Health Work Committees
Palestine

Annual Report
2009
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We Are all Gaza
We dedicate this annual report, with all that it includes of achievements and humanitarian work carried out by the prompters who worked really hard and suffered a lot in order to promote the marginalized and deprived groups of the Palestinian society across the country, we dedicate it to all the wretched of the earth and the strong ones who never collapsed and are still adhering to their rights.

We dedicate this report to the brave martyrs killed by the Zionist’s brutal attack on Gaza Strip; to the victims of white phosphorus; and to those who still insist on staying inside their land in Gaza, West Bank and Jerusalem, despite their pain and suffering.

We dedicate it to all HWC’s staffs, males and females, and all the volunteers who risked their lives and never hesitated to provide their services to those who needed them out of their strong belief in the mission and philosophy of the HWC.

And we shall never forget all the good friends and supporters who stood by the organization, side by side, which helped it to stay a lighthouse for the civil work in Palestine that everyone would follow and point at.

The HWC confirm their persistence on continuing the humanitarian and national work as well as their complete support to all deprived individuals and groups.
Forward by the Chairman of the Board of Directors
The year 2009 did not bring anything new at the level of the National Palestinian cause as it witnessed the peak of the brutal war on Gaza carried out by the Occupation, which effects can still be seen, for those who lost their houses that were demolished due to the war are still living in tents without any shelter, and the destroyed infrastructure is still not repaired nor reconstructed, and the same goes for destroyed schools, clinics and hospitals. Also people whose skins were severely burnt by the white phosphorus and are still alive are trying to heal their wounds, at a time the war crimes committed by the occupational forces in Gaza are still waiting for the human conscious to wake up and bring war criminals to justice.

The unjust siege and closure imposed on the people of Gaza Strip is still in effect under the eyes and ears of the world and the international community, who stood still, except for those honorable supporters who reflected the human conscious and values through their attempts to break the siege and attract the attention to the human sufferings in Gaza. This siege is affecting innocent women, children and poor civilians, not the politicians or people of influence. And at a time that all these crimes are taking place, the world that claims civilization, closes its eyes and ears to the Israeli military war crimes and deals with Israel as if it’s above the law.

There were hopes of a better world by the beginning of 2009; a world where peace, love, forgiveness, justice and equality values prevail; a world without wars or manipulation of innocent people. Many people were optimistic by the election of Barak Obama as a president to the United States of America, perhaps for his history or skin color, or maybe for his balanced political speech that is different from his predecessor’s, Bush. Also his speech at Cairo University gave new hope for better international relations. As the year approaches the end, and after being president for a almost a year now, wars are still going on in Afghanistan and Iraq, burning everything and killing tens of people every day, without any signs of hope for ending the war, thus ending the suffering of innocent people.

As for the Arab Israeli conflict, some imagined that a concrete change will take place at the American policy level and that the US will seriously deal with and respect the international law and the decisions of international Legitimacy, being the base and reference to the peace process and that it would apply real pressure on Israel to cease the settlement expansion and return to the negotiations table according to the vision and basis of a two-state solution.

No sooner, things got very clear and the true American view came to be very clear, which started by applying pressure on the Palestinian side to agree to resume negotiations without terminating settlement activities and stopping the Judaization of Jerusalem, where more than one American official declared in several occasions the US’s commitment to Israel’s safety and security, and the intention to continue to enhance and strengthen the strategic alliance, which would always make it militarily superior.
Joe Biden, the US Vice President, said during his visit to the so-called Israeli museum for catastrophe and heroism: “Being a Zionist doesn’t mean being Jewish”, confirming his complete biased position to the Occupation state, despite the fact that while receiving him and many other officials, new settlement plans in Jerusalem and the West Bank were announced by the Occupation government.

Moreover, the year 2009 brought the extreme rightwing government and the settlers’ government in Israel lead by the extremist Netanyahu and his racist Minister of Foreign Affairs, Lieberman, to form the most radical rightwing government ever in the history of Israel, which announced the government’s theoretical vision and real practice on the ground which completely contradicts with the basis of peace and International law. This government denies and rejects the two-state solution and launches the campaign of ethnic cleansing and a massive settlement campaign in Jerusalem, and adopts plans that intend to evacuate Jerusalem of its natural Palestinian residents to replace them with settlers, and demolish hundreds of houses to build what is called “The holy basin” and work day and night to change the city’s features since they consider it a Jewish city and a capital of the Jewish people as they claim, and announce that the government vision for peace is based on what is called Economic Peace, meaning improving the economic situation of Palestinians, therefore peace can prevail in their eyes even if this peace is under Occupation that controls all aspects of life for Palestinians.

What is expected from Palestinians according to this Israeli government is to give up their national rights in the right to return, freedom, independence and self-determination, and to accept pits and pieces and economic projects, at a time that the Netanyahu-Barak-Lieberman government continues its siege on Gaza Strip, turning it to the largest prison in the world, where more than 1.5 million Palestinians are being held.

The policies of this extreme radical government did not stop at the violations and attacks in the West Bank and the Gaza Strip, but extended and expanded to include Palestinian Arabs living in the occupied lands of 1948 forcing on them several laws and measures that cripple their movement, increase their suffering, and set a discrimination policy against them.

In front of all of this and despite all measures, the Palestinian position remains the weakest link under the prevailing prolonged Palestinian division that threatened and is still threatening the Palestinian national and social threads, as well as the fate of the Palestinian national cause; Palestinian political forces quarrelling over an authority under an occupation that fully controls it and its’ movement, security and economy; Gaza Strip is being dealt with as a “Human Crisis” under the control of Hamas accompanied by very bad and sad conditions of suffocation, poverty, sickness, disease, isolation, siege and severe control of freedom. The West Bank is under the Palestinian Authority’s control, which tries to impose security control on as a top priority and work on building institutions for the state-to-be, launching plans and developmental projects controlled by the occupation that manipulates and provokes the PNA in a
barefaced manner and practices all kinds of pressures by controlling the land and borders, dividing the West Bank into cantons through military check points and barriers, the apartheid wall, and arresting tens of Palestinian activists on daily basis. The Palestinian Authority depends on donor countries in financially supporting its budget and salaries for civil servants, which limits and maybe denies the independence and freedom in taking political positions that serve the national cause, meaning that the Palestinian national decision is deposited and held by the hands of the donor countries who financially support the Palestinian Authority’s activities.

Under these circumstances, a call to hold indirect negotiations to resume the peace process has been issued for a limited period of time with the continued Israeli practices in Jerusalem and the West Bank and the continuation of settlement activities with the same references and criteria that neglect the International law and the decisions of the international legitimacy as basic references for the peace process, and have negotiators make their negotiations according to the formula of unbalanced powers that leans towards the stronger party, which is Israel, without real decisive international intervention to implement the decisions of the international legitimacy or respect the International law. Therefore, resuming negotiations, whether direct or indirect, according to the formula of powers is illogical, unrealistic and ineffective, and is nothing but wasting additional time, especially that Israeli leaders have emphasized more than once that they want prolonged negotiations without any results. The question here is: Will these negotiations achieve results after many wasted rounds that lasted for seventeen years without any horizon??

What is needed from the international community today is to respect its decisions, legitimacy, convents and values, stop dealing with criteria in double standards, defend these values, put pressure on the occupation’s government, and force implementation of the references for the peace process, and not dealing with it as a state that’s above the law.

What’s requested from the countries of the European Union is not to develop partnerships with Israel and do not reward it for violating international laws and committing war crimes. They should also apply economic and political pressures on the occupation state to end the occupation. Arab countries should not deal with the situation neutrally or play as the mediator between Palestinians and Israel, but to stand strong against the occupation state because the Palestinian case is a top Arab Nationalist case. They should also respect and implement the requirements and desires of their people and their views towards the Arab-Zionist conflict, and Arabs should shut down the Israeli embassies, representative offices and economic offices in all Arab Capital cities. And what is needed and hoped for is a full political and economic support to the Palestinian people.

All people must immediately break and lift the siege off the surrounded Gaza Strip. Enough to what the boys and girls of Gaza have been subjected to in terms of death, aggravation, illness and hunger.
Despite these conditions and the spread of anger and depression among most of the sectors of the Palestinian people in Gaza Strip, West Bank or the Diaspora, we see signs of reorganization of the Palestinian society of itself, where increased activities against the occupation in many areas, especially campaigns against the wall, settlements, policy of home demolition in Jerusalem, launching the boycott of Israeli products and goods, anti-normalization of relations, the people’s reaction to postponing the discussion of the Goldstein report on the war on Gaza, the increased activities and the organization of popular resistant, show the strong Palestinian movement in this direction.

The most historical lessons learned until now confirm that Palestinian people will not accept to remain under occupation, and are able in all cases to take the initiative, and reorganize themselves, and resist and fight to regain their stolen rights. Will these forces and leaderships in Palestine rise up to the level of the people’s hopes, desires, or sacrifices? The fighting forces over the shattered authority that has no real authority must put an end to the division and reunite the Palestinians to achieve all their comprehensive rights and regain them from the thieves who stole them.

As for solidarity with the Palestinian people, we feel increased actions of support at the international popular level, the launching of boycott campaigns, withdrawing partnerships in many European countries from the occupation’s entity. Also, the results achieved and that are still being achieved by these campaigns the attempts to put Israeli officials responsible for war crimes conducted by them in Gaza to trial, the campaigns to break and lift the siege off Gaza Strip, and all these and other actions point to probable real change in the near future for the benefit of the Palestinian peoples’ rights and to revive the national cause, lead to possible popular pressure, locally and internationally, on the occupation’s state, and push the international community and institutions to stand firm in the face of the occupation’s state and its practices against the Palestinian people to put an end to it.

The international solidarity and support has a great importance in continuing the organized campaigns against the occupation’s state and its figures, and developing the mechanisms of boycott, lobbying and support, as well as activating the Palestinian popular work in steadfastness and resistance against the occupation’s practices, which would lead to institutionalizing the real process of change that shall allow the Palestinian people to achieve their national rights, get rid of the occupation, and achieve a just, long-lasting peace that’s based on human values, international law and international legitimacy decisions. Until then, the Palestinian people will stay armed with determination and hope for a better future.

Dr. Na’eem Abu Tair
Chairman of the Board of Directors
Health Work Committees
Inauguration of the new building in Al-Mazra Asharqiya:
The construction of the new 2-story building of Al-Mazra Asharqiya’s health center was completed in 2009, where all the work was transferred. The opening hours of the center were extended so that the center is opened in the evening as well. The center was equipped with new modern medical equipments and supplies as well as introducing additional specialized services.

Beit Sahour Health Center receives surgeons from Germany
Beit Sahour health center received a medical delegation from Germany specialized in urology. The surgeons operated on 15 patients suffering from genital problems and complications, which are considered complicated surgeries. The operations contributed significantly in decreasing the suffering of the patients, and added another qualitative services and achievements to the center.

Extending the working hours in the Emergency Clinic in Hebron City:
Responding to the acute needs in the old city of Hebron, and as a result of the heated and difficult conditions that the people are living under caused by the settlers and the occupation’s soldiers, and since the center is located within the permanent clashes and fire zone, the working hours of the emergency clinic and the laboratory were extended to 9pm in order to meet the needs of the people in emergency situations and provide the Palestinian residents in the area with medical treatment.

Mobile Clinics; responding to a special subjective case:
As a response to the health needs in the isolated areas due to the apartheid wall and the military checkpoints that hinder the medical and health teams to deliver their humanitarian mission in treating patients, and as a response to the health needs in the remote and marginalized areas, the HWC concentrated their work in these areas through operating a mobile clinic that provides general medicine, laboratory tests and women health services, and the work was more focused in the areas of Northern Jordan Valley, South of Hebron, and South of Bethlehem in 2009.

Tubas Center:
In continuation of the policy of developing diagnostic and health services in the center, and out of responding to the health needs in the area, and in continuation of developing preventive health services, the center was supplied by a special advanced mammography equipment, which would add a special quality service to women health in the area and contribute to the early detection of breast cancer.
Health Work Committees - Palestine

* Halhul Center:
The specialized services of the center were improved through developing both the heart and the ENT clinics with modern diagnostic equipment as well as special qualitative services.

* Marda Clinic operates from inside the cage:
This small village in Salfeet Governorate is still surrounded by a fence in a circle shape and from all directions and sides, and the only entrance to the village is actually a gate that is always closed by the military occupation’s troops. To avoid this isolation and to avoid that patients lose the possibilities to easily reach health services outside the village, the HWC started to develop a clinic inside the village and provide it with medicine and a laboratory in addition to the programs of women health, healthy child and diabetes.

* The Health Work Committees (HWC) in Jerusalem:
Shutting down Nidal Center: We consider the closure of “Nidal Center for the Enhancement and Development of the Society” by the occupation’s authorities as an unjust and brutal decision that will never stop our work in Jerusalem. In July 2009, the occupation’s authority in Jerusalem issued a decision in the so called name of the police inspector general to close the center in Jerusalem for 14 months on the accusation of illegal activities of the center according to the occupation authorities.

It is worth mentioning that the center is located in the old city of Jerusalem and it is where the HWC’s activities in Jerusalem are launched, which are the provision of social and health services and building the capacity of women, youth and children educational services among the most important of which are the school health program, which conducts health education activities for students, and provides immunization services against communicable diseases. Among the consequences of shutting down the center was keeping all the equipment, files and records, refrigerators for storing mussels, and administrative and financial reports inside the center since the occupation’s troops did not allow taking any of these documents, equipments and supplies out of the closed center. Thus, the HWC lost the administrative center and headquarter of the training activities, in addition to the meeting hall and the computer laboratory, which provided educational training sessions to tens of women and children. The brutal decision of shutting down Nidal center resulted in having 22 staff members finding themselves on the streets without a work place, which created a sense of confusion in organizing the work and providing the services. More than one Palestinian organization in Jerusalem absorbed some of the workers, and some of them worked from their homes and the streets.
Despite the difficulties and obstacles resulted by this decision, the HWC were able to implement the annual plans and agreed activities, such like: enhancement of women and children programs, implementing the school health program, and playing the coordinator role in many of the different fields, which was not easily done but was accompanied with much confusion in most of the times.

**Empowerment of Civil Society Program in Jerusalem:**
This program comes within the direction of the Palestinian NGOs Network of enhancing the role of the organizations and members in Jerusalem and enabling them to play their roles especially in the fields of lobbying, support and defending the rights of residents in Jerusalem, and increasing the coordination and joint work between all civil society activists in Jerusalem to implement the activities. The HWC lead the program as a member of the coordinating committee of the Palestinian NGOs Network (PNGO). The program aims at building the capacity of member organizations, increasing the coordination and joint work and organizing activities and actions to defend the rights of the residents of Jerusalem and confront the occupation practices in Jerusalem that contradict with all international agreements and covenants, where 15 active Palestinian organizations in Jerusalem work within this coalition.

**Developing an information system centrally and in the locations:**
In 2009, the HWC succeeded in developing the health and information system program through a computerized patients’ registration program and entered the patients’ data into the computerized System, which enabled the organization to obtain and retrieve any and all needed information for planning and evaluating the work of the HWC and contribute in developing the information at the national level.

**Kana’n Project:**
In 2009, the Kana’n project completed the second year of its’ existence and aims to build the capacity of the partner organizations and the grass root organizations in Jerusalem to enable them to implement the tasks in defending the social rights of the Jerusalemites and empower them to achieve the plans and objectives in serving the different sectors in the city of Jerusalem. There are 5 non governmental organizations that participate in implementing this project; Health Work Committees, Bisan Center, Defense for Children International, Land Research Center, Union of Palestinian Women Committees, in addition to 10 grass root organizations connected to the youth sector, women and land, with the participation of two organizations from Spain, namely Accsur and Mundubat. This program represents a good example of coordination and joint work between more than one organization within the specialty and mandate of each of them and is considered a good example for partnerships between
the grass root organizations and NGOs in confronting the occupation’s orders and decisions that aim at paralyzing the movement of the organizations in Jerusalem, out of a strong believe of the occupier’s intention to attack and destroy the national Palestinian organizations in Jerusalem, since this occupation is fed up and cannot hear the national voice in that reminds them that Jerusalem was and will always be a Palestinian Arab city, no matter how strong the Zionist’s attack is against it and no matter how strong the measures and policies of changing the nature of Jerusalem from an Arab to a Jewish city are. Despite all of this difficult reality and situation, the staff and volunteers have succeeded in achieving their tasks, missions and plans in the city very well, which would have never been possible without their full commitment and belief in their role and the importance of what they do for Jerusalem and its citizens.

*The Right-to-Health Network:*
Within its strategies and plans in Jerusalem, the HWC have been developing and providing strategies of the School Health Program that serves schools in Jerusalem for over 20 years now, through introducing one of the most important components of the project by establishing the right to health network to transform the students’ committees, teachers and administrations of schools to the position of participants in defending the health rights in its broader meaning. From this point, the bases for teachers’ network and students’ committees were established, where they were trained on health rights to become participants in the development process. These committees carried out evaluation activities for the health environment at schools and put forward solutions to the environmental obstacles there in order to improve the environmental health. In this regards, 8 projects were put in place to improve the schools infrastructure. The HWC and the Education Directorate in Jerusalem succeeded in marketing these projects that are expected to be implemented in the year 2010.

*Rehabilitation Program for Disabled People:*
This program has been serving Bethlehem and Hebron areas for more than 10 years jointly with The Bethlehem Arab Rehabilitation Society and the Red Crescent Society in Hebron. The program aims at merging the disabled people into the society, responding to their health and social needs and promoting their rights. In addition to working with disabled people and providing them with important services, a project for house adaptation was successfully implemented in the year 2009 for 147 disabled people, which included the rehabilitation of their living places to enable them to move around safely, as well as providing supporting equipment to 295 disabled persons including hearing aids, wheel chairs, artificial limbs, prescription eye glasses, walkers and others… This was done after an individual evaluation of each case.
by a qualified team that was composed of a physiotherapist, an occupational therapist, a rehabilitation physician, and specialized technicians in supporting equipment.

**Beit Sahour Senior Citizens Club: A Good Example to Follow:**
The HWC succeeded in creating a good example in providing social services to senior citizens and promoting their rights in the town of Beit Sahour, created a comfortable and healthy social, health and environmental atmosphere for more than 160 seniors of both genders, and established professional human relations between the working staff and the beneficiaries, in addition to carrying out several daily activities such as recreational, health, cultural and field trips for the seniors, which made, to a great deal, tangible quality improvements to the beneficiaries’ lives and provided them with a horizon and an opportunity to express their feelings and to actually realize their role in the society and that they can do a lot of things. At the same time, the club left a positive impact on the relationship between the seniors and their families, which explains the large popular support in the town for the club, both financially and morally, mainly proved by the traditional annual celebration organized by the club for the seniors and their families, by which it shows the important role of the club.

Moreover, the official interest and support to the club was topped by the visit of the President Mahmoud Abbas to the club in the summer of 2009 after several repeated visits made by the Governor of Bethlehem, and the Mayor and council members of Beit Sahour municipality, as well as the Minister of Social Affairs, the Director of Social Affairs Department in Bethlehem, and many other visits by representatives of the civil society organizations, who emphasized on the successful experience and model that is worth disseminating and copying to other areas.

**The HWC Play an Active Role in the Civil Society:**
The HWC continued to play an active and important role in the work of the Palestinian civil society in 2009, through the active participation in many different coalitions, seminars and conferences the submission and presentation of different important and valuable professional papers, and the participation at the local, regional and international levels.

**The NGOs Network (PNGO):**
The HWC played an active role through its membership in the coordination committee of the Palestinian NGOs Network (PNGO), and through representing the network in more than one Arabic and International coalition, such as the Arab NGO Network for Development and the Euro-Med Network, as well as leading the Jerusalem Committee and the active participation in the Civic Coalition for Defending the Palestinians’ Rights in Jerusalem and the Coalition for Jerusalem.
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* The Anti-Apartheid Wall and Settlements Campaign:
The HWC’s membership in the Coordination Committee for the Anti-Apartheid Wall and Settlements Campaign allowed the organization to play a significant role whether at the level of participating in meetings or in the field work, as well as presenting a professional paper about developing and enhancing the work of the campaign at the popular level.

* The Occupied Palestine and Syrian Golan Advocacy Initiative (OPGAI):
As a main party and as a founder member of this initiative, the HWC participated in all meetings of the Initiative, in the Coordination Committee, as well as in the Social Movements Committee and the Advocacy and Support committee. The HWC also actively participated in the international voluntary summer camp, and presented a paper in a conference organized by OPGAI and the Alternative Information Center.

* The Arab Women’s Network “ROA”:
The HWC joined this network that includes 8 Arab countries and aims at unifying Arab women efforts in supporting social and political women issues especially those under the occupation, particularly in Palestine and Iraq. This year, the HWC were elected as a national representative to the Network in Palestine. They participated in the network’s activities, among which was the General Assembly meeting in Beirut, where they discussed and approved the bylaw as well as the strategies, directions and future activities of the Network. Also, the HWC participated in a regional seminar that was held in Jordan to discuss the Arabic Human Development Report and its effect on Arab women, where the institute presented a paper about the general water crisis in Palestine and its effect on women.

Also, coordination was made to send Palestinian live testimonies to represent the Network in the World Social Forum held in Brazil regarding the situation of Palestinian women under the occupation. Finally, the HWC participated in a training course about “Preparing Women Leaders for the Arab Region”.

* The Palestinian Health Policies Council:
The HWC participate in the council, which is considered to be the highest health policy-making council in Palestine, composed of the: Ministry of Health, NGOs, Deans of Medicine Schools, and Emergency Departments. The council completed the National Health Plan, and discussed many health issues of that concern people, on top of which was the Comprehensive Health Insurance System. The HWC also participated in many committees and specialized health departments together with the different service providers.
Conferences and Seminars:
- The HWC presented an analytical paper about the political situation in a conference organized by the Alternative Information Center and OPGAI.
- The HWC participated in an international seminar in Madrid regarding the Spanish government support to Palestine.

The HWC presented a paper about the role of organizations and civil society in Madrid in a conference organized by the Spanish organizations.

The HWC presented a paper about the role of the organizations and civil society in Jerusalem through the participation of the “Jerusalem; Present and Future” conference held in the summer of 2009 in each of Jerusalem, Birzeit and Nazareth.

The “Violence Against Women” Forum:

The HWC is considered among the active organizations in this coalition where it participated in many of the activities that fight violence against women and organized many others at the popular level. In 2009, a campaign for violence-against-women was implemented in 27 villages, refugee camps and schools, in coordination with the Family Protection Department and Mehwar Center, with the participation of local organizations and village councils in the presence of hundreds of men and women.

The Youth Conference in Salfeet and Qalqilya:

The conference came as a result of a two-year work in both governorates of Salfeet and Qalqilya, and created a wide space for youth to actually participate in the rural development program. What made this conference exceptional and successful was the wide participation of both female and male youths in the planning and implementation processes of all its activities. Emphasizing the role of youth in decision making, the conference tackled many important subjects among which were enabling the youth and their active role, as well as their national role in resisting the Apartheid Wall and Settlements and the boycott campaigns, in addition to their role in the development process, where over 140 youth participated in the conference.
The Women Health Program and Success Stories about the Process of Individual and Group Women Empowerment:

Examples:

1. A 25 year old wife of a martyr from Husan village, who completed the 11th grade, has a two year old boy and was 5 months pregnant when she received the news her husband’s martyrdom, passed through an extremely difficult experience where her house was demolished and she went under interrogation. In terms of the social aspect, she is a widow living with her in-laws and has one child, and health-wise, she subjected to a premature early delivery and had a miscarriage. The women health program team played an important role in taking care of her and supported her mentally, socially and physically and encouraged her to take the Tawjihi general examination, after which she took a medical secretary training course and got the chance to work as a medical secretary in the clinic with a good salary. She was included in trainings and different activities of the program. She completed her Tawjihi examination, and the medical secretary course, and then received her Bachelor’s degree in social work and she is currently working and is an active member in the Martyrs’ Families Organization, where she is still a friend and supporter of the program and participates in its different activities.

2. The idea was initiated in a small village of no more than 1000 people that was located in a totally isolated area especially during the Israeli closure and aggression periods. The idea was expressed by a lady from Al-Jaba’ village named Iman. This lady was a good example of giving and whenever she found a possibility to help women in her village, she never hesitated. Iman approached the HWC whenever she needed anything through their staff who worked in the village. The HWC were very supportive to this woman and to other women in the village, by organizing different training courses in First Aid, Gender, Reproductive Health, and Human Rights, implementing special activities for women regarding violence against women, supporting this group through the development program that provided them with house gardens, plants, trees and green houses, where women in the village worked in unity as if they were in a bee cell. The experience of these women is considered a live example of the Palestinian woman. Around 40 of these women are currently members of the Union of Palestinian Woman Committees.
Primary Health Care Department
Primary Health Care Department

The HWC provide different health care services to the Palestinian citizens all over the country and wherever possible for the sake of easing the burdens on Palestinians who suffer greatly from the occupation and its’ discrimination policies.

The HWC provide their services through:
1) Health centers and clinics.
2) Mobile clinics.
3) The Women Health Program.
4) The School Health Program.
5) The Rehabilitation Program.
6) The Healthy Child and Diabetes programs.

The Health Care Department provides services in the following geographical areas:

1. Qalqilya Area.
   - Qalqilya Center

2. Nablus Area,
   - Salem Health Center
   - Awarta Health Center
   - Marda Health Center
   - Medical compound

3. Tubas Area,
   - Alshifa Health Center
   - Albadan Health Center
   - 12 locations covered by the mobile clinic

4. The Middle Area,
   - Almazra Asharqiya Health Center
   - Kufur Nima Health Center
   - Rantis, Alliban and Ras karkar Clinics

5. Beit Sahour Area:
   - Beit Sahour Health Center

6. The Southern Area,
   - Husan and Batir Clinics
   - Halhul Medical Center
   - Saier Clinic
   - Hebron Emergency Center
   - 11 locations covered by the mobile clinic
HWC follows a strategy that is based on applying total quality in its work and activities; therefore, the work is done through several committees:

1. The Health Education and Enhancement committee.
2. The Laboratories Committee.
3. The Nursing committee.
4. The Professional Work committee.
5. The Environment committee.
6. The Medicine committee.

The work of these committees is geared towards developing the work inside the organization with the application of the total quality control standards, following up on the work and the continuous education, developing the centers and the staff, and setting standards and indicators and ensuring its implementation.
Indicators and figures showing the number of beneficiaries from HWC health services:

<table>
<thead>
<tr>
<th>Activity/Service</th>
<th>Total</th>
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<tbody>
<tr>
<td>General Medicine</td>
<td>135147</td>
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<tr>
<td>Women health</td>
<td>28092</td>
</tr>
<tr>
<td>Healthy Child</td>
<td>10185</td>
</tr>
<tr>
<td>Dental</td>
<td>6794</td>
</tr>
<tr>
<td>Emergency</td>
<td>21249</td>
</tr>
<tr>
<td>Specialization</td>
<td>91245</td>
</tr>
<tr>
<td>Lab</td>
<td>92192</td>
</tr>
<tr>
<td>Radiology</td>
<td>29679</td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td><strong>414583</strong></td>
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Distribution of cases according to specialization at health centers and clinics
Geographical distribution of HWC beneficiaries:

The following chart shows the gender beneficiaries of HWC:
The following table shows the number of social cases that benefitted from the HWC free services in all locations:

<table>
<thead>
<tr>
<th>Year</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
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<tr>
<td>Total</td>
<td>16585</td>
<td>15213</td>
<td>24550</td>
<td>21413</td>
<td>26919</td>
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</table>

**Community Services:** The Health Care Department provides many community development services throughout the centers and clinics for the sake of alleviating the living conditions of the targeted areas, which include several activities and actions that pour into the area of health education and enhancement and support volunteer work in the local communities. The institute’s staffs also carry out home and school to reach out for those who need the services, as shown in the table below:

<table>
<thead>
<tr>
<th>Community Activity</th>
<th>Number of Activities</th>
<th>Number of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Education</td>
<td>586</td>
<td>12112</td>
</tr>
<tr>
<td>Health Courses</td>
<td>58</td>
<td>1652</td>
</tr>
<tr>
<td>School Health</td>
<td>249</td>
<td>9494</td>
</tr>
<tr>
<td>Volunteer work</td>
<td>48</td>
<td>3206</td>
</tr>
<tr>
<td>House Visits</td>
<td>1467</td>
<td>1467</td>
</tr>
<tr>
<td>Other</td>
<td>29</td>
<td>1275</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2437</strong></td>
<td><strong>29206</strong></td>
</tr>
</tbody>
</table>
Health Work Committees - Palestine

2009 Community Activities

- Health Education: 24%
- Health courses: 2%
- School health: 10%
- Volunteer work: 2%
- House visits: 61%
- Other: 1%

Image of various flyers and brochures arranged on a table.
Why the need for a School Health Program:

Students in Palestine form more than quarter of the Palestinian society, and the governmental School Health Program serves around half a million students from the first to the twelfth grade in terms of public health. As for the class health, it is limited to students in the 1st, 4th, 7th, and 10th grades.

The HWC School Health Program is one of the most NGOS’ specialized programs in school health that operates in Jerusalem due to the extreme shortage of health services because of the Israeli Occupation.

The Program was established in 1990, starting with 4 schools in Jerusalem then expanding gradually to include 66 schools serving 21000 students.

The program includes three types of supervision:

1. Comprehensive supervision through permanent clinics with a permanent nurse available in 33 schools.

2. Partial supervision, which includes regular visits by the program staff in 33 schools.

3. The national unified immunization campaign which is based on providing vaccinations to students of 66 schools in Jerusalem, particularly for the 1st grade students, female students of the 6th grade, and the students of the 9th grade.
The national unified immunization campaign according to classes and vaccinations:

<table>
<thead>
<tr>
<th>Number</th>
<th>Target classes</th>
<th>Vaccinations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1st grade (male and female students)</td>
<td>Diphtheria and Tetanus (DT), Infantile Paralysis (POLIO)</td>
</tr>
<tr>
<td>2</td>
<td>6th grade (female students)</td>
<td>Rubella</td>
</tr>
<tr>
<td>3</td>
<td>9th grade (male and female students)</td>
<td>Diphtheria and Tetanus (DT)</td>
</tr>
</tbody>
</table>

4,366 students received vaccinations through the program in 2009.

Program Activities:

1. Early detection of diseases and syndromes through checking and examining 1st grade students, where 1,602 students were checked, 781 male and 821 female students. Among the most significant cases were 164 cases of vision weaknesses, 20 heart cases, 3 cases of testicle disorders and 2 cases of Hernia.

2. Eye and dental examinations to students of the 1st, 7th and 10th grades, for a total of 3,653 students in 47 schools in 2009, 1,206 of which were male students and 2,447 were female students, and the result was 498 cases of vision weakness and 29 crossed-eyed cases with a percentage of 14.4%.

3. Dental examination for the 1st, 4th, 7th and 10th grades, totaling 4,948 students, 1,916 male and 3,032 female students, and the result was: 8% of the cases needed care, 1.6% needed fillings, 0.6% had missing teeth, and 27.8% needed support and orthodontic care.

4. Provision of basic preventive and treatment health services to students and teachers, with a total of 4,381 emergency care cases.
Treatment of problems and discovered critical cases or transferring them for follow-up.

The program keeps the records and information through a special system based on documenting the health history of the students and examinations’ results, where a file is opened and kept for each student.

Health education for students, teachers and parents that includes:

- Health courses for students, including: First aid, proper nutrition, adolescence and road safety, where 58 training sessions were organized benefiting 1,616 students.
- Lectures on the following subjects:
  Self hygiene, proper nutrition, adolescence, road safety, prevention of avian and swine flue, the importance of vaccinations, avoidance of communicable diseases, anemia, dental and oral care, first aid, Thalassemia, the importance of breakfast, AIDS, school environment hygiene, etc. A total of 893 lectures were held benefiting 19,126 students.
  - 55 lectures were made for parents with 1,788 participants.
  - Student-to student lectures on health issues that focus on: proper nutrition, personal hygiene, and dental health with 83 lectures held for 2,343 students.
  - Participation in schools’ open days with interesting health subjects for 1,478 students.
  - Health days and festivals for students and parents that include health topics and recreational activities, distributed among 5 festivals with 585 participants.
  - Commemorating national and international events throughout the school year with 8 different activities including 1,000 participants.
5. School Environment’s Health: Through establishing student health committees that are trained on different health activities within the student-to-student program, including:

- Wall magazine, releasing 288 issues.
- Morning radio, with 426 health messages.
- Committee for supervising and monitoring the cafeteria.
- Committee for supervising and monitoring the hygiene of schools’ playgrounds, classrooms, and utilities.

Medical Checkup for Preschool Students:
Through the good relations the program has with kindergartens and nurseries, a health checkup was made for 3 of them with 252 children checked and examined.

Meetings and Interviews with Parents:
These meetings are implemented through the program to follow up on the health issues of their students through individual and group meetings and providing health advice and consultations, where 241 meetings were organized.
**Summer Camps:**
As a service to the community, and out of the care for students’ health and well being, and to ensure that they receive the values and information, the School Health Program was keen to be among the first programs to take the initiative to play this important role in cooperation with the Education Department in planning, coordination and implementation of summer camps, combining recreation, values and principles of partnership and cooperation, as well as the concepts of proper health practices. Within this framework, 3 summer camps were organized with the participation of 230 students.

**Program Partners:**

<table>
<thead>
<tr>
<th>Ministry of Health</th>
<th>Ministry of Education</th>
<th>Local Organizations</th>
<th>International Organization</th>
<th>School Management</th>
</tr>
</thead>
</table>

Below is some information and numbers that clarify the activities of the School Health Program in the occupied Jerusalem and the surroundings:

**Number of the School Health Program staff:**
The program includes 10 staff members, where the HWC continuously seek to build the capacity of the staff as part of its’ policy towards the employees, and out of this belief, the HWC organized 3 training sessions for the staff on adolescence health, prepared health educational material, provided advanced emergency service skills, and held 3 workshops on proper nursing documentation, blood diseases and AIDS.

During 2009, the program faced many difficulties that limited staff mobility and freedom and the delivery of medicines and vaccinations in time to schools due to the aggressive occupation’s measures and policy of suffocating and tightening the closure imposed on Jerusalem.
HWC started working in this program since the year 1993, and in 2009 they were able to examine and follow up around 30,000 women who received several preventive, curative and guiding health services, such as:

- Medical days: 10 medical days were organized with total beneficiaries of 692 women on the occasion of the International Women’s Day, and the World Health Day.
- Organizing and participating in 11 training programs related to women and health.
- Organizing and participating in 18 different workshops on issues related to women and health and different life and rights aspects.
- Commemorating national, Arab and International occasions.
- Organizing 31 community training sessions.
- Organizing 34 training session at schools.

At the level of community development, the coordination and networking at the local and national level was activated with 124 institutions and organizations and contributed in 544 joint activities. The program is active in the “Violence against Women” Civil Forum.
The following graphs show the indicators of the activities and actions of the program during 2009:

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternity Care</td>
<td>13785</td>
</tr>
<tr>
<td>Risk Factors</td>
<td>2369</td>
</tr>
<tr>
<td>Gynecology Disease</td>
<td>7448</td>
</tr>
<tr>
<td>Family planning</td>
<td>4693</td>
</tr>
<tr>
<td>Post Delivery Care</td>
<td>650</td>
</tr>
<tr>
<td>Nutrition</td>
<td>441</td>
</tr>
<tr>
<td>Safe Age</td>
<td>347</td>
</tr>
<tr>
<td>Smears Pap</td>
<td>1099</td>
</tr>
<tr>
<td>Breast Examination</td>
<td>7818</td>
</tr>
<tr>
<td>Breast Mammography</td>
<td>347</td>
</tr>
<tr>
<td>Home Visits</td>
<td>1135</td>
</tr>
<tr>
<td>Others</td>
<td>326</td>
</tr>
</tbody>
</table>

- 782 health education activities were organized within the program with 12,773 attendees.
- 34 positive Pap Smears cases were discovered;
- 62 positive breast mammography cases were discovered;
- 216 positive breast examination cases were discovered.
Health Work Committees - Palestine

Distribution of Women health services in 2009

Transfer Cases in 2009

<table>
<thead>
<tr>
<th>Transferred to</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dangerous pregnancy</td>
<td>97</td>
</tr>
<tr>
<td>Detailed U/S</td>
<td>2499</td>
</tr>
<tr>
<td>Specialties</td>
<td>448</td>
</tr>
<tr>
<td>Hospital</td>
<td>498</td>
</tr>
<tr>
<td>Delivery</td>
<td>643</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4185</strong></td>
</tr>
</tbody>
</table>
Women Health transfers in 2009

- Dangerous pregnancy %2
- Delivery %15
- Hospital %12
- Specialties %11
- Detailed U/S 60%

Geographical Distribution of Women Health Cases in 2009:

Geographical distribution of women health cases
The Well-Baby Program

HWC believe in delivering the Well-Baby Program to all clinics and health centers for its importance and impact on Palestinian Children. During the year 2009, 10,185 cases were included in this program as follows:

- 5,577 cases without vaccinations.
- Following up on 1,531 cases.
- The Program included 1,042 new cases and excluded 231 old cases since those children's age was no longer within the Program’s target group.
- Following up on the nutrition of 12,365 children.

Complete Blood Count/Blood strength

<table>
<thead>
<tr>
<th>Description of Cases</th>
<th>Simple Anemia</th>
<th>Medium Anemia</th>
<th>Acute Anemia</th>
<th>Nutrition Evaluation</th>
<th>Treatment With Iron</th>
<th>Transfer Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of cases</td>
<td>1094</td>
<td>62</td>
<td>30</td>
<td>550</td>
<td>611</td>
<td>16</td>
</tr>
</tbody>
</table>

Weight evaluation

<table>
<thead>
<tr>
<th>Under Weight Cases</th>
<th>Over Weight Cases</th>
<th>Malnutrition Evaluation</th>
<th>Transfer Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>683</td>
<td>688</td>
<td>358</td>
<td>24</td>
</tr>
</tbody>
</table>

Height evaluation

<table>
<thead>
<tr>
<th>Shortness</th>
<th>Tallness</th>
<th>Malnutrition Evaluation</th>
<th>Transfer Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>444</td>
<td>538</td>
<td>223</td>
<td>10</td>
</tr>
</tbody>
</table>
- 98 cases of Congenital Malformation were detected, 17 of which were Thalasemia cases, 13 suffered from heart diseases, 11 cases had dislocated hip and 10 had feet problems.

- 932 cases of acute diseases were discovered as follows: (700 cases with respiratory problems, 132 cases of diarrhea).

- 3,251 new born babies had their heads measured, 2,718 of which were within the normal standard, 69 cases were Microcephalic, 30 were Macrorcephalic, and 16 cases were transferred for follow up and supervision.
Diabetes Care Program

The health future of the Palestinian society depends on the health and well-being of its children and its elderly. Despite the several successes achieved lately at the level of improving the elderly health, especially those with chronic diseases, diabetes still represents a true and major threat in terms of illness, death and the general deterioration of heath. In this regards, small achievements have been made, only the situation got worse during the last few years due to the policies of impoverishing the Palestinians, the increase in unemployment rates, and the lack of investment in health and environment, in the absence of a national comprehensive health plan that aims at decreasing diabetes rates its complications, in addition to the absence of the proper effective management in appropriate and effective treatment for diabetics.

The World Health Organization (WHO) called diabetes with the term “Epidemic” for its rapid spread among people, because obesity and diabetes are highly spread all over the world, particularly in the developing countries, and the reason is related to the changes in the type of living conditions, where the number of diabetics around the world is estimated at 170 million patients and is expected to reach 370 millions by the year 2025. In the Middle East, the number of patients is estimated at 6 million, and as for Palestine, more than 8% of the adult population suffer from diabetes.

Diabetes causes other problems, namely, it increases the heart and artery problems from 2 to 4 times, affects the kidneys, is considered to be the main cause of death among kidney patients, and directly affects the eyes and limbs and is a main reason for limbs amputation. Studies and research on diabetics have proven that almost half of the patients need insulin treatment, and the percentage is constantly increasing.
The HWC believe that caring for diabetics on one hand and improving the Palestinian nutrition conditions on the other is a moral and basic right that should never be subjected to manipulation or mood swings since it is considered to be a basic duty of the Palestinian Authority and its different institutions (Governmental, Legislative Council and Ministry of Health) by allowing the provision of quality health care to all diabetes patients, which requires having a comprehensive just qualitative health system.

Despite the Palestinian consensus that considers caring for diabetes patients is among the general priorities of chronic diseases, there’s still a lot to be done in this regards, and the HWC call for a national program for chronic diseases as a national objective that identifies strategies to observe chronic diseases, and diabetes in particular, and calls for the need to develop programs that target changes of behaviors, habits and life patterns of Palestinian people and ensures the provision of accessible services that early detect the illness and train and qualify human resources that are able to properly manage chronic diseases such as diabetes, and provides the right to benefit from the facilities of comprehensive and qualitative diabetic care to each and every Palestinian.

What is the Diabetes Care Program?
The Diabetes Care Program is a preventive, educational and curative health program that follows up on diabetics and enables them to deal with the disease in order to prevent further complications.

The program services are provided against nominal fees that include: clinical medical examination, blood glucose test, blood lipids and cholesterol test, accumulative blood sugar test (HbA1c) and kidneys’ function examination. Moreover, the program organizes activities to enhance health education such as awareness meetings regarding diabetes, publication of leaflets on diabetes patients’ self care, as well as educational wall posters.

The HWC started the implementation of this pilot program in several clinics aiming to evaluating and disseminating the experience to all the clinics and health centers of the HWC, therefore, a special protocol was produced to interact with
diabetics and train professional staff in the program to implement the articles of the protocol, starting an actual implementation of the program in 8 clinics in 2009, where 2,263 patients were followed up.

Also, there were 115 home visits and 121 lectures were organized about diabetes, from which 2,098 diabetics benefited. Within this framework, a medical day for diabetes patients was organized, benefiting 35 patients.

<table>
<thead>
<tr>
<th>Statistical Data for Diabetes Patients in 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Diabetic Cases</strong></td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>-------</td>
</tr>
<tr>
<td>Diabetes type I</td>
</tr>
<tr>
<td>Diabetes type II</td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td><strong>Number of Complications Cases for Diabetic Patients</strong></td>
</tr>
</tbody>
</table>
**Community Rehabilitation Program:**

The Community Rehabilitation Program works in the southern area of the West Bank, which splits to several sub-programs where several staff members work as needed, as follows:

<table>
<thead>
<tr>
<th></th>
<th>The Community Rehabilitation Program in partnership with the Regional Rehabilitation Committee in the South</th>
<th>6 female staffs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>The Extended Rehabilitation Program/West Hebron</td>
<td>6 female staffs</td>
</tr>
<tr>
<td>3.</td>
<td>Homes and Organizations Rehabilitation Program in Ithna and Tarqumya</td>
<td>2 and a half male staffs</td>
</tr>
<tr>
<td>4.</td>
<td>The Rehabilitation Unit</td>
<td>3 and a half staffs +1/6 male staff</td>
</tr>
</tbody>
</table>

The Community Rehabilitation Program

**Coverage:**

The Program covers 111,637 people, 34,491 of which are in 12 communities in Bethlehem district and 77,146 in 10 communities in Hebron.

**Number of disabled people targeted by the program:**

The Rehabilitation program worked extensively with 244 disabled people through weekly rehabilitation visits, with 375 people through monthly or ever two weeks follow up, and with 476 people intermittently and as needed.

1. **Individual work with disabled people:**

   - **Training visits:** The program carried out 9,293 house visits to train the beneficiaries, 6,101 of which were amongst extensive work cases, 2,033 were follow ups and 1,157 as other cases.
   - **Transfers:** The program examined 901 disabled cases that needed transfer, 71 of which were transferred to medical services and 830 to rehabilitation services.
Merging: The rehabilitation program included 8 people in job opportunities and occupational rehabilitation, and 69 children (28 males and 40 females) in kindergartens, schools and special centers.

Supporting tools: The program facilitated the reception of 394 supporting tools suitable for the physical environment at schools by 330 people.

2. Community Work:

Community visits: The rehabilitation councilors carried out 225 community visits, 207 of which were to schools and preschools, 4 to occupational rehabilitation centers, and 4 to other centers.

Coordination was made with 187 community organizations through 374 meetings and workshops.

Details and Indications:

- 92 activities were organized to emphasize and support the community, where 623 children participated, 114 of which were disabled, 822 were adults, 122 of which were with disability, in addition to 74 parents, 27 of which were disabled, and 1,392 mothers, 339 of which had disabled children.

- 55 activities were organized of social inclusion nature, which included 13 recreational trips, 5 summer camps, 30 fun days, 7 plays, where 2,801 children participated, 809 of which were disabled, and 308 adults, 155 of which were disabled, in addition to 33 fathers, 9 of which had disabled children and 673 mothers, 267 of which had disabled children.

- 153 activities were organized to detect early disability signs, where 1,108 children were checked and evaluated, 789 of which were disabled, and 297 adults, 229 of which were disabled.

- 30 events were organized to mobilize and support community for disabled cases where 444 children participated, 147 of which were children with disability, and 610 adults, 96 of which were disabled. Moreover, 49 fathers participated, 24 of which had disabled children, and 1,920 mothers, 130 of which had disabled children.

- 382 people volunteered in the activities, 64 of which were disabled, and 38 male specialists and 175 female specialties contributed to improving the quality of the activities.
Homes and Organizations Rehabilitation Program in Ithna and Tarqumya:

<table>
<thead>
<tr>
<th>Location</th>
<th>Tarqumia</th>
<th>Ithna</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total houses being currently rehabilitated</td>
<td>47</td>
<td>80</td>
<td>127</td>
</tr>
<tr>
<td>Total disabled people who will benefit from the alignment</td>
<td>55</td>
<td>87</td>
<td>142</td>
</tr>
<tr>
<td>Total houses being rehabilitated for children under 18</td>
<td>33</td>
<td>54</td>
<td>87</td>
</tr>
<tr>
<td>Total disabled children who will benefit from the alignment</td>
<td>40</td>
<td>58</td>
<td>98</td>
</tr>
<tr>
<td>Total houses being rehabilitated for people above 18</td>
<td>14</td>
<td>26</td>
<td>40</td>
</tr>
<tr>
<td>Total disabled adults who will benefit from the alignment</td>
<td>15</td>
<td>29</td>
<td>44</td>
</tr>
<tr>
<td>Number of community organizations being rehabilitated</td>
<td>3</td>
<td>7</td>
<td>10</td>
</tr>
</tbody>
</table>
Rehabilitation Unit for the Disabled

The HWC have been working in the Community-Based Rehabilitation Program for 14 years out of its strong interest in people with special needs and the marginalized. Therefore, the HWC opened a special rehabilitation unit in Halhul Medical Center in August 2006 for the great need for this unit to take care of the disabled and provide them with what they need. There was a great need for this unit due to the lack of governmental centers that provide this service and in order to present a helping hand and assistance to them to enhance their self-confidence and live their lives naturally without any obstacles.

This unit in HWC’s Halhul Medical Center has the following staff members: a pediatrician, a speech therapist, a physiotherapist, a functional therapy specialist and a psychiatrist. This exceptional staff is qualified with good education professional experience, which allows them to present comprehensive integrated services for disabled people after identifying their needs by the specialists’ team. The unit in Halhul benefits from the Medical Center in its work.

**General objective:**

Developing rehabilitation services in the southern area of the West Bank through evaluating, diagnosing, treating, following up and transferring disabled children in mutual coordination with the rehabilitation services in the area through the Community-Based Rehabilitation Program and the national organizations.

The working mechanisms of the Unit rely and concentrate on the necessity to include families in the rehabilitation process of the children, where they learn and get trained to be part of the therapy, after developing the treatment plan by the rehabilitation worker to be implemented in the child’s surrounding environment through daily activities until the families are able to rely on themselves in providing the needed care and attention to their children.

Among the Unit’s activities: Participating in the educational and training workshops to improve the workers’ capacities, coordinating and networking with other governmental and private organizations locally and nationally, as well as organizing joint summer camps for both disabled and healthy persons, and producing educational and awareness publications for the community.
The Unit’s Objectives:

1. Provide quality rehabilitation services for the disabled and their families through coordination between the Unit staff and the community-based rehabilitation workers.

2. Train the Community-Based Rehabilitation Program workers to enable them to observe and early detect the different disabilities like: physical disabilities, speech, hearing, etc… through home visits.

3. Alleviate the awareness level through educational leaflets, workshops and lectures.

4. Work to enhance the role of families and the rehabilitation workers in setting the objectives and treatment plans to be implemented in the daily activities of the children.

5. Provide transfer services in the area and at the national level in cooperation with Bethlehem Arab Society for Rehabilitation within a special program in this field.

6. Provide the needed curative and diagnosis services to rehabilitate disabled people and follow up with the pediatrician and rehabilitation staff in the center and the field with the participation of the Program’s staff.

7. Inclusion of disabled people into the community.

8. Use the center as a source of information and database of disabled people, their families and institutions working in the field of rehabilitation.

9. Develop professional and educational partnerships between the center and specialized centers at the national and international levels.
Health Work Committees - Palestine

Departments:

- **Diagnosis and Follow-Up Department:** The pediatrician evaluates the diagnosis of the children in cooperation with the Unit team in the presence of the families and staff to evaluate the difficulties and disabilities, then identifies the objectives and puts forward the treatment plan for each child and works on the regular follow-up.

- **Psychotherapy Department:** Is run by a psychologist who provides social and mental services with preventive and curative orientations based on targeting difficulties that accompany the disability through long term guidance and mental health services, such as supporting targeted individuals, especially children with psychological problems, whether chronic or acute, or problems accompanying the disability by supporting the family and the local community through the work of the staff with different specialties.

- **Speech Therapy Department:** A speech therapist evaluates, diagnoses, treats, and follows up children with speech, pronunciation and swallowing difficulties. These problems and difficulties are treated by joining the family and the community rehabilitation worker in developing the treatment plan through daily activities for children with multiple disabilities like Cerebral Palsy, speech delays... as well as transferring those who need special services like mental health or hearing treatment to specialists.

- **Physiotherapy Department:** This department helps those with moving disorders in maintaining the daily life functions and attempts to avoid complications as much as possible. The treatment includes no medications or surgical interventions, only the use of supporting tools, and is based on exercises and repeated movements to reach the desired objective. The educational program of each child and family is considered an important supporting factor to prevent complications, provide a clear picture of the future plan, and help in supporting and encouraging families to continue and benefit from the treatment, where the child parents must be trained on doing that at home on the long run with the support of the community rehabilitation worker.

- **Functional Therapy Department:** Which is a special profession dealing with treatment, guidance and rehabilitation of different groups in the community of different ages, and it targets diversified difficulties in different performance fields: physical, feelings, mental, psychological and independency fields. For example, the unit treats children in early childhood who suffer from growth delays, mobility, sense, feelings, and mental skills, and treats older groups who lost their ability to perform independently in their daily lives and suffer from low level of mental performance, like the loss of memory, or the inability to differentiate or self care.
What are the objectives of functional therapy?

The main objective of functional therapy is bringing patients to the highest degree of independency in their daily lives, through working directly with them, identifying the problems they face, and developing suitable treatment plans. It supplies the patient with the required supporting tools that serve them in independency, train them on using these tools, and assist them in modifying the environment to coincide with their health situation.

The following table explains the Rehabilitation Unit’s work during 2009:

<table>
<thead>
<tr>
<th></th>
<th>0-5y</th>
<th></th>
<th>6-18y</th>
<th></th>
<th>18+y</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Rehabilitation Doctor</td>
<td>175</td>
<td>147</td>
<td>59</td>
<td>73</td>
<td>8</td>
<td>5</td>
</tr>
<tr>
<td>Physiotherapy Department</td>
<td>122</td>
<td>76</td>
<td>52</td>
<td>46</td>
<td>2</td>
<td>32</td>
</tr>
<tr>
<td>Speech Therapy Department</td>
<td>175</td>
<td>99</td>
<td>104</td>
<td>65</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>34</td>
<td>21</td>
<td>57</td>
<td>22</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Functional Therapy Department</td>
<td>80</td>
<td>69</td>
<td>50</td>
<td>68</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td>Evaluation of Aid Tools</td>
<td>295 children and 65 adults were evaluated by the Rehabilitation Unit’s staff for suitable Aid Tools for disabled people.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Adaptation</td>
<td>The needs of 170 houses with disabled people in Ithna and Tarqomia were determined.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Mobile Clinic

The HWC strongly believe that all groups, particularly the marginalized and poor groups of the community, have the right to receive proper health care, especially those who live in remote areas that lack health care services. Therefore, the HWC work to ensure that these groups receive the required health care by organizing mobile clinics that reach people at their neighborhoods to provide the needed health care and empower them to stay on their land.

The following table shows the services provided by the mobile clinics as well as the geographical distribution, which ensure the essential health needs for the residents of the area who’ve suffered from siege and closure during the Intifada.

**Health Services Provided by the Mobile Clinics:**

1. General Medicine.
2. Treatment and emergency services.
3. Primary health care for women and children.
4. Empowering society through health care seminars, home visits and health education.
5. Medical supervision of students at schools.
6. Health care provision to patients with chronic diseases.
### Geographical Distribution of the Mobile Clinics Services:

<table>
<thead>
<tr>
<th>Geographical locations</th>
<th>Service</th>
<th>Villages</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Middle area</td>
<td>General medicine and women health</td>
<td>Alliban Algharbi, Ras Karkar, Rantis</td>
</tr>
<tr>
<td>The North and Northern Jordan Valley</td>
<td>General medicine and women health</td>
<td>Ein AlBida, Kardala, Bardala, Almaleh, Tayaser, Salhab wazraq, Ras Alfara, A’atof, Alaqrabaniyeh, Althagra</td>
</tr>
<tr>
<td>Bethlehem (West Rural area)</td>
<td>General medicine, women health and healthy child</td>
<td>Alwalaja, Wadi Fouken, Aljaba’</td>
</tr>
<tr>
<td>Bethlehem (East Rural area)</td>
<td>General medicine, women health and healthy child</td>
<td>Alkhas, Alnieman, Almaa‘sara, oret Ashama‘, Almanshiya, Ertas, Hindaza, Marah Rabah, Um Salamona, Wadi Rahal</td>
</tr>
<tr>
<td>Hebron</td>
<td>General medicine and women health</td>
<td>Qafan Khamis, Alshyoukh, Alaroub, Kwazeba, Hata, Safa, Jala, Wadi Neil, Khibit Zakariyam Alfahs, Saeir</td>
</tr>
</tbody>
</table>

### Number of Cases Checked by the Mobile Clinics in 2009

<table>
<thead>
<tr>
<th>Activity</th>
<th>Mobile Clinic in the North</th>
<th>Ras Karkar</th>
<th>Rantis Algharbi</th>
<th>Alliban Algharbi</th>
<th>Mobile Clinic in the West Rural Area</th>
<th>Hebron Care</th>
<th>Bethlehem Care</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Medicine</td>
<td>4850</td>
<td>4547</td>
<td>4401</td>
<td>3523</td>
<td>745</td>
<td>6985</td>
<td>1486</td>
<td>26537</td>
</tr>
<tr>
<td>Women Health</td>
<td>1466</td>
<td>329</td>
<td>648</td>
<td>359</td>
<td>357</td>
<td>1322</td>
<td>1361</td>
<td>5842</td>
</tr>
<tr>
<td>Healthy Child</td>
<td>0</td>
<td>59</td>
<td>48</td>
<td>97</td>
<td>525</td>
<td>0</td>
<td>0</td>
<td>729</td>
</tr>
<tr>
<td>Emergency</td>
<td>0</td>
<td>293</td>
<td>318</td>
<td>308</td>
<td>46</td>
<td>0</td>
<td>0</td>
<td>965</td>
</tr>
<tr>
<td>specialties</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>72</td>
<td>0</td>
<td>0</td>
<td>72</td>
</tr>
<tr>
<td>Lab</td>
<td>0</td>
<td>1124</td>
<td>1090</td>
<td>786</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6316</strong></td>
<td><strong>6352</strong></td>
<td><strong>6505</strong></td>
<td><strong>5073</strong></td>
<td><strong>1745</strong></td>
<td><strong>8307</strong></td>
<td><strong>2847</strong></td>
<td><strong>37145</strong></td>
</tr>
</tbody>
</table>
Bar Chart of the Cases Checked by the Mobile Clinics:

Number of cases seen by mobile clinics in 2009

Distribution of geographical percentage of mobile clinic 2009
Improving the Efficiency and Performance of HWC Staffs

Several years ago, the HWC started the process of developing their staff capacity in the different administrative, managerial and professional fields, under the project of developing the staff’s capacity and performance in the framework of serious work to improve the health condition through covering the basic health needs, such as women health, child health, and maternity, develop the infrastructure of health and human resources, and merge health institutions into the Palestinian health system.

The HWC continued to work in this program with the support of the Spanish solidarity financed by the Governmental Spanish Cooperation. The program aims at upgrading the HWC administratively and professionally through developing an information system by establishing a special program in the institute that helps to reach a centralized computer information system for all activities of clinics and health centers of the HWC.

The program also aims at developing the health and medical equipment in the different centers of the HWC within the program that started in 2007 in all centers.

The Spanish Institute SI provides technical advice through experts in the different fields, and the program targets the reception staff of the HWC, physicians, centers’ directors, accountants and information system staff.
Health Work Committees - Palestine

According to the organization’s future plans, the program will work towards developing a special information bank (database) for the HWC, and will improve the quality and efficiency of the provided health services for the beneficiaries of the centers and clinics of the Institute.

The main achievements of the program in 2009:

First: Enhancing the registration program in all HWC centers and clinics.

Second: Organizing training programs for HWC staffs such as (presentation skills, communications and reach out, and Public relations), in addition to trainings for health workers, mainly on the protocol of managing medical waste chronic diseases.

Third: Upgrading computer systems in the centers of HWC.

Fourth: Developing computer programs for inventory and human resources.
Community Development Program: Salfeet and Qalqilya

The program is being implemented in Salfeet and Qalqilya districts for several years now, which is based on the philosophy of alleviating the targeted local communities and supporting them towards taking a leading and active role in the development process and building up of the society.

The program is implemented in several locations in the city of Qalqilya as well as the villages of Kufur Laqef, Haja, Kefel Haris and Marda…, where the program’s activities in these locations include training sessions, lectures, receiving delegations, children’s recreational activities, cultural evenings, and commemoration of national and international occasions. For example, during 2009, a pioneer center organized several popular activities with large numbers of participants on the issue of boycotting Israeli products through a series of field activities to make the people aware of the importance of this file.

The following program activities can be highlighted and recorded taking a comprehensive general view:

- In the framework of working to empower the active grass root organizations to reach an improved living and health conditions of the people in the target areas, 11 meetings were held for the committees responsible for the projects, 25 meetings for the youth committees, 31 meetings for women’s’ committees, and 10 meetings for health committees in the 8 targeted areas. As for improving the level of the training submitted to women and the youth in the two districts, 15 training hours were organized on community development and the same for planning and management, as well as 15 training hours in the field of lobbying, supporting and organizing the community. Moreover, the program has implemented 5 workshops for 50 participants from the local community on women rights and civil violence, employment, youth and checkups for people affected by the wall.
- Improving the level of training provided to the youth: The program implemented 120 training hours for 8 youth committees in planning and management, networking, reaching out and gender. Trainers were trained for each location, and a central seminar was organized for 160 young males and females to discuss and study the status and needs of the youth.

- 1,000 students in the schools of Qalqilya, Azzoun, Jayyous, Kufur Laqef, Haja, Jainsafout, Kefel Haris, and Marda benefited from medical checkups coordinated by the program, which included dental check-ups, ophthalmology and general medicine, as well as providing health services to 139 women and pregnant women, in a way to try to promote the health situation and living conditions of the people.

- In order to emphasize the steadfastness of the people and build the capacities of the grass root organizations, the program implemented several activities and events such as organizing a special ceremony to remember the martyrs with 500 participants and following the announcement of the results of the General Secondary Exam (Tawjihi), the program organized 3 main events of celebrations with more than 1000 participants to reward the successful students. Moreover, a special cultural evening with 70 participants for the prisoners’ families was organized, as well as 120 farmers who received olive trees provided to them by the program. On women’s day, the program commemorated 120 women employees and volunteers of the Health Work Committees (HWC), which was attended by more than 500 women.
- The program worked to enhance and improve the capacities of children by having 50 children participate in a candlelight march in the center of Qalqilya, and organized a special session on psychological support and easing tension for 42 children in Jensafot, and 340 children enjoyed a circus show that the program had organized.

- During 2009, the Community Development Program held 74 workshops in Salfeet and Qalqilya districts with 2,106 citizens, organized 4 different workshops, and 7 summer camps with the participation of 631 children, received 16 local and international delegations, and 1,44 students benefited from health examinations in the two districts.

- The program enjoys an exceptional relations’ network with local and international community organizations that work across sectors such as the Union of Agricultural Work Committees (UAWC), the Educational Directorate in the district, Defense for Children International (DCI), Young Men Christian Association (YMCA), the Popular Anti-Apartheid Wall Campaign, as well as other clubs and organizations.
The Development Program in the West Rural Area

The program continues to work on improving the human and financial resources of the people in the rural villages in Bethlehem district through enabling the grass root organizations and developing them in the targeted areas. With this regard, the West Rural Development Organization was rehabilitated, reconstructed and provided with office furniture. As for developing the living conditions of the people in that area, house gardens were built. At the level of the health services in the West Rural Area, the program supported the clinics working in the area with medicines and medical supplies.

Regarding promoting the level of life skills for people in the health, cultural and agricultural fields, several courses were held targeting Palestinian women and youth of the West Rural Area in the fields of developing daily living skills and empowering women, agricultural cooperation and empowering farmers, psychological treatment through laughter, and confronting the drugs in the area.

The program implemented summer camp for the youngsters in Alkhader who as well participated in other summer camps.
Al-Waha Center for People with Special Needs

Within its efforts to build an ideal model center to enhance mentally disabled people and to ensure good living conditions and respect for them, Al-Waha Center started the provision of health insurance services to its beneficiaries, where the center transferred 8 different cases for follow-up and maintained supervision and follow-up with their families, which included dental surgery and kidney problems and continuous checkups for a case of Gout syndrome as well as other cases.

The center continued to develop by carrying out several developmental and rehabilitation work, a moving to a new building, purchasing new equipment, organizing several workshops about families support to the beneficiaries, in addition to visiting beneficiaries’ families, and hosting three volunteers within the framework of networking with local and international community.

At the level of promoting the center through information about the mission and vision, Al-Waha Center hosted volunteers from local universities and community organizations, as well as international delegations, and organized recreational activities and continued to develop the staff through capacity building programs.

The center serves more than 32 beneficiaries daily (13 of which are females and 10 are males) of mental and physical disabilities.
Senior Citizens’ Club

The senior citizens’ club continued to be a good example for enhancing the community role of senior people by meeting their needs and supporting their rights according to the HWC’s philosophy and vision. During 2009, tests for Diabetes and cholesterol to 132 senior females and males were carried out, and vision and eye tests for 37 others, as well as two ophthalmological surgeries and three checkups for the retina, and flu shots were given for 40 people, in addition to the organization of different checkups and tests for 80 seniors at the club.

At the awareness level, 12 health lectures were held on avian flu and ways of prevention and treatment, with 57 beneficiaries, including lectures on different subjects like eye problems, improving mental health, ways to fill their free time, getting rid of sadness and anxiety before sleeping, healthy nutrition for seniors, prevention measures of diabetes and knowing its symptoms, and ways to take care of the dental dentures for elderly people.

245 meals were provided to 9,766 seniors at the club, and a cultural day was organized where health pamphlets about diabetes, Thalasemia drugs and breast cancer were distributed, and 5 celebrations and 2 marches were organized in different occasions.

In the framework of horizontally expanding the club services, 5 new seniors were recruited in the club, the organization of activities with 63 senior outside the club, the publication of a booklet on seniors’ conditions, and three meetings were held with seniors’ families. Moreover, 20 computer training sessions were organized and 13 stories were documented in the framework of oral dating of the seniors’ experience, as well
as organizing a seminar for 85 seniors on the value and importance of their age phase. Also, seniors participated in the clubs’ administrative committee which held 10 meetings and contributed to the preparation of celebrations and meetings, and the club established a private library where 50 books were collected.

The club enhanced the relations with organizations interested in seniors’ issues, by which it implemented two activities, in addition to organizing three voluntary activities for the seniors. The club management also worked to enhance the social and health rights for the seniors through media and emphasized the cooperation and coordination with them.

**Implemented Administrative Activities:**

- 50 staff meetings were held for the purpose of routine follow-ups of the activities, monitoring the plan of implementation for 2009, discussing the needs and the situation of the club, evaluating the celebrations organized on Women’s Day, Mothers’ Day and Seniors’ International Day, and also distributing tasks among staff.
- The recruitment of an administrative assistant.
- The director of the club participated in all development-concerned meetings organized by the HWC.
Other Activities:

• The director and staff participated in the celebration of Women International Day held at the medical center upon an invitation from the HWC.

• The director, 4 staff members and a volunteer participated in the Labor Day celebrations in Ramallah upon an invitation from the HWC.

• 80 senior citizens participated in a solidarity march with our people in Gaza.

• 9 female seniors participated in a workshop on “The Effect of Environment Pollution on Women’s Health” in Bethlehem.

• 41 seniors participated in a workshop of 5.5 hours duration about “Skills for Dealing with Alzheimer Syndrome”.

• Participation in the “Palestine International Prize for Creativity and Exceptional Performance.”

• Visiting the advisor of the Minister of Women Affairs, Director of Girls Department, and Director of Bait Al-Ajdad Center for Senior Citizen Care and the Director of Social Affairs Department in Jericho.

• Receiving the Governor of Bethlehem, Mr. Abdel Fatah Hamayel at the club.

• Receiving the Minister of Social Affairs, Ms. Majida Al-Masri, accompanied by the Governor of Bethlehem at the club.

• Receiving the president Abu Mazen on 20th July 2009 at the club.

• Receiving the Governor of Bethlehem, Mr. Abdel Fatah Hamayel at the club together with his Office Director and Director of Social Affairs Department, Ms. Diana Mubarak.
Jadal Center continued to respond to the increased development needs of the Palestinian community according to the organization’s vision in order to contribute to developing the awareness of national identity and cultural rights in its progressive human aspect according to several strategies, most important of which are:

- Enhancing the community cultural dialogue through organizing 5 political, economic, social and cultural seminars with 143 participants, and organizing three discussions on the subjects of identity, basic law, and concepts of democracy and elections, where 54 people participated in these discussions. The center organized meetings with 15 foreign delegations of different nationalities, networked with 26 organizations working in different fields, organized 18 musical evenings and presented 5 meaningful movies.

- The second strategy of the year was geared towards encouraging skills and artistic and intellectual creativity where 10 beneficiaries were trained on the Marsam program, continued training the floklorik dabka which belongs to the center, and produced an awareness conceptual booklet on the youth rights.

- The center also enhanced the volunteers’ group work, within the strategy of building up youth leaders, by organizing several training courses in language, computer driving license, and boycotting the occupation, and held 4 training sessions on youth leadership. The center also organized summer camps, and held prior preparation training for the camp supervisors.
• Regarding increasing the awareness of people for their basic rights, the center implemented a special campaign for youth rights and published a pamphlet and poster regarding this issue, and organized free medical days, wall paintings and volunteer work days, in addition to popular campaigns at schools during the memorial day of Al-Nakba, targeting 1,860 students of both genders in schools in Bethlehem District and their teachers, and finally implemented several different training sessions for women over a 7-month period.

• The center also organized several training sessions, plays and sketches in the southern West Bank area during 2009 and celebrated many national and international occasions as well as many specialized workshops.
Sheppard’s Field (Haql Al Roa) Kindergarten and Daycare

Introduction:
Sheppard’s Field Kindergarten and Daycare in Beit Sahour has been functioning through the program of assistance to working women and developing the children educationally and academically since 1996, when work started by providing care to 25 children, which increased quickly and forced us to rent another wider space, and today we can see a noticeable development and improvement of the services provided to children and families by the daycare and kindergarten.

The daycare and kindergarten aim at responding to and meeting the educational, health and development needs of the Palestinian community and enhancing the children’s educational abilities in Bethlehem District. It also aims at improving and developing the educational methods and learning in the district though working and coordinating with all existing organizations in the area, which are estimated at 16 organizations that differ in their names according to their objectives.

The methodology used in the daycare and kindergarten targets several educational, cultural and learning issues that can alleviate and improve the children’s educational process and develop the capacities of field workers.

The Operational Objectives of the Daycare and Kindergarten:

1. Daily care of 110 children throughout the year.
2. Health care and health insurance for the children.
3. Provide breakfast to children in cooperation with parents and lunch provided by the center.
4. Develop the skills of youth in knowledge, psychology, sentimental and physical skills.
5. Enhance volunteer work and active participation of families and organizations.
6. Develop a consultative base for the educational organizations in the district.
7. Carry out awareness campaigns for families in the health, psychology and cultural fields.
8. Educational base for students in academic organizations.

In the framework of implementing the strategic plan of the Daycare and Kindergarten, the work included:

Building an advanced educational model to influence the childhood general policies through responding to the health rights of the Palestinian community by undertaking comprehensive examinations to 81 children including laboratory tests. Moreover, the daycare and kindergarten distributed 900 educational and guiding pamphlets and 100 photo leaflets.

The daycare and kindergarten worked on developing the capacities of the staff and workers by organizing drama training sessions for workers and a training session on story telling to 3 others, as well as implementing 33 joint activities for daycare and kindergarten students.

In the framework of responding to the developmental rights of the Palestinian community, the daycare and kindergarten provided daily care for 112 children, offered them breakfast, implemented many daily working papers, purchased educational toys, and held special and general celebrations including marching and open days and graduation parties, in addition to the organization of 20 educational and recreational field trips inside the Bethlehem district and 2 outside the district.

At the level of alleviating reading skills of children and their families, the library was supported by 270 stories donated by the families and parents of children where the available books reached 787 books and stories, 668 of which were borrowed and returned by the children and their families.

On the other hand, and at the level of creating programs for the parents and university students in the educational process, 10 students of Bethlehem University and Al-Quds Open University participated in community services, where three students from Bethlehem University carried out applied research on kindergarten students as required by the university, and seven others from St. Joseph Rosary Sisters school volunteered in the daycare and kindergarten, as well as another volunteer from the Future College and another from France and two others from Al Mihwar Center. In addition to this, 13 young male and female members of Jadal Center of the HWC volunteered in the daycare and kindergarten. The daycare and kindergarten added some improvements at the level of services by furnishing it with equipment that are safer and cleaner.
Public Relations Department
Public Relations, Advocacy and Media

The work of the Public Relations (PR) Department focuses on the following fields:

First: Relations with donors by submitting new projects, following up on funded projects and submitting periodical reports, as well as contacting funding agencies and donors and organizing meetings with them for the purpose of getting financial and moral support to the HWC.

Second: Networking, advocacy and support at the local, Arab and international levels.

Third: Contribute to the implementation of part of the activities and events for internal advocacy and support.

Fourth: Carry out media activities of the HWC.

The Department of Public Relations carried out its complementary role to the other departments in the framework of support, assistance and meeting the needs, through expanding the HWC’s relations towards real partnerships with donors, and lobbying and support at the local, Arab and international levels, within the efforts to emphasize the national, health and developmental rights of our people who are still living under occupation.

Local Relations:

The PR department worked extensively to enhance the local relations with organizations, networks and local community, where it responded to the calls of other organizations and participated in their activities out of the believe of enhancing relations with the local and civil society, such as (Al-Haq, Women Studies Center, Aman Coalition, the Democratic Movement Conference, Yaser
Arafat Institute, Ma-an News Agency, Baladna Cultural Center, Save the Children Foundation, Palestinian Studies Center, Women's Center for Studies...etc), in addition to participating in Palestine International Festival and Ramallah International Festival for Modern Dance, by providing medical staff to be ready for any emergency, as well as attending the opening session of the conference of the General Palestinian Women Union, and participating in the Award Ceremony for Prisoners in Military Jails, The Palestinian Social Policy Conference organized by the Ministry of Planning, the Educational Coalition Conference for Illiteracy, the Ministry of Health Conference on Health Service Quality, Beliein Conference against the wall and many others. HWC had a prominent role in supporting our people in Gaza and participated in many activities and preparatory meetings against the attacks on Gaza, where 25 meetings were organized for this purpose with financial support agencies, in addition to meetings with civil society organizations and political groups and parties, and media activities and interviews with the French Radio, a Chinese newspaper, a Japanese newspaper, and the Italian Communist Party newspaper, in addition to the active participation in preparatory meetings for the demonstrations against withdrawing the vote on the Goldstein report, and many other national events and ceremonies with the boycott and the anti-apartheid wall campaigns.

The department continued to represent the HWC in the main national coalitions such as being a member of the coordinating committee of the Palestinian NGOs Network (PNGO), the Anti-Apartheid Wall and Settlements Popular Committee against, the Occupied Palestine and Syrian Golan Advocacy Initiative, the Palestinian Health Policy Council, the “Violence Against women” Forum. In addition to representing these coalitions, the HWC played an important role in the Arab Women Network (ROA), the Euro-Mediterranean NGO Platform, and the National Campaign for boycotting and imposing punishments and measures against the occupation. The department also participated in periodic ordinary meetings of other coalitions such as:

1. The National Coalition for Protection against the Risks of Abortion: The HWC is one of the founders of this coalition, which started recently by organizing a workshop about abortion. Moreover, work was made on developing a document to modify the articles related to abortion to be submitted to the Legislative Council and a manual was developed for the participating organizations in the reproductive health services.

2. The International Educational Forum: The HWC participates in this forum through its membership in the Educational Coalition for Safe Health Environment, where it represented PNGO Network in 7 meetings. Preparations are being made to organize an International Educational Conference in Palestine, in each of Gaza, Ramallah, Haifa, Jerusalem, and Beirut on the Arabic level.
3. The Pool of Developmental Institutions in Bethlehem: The HWC is the coordinator of a body consisting of 10 active organizations in Bethlehem, and throughout 2009, 8 meetings were held, and it participated in 14 activities of political, developmental and popular nature.

4. HWC leading of the PNGO Network in Jerusalem and the implementation of a project in the name of the Network, where many meetings were held especially for the members of the Network who work in Jerusalem, in addition to the participation in the preparations of special activities in Jerusalem presenting the occupation’s practices and policies in the city.

Special efforts were made at the level of Embassies and General Consulates in Palestine, where the HWC communicated with the Turkish Development Cooperation Agency (TIKA), responded to the invitation of the Embassy of Venezuela on their independence day, and communicated with the Belgium Technical Cooperation (BTC), and met with the Spanish Cooperation, the Italian Cooperation and the Embassy of South Africa.

**Arabic and International Relations:**

HWC was represented in many Arabic and International conferences and meetings to talk about the Palestinian reality present a picture of our people under the occupation enhance international solidarity and explain the Palestinian cause. To this effect, the HWC activities and programs were promoted by sending delegations to represent it in many Arab and international conferences including: Brazil, Italy, Egypt, Morocco, Turkey, Jordan, Dubai, Spain, Belgium, Bahrain, Lebanon, and France... as well as receiving many friendly and partner delegations such as receiving 5 delegations from Belgium including
medical students, 6 delegations from Italy including physicians and a delegation of the Italian communist party, 5 delegations from Spain, 3 from Al-Bask region, a delegation from Norway, 4 delegations from Greece, 2 from the US, 4 from France which included members of the workers’ union and students’ union, in addition to joint delegation of Ajyal Palestine Organizations of different nationalities, and the visit of the participants of the General Women’s Union Conference in Syria and Lebanon. Among the examples of this role and participations:

1. **The Conference of Left-Wing Political Groups in Europe:** Where the HWC participated with a Palestinian speech in the conference, which talked about the Palestinian situation, especially on the aftermath of the Israeli aggression and attack on Gaza Strip, where the most brutal genocide took place, with 24 political groups from the European countries participating in the conference.

2. **The World Social Forum:** The HWC participated in the World Social Forum in Brazil, with an active role at the level of contribution to the preparation of a unified Palestinian delegation carrying a Palestinian message regarding the importance of international solidarity with the Palestinian rights. The HWC representative also presented 2 main lectures about the right of people to self-determination and mechanisms of international solidarity with minorities in their societies. Many meetings and sessions were held with international networks to prepare for joint activities and work on general international issues like: Immigration, the economic crisis, environmental pollution and stability, and armed conflicts, and it was decided to hold the World Social Forum in Palestine in 2010. It is worth mentioning that the HWC is a member of the Secretariat of the Educational Forum and the National committee and that it represents PNGO Network in the forum preparations together with other coalitions.
3. **The 3rd International Youth Camp:** The HWC organized the third International Youth Camp to form a friends’ committees network to support national issues, particularly the boycott and impose of punishments on the occupying state, where the campaigns continue in Belgium to apply pressure on the Belgium Bank to withdraw its’ investments from the occupation state, and the message of HWC to the committee working in Greece was of great importance that they organized a boycott campaign to the “Israeli” football team.

The Development Conference in (Dubai Dihad): Where the HWC participated in the conference within the participating Palestinian delegation, and many meetings were held with international agencies and organizations working in the fields of relief and development, in addition to meetings with many of the Palestinian community members that have relations with the HWC.

**Media is an indicator of the work and achievements of the HWC:**

In coherency with the trends, directions, philosophy and mission of the HWC to support the steadfastness of the people and their rights in getting proper diversified health care, the PR department worked on marketing and promoting the philosophy in its broader sides of nationalism and rights. Within this framework, the PR and information department produced 8 television series of one hour each aired on the Palestinian Satellite Channel (PSC) and one local station in each governorate, according to the most advanced information technologies featuring several subjects such as the health reality and situation in Jerusalem under the Israeli occupation, and the services that HWC provides to citizens, women health program, diabetes, community based rehabilitation, and primary health care services.

HWC also produced 7 TV spots aired tens of times each on the PSC and local stations of educational nature of people’s rights, guidance and counseling on different important subjects like: Diabetes and how to prevent it and deal with it, drugs and its danger on society, maternity care, the disabled and their right to life and work, the role of society in boycotting Israeli products, child health, and water and its preservation,

At the level of bridging relations with journalists working in Palestine, rewards for annual media competition were provided to winners in a celebration organized in the HWC headquarters with wide media coverage, where the competition was singularly targeting the reality of health insurance in Palestine. In the same framework, the HWC organized a special meeting with 13 Palestinian media specialist to discuss ways of enhancing the cooperation between the HWC and their organizations to establish the participation values and defend the rights of marginalized and deprived groups.
The department covered many national and labor activities in the different media like awarding the workers event on the 1st of May “Labor day” and the 8th of March “Women’s day” and produced several media decelerations in different occasions. Moreover, the HWC organized a special press conference on the prisoners’ day aired by many information and media stations and agencies in Palestine and the Arab world, which presented the sufferings of Palestinian prisoners as well as Arab prisoners kidnapped and held in Israeli jails.

The HWC published 4 issues of the periodical AMAL magazine in Arabic language and 3 English issues throughout 2009, which included many health subjects and investigations and news about the organizations’ activities. It also activated and regularly updated its Website. In 2009, the HWC was present in media and news with more than 200 news articles and reports, and the department published 11 special long documentary reports about the HWC in local newspapers and different electronic sites, published 8 statements on different occasions, coordinated the participation of representatives of the organization in 9 satellite interviews and coordinated the production of a short documentary film for Al-Jazeera satellite station about the HWC organization.
Financial Report
Independent Auditors’ Report

To M/s the Head and members of Board of Director
Health Work Committees
Ramallah – Palestine

We have audited the accompanying financial statements of Health Work Committees, which comprise the statement of financial position as of December 31, 2009, statement of activities and change in net assets and statement of cash flows for the year then ended, and a summary of significant accounting policies and other explanatory notes.

Management responsibility for financial statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Financial Reporting Standards. This responsibility includes designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error, selecting and applying appropriate accounting policies, and making accounting estimates that are reasonable in the circumstances.

Auditor’s responsibility
Our responsibility is to express an opinion on these financial statements based on our audit; we conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Auditor’s opinion
In our opinion, the financial statements present fairly, in all material respects, the financial position of the Health Work Committees as of December 31, 2009 and of its financial performance and its cash flows for the year then ended, in conformity with International Financial Reporting Standards.

Talal Abu-Ghazaleh & Co.
Jamil Mihen
Certified Accountant License # (109/95)
Ramallah, March 25, 2010
### Health Work Committees
**Ramallah – Palestine**

#### Statement of Financial Position as of December 31, 2009  
*Exhibit “A”*

<table>
<thead>
<tr>
<th>Assets</th>
<th>Note</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>(3)</td>
<td>1,962,405</td>
<td>1,607,714</td>
</tr>
<tr>
<td>Patients’ receivables</td>
<td>(2c)</td>
<td>678,666</td>
<td>521,679</td>
</tr>
<tr>
<td>Donors’ (pledges) receivables</td>
<td>(4)</td>
<td>946,423</td>
<td>2,235,950</td>
</tr>
<tr>
<td>Inventory</td>
<td>(5)</td>
<td>2,408,611</td>
<td>2,357,242</td>
</tr>
<tr>
<td>Other receivables</td>
<td>(6)</td>
<td>344,085</td>
<td>1,410,771</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td></td>
<td>6,340,190</td>
<td>8,131,356</td>
</tr>
<tr>
<td><strong>Property, plant and equipment</strong></td>
<td>(2c, 7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At cost</td>
<td></td>
<td>27,831,799</td>
<td>25,218,932</td>
</tr>
<tr>
<td>Accumulated depreciation</td>
<td></td>
<td>(9,778,255)</td>
<td>(7,603,539)</td>
</tr>
<tr>
<td>Net book value</td>
<td></td>
<td>18,053,544</td>
<td>17,615,393</td>
</tr>
<tr>
<td>Projects under construction</td>
<td>(8)</td>
<td>11,141,110</td>
<td>9,752,640</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td></td>
<td>35,534,844</td>
<td>35,499,389</td>
</tr>
</tbody>
</table>

**Liabilities and Net assets**

<table>
<thead>
<tr>
<th>Current Liabilities</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payables – (medical services suppliers)</td>
<td></td>
<td>1,106,830</td>
<td>412,467</td>
</tr>
<tr>
<td>Other accounts payables</td>
<td>(9)</td>
<td>1,830,800</td>
<td>1,447,742</td>
</tr>
<tr>
<td>Donations received in advance</td>
<td>(10)</td>
<td>1,454,383</td>
<td>1,184,064</td>
</tr>
<tr>
<td><strong>Total current liabilities</strong></td>
<td></td>
<td>4,392,013</td>
<td>3,044,273</td>
</tr>
<tr>
<td>Provision for End of service indemnity</td>
<td>(2h, 11)</td>
<td>3,723,560</td>
<td>3,395,812</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td></td>
<td>8,115,573</td>
<td>6,440,085</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net assets</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Net assets – <em>Exhibit “B”</em></td>
<td></td>
<td>23,821,540</td>
<td>25,461,573</td>
</tr>
<tr>
<td>Re- evaluation of fixed assets reserve</td>
<td></td>
<td>3,597,731</td>
<td>3,597,731</td>
</tr>
<tr>
<td><strong>Net assets at end of the year</strong></td>
<td></td>
<td>27,419,271</td>
<td>29,059,304</td>
</tr>
<tr>
<td><strong>Total liabilities and net assets</strong></td>
<td></td>
<td>35,534,844</td>
<td>35,499,389</td>
</tr>
</tbody>
</table>

*The accompanying notes constitute an integral part of these financial statements*
# Health Work Committees

## Ramallah - Palestine

### Statement of Activities and change in net assets for the Year Ended

December 31, 2009, **Exhibit “B”**

<table>
<thead>
<tr>
<th>Note</th>
<th>Temporary Revenues</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Unrestricted NIS</td>
<td>Restricted NIS</td>
<td>Total NIS</td>
</tr>
<tr>
<td>Operating revenues</td>
<td>(12)</td>
<td>10,876,004</td>
<td>--</td>
</tr>
<tr>
<td>Grants revenues</td>
<td>(13)</td>
<td>--</td>
<td>6,852,817</td>
</tr>
<tr>
<td>Donations revenues</td>
<td>(14)</td>
<td>7,181,933</td>
<td>--</td>
</tr>
<tr>
<td>In-kind Donation</td>
<td>(15)</td>
<td>1,091,835</td>
<td>--</td>
</tr>
<tr>
<td>Other revenues</td>
<td>(16)</td>
<td>101,231</td>
<td>--</td>
</tr>
<tr>
<td>Amounts released from temporary restricted revenues to unrestricted</td>
<td></td>
<td>5,111,662</td>
<td>(5,111,662)</td>
</tr>
<tr>
<td><strong>Total revenues</strong></td>
<td></td>
<td>24,363,665</td>
<td>1,741,155</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Note</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating expenses</td>
<td>(17)</td>
<td>(17,315,151)</td>
</tr>
<tr>
<td>Projects expenses</td>
<td>(18)</td>
<td>(5,111,662)</td>
</tr>
<tr>
<td>General &amp; Adm. expenses</td>
<td>(19)</td>
<td>(3,430,383)</td>
</tr>
<tr>
<td>Depreciation of fixed assets</td>
<td>(7)</td>
<td>(2,174,716)</td>
</tr>
<tr>
<td>Currency differences</td>
<td></td>
<td>287,059</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td></td>
<td>(27,744,853)</td>
</tr>
<tr>
<td>Net change in net assets during the year</td>
<td>(3,381,188)</td>
<td>1,741,155</td>
</tr>
</tbody>
</table>

### Net assets

<table>
<thead>
<tr>
<th>Note</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net change in net assets during the year</td>
<td>(3,381,188)</td>
<td>1,741,155</td>
</tr>
<tr>
<td>Net assets at beginning of the year</td>
<td>25,461,573</td>
<td>25,461,573</td>
</tr>
<tr>
<td><strong>Net assets ending of year</strong></td>
<td>22,080,385</td>
<td>1,741,155</td>
</tr>
</tbody>
</table>

"The accompanying notes constitute an integral part of these financial statements"
### Statement of Cash Flows for the Year Ended December 31, 2009

**Exhibit “C”**

<table>
<thead>
<tr>
<th>Cash flows from operating activities</th>
<th>Note</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in net assets during the year – Exhibit B</td>
<td></td>
<td>(1,640,033)</td>
<td>1,794,408</td>
</tr>
<tr>
<td><strong>Adjustments to reconcile changes in net assets during the year to net cash flow</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation of fixed assets</td>
<td></td>
<td>2,174,716</td>
<td>1,974,235</td>
</tr>
<tr>
<td>Addition on end of service indemnity during the year</td>
<td></td>
<td>1,007,703</td>
<td>853,650</td>
</tr>
<tr>
<td><strong>Changes in current assets and current liabilities:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients’ receivables</td>
<td></td>
<td>(156,987)</td>
<td>(79,785)</td>
</tr>
<tr>
<td>Donors’ (pledges) receivables</td>
<td></td>
<td>1,287,527</td>
<td>(37,509)</td>
</tr>
<tr>
<td>Other receivables</td>
<td></td>
<td>1,066,686</td>
<td>62,166</td>
</tr>
<tr>
<td>Inventory</td>
<td></td>
<td>(51,369)</td>
<td>317,674</td>
</tr>
<tr>
<td>Accounts payable</td>
<td></td>
<td>694,363</td>
<td>(395,667)</td>
</tr>
<tr>
<td>Other accounts payable</td>
<td></td>
<td>383,038</td>
<td>(617,763)</td>
</tr>
<tr>
<td>Donations received in advance</td>
<td></td>
<td>270,319</td>
<td>78,465</td>
</tr>
<tr>
<td>Paid to employee from provision end of service indemnity during the year</td>
<td></td>
<td>(679,955)</td>
<td>(354,273)</td>
</tr>
</tbody>
</table>

**Net cash flows provided by operating activities**

| 4,356,028 | 3,591,601 |

| Cash flows from investing activities: |
|------------------------------------|--------|--------|--------|
| Net transaction of fixed assets    | (2,612,867) | (1,609,954) |
| Projects under construction        | (1,388,470)  | (2,182,079) |

**Net cash flows used in investing activities**

| 4,001,337 | (3,792,033) |

| Cash flows from financing activities |
|--------------------------------------|--------|--------|--------|
| Net cash flows from financing activities |      |        |        |
| Net increase (decrease) in cash and cash equivalents | 354,691 | (200,432) |
| Cash and cash equivalent at beginning of year | 1,607,714 | 1,808,146 |

**Cash and cash equivalents at the end of the year**

| (2b, 3) | 1,962,405 | 1,607,714 |

*The accompanying notes constitute an integral part of these financial statements*
Thanks to

care

Agència Catalana de Cooperació al Desenvolupament

solidaridad internacional

DAN CHURCH AID

CON DIGNIDAD

Castilla-La Mancha

Muevemento por la Paz

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Cooperación extremeña

Junta de Extremadura

ACSUR

LAS SECUELAS

SODEPAZ

Gobierno de Navarra

MAP

Medical Aid for Palestinians

iCCO

Partner to enterprising people

Ajuntament de Barcelona

Junta de Comunidades de Castilla-La Mancha

Mundubat

PTM

Paz y Tercer Mundo

Fundación Castellano-Manchega de Cooperación

International Action for Liberation

INTAL

Ministerio de Asuntos Exteriores y de Cooperación

AECID

MOVIMONDO

MOLISV

EUSKO JAURLARITZA

Gobierno Vasco

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SUPPORT PROGRAMME