

Pitching in for health on the West Bank

By Alice Rothchild, 3/6/2004

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WORD SPREAD QUICKLY in Selet el Harthiya and a day later in Qufor, two Palestinian villages near Jenin. A lady doctor was coming to the clinics run by the Union of Palestinian Medical Relief Committees, one of the largest NGOs providing care in the West Bank and Gaza. I stared at the earnest, often tearful, faces of patients, their squirming children in tow, and listened to concerns about pregnancy, infertility, IUDs, decreased libido, and breast mass. Underneath their long robes an assortment of bodies presented themselves, some in tight jeans, some in faded dresses hiding bulging bellies.

Each interaction was followed by a complicated negotiation. This included a chaotic mix involving a lack of finances, a minimal assortment of free drugs, and complex strategic planning that encompassed access to testing, specialists, and treatment that all hinged on the multiple road blocks, checkpoints, and the separation wall that is massively disrupting daily life.

The role of the Palestinian Authority Health Ministry seemed very limited -- a combination of inadequate funding, severe disruption due to Israeli incursions, and the ministry's own weakness and disorganization. According to the Union of Palestinian Medical Relief Committees, due to curfews and closures, 85 percent of people in the West Bank have not left their villages in three years, and unemployment is approaching 70 percent.

A recent UN report estimated that 50 percent of Palestinian women are delivering babies at home because they cannot get through checkpoints to the hospital. Many people in the villages were talking about a woman who had delivered premature twins who died at a checkpoint she was unable to pass.

A week later I found myself at Shaare Tzeddek Hospital and a day later at the two Hadassah Hospitals, Ein Kerem and Mount Scopus, marveling at the well organized, high quality, First World health care that is available to almost universally insured Jewish and Arab Israelis, provided by Jewish and Arab staff. In these bubbles of sanity, doctors talked about pediatric endocrinology, oncology, and the family trauma caused by suicide bombers. They debated the psychological effects of compulsory military service on the young, the role of dissent, increasing drug use, family violence, and the impact of the shaky Israeli economy on the health care system.

Some lived in lovely Jerusalem suburbs, some in West Bank settlements, some were secular, others deeply religious. For some, their primary experience with Palestinians in the Occupied Territories was through military service while others worked with Physicians for Human Rights Israel, a health and human rights organization involved in issues related to occupation, closure, curfew, prisoners rights, and foreign workers.

Despite the stunning differences in health care several miles and many worlds apart, political realities on the ground profoundly affected providers and patients on both sides of the Green Line. This was painfully clear when I joined the physicians' mobile clinic that brings Jewish and Arab Israeli physicians and other health care providers and

supplies to a prearranged village on the West Bank for a day of much needed health care.

In the village of Mas'ha, a Jewish settlement clearly in view of the wall, families crowded around the makeshift "offices." A women's center was the scene of this organized chaos, my "office" a third-floor room with no door, a rickety table, a mattress on the floor, and two eager Jewish Israeli medical students, one fluent in Arabic. The women came and waited, and I struggled to bring my Boston medicine to a place where poverty, checkpoints, walls, and the consequent impairment of access, frequent humiliation, and arbitrary military decisions form a major part of the health picture.

In an interview recently, the founder of Physicians for Human Rights Israel, Ruhama Marton, reflected on the idea that Israelis have developed "the politics of the last atrocity . . . We don't know how to see ourselves not as victims; being a victim gives you license to do awful things." Mustafa Barghouti, the head of Union of Palestinian Medical Relief Committees and the Health Development and Policy Institute, discussed an upcoming report documenting the impact of the separation wall on health care by cutting off access to services and care for rural areas, impairing referrals to tertiary facilities, and creating an economic disaster. "Some 3.7 million people are in prison, we are suffering from a mixture of occupation, plus apartheid, plus ethnic cleansing," he said.

Stuck in a massive traffic jam in Jerusalem, a Jewish taxi driver asked me, "So how do you find Israel?" I hesitated and replied, "complicated." Then I asked him: "So, how do you find Israel?" "Impossible," he replied.

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Author's correction: Mas'ha is a small Palestinian village on the West Bank. There is a Jewish settlement and the separation wall within view of the women's center in Mas'ha.