

CARING ABOUT HEALTH

Many Palestinians must struggle daily to meet their basic needs (food, clothing and shelter). As a result, the major health problems among Palestinians are those associated with poor nutrition and the lack of adequate medical and sanitation facilities. The lack of adequate nutrition and medical facilities is especially detrimental to the health of infants and young children. The infant mortality rate in the West Bank and Gaza exceeds that of the surrounding areas. Malnutrition during the weaning period is common, as are accompanying infectious diseases such as gastro-enteritis (an inflammation of the intestine and stomach linings) which is potentially fatal among malnourished young children. An international agency recently reported that in the West Bank and Gaza, diarrheal diseases are by far the major cause of illness and death and that infants and young children are especially affected. The report goes on to say that twenty-five percent of children under the age of three suffer from iron deficiency anemia and that many refugees under the age of three suffer from some form of protein energy malnutrition.

The impact of malnutrition and infectious diarrheal diseases on the overall development of the Palestinian people is considerable. According to the study "Health and Policymaking in the Arab Middle East" by the Center for Contemporary Arab Studies at Georgetown University, the ill health generated "from such diarrheal diseases decreases productivity in working situations...increases absenteeism on the job and in schools...and increases susceptibility to other diseases throughout the entire population." Gastro-enteritis and other similar infectious diseases are difficult to control, because they are spread in a number of different ways. In order to control these diseases there must be cooperation in areas such as water supply systems, health education, housing, nutrition, agriculture and sanitation.

It becomes obvious that adequate health care is necessary if there is to be any sustained development in the West Bank and Gaza Strip. We also feel that the children of the area are its most important resource and that they have the right to develop to their fullest potential. To this end, ANERA is working with local officials in the planning of projects that will make up an integrated health care system that will address the needs of the entire population of the area.



JEBEL HUSSEIN REFUGEE CAMP, Amman, Jordan—A staff nurse advises a Palestinian refugee mother on the care of her baby at the Rehydration and Nutrition Center run by the United Nations Relief & Works Agency (UNRWA). The Center restores the health of many infants suffering from gastro-enteritis which is especially prevalent during the hot, dusty summers when problems of sanitation in the refugee camps become more serious. Part of the funds for the construction of the Center were donated by AMER. AMER/ANERA also donated \$16,300 toward the operation of the Center over a six-year period, 1970-1975. (UNRWA photo by Zaven Mazakian)

AMER MEDICAL PROGRAM

AMER stands for American Middle East Rehabilitation, which is a division of ANERA. The AMER Medical Program solicits contributions of pharmaceuticals and medical supplies for shipment to needy Palestinians and civilian victims of war in the Middle East.

AMER was founded in New York in 1948, as American Middle East Relief, in response to the Arab-Israeli War of 1948. AMER worked to alleviate suffering by sending shipments of food, clothing and blankets to the Palestinian refugees. As the refugee problem remained unresolved and a new generation of Palestinians were born in the camps, AMER widened its emphasis to include vocational training.

As a result, in 1963 the final "R" in AMER was changed to Rehabilitation. AMER has also provided emergency relief during the Jordanian crisis (1970) and the ongoing conflict in Lebanon. Following the June 1967 war and the establishment of ANERA, negotiations were begun to merge AMER with ANERA. The merger took place in 1971. In 1977 the AMER division was moved to the ANERA office in Washington.

Fiscal Year 79 was a successful one for the AMER Medical Program. Donations-in-Kind totalled \$151,256.49 (U.S. Wholesale Value). Already in Fiscal Year 80 (June 1, 1979-May 31, 1980) the AMER Medical Program has been the recipient of over \$150,000 of Donations-in-Kind (U.S. Wholesale Value).

AMER RECEIVES ITS 500TH DONATION

On November 13, 1979 AMER received its 500th donation in its thirty-one-year history. The donation was from Lederle Laboratories, a division of American Cyanamid Co., located in Wayne, New Jersey. This marks the third Lederle donation in the last two years and shows Lederle's concern for the health of people in the Middle East. Lederle and other pharmaceutical companies are vital to the success of the AMER Medical Program. With their continued support the AMER Medical Program will be able to contribute to a better quality of life in the Middle East. On behalf of thousands of people benefitting from this gift, ANERA wishes to express its gratitude to Lederle Laboratories for their generosity.



THE FOUR HOMES OF MERCY were established in 1940 by the late Katherine Siksek, a pioneer social worker in Palestine. The Four Homes are: The Home for Aged Invalids, The Home for Crippled Children, St. Mary's Home for Homeless Children and St. Mary's Maternity Hospital. The first three are located in Bethany near Jerusalem and the fourth is in Beit Jala near Bethlehem. These institutions are unique on the West Bank in that they provide medical and welfare assistance (including housing) for four groups of especially needy and helpless people. Altogether, several hundred people receive services from the Four Homes. In Fiscal Years 75 and 77, the Four Homes of Mercy received \$75,000 grants from ANERA for the training of practical nurses. Pictured above is the first graduating class from the Four Homes Nurses Training Center in East Jerusalem. Shown at their graduation in February, 1978, the students are gathered around their dedicated Director, Miss Collette Habesch (fifth person from the left).

THE RED CRESCENT SOCIETY OF JERUSALEM MATERNITY HOSPITAL

The Red Crescent Society of Jerusalem was established in 1951 as a charitable society. Its goals are to help the poor and needy and provide first aid and medical care.

In 1953, the Society opened a maternity hospital for poor and middle class mothers. The hospital receives its income from donations, contributions and subscriptions in addition to the modest fees charged for hospital services. The hospital provides maternity and gynecological care for women; it also has anti-natal, infant and post-natal clinics. The hospital averages about 150 deliveries per month, and about 280 people visit the ante-natal (pregnancy) clinic each month.

In Fiscal Year 76 ANERA granted the Society \$50,000 for a new operating room. In Fiscal Year 77 ANERA granted \$31,000 for the continuation for this project as well as the equipping of an examination room and laboratory.

Before the maternity hospital had this operating room, surgical cases had to be sent to other hospitals. This was very risky, because if complications developed during the course of a delivery which required surgery, the lives of both mother and child were endangered by having to move to another hospital with the proper facilities.

The hospital has one of the most qualified staffs in the area. The staff is headed by Dr. Salim Matouk, who is Director of the Hospital. He and his staff provide quality maternity care at a reasonable cost (less than half the fee charged at other comparable hospitals) to those who otherwise would not be able to afford this service.

ANERA's health services grants have been mainly of two quality of health care. Included in this category are: mother the funding of maternity and multi-purpose hospitals and th of aid is centered in the Occupied Territories (West Bank a ANERA's efforts directed toward developmental efforts in traditionally, military occupation has made it difficult for aid Bank and Gaza Strip have the largest concentration. Unless some type of homeland or state is expected to exist in the

The second type of health service grant has been in the for assistance dates back to the first major Arab-Israeli War in Voluntary Organization providing assistance to Palestinian AMER after it joined ANERA in 1971) has provided emerger the war in Jordan in 1970, the Arab-Israeli conflict of 1973

ARAB WOMEN'S UNIONS

The Arab Women's Unions of the West Bank and Gaza have been, and continue to be, an important force in education, economic development and health care. Since the Unions are governed by women, they have made special attempts to meet the needs of women. With respect to health care, many of the Unions support mother/child care programs, maternity and feeding programs.

The Women's Unions are the representative of a long history of self-help efforts initiated by Palestinian women. The Arab Women's Union of Jerusalem, for instance, was founded in 1928. Its goals are to improve the educational, cultural and health levels of the Jerusalem area. In the field of health care the Union achieves these goals by operating an Infant Welfare Center, a Pre-Natal Care Center and a special feeding program for infants and young children.

The Arab Women's Union of Nablus was established in 1948, with goals similar to those of the Arab Women's Union in Jerusalem. In caring for the health needs of women and children in the community, the Union maintains a maternity center and a home for new-born babies. In 1971, the Union established the Ittehad Hospital in Nablus, centralizing most of its activities in a modern three-story building. The hospital consists of a surgical unit, a medical and pediatrics unit, a gynecological and obstetrics unit, an x-ray department, a laboratory and an out-patient clinic. The Union's Board of Directors had wanted for some time to make Ittehad a multi-purpose institution offering medical, surgical, gynecological and pediatric services. In 1976 Ittehad received a \$35,000 grant from ANERA for the establishment of a training course for practical nurses in the Nablus district. This program has helped lessen the tremendous shortage of practical nurses that had previously existed. In 1977, ANERA granted Ittehad \$100,000 towards the expansion of the hospitals space and facilities. The number of beds were increased to 100, almost double the original total. In addition, a great deal of necessary medical equipment was purchased. The expansion of the hospital has transformed it into a general-purpose hospital, and has improved the quantity of medical care in the community.

IN MEMORIAM

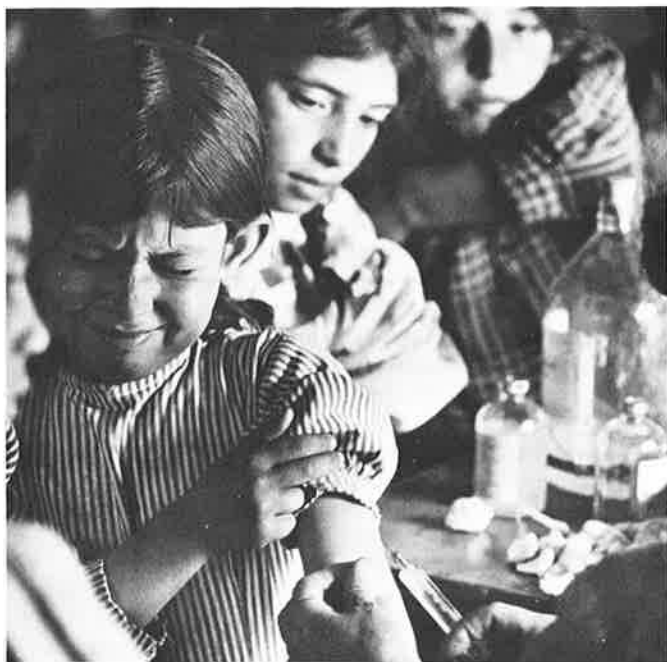
Recently, ANERA has been informed of the death of three close friends in the West Bank and Gaza Strip: **Hajeh Andaleeb El-Amad**, was President of the Arab Women's Union in Nablus, and was responsible for the implementation of programs relating to the needs of women in the area. **Labib Nasir**, was the General Secretary of the East Jerusalem Y.M.C.A. Mr. Nasir was a driving force behind the Y.M.C.A. Vocational Training Center in Jericho, which has provided training for Palestinians since 1950. **Wadi Tarazi** founded the Gaza College in 1948 along with his brother Shafiq. He presided over the college during a period of expansion of the student body and the development of new programs.

types. The first is assistance to improve the level of child care services through the Arab Women's Unions, the development of nurses' training programs. This form (and Gaza). Recent years have seen more and more of the West Bank and Gaza for three main reasons: (1) to reach the Palestinians in these areas; (2) the West Bank in the Middle East; (3) it is these two areas where the future.

form of emergency war relief. AMER's help in this type of relief began in 1948 (AMER is the oldest, non-sectarian American organization for Arab refugees). Since its founding in 1968, ANERA (and AMER) has provided emergency aid in the aftermath of the Arab-Israeli War of 1967, and most recently in response to the war in Lebanon.

PALESTINE RED CRESCENT SOCIETY

The Palestine Red Crescent Society was formed in 1969 to provide free medical care to Palestine refugees. The ongoing strife in Lebanon, particularly in Southern Lebanon, has made the Society's job especially difficult. The Society administers surgical hospitals, blood banks and many first aid centers near points of conflict. A number of clinics run by the Society provide comprehensive care, including: medical consultations, injections, dressings, eye treatments, as well as referrals, when necessary, to specialists, hospitals and medical rehabilitation centers. The clinics also provide mother/child care and feeding supplements. Under more normal circumstances, the Society also administers convalescent homes and dental clinics; trains nurses for work in the hospitals and camps and sends qualified Palestinians abroad to be trained as x-ray technicians, lab technicians and nurses. The Palestine Red Crescent Society has been given full membership status in the regional Red Cross and Red Crescent Societies.



MARKA REFUGEE CAMP, Amman, Jordan—UNRWA provides School Health Teams which visit UNRWA refugee camps each month to give school-age children a routine physical check-up and necessary immunizations. In February, 1979, AMER/ANERA received a donation of 15,000 doses of measles vaccine and 15,000 disposable syringes which were kept under refrigeration and flown non-stop to Amman, Jordan, for UNRWA's use in refugee camps. Each year a large portion of the pharmaceuticals received by AMER are donated to UNRWA. Since AMER joined ANERA in FY72, a total of \$803,641 in pharmaceutical supplies have been sent to the Middle East. Of that amount, 81% or \$653,612 (U.S. wholesale value) were donated to UNRWA. (UNRWA photo)



DAMASCUS, SYRIA—Founded in 1968 as an American expression of humanitarian concern for Palestinians and Arab civilian victims of war in the Middle East, ANERA has provided emergency relief during and after four major conflicts. To date, the largest amount of war relief (over \$2.1 million) was raised after the October War of 1973 and used to aid civilian victims mainly in Syria and Egypt. The photo above shows one of the destruction in Damascus, Syria, during the October War. (Photo courtesy of the Ministry of Information, Government of the Syrian Arab Republic.)

THE LEBANESE RED CROSS

The Lebanese Red Cross' function is to offer immediate aid to relieve suffering, whenever, and wherever needed. The need has been great the last few years and the aid and assistance the Red Cross has offered and is still offering has been equally great.

The League of Red Cross nurses and student nurses have rendered much needed services in a number of hospitals. The Lebanese Red Cross has also rendered services to handicapped and displaced children. The displaced children are a particularly anguishing product of the conflict in Lebanon. As with any tragedy of this dimension, much of the suffering is borne by those least able to cope, the children of Lebanon. The Lebanese Red Cross has performed admirably in helping these children who have seen so much suffering.

AMER MEDICAL COMMITTEE

The AMER Medical Committee oversees the activities of the AMER Medical Program and, in 1979-80, is co-chaired by **Dr. Gerald D. Dorman**, former President of the American Medical Association now living in Orient, New York, and by **Dr. Rosa Lee Nemir**, Professor of Pediatrics, New York University School of Medicine, New York, New York. The other members of the committee are: **Dr. Joseph Abullarge**, Senior Pediatrics Resident, Bellevue Hospital, New York, New York; **Dr. Mansour Armaly**, Chairman, Department of Ophthalmology, George Washington University, Washington, D.C.; **Dr. Samuel P. Asper**, Deputy Executive Vice President, The American College of Physicians, Philadelphia, Pennsylvania; **Dr. Charles Hazzi**, Associate Professor of Medicine, New York University, New York, New York; **Dr. Vicken Kalbian**, Pediatrician, Winchester, Virginia; **Dr. Said Karmi**, Surgeon, University Hospital, Baltimore, Maryland; **Dr. Onver Mahadeen**, Pediatrician, Paterson, New Jersey; **Dr. Allan McKelvie**, Orthopedic Surgeon, Washington, D.C.; **Dr. M. Hadi Salem**, Thoracic Surgeon, Beverly Hills, California; **Dr. Hamilton Southworth**, Emeritus Professor of Clinical Medicine, Columbia University, New York, New York; and **Dr. James V. Warren**, Chairman, Department of Medicine, Ohio State University, Columbus, Ohio.

PAULA T. MAENAK

ANERA lost a good friend and champion of Palestinian human rights when Paula T. Maenak died on October 23, 1978.

Born in Camden, New Jersey, Mrs. Maenak graduated from Cornell University in 1941. She received her master's degree in Social Work from Columbia University in 1943. As a social worker, she was involved with the problems of children and their families from 1941 until 1975. Among the organizations for whom she worked are the Boston Children's Friend Society; the Family Societies of Newton and Boston, Massachusetts, Seattle, Washington, and Bridgeport, Connecticut; the Spanish Evangelical Mission in Bridgeport; the Casa De La Salud in Puerto Rico; and institutions in London and Birmingham, England.

While visiting the Middle East after the Arab-Israeli war of 1967, Mrs. Maenak saw thousands of Palestinians who had fled the West Bank, seeking refuge in the emergency relief camps, towns, and villages of Jordan. She was able to gain entrance to several of the camps where she spoke with many Palestinians who had lost their homes — some for the second time — fleeing Israeli military occupation. She had not previously been involved with issues of the Arab-Israeli conflict but these conversations in the camps led to her understanding of the basic injustice suffered by the Palestinian people.

Over the years, Mrs. Maenak spoke out many times on behalf of Palestinian human rights and wrote many letters to the U.S. and Israeli governments urging justice. Almost since ANERA's beginning, she was a generous, thoughtful contributor, donating thousands of dollars for vocational training and for medical relief in war-torn Lebanon.

ANERA and Project Loving Care (an organization based in Indiana which provides help especially for Palestinian children) were named by Mrs. Maenak as sole beneficiaries of her estate,

estimated to be over \$100,000. ANERA will be donating special gifts in her memory to vocational training institutions in the West Bank and Gaza Strip and for continued medical relief in Lebanon.

Throughout her life, Mrs. Maenak was an activist in helping people of many countries. But after 1967 and those conversations in the emergency camps, it was the injustice suffered by the Palestinians which captured her special attention. For the rest of her life and now, even in death, Paula Maenak has been trying to correct that injustice.



RASHIDIEH REFUGEE CAMP, South Lebanon—This Palestinian woman, sifting through the debris in what was once her kitchen, has become a classic expression of the disruption of life arising from the complicated war in Lebanon. (The UNRWA photo was taken after an Israeli sea strike on refugee camps in May, 1974). ANERA has sent over \$400,000 in cash and gifts-in-kind (primarily pharmaceutical supplies and food for civilian casualties) to Lebanon with most of that sent in response to the ongoing crisis. ANERA continues to accept donations for civilian relief in Lebanon.

Enclosed is a special gift for health-related projects in the Occupied Territories and/or for continued medical relief to Lebanon:

_____ \$15 _____ \$25 _____ \$50 _____ \$100 _____ \$500 _____ \$1000

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

Contributions to ANERA are tax-deductible and should be sent with this form to the ANERA office. Thank you for your help.

This issue of the ANERA Newsletter was edited by Doug McNutt, ANERA's Executive Assistant.

ANERA

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