

**PALESTINE/ISRAEL HEALTH INITIATIVE (PIHI)
FINAL REPORT**

***“ADVANCING TRUST AND RECONCILIATION IN ISRAEL AND
PALESTINE”***

A Center for the Study of the Presidency Project

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by

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I. Palestine/Israel Health Initiative Overview

Health is essential to the economy, well-being, national security, and future of the Middle East region. The Palestine/Israel Health Initiative (PIHI) is a central component of the Center for the Study of the Presidency's USAID-supported program "*Advancing Trust and Reconciliation in Israel and Palestine*." Advancing trust and reconciliation in Israel and Palestine requires the imagination and resolve of local as well as national leaders, and the engagement of non-profit organizations as well as governments. Supported by a grant from the U.S. Agency for International Development (USAID), the non-partisan Center for the Study of the Presidency (CSP), a 40-year-old public policy and education organization, coordinated a series of planning and program activities in Israel and Palestine aimed at fostering reconciliation through local social and economic development and interfaith cooperation. The program consisted of three major components: inter-religious cooperation and dialogue, socio-economic development, and health and medicine programs.

The health and medicine component of this USAID-sponsored initiative focused on using health as a bridge to further knowledge exchange, trust, and understanding between Israelis and Palestinians. Countries cannot achieve political stability or flourish economically with unhealthy people. Health is a common currency among nations in this region of the world to help achieve a better future—reducing inequalities that lead to mistrust and building the relationships between people that can serve as pillars for peaceful co-existence.

Just as diplomats have hammered out treaties over the centuries to build bridges between nations, public health officials and humanitarian organizations have begun sharing best practices and technology in an effort to build a new kind of bridge between countries to foster peace and development around the world. This field, health diplomacy, is an important and underutilized instrument in our nation's foreign-policy toolbox and it has provided a framework for this Palestine/Israel Health Initiative.

Health diplomacy recognizes health as a universal and powerful language between people and between nations, which necessitates cooperation even in situations of conflict. Health diplomacy offers a much-needed opportunity for building bridges between societies, creating links between governments, the private sector, and NGOs and allowing them to work together to improve public health. Building such links can facilitate communications in other areas, increasing trust and confidence and helping improve overall relations.¹

In Palestine and Israel, the fields of public health and medicine offer unique opportunities for cooperation between professionals and leaders in both societies who come together to craft common solutions to shared health challenges. Palestinians and Israelis draw their drinking water and feed their fields and livestock from common water sources, including the Jordan River. They breathe the same air. They occupy a similar geographic landscape, eat similar foods from many of the same sources, share certain genetic predispositions, and

¹ Blumenthal, Susan, "Health Diplomacy: Rx for peace," *Washington Times*, 26 August 2007.

intermingle on a daily basis as Palestinians cross into Israel to live, work, and seek medical treatment.

Palestinian and Israeli professionals have been working together in the fields of public health and medicine for decades out of necessity and irrespective of political constraints. Though the political climate has affected the feasibility of certain projects, the need for this cooperation has sustained joint Palestinian-Israeli initiatives in health and spurred the development of new programs. This shared work produces relationships that are both professional and personal and that endure despite challenges. These initiatives build trust and reconciliation when patients receive lifesaving treatments, when health systems are built, when diseases and epidemics are monitored and prevented, when collaboration in research is undertaken, and when new generations of professionals are trained. The common quest for good health knows no borders. Crossing politics, borders, and cultures, these cooperative initiatives in public health and medicine are premised on the increasing interdependence of societies and their shared humanity.

The goal of the CSP Palestine/Israel Health Initiative has been to foster collaboration and facilitate interactions between medical, public health, and scientific experts, as well as other relevant organizations and individuals, in Israel and the Palestinian Territories to improve the health of people in the region as well as to promote increased cooperation and understanding. This Initiative builds on the foundation of health programs that have been conducted over the past decade in the Middle East region facilitated by governmental, academic, and private sector organizations.

The Initiative consisted of meetings of Palestinian, Israeli and U.S. medical experts that produced recommendations to improve primary care, disease prevention, and emergency preparedness as well as to foster collaboration on research, education, training, and the delivery of health services in the region. Other activities of the Initiative included a selected mapping of collaborative health programs underway between Palestinian and Israeli scientists and healthcare professionals and building an internet-based “health e-commons” for networking Israeli, Palestinian, and U.S. health and medical experts to foster collaboration and health information exchange. The Initiative also identified innovative opportunities to apply information technology and new media to advance health in the region. Recommendations from the project provide a framework for future work and initiatives.

II. Methodology

The Palestine/Israel Health Initiative, a component of the Center for the Study of the Presidency's program on "Advancing Trust and Reconciliation in Israel and Palestine" supported by USAID, involved a strategy to:

- Identify and engage organizations and experts involved in joint Palestinian/Israeli health activities in the region and from the United States who brought their expertise to the Initiative.
- Produce a selected inventory of Palestinian/Israeli health collaborations identified through structured internet-based research as well as field investigations.
- Convene meetings and Working Groups in Jerusalem, Haifa, Tel Aviv, and the West Bank during the winter and spring of 2008, which brought together health and medical experts to foster knowledge exchange and dialogue.

The meetings included dialogue with Palestinian and Israeli health professionals and scientists. The Working Groups convened on April 29-30, 2008 in East Jerusalem included plenary panels and discussion groups on education and training, primary care and prevention, emergency preparedness and disaster planning, health and medical research, and health information technology. Areas of focus included infrastructure for training of clinicians and scientific researchers and opportunities to establish clinical and research training exchanges. The working group meetings also explored the use of information technology and new media, including telemedicine and telehealth, to improve health in the region, foster collaboration and knowledge exchange, and enhance clinical training, research collaborations, and the provision of diagnostic, treatment, and prevention services.

- Develop a set of recommendations and a report to provide direction for effective, collaborative health activities in the region in the future.
- Explore strategies to sustain the recommendations of the Initiative's working groups, including creating and expanding a PIHI "health e-commons" website to network health and medical professionals in the region for continuation of collaborative activities and knowledge exchange.
- Explore building an internet health information portal with resources available in Arabic, Hebrew, and English for Israelis, Palestinians, and others in the region.

Key Individuals Involved in the Palestine/Israel Health Initiative Included:

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- Michael Silberman, D.M.D., Ph.D., Field Director, Palestinian/Israeli Health Initiative and Executive Director, Middle East Cancer Consortium
- Ziad Abdeen, Ph.D., Director, Al-Quds University Nutrition and Research Institute
- Beth Hoffman, Health Policy Fellow, Center for the Study of the Presidency

III. Background on Israeli and Palestinian Health Systems and Health Indicators

Though geographically intertwined, the health systems in Israel and Palestine are worlds apart. Since the passage of the 1995 National Health Insurance Law, the state of Israel has assumed responsibility for providing health services for all of its residents. State funding provides for a standardized set of medical services, including hospitalization. Healthcare in Palestine was reorganized during roughly the same period, with the creation of the Palestinian Ministry of Health in 1994. By contrast, unlike Israel's standardized provider system, the Palestinian healthcare system contains a mix of public, non-governmental, United Nations Relief and Works Agency for Palestinian Refugees (UNRWA), and private sector services. While Israel's ratio of physicians to residents is 372.61/100,000, one of the highest in the world², this ratio is only 97/100,000 for the Palestinian Territories.³ Israel and Palestine have at once very different systems of healthcare delivery and demographic profiles combined with geographic similarities and physical proximity, all operating within the constraints of a complicated and difficult political situation. This complex background has yielded two populations that have divergent health status indicators, many similar disease and genetic concerns, and almost unavoidably intertwined systems of healthcare delivery.

Israeli Health System

The current organization of Israel's health system has its roots in structures that were institutionalized with the establishment of the State of Israel in 1948. At that time, an Israeli Ministry of Health was formed along with regional health bureaus, an epidemiological service, mother-and-child healthcare services, and a medical corps to serve the Israeli Defense Force (IDF). Since the establishment of Israel's first and largest insurance company, Kupat Holim Clalit, in 1911, health insurance has been provided by four main insurance companies, known in Israel as "sick funds" or "kupat holim." Other sick funds include Kupat Holim Maccabi, Kupat Holim Meuhedet, and Kupat Holim Leumit. By 1995, approximately 96% of the population was insured. Nevertheless, the financing of health services, which faced periodic budgetary crises, had long been a topic of public debate.⁴

On January 1, 1995, the National Health Insurance Law was passed, creating a mandatory and nationalized health insurance system for the State of Israel. The law established the state's responsibility for the provision of health services for all of the country's residents. A standardized basket of medical services, including hospitalization, are supplied through the four sick funds. Health costs are funded through health insurance premiums paid for by each resident, employers' health tax payments, National Insurance Institute funds, Ministry

² World Health Organization (WHO), Regional Office for Europe, "Extract from Health For All Database: Israel," <http://www.euro.who.int/main/WHO/CountryInformation/HFAExtracts?Country=ISR&language=English>.

³ World Health Organization (WHO), Regional Office for the Eastern Mediterranean, "Country Profiles: Palestine," <http://www.emro.who.int/emrinfo/index.asp?Ctry=pal>.

⁴ Israel Ministry of Foreign Affairs, "The Health Care System in Israel – An Historical Perspective," 26 June 2002.

of Health funds, and consumer payments. All residents must register with a sick fund, and no sick fund can bar applicants on any grounds, including state of health and age. Among others, health services covered include medical diagnosis and treatment, preventive medicine and health education, hospitalization, surgery, chronic disease treatment, and obstetrics/gynecology.

With advanced medical technology and a thriving information technology sector, Israel provides some of the world's most advanced and accessible medical services. As of 2002, Israel is home to 356 hospitals, including 48 general hospitals with 14,324 beds. The health system also includes approximately 5400 beds for psychiatric patients, 19,600 nursing home beds, and 11,500 private in-patient hospital beds. Approximately 45% of general hospital beds are operated by the government, 30% by Israel's largest sick fund insurance company Kupat Holim Clalit, 6% in two hospitals belonging to the Hadassah Medical Organization, and the rest in hospitals run by non-profit and religious organizations. The ratio of hospital beds to Israeli residents is 5.95/1,000.⁵

The health system also supports over 2,000 community-oriented primary care clinics throughout the country, which are operated by sick funds, the Ministry of Health, and municipalities. Approximately 850 mother and child care centers offer low-cost accessible services throughout the country, including health education programs, regular checkups to monitor child development, and a comprehensive immunization program for newborns and children up to the age of five. 95% of all babies and children in Israel are immunized, a proportion that is higher than in Western Europe.⁶ Additionally, Israel's child mortality rate is very low at approximately 4.95 per 1,000 live births.⁷

With four medical schools, two schools of dentistry, one of pharmacology, 20 nursing schools, and numerous public health programs, Israel has approximately 26,000 physicians, most of whom are salaried employees of hospitals and the national sick funds. Israel's physicians service a population of approximately 6,930,000, 81% of whom are Jews and 19% of whom are mostly Arab non-Jews, with the majority of the population residing in urban centers.⁸ Its ratio of physicians to residents is 372.61/100,000, one of the highest in the world.⁹ 8.7% of Israel's gross national product is spent on health, a proportion similar to Western European countries. Israel's health indicators place its population among the healthiest in the world. For instance, life expectancy at birth for men is 77.56 years and for women is 81.74 years. Israel also has an advanced system of secondary care delivery: approximately 25% of its physicians are certified to provide specialized care.¹⁰

⁵ Ibid, 2.

⁶ Ibid, 3.

⁷ World Health Organization (WHO), Regional Office for Europe, "Extract from Health For All Database: Israel," <http://www.euro.who.int/main/WHO/CountryInformation/HFAExtracts?Country=ISR&language=English>.

⁸ Israeli Ministry of Foreign Affairs, 2002.

⁹ World Health Organization (WHO), Regional Office for Europe, "Extract from Health For All Database: Israel," <http://www.euro.who.int/main/WHO/CountryInformation/HFAExtracts?Country=ISR&language=English>.

¹⁰ Ibid.

Palestinian Healthcare System

In contrast to the high degree of specialization found in Israel, the healthcare system in the Palestinian Territories is organized principally around the delivery of primary care services. With two medical schools and no centers for training of specialists, the ratio of physicians to residents in the Palestinian Territories is 97/100,000, one of the lowest in the world.¹¹ Transferred to Palestinian control only in 1994, the health system's underdeveloped secondary and tertiary healthcare networks have made it largely dependent on neighboring countries, including Israel, Egypt, and Jordan, for obtaining appropriate health services for its people, particularly for advanced conditions and specialized procedures. While health indicators in the Territories are generally better than for neighboring Arab states, the area faces particular challenges as a result of the political environment and its effects on population mobility, security and stability, the availability of supplies, and the training and accreditation of healthcare workers.

As of 2004, the Palestinian Territories had a population of approximately 3.6 million people, growing at an annual rate of 2.6% and up from 2.89 million in 1994. The population is divided between the West Bank, East Jerusalem, and the Gaza Strip, with 58% residing in urban areas.¹² According to the Palestinian Central Bureau of Statistics, the population density in the Palestinian Territory was 625 persons per square kilometer at the end of 2007. The population density in the West Bank was 415 persons per square kilometer and 3,881 persons per square kilometer in Gaza (one of the highest ratios in the world). By contrast, the population density in Israel in 2007 was approximately 317 persons per square kilometer.¹³ In 1997, the fertility rate in the Palestinian Territories was estimated at 6.1 (2.88 in Israel), and children less than 14 years of age constituted approximately 47% of the total population. In 1997, refugees comprised 65.1% of the population in the Gaza Strip and 26.5% in the West Bank and Jerusalem, and 16% of Palestine's total population was residing in refugee camps.¹⁴

Health status indicators for the Palestinian Territories have generally improved over time and tend to be better than in neighboring countries, *excluding* Israel. Life expectancy, according to 2004 World Health Organization (WHO) estimates, is 72.6 years at birth (71.1 for men and 74.1 for women). Though significantly higher as compared to Israel, the infant mortality rate of approximately 20.5 per 1000 live births is comparable to or lower than rates in neighboring Arab nations and less than half the infant mortality rate in the Palestinian Territories during the 1970s. Furthermore, access to healthcare as well as living standards and hygiene have improved considerably during the past several decades. The WHO now indicates that 100% of the population has access to sanitation facilities, though

¹¹ World Health Organization (WHO), Regional Office for the Eastern Mediterranean, "Country Profiles: Palestine," <http://www.emro.who.int/emrinfo/index.asp?Ctry=pal>.

¹² Ibid.

¹³ Palestinian Central Bureau of Statistics, "Executive Summary of the Computer, Internet and Mobile Phone Survey," Ramallah - West Bank, Palestine, April 26, 2007.

¹⁴ Palestinian Central Bureau of Statistics, "Population in the Palestinian Territory, 1997-2010," Ramallah, Palestine, 1997.

only 97% has sustainable access to safe water sources. Moreover, while incidence of infectious disease has declined largely due to immunization programs and other public health measures, incidence and prevalence of cardiovascular diseases, hypertension, diabetes, and cancer has increased, requiring new public health interventions for chronic disease prevention and treatment.¹⁵

Meanwhile, regional politics has had a measurable affect on health status indicators in the Palestinian Territories in recent years. For instance, while childhood immunization coverage rose to approximately 97% by 2001, reports in 2002 indicated that immunization rates had declined, particularly in remote areas. This decrease may in part be due to transportation problems in delivering vaccines across check points, electrical shortages affecting vaccine storage facilities, and constraints on mobility affecting surveillance of vaccine-preventable diseases. Reports have indicated a similar decline in the use of preventive services, particularly among women attending post-natal care facilities and in the implementation of school health programs. UNRWA reported a 58% increase in the number of still births from 2001-2002, while the Palestinian Ministry of Health reported that the percentage of home deliveries had increased from 5% to 50%, as a possible consequence of mobility constraints affecting access to services.¹⁶

In recent years, nutritional status and access to nutritious food, particularly for women and children, have also been issues of concern in the region. The prevalence of anemia, wasting, and stunting in the population suggest a high incidence of childhood malnutrition. Market surveys have suggested shortages of high protein foods, caused by a combination of road closures, checkpoints, and military conflict. The collection of waste and other sanitation issues have also grown more problematic since the outbreak of the second intifada in 2000, particularly in the Gaza Strip. Additionally, ongoing conflict in the region has produced immediate health effects, causing deaths, physical trauma, and mental health concerns in both Israel and Palestine. In 2004, according to the World Health Organization, injuries (including domestic, road, and conflict-related) represented the leading cause of death for Palestinians 1-59 years of age. In addition to injuries, other causes of death among all age groups in 2004 included cardiovascular disease (25.1%), accidents (11.4%), cancer (10%), perinatal conditions (8%), and respiratory disorders including pneumonia (6.4%).¹⁷

Palestine's current health system was structured relatively recently with the creation of the Palestinian Authority's Ministry of Health in 1994. Prior to 1967, health services in Gaza were administered by Egypt and services in the West Bank and East Jerusalem by Jordan. Health institutions in Gaza and the West Bank operated independently of each other until 1967, when the Israeli Defense Ministry assumed responsibility for the provision of

¹⁵ World Health Organization (WHO), Regional Office for the Eastern Mediterranean, "Country Profiles: Palestine," <http://www.emro.who.int/emrinfo/index.asp?Ctrv=pal>.

¹⁶ World Health Organization, "Health Situation of Palestinian people living in the occupied Palestinian Territory: Statement by Dr. Gro Harlem Brundtland Director-General World Health Organization," September 2002.

¹⁷ World Health Organization, Health Action in Crises, "Occupied Palestinian Territory," July 2006.

services in the regions. Nevertheless, Gaza and the West Bank continued to have disjointed health delivery systems, each with a different chief medical officer, administrative structure, and protocols in certain health policy areas. Beginning in 1948, UNRWA has been responsible for providing basic health services to registered Palestinian refugees, who numbered approximately 1.1 million in 1997.¹⁸

Between 1967 and 1994, the Israeli Defense Ministry, with supervision from the Israeli Health Ministry, aimed to provide the best possible healthcare in the region given the available resources and to maintain financial self-sufficiency of the government health sector. To do so, it prioritized public health and primary care in the Territories, emphasizing immunization programs and maternal and child health programs in particular. Little investment, however, went into the development of secondary and tertiary care infrastructure and capacity. As a result, the number of government hospital beds in the West Bank and Gaza increased by only 13% between 1970 and 1993, and in 1992 only 10% (\$5.9 million) of the government health budget for Palestine went into development versus operating expenses.¹⁹

Following the Oslo Agreement in 1993, Israel transferred responsibility for health services and health policy in the West Bank and Gaza to the newly formed Palestinian Authority (PA), managed by its Ministry of Health (MOH). Currently, the Palestinian health system is broadly managed by four sectors: the government sector led by the Ministry of Health, the private sector, the non-governmental (NGO) sector, and the sector run by UNRWA for the health needs of Palestinian refugees. The MOH is the principal regulatory and administrative body for the Palestinian health system, managing public health services and delivery of primary, secondary, and tertiary care in public facilities. Primary care services are still considered to be the backbone of the Palestinian health care system, and 56.5% of all primary healthcare centers are run by the MOH.

Government-run health clinics are available in all urban centers in the Palestinian Territories but are less common in rural areas. The Ministry of Health does not operate any services in East Jerusalem, where services are provided by Palestinian NGOs and private agencies as well as by the Israeli health system. UNRWA provides education, healthcare, environmental health and support services to refugees in the West Bank, East Jerusalem and Gaza, who together accounted for 45% of the Palestinian population in 1998. UNRWA also primarily focuses on basic health services, operating 51 primary healthcare centers in the West Bank and Gaza. 49 NGOs provide healthcare services to Palestinians, operating 170 primary healthcare centers and 24 hospitals, primarily in the West Bank. For-profit services are concentrated in urban areas and in the West Bank. As of 2005, there were 77 hospitals with approximately 4,000 beds operating in the Palestinian Territories, 55 of which are located in the West Bank. Of the 77 total hospitals, 43 were general hospitals, 10

¹⁸ Palestinian Central Bureau of Statistics, "Population in the Palestinian Territory, 1997-2010," Ramallah, Palestine, 1997.

¹⁹ Schoenbaum, Michael, A. Afifi, and R. Deckelbaum, *Strengthening the Palestinian Health System*, (2005), 17.

are specialized, 20 offer maternity services and 4 concentrate on rehabilitation. The Ministry of Health operates 22 of these hospitals.²⁰

The accessibility of hospital beds varies considerably between regions. The ratio of beds/10,000 population in the Palestinian Territories was 13.26 in 2004 (14.87 in Gaza and 12.32 in the West Bank). In the West Bank, the highest bed accessibility in 2004 was in Bethlehem, at 37.1 beds/10,000 population, and the lowest was in Salfiet, near Nablus, at 2 beds/10,000 population. In general, tertiary services are not evenly distributed. Hospitals tend to be concentrated in urban areas, and more remote populations often have difficulty reaching centers for appropriate care. According to the Palestinian Ministry of Health, most MOH hospitals are over-utilized and crowded while NGO hospitals tend to be underutilized. The MOH estimates the average occupancy rate for MOH hospitals at 80% and the overall occupancy rate for government and non-governmental hospitals at 65%.²¹

With resources predominantly flowing into primary care and community health services, the Palestinian health system faces particular challenges with regards to the provision of secondary and tertiary care services. There are only three oncology and cardiology centers in the West Bank, all located in urban areas inaccessible to most of the population, and specialized medical personnel is limited. As a result, Palestinian patients needing advanced care are often referred to other countries. According to the WHO, approximately 16% of the Palestinian Ministry of Health Budget is devoted to remote care, most of which occurs in Israel, Egypt, and Jordan. The total budget of the Ministry of Health in 2004 was \$126 million, \$32 million of which supported the cost of treatment provided to Palestinians abroad. A recent report by the Israeli Health Minister to the WHO estimated that in 2006 tens of thousands of permits, averaging 200 patients each day, were given to Palestinians to pass through checkpoints and receive medical care in Israel. In 2006, approximately 60,000 Palestinians from the West Bank area were treated in Israeli hospitals, 20,000 of whom were hospitalized and 40,000 of whom received ambulatory services. 2,500 of these patients were children, the majority of whom received long-term treatment for cancer and complicated operations.²²

Financing for health services in the Palestinian Territories is fragmented, coming from a mix of tax revenues, government insurance premiums, out of pocket payments, external assistance, private health insurance and investments, and contributions by the Israeli government and workers living in Israel. In 2004, according to the Palestinian Ministry of Health, 55.9% of Palestinian families were covered by governmental health insurance, which entitles them to free services provided by the governmental health sector. Total health expenditure per capita in Palestine was \$138 in 2001 (compared to \$1,622 in Israel

²⁰ Palestinian National Authority, Ministry of Health, "Hospitals," May 2005.

²¹ Ibid.

²² Palestinian Central Bureau of Statistics, "Population in the Palestinian Territory, 1997-2010," Ramallah, Palestine, 1997.

in 2003) and constituted 13.5% of the 2004 gross domestic product (compared to 8.7% of GDP in Israel in 2004).²³

Challenges to the Palestinian economy in recent years have had an impact on the financing of the health system. The unemployment rate in Palestine rose to over 60% of the population in 2007, while GDP decreased from \$1,612 U.S. in 1999 to \$1,129 in 2006. According to a 2007 report by the Palestinian Ministry of Health, after the Second Intifada the late President Yasser Arafat decided to offer free health insurance to unemployed persons and their families, which contributed to a decrease in health insurance revenues. Currently, about half of enrolled Palestinian families receive their coverage free of charge. The Ministry of Health has made the sustainable financing of its health system a major objective, identifying as a long-term goal the creation of a national health insurance system covering all Palestinians.²⁴

While two medical schools exist for the education of Palestinian physicians, doctors within the Palestinian Territories generally rely on Israeli hospitals to receive specialized training. The Al-Quds Medical School, for instance, began to operate in 1994, offering a 6-year program in medical education based on the European training model. By 1998, the program was graduating 55 students, trained in Gaza, Jerusalem, and Nablus. Palestinian medical students, however, face numerous problems including difficulties financing their education, access to school facilities, and postgraduate training. The curriculum costs about \$4,000 U.S. per year, which for many students, whose families may be living on \$200 per month, is not financially feasible. Government scholarships and outside donations from Arab states help finance the education for a limited number of students. Al-Quds University's three affiliated medical campuses in Gaza, Nablus, and East Jerusalem are largely cut-off from each other due to border-crossing issues. In addition, students from the West Bank who must access hospitals in East Jerusalem for their training face daily difficulties obtaining permits and passing through checkpoints.

Resources within the Palestinian health system are limited for students seeking specialized training beyond their generalized medical degree. Palestinian education and training programs have problems associated with their accreditation by international standards. Medical students who wish to specialize must complete a residency in a hospital that is accredited by a body that awards a specialty certificate. Only Makassed Islamic Hospital in East Jerusalem is fully recognized and accredited in four major specialties (internal medicine, general surgery, obstetrics/gynecology, and pediatrics) by the Jordanian Medical Council. Palestinian interns can complete residencies there, which will be certified by the Jordanian medical board. However, Makassed Hospital receives far more candidates than it can train. Consequently, a number of physicians each year receive specialized training in Israeli hospitals and through Israeli NGOS such as Hadassah Medical Center, Save a Child's Heart Foundation, and the Peres Center for Peace, among others. In 2006, sixty-five physicians and two nurses participated in a variety of medical and surgical training

²³ Palestinian National Authority, Ministry of Health, "Demographic and Health Characteristics of the Palestinian Population," May 2005.

²⁴ Palestinian National Authority, Ministry of Health, Health Planning Unit, "National Strategic Health Plan: Medium Term Development Plan 2008-2010," December 2007.

programs in Israeli hospitals, most of which ran for 3-6 months. Only five physicians, however, participated in a complete residency program of approximately five years to receive a full specialty certificate. Furthermore, the West Bank currently lacks unified programs and standards for continuing medical education, although Al-Quds Medical School has been working to develop infrastructure in this area.

The Palestinian health system faces additional problems in relation to the training and retention of non-physician healthcare workers. There are significant shortages of nurses in the healthcare system. Nurses also face the same problems with regards to accessing specialized training as Palestinian physicians. In addition, the Palestinian Territories suffer from the migration of qualified and trained staff from the governmental sector to the private sector and outside of Palestine, where they can receive a higher income than the limited salaries offered by the Palestinian governmental sector. According to the MOH's 2007 report, the current incentive system is insufficient to build the healthcare human resource infrastructure needed to improve the performance and effectiveness of the health system.²⁵

Israel-Palestinian Health System Cooperation

Health system disparities between Israel and the Palestinian Territories coupled with their geographic proximity and interdependence have necessitated systematic cooperation in the fields of health and medicine between the two societies. The Israeli Ministry of Health has explicitly followed a "humanitarian policy" with regards to the treatment of Palestinian patients, providing care for hundreds of patients each day in Israeli health facilities and absorbing much of the cost when it is not met by the Palestinian MOH.²⁶ The complicated political environment, however, has made the transfer of patients across checkpoints increasingly difficult. While cooperation also exists in areas like education and training to promote infrastructure development, a systematic approach is needed to develop, supply, and equip a Palestinian health system capable of meeting the changing needs of its population. The National Strategic Health Plan published by the Palestinian Ministry of Health in December 2007 lays out a vision and roadmap for these changes. The Palestine/Israel Health Initiative was conceived in an effort to identify, network, and promote cooperative activities between Palestine and Israel in the fields of health and medicine. The Initiative has endeavored to help meet goals articulated for improving health in the region while advancing trust which will lay the foundation for sustainable peace and collaboration in the future.

²⁵ Ministry of Health, Palestinian Authority, "National Strategic Health Plan," 2007.

²⁶ World Health Organization, "Health Conditions in the Occupied Palestinian Territory, Including East Jerusalem, and in the Occupied Syrian Golan: Report of the Israeli Ministry of Health to the Sixtieth World Health Assembly," 15 May 2007.

IV. History of Cooperation in Health and Medicine between Israel and Palestine

Since Israel assumed control of the West Bank and Gaza from Jordan and Egypt in the 1967 Six-Day War, professional interactions have occurred on a variety of levels between Palestinian and Israeli healthcare workers. From 1967 until the onset of the First Intifada in 1987, Palestinians and Israelis developed numerous cooperative health projects. These projects ranged from initiatives focused on specific diseases and populations, such as improving poliomyelitis vaccination rates in the West Bank, Gaza, and Israel, to joint committees focused on long-term infrastructure planning. During this time, thousands of Palestinian patients were treated in Israeli hospitals, and many Palestinian health professionals were trained in Israel, although few Israelis were exposed to Palestinian hospitals and clinics.

The outbreak of violence in 1987 meant that Israeli health officials were no longer able to move freely in the Territories, and as a result, professional cooperation declined. During this time, the Palestinian authorities continued to move forward with organizing their health system, beginning with the creation of a plan for caring for those injured in the violence, followed by the preparation of a national health plan. During this period and conflict and tension, however, cooperation in the health field did not completely cease, particularly with regards to the provision of essential health services. Furthermore, the establishment of the Association of Palestinian-Israeli Physicians for Human Rights in 1988 marked the first initiative of Israeli civil society devoted to providing health assistance to Palestinians outside the scope of the Israeli Civil Administration.

The signing of the Madrid Agreement in 1991 and the Oslo Accords in 1993 resulted in significant advances in the field of health cooperation. A section in Annex 3 of the Declaration of Principles in the Oslo Accords on the importance of civil society cooperation and people-to-people activities provided legitimacy for Palestinian and Israeli NGOs to launch cooperative activities and established a mechanism for international organizations to provide funds and cooperate in their efforts. As a result, several foreign programs such as the United States' Middle East Regional Cooperation Program (MERC) were expanded to include an Israeli-Palestinian component.

The transfer of responsibility for the Palestinian health system to the Palestinian Authority in 1994 and the establishment of the Palestinian Ministry of Health changed the nature of cooperation. Most interaction in the field of health between Israelis and Palestinians revolved around committees established to deal with food, medicine, and hospitalizations, and the Israeli Coordinator to the Palestinian Health Authority assumed responsibility for issuing health-related permits for Israelis and Palestinians to cross the border. In addition to the Palestinian Ministry of Health, the United Nations Refugee Works Administration (UNRWA), the Palestinian Red Crescent Society, local and international NGOs, universities, and the private sector became potential partners for cooperation with Israeli health professionals.

In 2000, JDC-Brookdale, JDC-Israel and Al-Quds University jointly published a study of Israeli-Palestinian cooperation in the health field between 1994-1998. This study identified

148 collaborative projects that took place during these four years. Through surveys of Israeli and Palestinian organizations and interviews with participants, the study mapped cooperative projects and analyzed the factors influencing collaborations and their mechanisms.²⁷

In the ten years since this study was completed, increased restrictions in mobility and a tenser political environment have made collaboration more challenging. Israeli citizens are now prohibited from entering Gaza and the West Bank, and Palestinians need permits to enter Israel, making it difficult to coordinate people-to-people exchanges. A case study published in 2007 on Arab-Israeli cooperation noted that increased violence from 2001-2004, broader conflicts in the Middle East, and the Hamas takeover of Gaza in 2007 have all made Israeli-Palestinian cooperation more challenging than ever over the course of the past decade.²⁸ Other recent studies examining Israeli-Palestinian cooperation note these same issues, emphasizing the sensitivities involved and the need to maintain the low profile of many cooperative activities in the current political climate.

With the exception of a few initiatives such as the Middle East Cancer Consortium and the Middle East Consortium on Infectious Disease Surveillance, formal cooperation at the government level has been quite limited. There are currently four joint committees between the Israeli and Palestinian Ministry of Health on issues such as pharmaceuticals and avian flu. In 2005, the Israeli ambulance association, Magen David Adom, signed a memorandum of understanding with the Palestinian Red Crescent Society to facilitate cooperation between the two ambulance services. Although this memorandum has been successful in many regards, political issues continue to impact the ability of the two services to fully work together. Although the Israeli Ministry of Health has been explicit in following a “humanitarian policy” with regards to the treatment of Palestinian patients, the complicated political environment has made the transfer of patients across checkpoints increasingly difficult.²⁹

Because of the tense political climate, most health and medicine cooperative activities during the past several years have occurred on a relatively ad-hoc basis between individual professionals, hospitals, or non-governmental organizations. Most of these programs focus on health issues where it is easy to find common ground, such as children’s mental health, cancer, genetics research, or specialist education and training. The Middle East Cancer Consortium (MECC), founded in 1996, for example, has sponsored numerous collaborative projects on cancer and genetics research through its small grants program and has also facilitated education and training. The Israeli-Palestinian Science Organization (IPSO), founded in 2003, received over 100 proposals between 2004 and 2006 for collaborative research between Palestinian and Israeli investigators in the medical and environmental

²⁷ Barnera, Tamara et al., “Study Report: Israeli-Palestinian Cooperation in the Health Field 1994-1998,” JDC-Brookdale Institute, JDC-Israel, AJJDC, Al-Quds University, May 2000.

²⁸ Skinner, Harvey and Abi Sriharan, “Building cooperation through health initiatives: an Arab and Israeli case study,” *Conflict and Health*, 2007, 8.

²⁹ World Health Organization, “Health Conditions in the Occupied Palestinian Territory, Including East Jerusalem, and in the Occupied Syrian Golan: Report of the Israeli Ministry of Health to the Sixtieth World Health Assembly,” 15 May 2007.

fields. Furthermore, *Bridges Magazine*, founded in 2004 and supported by the World Health Organization, continues to issue bi-monthly publications written and managed by Palestinian and Israeli academics and health professionals. The magazine is intended to embody WHO's paradigm "Health as Bridge for Peace" and endeavors to cover health topics of common concern to both Israel and Palestinian populations while building "relationships, links, and common understanding."³⁰ Moreover, although Israeli physicians are no longer permitted to enter the Palestinian territories, cooperation still occurs on a daily basis at the physician-patient interface, as Palestinian patients are treated in Israeli hospitals by Israeli physicians.

Several organizations such as Hadassah Medical Organization and the Canada International Scientific Exchange Program (CISEPO) continue to promote cooperation and facilitate training and patient care exchanges despite violence and political challenges. Such persistence has helped ensure the continuation and strength of cooperative activities. To facilitate cooperation, many recent projects are trilateral in nature, involving participants from the United States, Canada or Europe in addition to Israel and Palestine. These parties are critical to raising funds, maintaining channels of communication, ensuring the equal stature of parties involved in the work, and facilitating continuation of projects when political tensions rise.

Despite some setbacks in funding and delays that occur due to logistical difficulties, there persists a dedicated group of individuals and organizations committed to continuing their work together on both sides of the border. Although many cooperative projects continue to operate, there is an urgent need for sustained funding to support programs over the long term that will help build and strengthen the entire healthcare system. Historically, the health sector has benefited from ongoing cooperation between Palestinian and Israeli institutions and individuals, especially in the area of human resource development. Cooperation in the health field is part of a broader spectrum of people-to-people exchanges that operate in the region to build trust and understanding while delivering needed services in spite of a tense political climate. Just as diseases can cross borders easily today, so can solutions, making health an important bridge for building partnerships, trust and cooperation among Palestinians and Israelis.

Using this framework, an objective of the CSP Palestine/Israel Health Initiative was to describe the current scope of health collaborations, create an inventory of selected initiatives underway, and review lessons learned from these projects with the hope of creating a framework for strengthening and developing programs to improve health and promote peace in the region for the future.

³⁰ *Bridges: Israeli-Palestinian Public Health Magazine*, <http://www.bridgesmagazine.org/nindex.php>.

V. Summary of PIHI Meetings and Working Group Recommendations

(See Appendix II)

The Palestine-Israel Health Initiative focused primarily on key programs and institutions needed to ensure a successful health system in Palestine that would benefit from cooperative activities in the region. Some of these critical issues included licensing and accreditation of health professionals, facility and human resource development, research and evaluation programs, health information systems and educational campaigns, disease prevention and health promotion, and emergency preparedness.

Despite the current tensions in the region, it was found over the course of this project that considerable support exists among Israelis and Palestinians for continuing and strengthening cooperation as circumstances permit. Furthermore, health system development might be an area where outside parties, including the United States, can play a constructive role. Several program leaders emphasized during the PIHI Working Group meetings, the important role of a third party, like USAID, WHO, and foundations, in facilitating projects between Palestinian and Israeli health and medical experts. These parties can be critical in providing funds, opening up and maintaining venues for communication, ensuring the equal stature of parties involved in the work, and helping to sustain projects when political tensions rise.

Through meetings and discussions convened during the winter and spring of 2008 (See Appendix I), the Palestine/Israel Health Initiative (PIHI) identified five areas of critical importance for health and medicine cooperative activities between Israel and Palestine. These areas included primary care and prevention, education and training, emergency medicine and disaster preparedness, health information technology, and health and medical research. Following a number of focused discussions between leaders in these areas over the winter and spring, the initiative convened two days of Working Group meetings in East Jerusalem on April 29 and 30th, 2008.

Approximately 50 participants were involved in this two-day exchange convened at the American Colony Hotel in East Jerusalem. Participants included leaders in health and medicine from Israel and Palestine, representing the Ministries of Health, academia, hospitals, insurance companies, and NGOs. Representatives of international bodies including the World Health Organization and USAID also participated in the meetings. Additionally, the sessions featured a group of 12 professionals from the United States, including experts from for-profit organizations such as Intel and universities such as Harvard, Brown, and Johns Hopkins in the fields of health information technology, emergency medicine, international nursing, health and medical research, primary and secondary care, education and training programs, and website development for health information.

The two-day event included presentations by health professionals from the United States and Palestinian and Israeli experts and leaders of collaborative projects in health and

medicine. Participants drew on the discussions that took place at previous meetings of the Palestine/Israel Health Initiative and produced a series of recommendations for each of the Working Group topic areas. The five primary areas were consolidated to form three final Working Groups: education, training and research; public health and emergency medicine; and health information technology. Recommendations and findings from these Working Groups were presented at the conclusion of the meetings. A follow-up session was conducted between PIHI's Project Director and Manager and several of the U.S. participants with the Palestinian Minister of Health and staff at the Ministry of Health office in Ramallah.

Recommendations from the Palestine/Israel Health Initiative meetings and Working Group sessions respond to needs articulated by experts and leaders from the Palestinian and Israeli health sectors. The National Strategic Health Plans published by the Palestinian Ministry of Health (1994, 1999, 2001, 2007) articulate a vision of how the health system should develop over time, including short, medium, and long-term objectives. This vision has emphasized public and primary healthcare as the "cornerstone" of service delivery, with expanded emphasis on health promotion and disease prevention capabilities. The 2007 National Strategic Health Plan emphasized that the health system has been challenged by the lack of human resources, accredited programs for training and education, distribution of hospital beds, and accessibility of specialized personnel.

Discussions between Israeli, Palestinian, and U.S. health and medical experts leading up to and culminating in the April 29th - 30th, 2008 PIHI Working Group meetings focused on priorities and opportunities of greatest importance for cooperative activities in health and medicine in the region. A key recommendation of these Working Groups has been that public and primary care systems in the Palestinian Territories be complemented by the development of high-quality secondary and tertiary care systems. This represents an area where cooperation between Israeli and Palestinian professionals and stakeholders is of particular importance.

Examples of other key recommendations include the creation of a central Cardiac Center and Cancer Center as well as a Trauma Center in the West Bank. These centers were identified as priority needs for the Palestinian Territories and areas where cooperation between Israeli, Palestinian, and U.S. professionals would be essential. The 2007 National Strategic Health Plan also identified the systematic integration of health information technology as a strategic goal necessary to improve health system performance. The development of such an information technology system was identified during Working Group meetings as a significant area for cooperation between Palestinian, Israeli, and U.S. experts. In general, it was emphasized that security arrangements between Israel and Palestine are crucial for the successful development of Palestinian health institutions and to facilitate cooperative projects between public health and medical experts in the two societies.

Discussions emphasized the importance of joint and cooperative projects in health and medicine in the region both in terms of their role in advancing trust and in opening channels for collaboration between Israelis and Palestinians. Detailed recommendations

produced from the Working Groups are listed below and cover the following topic areas: 1) education, training and research; 2) public health and emergency medicine; and 3) the application of information technology to improve health. It should be noted that recommendations from these Working Groups are intended to provide a framework to guide work on future cooperative projects in health and medicine in the region.

Key Participants

Meetings were conducted by Rear Admiral Susan Blumenthal, M.D. (PIHI Director, U.S.), Stephanie Safdi, M.Phil. (PIHI Project Manager, U.S.), and Michael Silbermann, D.M.D, Ph.D. (PIHI Field Director, Israel). Key contributors to the development of these meetings included Ziad Abdeen, Ph.D. (Director, Al-Quds Nutrition and Health Research Institute, Palestine); officials from the Palestinian Ministry of Health including Dr. Fathi Abu Moghli (Minister of Health, Palestine); officials from the Israeli Ministry of Health including Avi Israeli, M.D. (Director General, Ministry of Health, Israel) and Alex Levantahl, M.D. (Director of International Affairs, Ministry of Health, Israel); Dan Bitan, Ph.D. (Co-Director, Israeli-Palestinian Science Organization, Israel); Yehuda Roth, M.D. (Chair, Dept of Otolaryngology, Wolfson Medical Center, Israel); and Ron Krumer (Director of External Affairs, Hadassah Medical Center, Israel). Other key participants included Akiva Tamir, M.D. (Chief Pediatric Cardiologist and Founding Member, Save a Child's Heart), Simon Fisher, J.D. (Executive Director, SACH) and other individuals from Save a Child's Heart (SACH); Rivka Carmi, M.D. (President, Ben Gurion University of the Negev); Yoseph Mekori, M.D. (Dean, Sackler Faculty of Medicine, Tel Aviv University, Israel); Michael Karplus, M.D. (Professor, Medical School for International Health, Ben Gurion University); and fifty other senior Israeli, Palestinian and U.S. health and medical experts.

Working Group Recommendations

• Education, Training, and Research Working Group

Background

Along with licensing and certification procedures, Palestinian educational programs require to be strengthening for all types of health professionals, including clinicians, pharmacists, health system administrators, public health workers, research and evaluation staff, and other relevant personnel. In many of these fields, the supply of appropriately trained professionals for the health system is currently inadequate. Historically, human resource development has been a domain in which cooperative activities between Palestinian and Israeli professionals and institutions have been very strong. Medical centers and hospitals including Hadassah Medical Center in West Jerusalem and Augusta Victoria Hospital in East Jerusalem as well as NGOs such as Save a Child's Heart and the Peres Center for Peace have been critically important in providing opportunities for Palestinian physicians

and nurses to train alongside their Israeli counterparts. The recommendations of this working group highlight the importance of building on existing cooperative programs and creating mechanisms for Israeli and Palestinian professionals and institutions to work together to systematically expand human resources for health.

There are two medical schools in the Palestinian Territories, Al-Quds University at Abu Dies and Al-Najeh University in Nablus. Each of these schools admits approximately 50 new undergraduate students per year. While these schools are essential to producing future generations of health professionals to meet the needs of the Palestinian population, they face problems gaining accreditation by accepted international standards. It is imperative that they receive international accreditation and that their basic science and clinical education programs be strengthened if necessary.

Furthermore, postgraduate medical training for Palestinians is currently very limited. Medical graduates must go abroad for specialty training in nearly every field of specialty, including internal medicine and family practice. The supply of highly qualified physicians is inadequate, particularly in many medical subspecialties. Specific areas of shortage include: psychology, psychiatry (particularly child psychiatry), neurology, oncology (particularly radiation oncology and pediatric oncology), cardiac surgery, and trauma, among others.

There are also two dental schools in the Palestinian Territories as well as training programs in other health professions, including nursing, pharmacy, midwifery, and medical social work, which were established prior to the medical schools. These programs have helped to meet human resource needs in their respective fields for the Palestinian Territories. However, shortages of qualified professionals still exist in fields, including dentistry, nursing, midwifery, and psychology.

It is recommended that Palestinian institutions create and implement a human resource development strategy for the health professions to ensure an adequate supply of appropriately trained personnel for the Palestinian health system. The Palestinian National Strategic Health Plan (2007) identifies the development of a human resource planning and management process as a critical goal. It reports that current training and education programs “do not meet the needs of the health sector” due to: 1) unavailability of an accreditation system of educational institutions and programs based on international standards; 2) shortages in some specialties such as family medicine, psychiatry, and preventive medicine; 3) lack of diversity in public health programs and subspecialties, including epidemiology, reproductive health, nutrition, health information systems, and scientific research; and 4) scarcity of financial and human resources, which are necessary to enable postgraduate studies.

The 2007 Palestinian National Health Plan enumerates several areas of need for human resource development for the health professions. These needs include: updating, standardizing, and enforcing licensing and accreditation of human resources; accrediting new and existing educational institutions and programs using appropriate international standards; developing continuing education programs and encouraging their utilization;

developing an incentive system to motivate qualified health professionals to work in the Palestinian health system; and initiating an ongoing training program for managers in the health sectors. In addition, the human resources planning and management process should be developed by identifying the “exact number, specialty and the place of work for the available health human resources” and assessing the “shortage and the surplus in the various fields to develop a plan to overcome this.”³¹

Recommendations

The PIHI Education, Training, and Research Working Group recommendations include that:

- Policymakers and local institutions develop cooperative agreements with foreign institutions regarding training and academic exchange. In terms of meeting medium term goals for human resource development, the Palestinian health system is likely to benefit from the development of bilateral agreements with foreign countries and/or institutions to designate training slots for suitably qualified Palestinian students and to enable periodic exchange of faculty. Training in Israel can be a very cost-effective option for Palestinians, and the exchange itself can contribute to greater understanding between the peoples in the various communities. Ongoing programs are in place in several institutions in Israel for the training of Palestinian health professionals. These programs are described in some detail in the attached selected inventory of Palestinian-Israel cooperative initiatives in health and medicine (see Appendix II). Palestinians training in Israel may be able to live at home, or at least to travel home frequently and inexpensively. In addition, Palestinians trained in Israel, rather than in other countries, may be more likely to return to Palestine when their training is completed.
- The need for adequate funding is a constraint for most Palestinian-Israeli training partnerships and a concern for the sustainability of these cooperative efforts. Outside funding would likely be needed to increase the number and duration of postgraduate training opportunities for Palestinians in Israeli institutions. Most training programs are currently conducted for a period of three to six months. The Palestinian health system is in need of fully trained and certified health and medical specialists, including both physicians and nurses. Expanding and funding full residency programs in medical specialties in addition to more short-term training programs can be an important area for sustained and expanded cooperation between Israeli and Palestinian professionals and institutions. Cooperative efforts with Israeli institutions to systematically develop human resource capacity in the Palestinian health system should be based on a thorough understanding of the distribution of health professionals in existing specialties and tailored to meet the short and long-term needs of the health system.

³¹ “National Strategic Health Plan,” 35

- Israel should be viewed as a source of technical assistance, particularly regarding faculty development and research, to help in meeting the goals articulated for the development of human resources for health in the Palestinian Territories. Israeli institutions have played this role successfully in the past, and Israeli and Palestinian professionals report their willingness to work together in this area.
- Participants in the Working Group involved in cooperative projects in research and training emphasized the important human component of these activities. In addition to helping to meet health systems needs for education and training, there are opportunities to build relationships between Palestinian and Israeli health professionals premised on mutual trust, understanding, and respect. Exchanges and training programs for Palestinian professionals in Israeli institutions tend to produce relationships that last well beyond the conclusion of the training period. In the current political climate where mobility is restricted and opportunities for Israelis and Palestinians to develop personal and professional relationships are limited, these opportunities for relationship-building are both unique and vitally important.

In fact, many of the cooperative programs presented during the Working Group sessions stemmed from relationships that began during training exchanges. Palestinian physicians trained in Israeli institutions have gone back to the Palestinian Territories to begin clinical programs informed by the Israeli ones that they participated in. Israeli and Palestinian physicians and nurses who trained together tend to maintain their contact, both on a personal and professional level. These training programs and exchanges may represent a rare and significant mechanism for building and sustaining relationships of mutual trust and understanding between health leaders in Palestinian and Israeli communities.

- In addition to training programs, Working Group participants emphasized the importance of collaboration in health and medical research between Palestinian and Israeli scientists. The Israeli-Palestinian Science Organization has been instrumental in facilitating and supporting these partnerships, financially and in other aspects. Collaborations in health and medical research take place between academics at universities and research institutions, and are essential for promoting the exchange of knowledge and expertise, for building research capacity, for the insights they produce, and for the professional and personal channels that they open.
- Cooperative projects in education, training, and research in health and medicine are vital opportunities for Palestinian and Israeli leaders and professionals in both health systems to learn from each other and work together. Though the political climate makes contact difficult, these relationships seem to endure and grow over time, producing outcomes that are important for knowledge-sharing, research, and the development of health systems in the area, as well as for fostering trust, understanding and friendship.

- **Public Health and Emergency Medicine Working Group**

Background

Primary care is the current cornerstone of the Palestinian health care system and will likely continue to be so in the future. The 2007 Palestinian National Strategic Health Plan underscores its centrality, calling primary healthcare the “major tool” and the “promoting and improving mechanism to restore and sustain the well-being of the Palestinian people.”³² Certain aspects of primary care in the Palestinian Territories require strengthening, including health promotion and disease prevention, as well as screening and diagnosis, particularly of child developmental disorders and adult chronic and non-communicable diseases.

The relative importance of the primary healthcare delivery system in the Palestinian Territories has increased since recent political and military conflicts because primary care clinics are widely distributed and thus relatively accessible during periods of restricted mobility. Geographic closures have strengthened the role of nurses as well, who tend to live closer to the primary care clinics and have been more consistently available to patients than physicians.

Efforts to strengthen health promotion and disease prevention in both Israel and the Palestinian Territories might include additional training and empowerment of health educators, social workers, skilled lay people such as village health workers, and community groups. Critical issues to be addressed in the context of public health include sanitation and water quality, workplace safety, diet, nutrition, physical activity, cigarette smoking, and clinical concerns such as developmental disorders, psychosocial problems, and chronic illness. One important step for the Palestinian national health system in particular is to strengthen psychosocial support and mental health services within the primary care setting. Proactive strategies are generally valuable for addressing psychosocial problems and particularly for treating psychosocial trauma; indeed relatively few trauma victims receive effective care in the absence of community outreach programs.

Pre-hospital emergency medical services in the Palestinian Territories are provided by the Palestinian Red Crescent Society (PRCS), which operates with a total yearly budget of \$7 million. Services are provided through a national “101” telephone number, a PRCS headquarters in Ramallah, 8 main stations and 23 substations in the West Bank, 6 main stations and 2 substations in Gaza, and an average of 120 vehicles and 350 EMTs and ambulance drivers on-duty 24 hours a day.³³ Emergency medical services in Israel are provided by the Magen David Adom (MDA), with a 2002-2003 expenditure level of approximately \$114 million³⁴, 1,400 paid employees, and over 10,000 volunteers estimated

³² “National Strategic Health Plan,” 19.

³³ Ibid.

³⁴ “Magen David Adom in Israel,” *Partnerships in Profile 2002-2003*.

as of 2006.³⁵ In November 2005, a Memorandum of Understanding (MOU), or an Agreement on Operational Arrangements, was signed between MDA and PRCS to facilitate the entry of both societies into the International Red Cross and Red Crescent Movement by June 2006. As of November 2007, the MOU has so far provided for five PRCS ambulances to operate in East Jerusalem and created a system to screen PRCS ambulances quickly when emergency cases require access to East Jerusalem hospitals. In addition, joint programs recently began to ensure that PRCS ambulance drivers and EMTs based in East Jerusalem have gone through training required by Israeli regulations. However, other aspects of the agreement, such as the provision to create a formal hotline for the PRCS, have not yet been implemented, and relations between MDA and the PRCS have faced challenges due to political issues.

Recommendations

The CSP Palestine/Israel Health Initiative Working Group discussions stressed the importance of cooperation between Israelis and Palestinians in areas including the provision of emergency medical services and the training and augmentation of primary care and prevention strategies and services. Because disasters like earthquakes and infectious disease pandemics do not recognize political boundaries or regional borders, disaster management is an area that necessitates cooperation between Palestinian and Israeli experts and professionals. With the geographic proximity and daily intermingling of Palestinian and Israeli communities, infectious diseases affecting one population will unavoidably affect the other. Consequently, creating a regional disaster response and emergency preparedness infrastructure may be a topic that can foster collaborative planning between Palestinian and Israeli experts in this field, who will need to work together on these issues of critical common concern to the region. This foundation can be built concurrently with the cooperative emergency medical systems projects and the development of patient transfer procedures. These topics can be complimentary and may be constructed together.

Cooperative activities and exchange currently take place between Israeli and Palestinian health systems leaders through the work of organizations including the World Health Organization (WHO) and the Middle East Consortium on Infectious Disease Surveillance (MECIDS). Presentations by regional leaders of organizations including MECIDS at the Working Group Meetings emphasized the necessity of these collaborative partnerships for disaster preparedness and planning for the region. Exchanges have occurred in the past in response to events like the SARS outbreak and preparing for a potential pandemic with avian influenza. During 2007, public health experts from the Palestinian Authority, Israel, and Jordan met on several occasions, convened by the NGO Search for Common Ground, to address the threat of avian influenza, which was found in poultry in the Gaza Strip and Israel, and began joint preparations for a possible pandemic.

³⁵ "MDA in Israel," American Friends of Magen David Adom.

Recommendations from the Working Group on Public Health and Emergency Medicine include the following:

- The Working Group emphasized that the most effective way to begin planning for disasters is to form and maintain a strong public health system and medical infrastructure. To this end, working group participants discussed the possibility of forming a paramedic “train-the-trainer” program based in Jerusalem for Palestinian personnel. This program would last 3-5 months and cover an advanced emergency medical technician curriculum. The graduates could continue on-the-job training in the Palestinian Territories and obtain the skills to train additional Palestinian healthcare workers in these areas. Reducing the program time from the 6-12 months typically allotted for paramedic training and concentrating on high impact practical topics in this compact curriculum would make the program more viable and reduce overhead expenses. On-the-job training could replace ride-along requirements, which extend the time requirements for typical paramedic programs.
- In addition, Working Group participants discussed the possibility of using high fidelity medical simulation to conduct joint educational exercises. Medical simulation is an effective tool for training healthcare personnel in the recognition and treatment of disease processes, teamwork, procedural competency and error reduction. The resources available in Israel, at the Hadassah Medical Center and elsewhere, could be leveraged to create collaborative training programs involving experts from Israel, Palestine, and the United States. These programs could place emphasis on responses to common threats such as earthquakes and the pandemic strain of influenza as well as play a role in the education and ongoing training of paramedics.
- Development of standardized protocols for the delivery of care, particularly in the area of pre-hospital care, was also recommended as a potential cooperative initiative. Maintaining continuity and consistency in the care of patients in the pre-hospital setting will have many benefits in the quality of care of patients, as the continuum of care transcends political boundaries between Palestine and Israel. Patients are often transferred between facilities and between PRCs and MDA ambulances, and joint protocols would help ensure continuity of care. These protocols could be strengthened by formulating standard agreements and memoranda of understanding for mutual aid and surge capacity between institutions.
- The initial effort towards unified standardized protocols could also involve the development of a joint coordination center to facilitate inter-facility and scene transfer of patients from the Palestinian Territories. This center could utilize a low technology electronic information transfer protocol to help with patient tracking and reducing the logistical difficulties and delays experienced during urgent patient transfers into Israel. A unified coordinating body stationed in a single dispatch center with representation from Israel and Palestine could act as a clearinghouse for all transfer requests and facilitate inter-facility transfers by maintaining open lines

of communication with officials granting permits as well as the hospitals and checkpoint personnel. Furthermore, to facilitate the transfer of information between hospitals, emergency medical services, and health ministry officials, a simple internet-based electronic patient transfer information form accessible to all parties simultaneously could be developed and maintained under the current EMS structure.

- Some discussion at Working Group Meetings centered around the formation of an emergency medicine tele-consultation program run on a cooperative basis by Israeli, Palestinian, and U.S. experts in health, medicine, and information technology. Such a system could be useful in emergency cases when expertise is not available locally and could help ease some of the problems created by restrictions on the mobility of health professionals in the Palestinian Territories. Options for such a system could utilize low-bandwidth technology or more complex solutions. Email-based histories and physical examinations of patients augmented by photography sent over the internet would be one possible system. A real-time web-conference system with real-time connection between hospitals would be another. There appears, however, to be little buy-in at this time to these types of programs because direct interaction and examination of the patient is valued highly. In general, it is particularly important in this region to show that internet technologies and new media can and should be incorporated into cooperative activities in such a way that they support and facilitate rather than supplant person-to-person interaction.
- The development of an international fellowship program in disaster medicine was also recommended as an important area for cooperation in developing expertise and exchange in emergency and disaster medicine in the region. This program could have many levels of education including an on-line didactic curriculum, an on-site program at a designated hospital, and a simulation-based practical training component. Programs that are longitudinal in nature involving the collaboration of Palestinian and Israeli healthcare professionals are essential to building long lasting and durable relationships. Many examples exist of collaborative research projects and educational and training programs involving Palestinian, Israeli and U.S. healthcare professionals. Existing programs should be continued and expanded and new opportunities created where possible. International fellowship programs should include post-graduate medical students from Palestine, Israel and other countries in the region. These programs could be supported by local experts as well as those from the United States.
- As the impact of infectious disease on the health of Palestinians has declined, the relative importance of non-communicable and chronic illness has risen. As in most countries, ischemic heart disease, stroke, hypertension, diabetes, and cancer together account for more than half of adult mortality, and incidence and prevalence rates for these conditions have been rising over time. Accordingly, among the top priorities in Palestine are the establishment of a central cardiac center (including invasive cardiology and cardiac surgery) and a cancer center equipped with all the

necessary machines to provide comprehensive oncological treatment (radiotherapy, medical oncology, pediatric oncology, brachytherapy, and hormonal therapy).

- Among infants and children in the Palestinian Territories, one-third of deaths are due to accidents, more than any other identifiable category of causes. Accordingly, a centralized trauma center is urgently needed which would include the following surgical disciplines: general, orthopedic, chest, pediatric, neuro, ophthalmic, maxillo-facial, and ENT, along with the necessary imaging systems: CT, MRI and others. Expertise in Israel in the area of trauma medicine is quite advanced. Hadassah Medical Center in particular has developed an integrated trauma center which serves as an international model. Israeli experts from this and other institutions appear very willing to engage with and share expertise with their Palestinian colleagues to develop a similar center in the Palestinian Territories. The development of a trauma center as well as a cancer and cardiac center for the Palestinian Territories represent immediate, feasible, and critical cooperative initiatives between Palestinian and Israeli as well as U.S. professionals and institutions.

- **Health Information Technology Working Group**

Background

“Health Information” is a broad concept which includes all types of data that are directly relevant to health system planning, operating, and evaluation. Such data include both vital statistics and epidemiological data (vaccine coverage, nutritional status, behavioral risk, incidence rate, cost of healthcare, inventory and consumption of pharmaceuticals, health insurance registry, purchasing of health service, etc.). Data collection and health information is the scaffolding for advancing healthcare in societies across the world. In the 21st century, health information technology also includes the tools of new media that function as conduits for transporting data, including the internet, cell phones, PDAs, and telemedicine systems.

In the Palestinian Territories, the Palestinian Health Information Centre at the MOH collects data on health status indicators and services while the Palestinian Bureau of Statistics provides for vital statistics. Ongoing population-based nutritional monitoring is being conducted or supported by various organizations, including Al-Quds University, Johns Hopkins University, CARE, USAID, the United Nations Children’s Fund, and others. The World Bank is currently sponsoring a major project with the Palestinian Ministry of Health to strengthen various health information systems, including national registries for health insurance and international referrals.

In Israel, the Health Information Department in the Ministry of Health serves as the focal point for health statistics and data collection. Additionally, individual hospitals and universities are involved in data collection and research. The use of electronic medical records (EMRs) is widespread in Israel. A 1999 survey by the Israeli Medical Association

revealed that of the 26 general hospitals in Israel, 21 (91.3%) use EMR systems.³⁶ However, this same survey also showed that there are 27 different types of EMR systems in use in Israeli hospitals, and generally more than one type is used in any given hospital. IBM is currently involved in the Interoperable Health Information Infrastructure (IHII) project with the goal of developing state-of-the-art technologies that promote interoperability of EMRs.

The Palestinian Ministry of Health has identified the strengthening of its health information management system as a strategic goal, especially in terms of its comprehensiveness and integration. The 2007 Palestinian National Strategic Health Plan indicates that “in spite of efforts made by MOH and several partners to strengthen health information management there is still much room for improvement.”³⁷ Quality of data collection in Palestine as well as data analysis capacity requires strengthening. The absence of comprehensive health data in the Palestinian Territories impedes national planning efforts, policy development, research, and evaluation. In addition to the MOH’s efforts, data tends to be gathered in a fractured way, by NGOs, International Agencies, and providers, all of which use this information for their own monitoring and programmatic purposes, resulting in a flow of information which can be contradictory and lacks cohesion.

The Palestinian Territories need to improve data collection on the incidence and prevalence of non-communicable diseases and behavioral risk factors. Data on conditions such as heart disease, diabetes, hypertension, and cancer are incomplete. The 2007 Palestinian National Health Plan also reports that the “The health sector is in an urgent need to identify basic health indicators (base-line indicators) and the development of an information system capable of collecting and analyzing data and trends for these indicators and produce periodic reports routinely and timely.”³⁸ Furthermore, the Palestinian health system is also likely to benefit from a surveillance system of behavioral risk factors, including cigarette smoking, diet, and physical activity, which would help in targeting and implementing interventions to specific population groups.

In addition to data collection, regional and international systems for data exchange require strengthening. Given the relative strengths of Israel’s health information systems and its technology sector, the development and extension of health information systems in the Palestinian Territories is an area where cooperation and the sharing of expertise would be particularly beneficial. Cooperation in the area of health information systems development could help meet goals laid out by the Palestinian Ministry of Health. At the same time, the development of compatible health information technology systems would be of considerable benefit to both Israel and Palestine by facilitating data exchange and the monitoring and treatment of patients and risk factors. Health in Palestine is closely bound to health in Israel as well as Egypt, Jordan, and other countries in the region. As a result, these countries are likely to benefit from the development of ways to rapidly and accurately exchange epidemiological data.

³⁶ Izabella Lejbkovicz et al., “Electronic medical record systems in Israel’s public hospitals,” *Israeli Medical Association Journal*, 6 (10): 583-587.

³⁷ “National Strategic Health Plan,” 41.

³⁸ *Ibid.*, 42.

Furthermore, health information technology today also includes the tools of new media, which are reshaping the way that individuals and societies communicate and share information. The internet, email, cell phones, PDAs, iPods, satellite television, and other rapidly disseminating technological devices are only beginning to be explored as methods for advancing public health and medicine. Cell phones, for instance, owned by most Palestinians and Israelis, can help with data collection and public health outreach. Functioning as miniature hand-held computers, cell phones and PDAs have created an unprecedented level of connectivity, which can be harnessed for public health purposes and in support of cooperative activities in this and other regions of the world. These devices may soon take their place next to the stethoscope as essential instruments in health professional toolboxes as well as for consumer empowerment. The internet too can be used in new and creative ways to promote cooperative activities that advance health and medicine. Telemedicine systems, remote monitoring for conditions like hypertension and diabetes, online networking websites, and health information portals all represent powerful ways of connecting professionals and the public with critical information and with each other. In this region in particular, new media tools can help to transcend geopolitical divides which can make communication and collaboration difficult. Online workspaces immunized from politics can facilitate cooperation between Palestinians and Israelis for the advancement of health in the region as well as to promote trust and reconciliation.

Recommendations

Recommendations from the Health Information Technology Working Group included the following:

- Create compatible and comprehensive systems for health information sharing.
- There is a need in both Israel and Palestine for widespread adoption of an interoperable electronic medical record keeping system with the collection and analysis of shared data for research and evaluation. This is vital for monitoring and combating public health issues of common concern. IBM, for instance, has created a web-based program as part of the Middle East Consortium on Infectious Disease to assist Israel, the Palestinian Authority, and Jordan combat food-borne diseases and bird flu. This system permits public health researchers and organizations to rapidly report, share, and act on medical and health information across borders. These three societies share a common waterway, the Jordan River, and their citizens breathe the same air and cross borders on a daily basis. All of these factors make the tracking of infectious diseases including food-borne illnesses essential to the well-being of everyone in the region. In addition to the monitoring and evaluation of disease and risk factor trends, improved health information systems would greatly benefit other areas of health and medical research that are important for Palestinian and Israeli scientific collaboration, such as genetics research.

- A significant long-term goal for both the Israeli and Palestinian health systems is that all citizens have interoperable electronic medical records that use a common language. One intermediate and easily implemented step recommended by the Health IT Working Group would be the development of Palestinian and Israeli Yahoo listserv groups for specialties, such as Pediatrics, Emergency Medicine, and Radiology, or to use the PIHI “health e-commons” for this purpose. The PIHI “health e-commons” or listserv groups would use the Internet to facilitate communication, cooperation, information-sharing, and relationship-building among Palestinian and Israeli health specialists.
- An additional recommended project for cooperation between Palestinian and Israeli medical and information technology experts would be the development of an online system to manage the transfer of patients between health facilities. Currently, patient transfers are often accomplished by fax, particularly when the transfer occurs from a Palestinian to an Israeli hospital. A comprehensive system for exchange and storage of patient information is a necessary step in the development of compatible health information systems in the Palestinian Authority and Israel, and the Internet should be harnessed to accomplish this goal.
- The Working Group recommended that small first steps be taken as part of a concerted strategy to develop compatible information technology systems. A starting point could be a joint Palestinian-Israeli Information Technology inventory and research project to detail existing health IT in the region and create a gap and cost analysis to aid future development work. In addition, a Palestinian-Israeli research team could select a single disease or condition of mutual concern, such as breast cancer, around which a healthcare provider organization in Israel and an organization in Palestine could jointly pilot electronic medical record implementation. Small steps such as these would both facilitate joint work between Palestinian and Israeli researchers and health and medical experts and lay the groundwork for systematic and compatible health information system development in the future.
- Online tools and websites can serve as important vehicles for networking and information-sharing in the region to aid in health promotion and health systems development. The Palestine/Israel Health Initiative has explored the use of online media for facilitating networking and cooperative activities between Palestinian and Israeli health and medical experts. Through the pilot PIHI “Health e-Commons” website run in conjunction with Working Group Meetings, the Initiative determined that these networks and web spaces can be a useful and cost-effective mechanism in the region for connecting health professionals in meaningful ways and sustaining their relationships and information-sharing between and beyond face-to-face meetings.

- Finally, the Working Group recommended the exploration of *new media and information tools* for public health purposes and joint activities between Palestinian and Israeli professionals in the region. Such tools can include telemedicine and tele-health, which can allow professionals to share information and expertise and practice medicine together across borders. Teleconferencing and internet-based networking tools can help facilitate interaction, exchange, and virtual meetings between Palestinian and Israel public health and medical experts when they cannot always consistently meet in person. In addition, mobile phones are a largely unexplored resource for public health purposes, which might be particularly useful in this region for public health outreach as well as data collection and data sharing. The use of the internet and new media devices like cell phones, satellite TVs, iPods, and PDAs are rapidly proliferating, and their potential should be critically examined now for their applications to support cooperative activities between Palestinians and Israelis to advance health in the region.
- As a first step, the Palestine/Israel Health Initiative launched an online networking “Health e-Commons” workspace, “PIHI Project Spaces.” The technology and the domain-name (<http://www.pihi.projectsaces.com>) were donated by an online strategy consulting firm. This workspace provides a password-protected forum for working group participants and other individuals interested in collaborative health work to convene online in an electronic commons to share best practices, health information, and data through the Internet. The space is intended to foster the sharing of information and the discussion and development of collaborative health activities in the region. In this “Health e-Commons,” users may post announcements and resources, view documents related to meeting topics and health programs in the region, and originate and contribute to discussions pertaining to the Working Group topic areas. Links are also provided to open-university public health courses, health tutorials, online health brochures and a range of other useful materials, which can evolve and grow with the contributions of the participants. Palestinian, Israeli, and U.S. participants in the Initiative’s Working Group meetings are currently using the site to share insights and maintain connections facilitated by the Working Group sessions. It is hoped that activity on this site will continue and grow and that it can be a model for the development of future online networking tools used by Palestinian and Israeli health and medical experts for the advancement of cooperative projects in health and medicine in the region. It is building an online community of Palestinians and Israeli health providers, researchers, and policymakers, with tools that facilitate active networking and the sharing of information and experiences within this online forum.
- The Palestine/Israel Health Initiative has additionally taken first steps in exploring the development of a public health information portal for the sharing of health information and clinical guidelines in the region, with resources in Hebrew, Arabic, and English. This public website would be geared toward a general audience of public health and medical experts and consumers in the

Palestinian Territories and Israel. It would include and link to a wealth of information on diseases and medical conditions of common concern in the region and provide helpful resources to prevent disease as well.

This expansion of the “Health e-Commons” to include a public portal would potentially extend its reach to Palestinian and Israeli professional and public audiences. The portal might also include a section that links to descriptions of cooperative programs and activities in health and medicine between Palestinians and Israelis, helping to facilitate the growth of these initiatives and build support for this work. Furthermore, a website of this kind could provide information for outside parties, such as interested organizations in the United States, on health systems in the region and link potential donors and collaborators from other areas of the world to experts and joint activities in Palestine and Israel.

VI. Overview of Selected Inventory of Israeli-Palestinian Cooperative Initiatives in Health and Medicine

(See Appendix I)

Only minimal work has been undertaken in recent years to identify ongoing partnerships and joint initiatives in health and medicine between Israel and the Palestinian Territories. The most recent selected mapping of cooperative initiatives was published by the JDC-Brookdale Institute in 2000 and included information on “Israeli-Palestinian Cooperation in the Health Field, 1994-1998.”³⁹ Much has changed, however, since the conclusion of this study period, including the Second Intifada, changes in government leadership, the emergence of new diseases and public health threats, and innovations in the fields of public health and medicine. Many of the programs previously profiled no longer exist and many new ones have been created over the course of the last decade.

The lack of knowledge regarding the landscape of ongoing cooperative initiatives between Palestinians and Israelis impedes investment in these activities and networking between those involved. As a first step to overcoming this knowledge gap, the Palestine/Israel Health Initiative (PIHI) has created a selected mapping of collaborative health programs underway between Palestinian and Israeli scientists and healthcare professionals. The PIHI Selected Inventory (see Appendix II) identifies cooperative programs from 2005 to the present between Israel and the Palestinian Territories as well as organizations that have been frequently involved in collaborative activities during the past several years.

Because of the sensitive nature of these projects or due to lack of funding and publicity, many have not been well publicized. The majority of these cooperative projects and organizations were identified through structured internet-based research and field investigations carried out over the course of the Palestine/Israel Health Initiative. The Selected Inventory included in Appendix II contains information on over forty cooperative programs in health and medicine between Palestinian and Israeli professionals, including a description of the program’s mission and goals, its partnering organizations, and key contact information.

This Selected Inventory is not intended to serve as a complete listing of all existing cooperative programs. Rather, it is intended to showcase examples of cooperation and highlight certain projects and organizations that have been involved in Palestinian-Israeli health cooperative activities. Such a selected mapping can serve as a useful tool for experts, organization leaders, and health workers and as a guide to promising programs for donors and for governmental and nongovernmental organizations.

³⁹ Barnea, T., “Study Report: Israeli-Palestinian Cooperation in the Health Field 1994-1998,” May 2000.

VII. Overview of PIHI Health E-Commons

(See Appendix III)

The challenges of time and mobility coupled with financial constraints can make it difficult to sustain the dialogue and interactions that are necessary to support cooperative activities, particularly in a region with the political complexities of Israel and Palestine. The tools of new media and the Internet, however, can create online spaces immunized from regional politics to help facilitate cooperation, exchange, and information sharing despite geopolitical divides. A critical insight of the Palestine/Israel Health Initiative has been that these tools can be applied in innovative ways in order to advance health in the region as well as to promote increased cooperation and understanding.

In addition to electronic medical records and data management systems, health information technology today also includes the tools of new media, which are reshaping the way that individuals and societies communicate and share information. The internet, email, cell phones, PDAs, iPods, satellite television, and other rapidly disseminating technological devices are only beginning to be explored as methods for advancing public health and medicine. Cell phones, for instance, owned by most Palestinians and Israelis, can help in ways such as data collection and public health outreach. Functioning as miniature hand-held computers, cell phones and PDAs have created an unprecedented level of connectivity, which can be harnessed for public health purposes and in support of cooperative activities in this and other regions of the world. These devices may soon take their place next to the stethoscope as essential instruments in health professional toolboxes as well as for consumer empowerment. Furthermore, serious games are being used to teach public and professional audiences healthy behaviors and emergency preparedness. Medical simulation robotics are teaching skills to students and healthcare providers in interactive ways to facilitate learning and practice before performing procedures on patients.

The Internet too can be used in new and creative ways to promote cooperative activities that advance health and medicine. Telemedicine systems, remote monitoring for conditions like hypertension and diabetes, online networking websites, and health information portals all represent powerful ways of connecting professionals and the public with critical information and with each other. In this region in particular, new media tools can help to transcend geopolitical divides which can make communication and collaboration difficult. They can create online spaces immunized from politics that facilitate cooperation between Palestinians and Israelis for the advancement of health in the region as well as to promote trust and reconciliation.

In order to facilitate interaction and knowledge exchange between its Palestinian, Israeli, and U.S. participants, the Palestine/Israel Health Initiative launched an online networking “Health e-Commons” workspace. The technology and the domain-name (<http://www.pihi.projectsaces.com>) were donated by an online strategy consulting

firm. This workspace provides a password-protected forum for working group participants and other individuals interested in collaborative health work to convene online in an electronic commons to share best practices, health information, and data through the Internet. The space is intended to foster the sharing of information and the discussion and development of collaborative health activities in the region.

In this “Health e-Commons,” users may post announcements and resources, view documents related to meeting topics and health programs in the region, and originate and contribute to discussions pertaining to the working group topic areas. Links are also provided to open-university public health courses, health tutorials, online health brochures and a range of other useful materials, which can evolve and grow with the contributions of the participants. Palestinian, Israeli, and U.S. participants in the Initiative’s Working Group meetings are currently using the site to share insights and maintain connections begun in the Working Group sessions.

It is hoped that activity on this site will continue and grow and that it can be a model for the development of future online networking tools used by Palestinian and Israeli health and medical experts (including providers, researchers, and policymakers) for the advancement of cooperative projects in health and medicine in the region. The “Health e-Commons” is building an online community of Palestinians and Israelis, with tools that facilitate active networking and the sharing of information and experiences. This “Health e-Commons” may in the future help facilitate the adoption of new tools for public health purposes that would be useful in the region, including the use of new media for data collection and analysis, the use of cell phones for public health purposes, and the use of telemedicine and tele-health in the region.

The Palestine/Israel Health Initiative has additionally taken first steps in exploring the development of a public health information portal for the sharing of health information and best practices in the region, with resources in Hebrew, Arabic, and English. This public website would be geared toward a general audience of public health and medical experts and consumers in the Palestinian Territories and Israel. It would include and link to a wealth of information on diseases and medical conditions of common concern in the region and provide helpful resources to prevent diseases as well. The portal would also include a section that highlights cooperative programs and activities in health and medicine between Palestinians and Israelis. Furthermore, this website could provide links to information for outside parties, such as interested organizations in the United States, on health issues in the region and potentially facilitate connections between donors and collaborators from other regions to experts and joint activities in Palestine and Israel. Together, the PIHI public information portal and online networking site are creative tools which can help foster the strong and continuing future of cooperative activities in the area as well as to increase knowledge and awareness of health issues in the region.

VIII. Conclusion

The health and medical fields provide special opportunities for building bridges between societies. Whether through preventive interventions, the delivery of health services, or research, the quest to improve health facilitates cooperation between healthcare professionals and patients from across the region. Healthcare providers in Palestine and Israel who work together do not simply deliver care and prevent illness. They have taken on a role as health diplomats, building bridges between these two societies, creating venues for cooperation, and laying the seeds for a peaceful future in the region.

The requirement to provide treatment and care for patients in need and to prevent diseases and epidemics of common concern to the region has necessitated cooperation in the health field between Palestinian and Israeli scientists, clinicians, and public health practitioners for decades. The political climate has presented many challenges to the operation and sustainability of these programs. Nevertheless, a significant group of individuals and organizations from both sides of the border remain committed to continuing to work together. Their cooperation serves as a vehicle for strengthening health systems, improving the health status of people in the region, and creating the professional and personal relationships that build trust and create peaceful ties between the societies.

The goal of the Palestine/Israel Health Initiative has been to foster collaboration and facilitate interaction between health and medical experts in Palestine and Israel to improve the health of people in the region as well as to promote increased cooperation and understanding. During the winter and spring of 2008, under the auspices of the CSP Palestine/Israel Health Initiative, meetings were convened in Israel, the West Bank, East Jerusalem, and the United States that brought together Palestinian, Israeli, and U.S. experts and professionals to discuss areas of common concern and priorities for advancing health in this region. Meetings culminated in two days of Working Group sessions in East Jerusalem, where over fifty participants gathered to share insights, knowledge, and experiences. The meetings included representatives from the Ministries of Health, the NGO community, the World Health Organization, USAID, academia and the private sector as well as physicians and nurses from Palestine, Israel, and the United States. Working groups produced joint recommendations for advancing cooperative initiatives between Palestinians and Israelis in the fields of health education and training, primary care and prevention, emergency medicine and disaster preparedness, medical research, and the exploration of information technology to improve health.

Another product of the Initiative has been to understand and begin mapping the range of individuals, programs, and organizations involved in Palestinian-Israeli cooperative activities in the health field. Few studies have been conducted in recent years identifying collaborative health initiatives, which has impeded investment in these activities and networking between those involved. The Initiative consequently produced a Selected Inventory of ongoing collaborative activities between Israelis and Palestinians working to improve health in the region. The creation of the Selected Inventory included in this report has revealed over forty programs and thousands of individuals committed to working

together across the border to advance the health of people in Palestine and Israel. It illustrates the importance and necessity of the work that these programs accomplish. The Selected Inventory provides an important lens into the inspiring daily interactions that occur, often below the radar, between people who believe that the need to heal transcends politics and the need to advance health knows no borders.

The process of convening meetings between health professionals in Palestine and Israel, however, was often challenging. Political tensions, border crossing issues, and funding constraints all created obstacles to bringing together Palestinian and Israeli health and medical experts over the course of this Initiative, despite their commitment and willingness to attend joint meetings, collaborate, and expand opportunities to work together. Furthermore, sustaining collaboration and communication after the conclusion of meetings is a problem faced by most initiatives and a particular problem in this region where tensions can restrict communication and mobility. Given these constraints in the region, a new paradigm for connecting health professionals and patients is required, facilitating greater interaction that is immunized from geopolitical divides. In the Information Age, the Internet and new media can enable communication and engagement when meaningful interaction would otherwise be impossible, connecting large numbers of people despite the challenges of geography, distance, and time.

A critical insight of the Palestine/Israel Health Initiative has been that information technology and new media *can* be a vehicle to successfully enhance cooperative activities in health and medicine globally, and specifically between Palestinians and Israelis, both by facilitating dialogue and communication and aiding in public health and service delivery. The creation of the PIHI “Health e-Commons” internet workspace over the course of the Initiative has allowed the health and medical experts involved to convene online to share best practices, health information, and data through the internet. The space connects Palestinian, Israeli, and U.S. participants in the PIHI Working Groups to share insights, best practices, and applications of information technology in order to facilitate cooperation.

The “Health e-Commons” enables its membership to maintain dialogue, interaction, and information sharing as well as to access resources of mutual benefit between and beyond meetings. This online networking site helps sustain dialogue between meetings and can also help to raise funds to begin and sustain projects as well as to grow communities. The Initiative is also beginning to explore the development of a public health information portal for the sharing of health information and best practices in the region, with resources in Hebrew, Arabic, and English. Both the online workspace and public health portal are creative tools that can help to ensure the strong and sustainable future for cooperative activities in the area as well as to increase knowledge and awareness of health issues in the region.

It is hoped that by promoting cooperative activities in health and medicine, the products of the CSP Palestine/Israel Health Initiative will make meaningful contributions to the continuing process of building trust and reconciliation, paving the way toward a more peaceful future in the region. In many ways, healthcare professionals in this area of our world have taken on a new role in addition to their traditional duties to cure and prevent

illness. This third role of “peace promotion” through health is a vital function that physicians and other healthcare providers play when working in areas of conflict. Collaborative activities between Palestinian and Israeli medical professionals are necessary both to improving health and serving the broader social function of building a peaceful future for this region.

The words of President John F. Kennedy remind us why this agenda is so important: “Our most basic common link is that we all inhabit this small planet. We all breathe the same air. We all cherish our children’s future.” The common quest for good health knows no borders. Crossing societies, politics and cultures, the cooperative activities supported by the CSP Palestine/Israel Health Initiative are helping to foster increasing interdependence and interconnections in the region and its shared humanity through the advancement of health.⁴⁰

⁴⁰ Blumenthal, Susan, “Health Diplomacy: Rx for Peace,” *Washington Times*, 26 August 2007.

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APPENDIX I

SUMMARY OF PIHI WORKING GROUP AND PLANNING MEETINGS

January – April, 2008

Key Collaborators

Over the course of the grant period, meetings were held in the United States, Israel, and the Palestinian Territories to foster dialogue and exchange on health issues. Meetings were conducted by Rear Admiral Susan Blumenthal, M.D. (PIHI Director, U.S.), Stephanie Safdi, M.Phil. (PIHI Project Manager, U.S.), and Michael Silbermann, D.M.D, Ph.D. (PIHI Field Director, Israel). Key contributors to the development of these meetings included Ziad Abdeen, Ph.D. (Director, Al-Quds Nutrition and Health Research Institute, Palestine); officials from the Palestinian Ministry of Health including Dr. Fathi Abu Moghli (Minister of Health, Palestine); officials from the Israeli Ministry of Health including Avi Israeli, M.D. (Director General, Ministry of Health, Israel) and Alex Levant, M.D. (Director of International Affairs, Ministry of Health, Israel); Dan Bitan, Ph.D. (Co-Director, Israeli-Palestinian Science Organization, Israel); Yehuda Roth, M.D. (Chair, Dept of Otolaryngology, Wolfson Medical Center, Israel); and Ron Krumer (Director of External Affairs, Hadassah Medical Center, Israel). Other key participants included Akiva Tamir, M.D. (Chief Pediatric Cardiologist and Founding Member, Save a Child's Heart), Simon Fisher, J.D. (Executive Director, SACH) and other individuals from Save a Child's Heart (SACH); Rivka Carmi, M.D. (President, Ben Gurion University of the Negev); Yoseph Mekori, M.D. (Dean, Sackler Faculty of Medicine, Tel Aviv University, Israel); Michael Karplus, M.D. (Professor, Medical School for International Health, Ben Gurion University); and fifty other senior Israeli, Palestinian and U.S. health and medical experts.

A summary of the principal meetings conducted, including date, location, participants, topics discussed, and a summary of findings, is included below.

Summary of Meetings

- January 1, 2008

American Colony Hotel, East Jerusalem

This meeting involved PIHI leadership and Palestinian nurses from the West Bank and East Jerusalem for discussions on health issues of highest priority for the Palestinian population in the West Bank. The participants discussed the many strengths of the health system in the Palestinian Territories, including: a relatively healthy population, high social valuation of health, the many highly qualified, experienced, and motivated health professionals (including clinicians, planners, administrators, technicians, researchers and public health workers), and a strong base of governmental and non-governmental institutions.

The meeting also addressed areas of concern for the Palestinian health system. These include poor system-wide coordination and implementation of policies and programs across geographic areas and between the governmental and non-governmental sectors of the health system, the presence of many under-qualified healthcare providers, and weak systems for licensing and continuing education.

Recommendations from the meeting for enhancing the health system in the Palestinian Territories included:

1. Integrate health system planning and policy development.
2. Develop viable and sustainable health insurance and healthcare financing systems.
3. Update, standardize, and enforce licensing standards for all types of healthcare professionals.
4. Update, standardize, and enforce standards for licensing and accrediting healthcare facilities and services.
5. Improve training of health professionals, including academic and vocational training programs that are internationally accredited, and implement comprehensive programs for continuing medical education.
6. Implement a national strategy on healthcare quality improvement and systematically evaluate quality improvement projects.
7. Improve health information systems for tracking data such as health and nutritional status, costs of inpatient and outpatient care, health system staffing, and medical records.
8. Improve research and evaluation capacity, including public health, clinical, and biomedical research.
9. Improve public and primary healthcare programs, including updated immunization programs, prevention and treatment of chronic and non-infectious diseases, and treatment of developmental and psychosocial conditions.

Participants at this meeting underscored that immediate priority should be given to improving system-wide coordination and implementation and improving public and primary healthcare programs. It was thought that the Palestinian health system could constructively absorb between \$160-200 million U.S. per year in external international support over the first decade of an independent state. Participants emphasized that the successful development of the Palestinian health system is worthwhile in its own right and can be a cost-effective way to help demonstrate the tangible benefits of peaceful relations with neighboring countries. Participants believed that Israel might play a helpful role, especially in areas such as health system planning, licensing and accreditation, development of information systems, and research.

- January 10, 2008

Dan Panorama Hotel, Tel Aviv

This meeting involved senior Israeli physicians and nurses and PIHI leadership. This group of Israeli participants adopted many of the recommendations listed above and

expressed their willingness to extend any assistance and support necessary to promote these objectives. Meeting participants concluded that the training of Palestinian physicians in Israeli hospitals is already ongoing and can be further strengthened; the same is true for training and education activities among senior nurses in the Palestinian Authority. The group of healthcare professionals participating in the meeting emphasized their willingness to collaborate with Palestinian colleagues in areas such as the establishment of standards and protocols for palliative care in severely sick patients.

- February 7, 2008

Crowne Plaza Hotel, Jerusalem

This meeting involved the Palestinian Deputy Minister of Health, the Director of the Department of International Collaborations for the Palestinian Ministry of Health, and PIHI leadership. Originally this meeting was to include many Palestinian physicians from across the West Bank along with professors of medicine and biology in the region, but the meeting could not take place as originally scheduled.

A discussion of the overall objectives of the Palestine/Israel Health Initiative took place. Regarding priorities for the health sector, the Palestinian Deputy Minister emphasized the urgent need for a Trauma Center (Emergency Medicine Center) and a Center for Cardiac Surgery in the West Bank. It was discussed that Israel is in a position to extend expertise and to help establish new centers in the West Bank.

- February 19, 2008

Dan Panorama Hotel, Jerusalem

This meeting convened Palestinian and Israeli physicians, nurses, scientists, representatives from the Ministries of Health, PIHI leadership, and other health and medical experts from Palestine and Israel. This was the first joint Israeli-Palestinian meeting whereby some of the above topics were further elaborated. A joint consensus was reached that new collaborative Israeli-Palestinian initiatives in the health sector are needed and welcome. Such collaborations include upgrading of clinical services at both the primary healthcare level and the tertiary healthcare level (hospital services). An integral part of such an initiative would involve continuing education programs for healthcare providers and public education campaigns. The group also discussed strategies to achieve these goals.

Meeting participants identified the need to institutionalize authorities for accreditation of hospitals, departments, and clinical units, along with the academic institutions affiliated with medical education in Palestine. Moreover, there is an urgent need to establish standards and protocols for clinical procedures. During this meeting, practical proposals were discussed to facilitate the achievement of these goals, based on mutual visits to Israeli and Palestinian institutions.

- February 4, 2008

Partners HealthCare, Harvard University, Boston, Massachusetts

This meeting included members of the Board of Directors of Harvard University's Partners Healthcare Network as well health professionals and experts from the

Harvard University affiliated health systems and PIHI leadership. Participants included experts in telemedicine, new media, global health, and primary care. Discussions involved the potential uses and applications of health information technology (including telemedicine and the internet) for collaborative projects between Palestinians and Israelis in health and medicine. Participants also discussed ways in which U.S. health and medical experts could contribute to the Palestine/Israel Health Initiative to advance collaborations.

- March 2, 2008

Dan Panorama Hotel, Haifa

This meeting convened by key organizers of the Palestine/Israel Health Initiative included discussions on the planning and coordination of Working Group Meetings during spring, 2008. A discussion on the background of the Israeli and Palestinian health systems and Palestinian-Israeli collaborations in health and medicine also occurred.

- March 3, 2008

American Colony Hotel, East Jerusalem

This meeting involved directors of important Israeli and Palestinian joint programs in health and medicine and PIHI leadership. It focused on a discussion of ongoing Palestinian-Israeli health collaborations and planning for the spring, 2008 PIHI Working Group Meetings.

- March 4, 2008

Dan Panorama Hotel, Jerusalem

This meeting involved leadership from PIHI and the Israeli-Palestinian Science Organization. Discussion focused on Israeli-Palestinian collaborations in health and medical research, including their history, ongoing work, and future directions, as well as planning for the spring, 2008 Working Group Meetings in Jerusalem.

- March 5, 2008

Hadassah Medical Center, Ein Kerem, Jerusalem

This meeting included health and medical professionals and administrators from Hadassah Medical Center as well as PIHI leadership. Participants included leaders of Palestinian-Israel cooperative projects in health and medicine. Participants discussed collaborative Israeli-Palestinian health and training initiatives underway at Hadassah Medical Center in the areas of education and training, patient care, health and medical research, and other fields. Planning for the spring, 2008 Working Group Meetings in Jerusalem was also discussed.

- March 5, 2008

Dan Panorama Hotel, Jerusalem

This meeting with the Director of International Affairs from the Israeli Ministry of Health and PIHI leadership included a discussion of Israeli and Palestinian health systems, ongoing and future opportunities for collaboration on health issues of common concern, Israeli and Palestinian Ministries of Health and interactions

between them, the role of public health services in Israeli-Palestinian collaborations, ongoing collaborations in the area of infectious disease, and opportunities to advance collaborative work in health and medicine between Israel and Palestine. Planning for Spring 2008 Working Group Meetings in Jerusalem was also discussed.

- March 5, 2008

Dan Panorama Hotel, Jerusalem

This meeting convened leadership from PIHI and the Palestinian NGO sector operating in the West Bank in the areas of health, medicine, and child development. It included a discussion of health issues in the West Bank and Palestine broadly, health initiatives and interventions in the West Bank in prevention and healthy lifestyle promotion for children, ongoing collaborations between Israeli and Palestinian NGOs and healthcare workers in the West Bank, and the role of NGOs in Israeli-Palestinian collaborations in health and medicine.

- March 5, 2008

Sackler School of Medicine, Tel Aviv

This meeting convened the Dean of the Sackler Faculty of Medicine and PIHI leadership for a discussion of Israeli-Palestinian collaborations in academic medicine, including health and medical research and the role of academic institutions in fostering collaborations in these areas. Also discussed were collaborative activities ongoing at the Tel Aviv University Sackler School of Medicine, between professors and researchers at the Sackler School and in universities and health and medical institutions in Palestine. Planning for the spring, 2008 PIHI Working Group Meetings in Jerusalem was also discussed.

- March 5, 2008

Tel Aviv

This meeting with leadership in PIHI and in the departments of research and evaluation at Israel's Maccabi Insurance Company, a pioneer in health information technology, involved discussions of health information technology systems in Israel and Palestine. Opportunities for Israeli-Palestinian health and medical collaborations in the area of health information technology were explored. Also discussed was the role of Israeli insurance companies in Israeli-Palestinian health collaborations, including examples of ongoing collaborations and opportunities for future work. Planning for the spring, 2008 Working Group Meetings was also discussed.

- March 6, 2008

Imperial Hotel, Tel Aviv

This meeting convened leadership from PIHI and Ben Gurion University of the Negev's Faculty of Health Sciences for discussions of Palestinian-Israeli health collaborations, particularly in the area of education and training. The meeting included a review of current systems for health and medical education in Israel and Palestine and a discussion of opportunities for future initiatives in the area of

education and training. Strategies for planning spring, 2008 PIHI Working Group Meetings were discussed.

- March 6, 2008

Edith Wolfson Medical Center, Tel Aviv

This meeting convened leadership from Save a Child's Heart Foundation (SACH) and PIHI. Discussion focused on the history and work of Save a Child's Heart and other Israeli-Palestinian health collaborations, including training programs for Palestinian physicians and nurses, as well as future opportunities. The meeting also involved a tour of the SACH facilities and conversations with SACH physicians and families of Palestinian patients undergoing treatment.

- April 27, 2008

Jerusalem

This meeting convened PIHI organizers and U.S. health and medical experts with the Israeli Co-Director of the Israeli-Palestinian Science Organization. The meeting included a discussion of goals and objectives of the PIHI Working Group Meetings in Jerusalem, background on Palestinian-Israeli health collaborations and health systems, and preparation of presentations for the Working Group Meetings.

- April 28, 2008

Augusta Victoria Hospital, East Jerusalem

This meeting included PIHI leadership, a delegation of U.S. health professionals participating in the PIHI Working Group meetings, and clinicians, administrators, and staff at Augusta Victoria Hospital in East Jerusalem. Participants from Augusta Victoria Hospital included the Director of Nursing, physicians, nurses and technicians.

The tour included a visit to the Oncology Radiation Therapy Center and discussion of oncology services for the Palestinian population, cooperative projects with Israelis in the area of cancer treatment and prevention, and opportunities for future collaboration.

The group also visited the Pediatric Dialysis Center at Augusta Victoria Hospital. A discussion was conducted with Palestinian physicians and staff on the needs of the Palestinian population for dialysis treatment, the etiology of renal failure, and cooperative projects and collaborative opportunities with Israeli hospitals and treatment centers.

Leaders from Augusta Victoria Hospital discussed the institution's history, operations, challenges, and planned initiatives for the future, with a focus on cooperative projects with Israeli health and medical institutions. A particular focus of discussion was the Radiation Therapy Center at Augusta Victoria Hospital that has been operating since August 1, 2005. Augusta Victoria Hospital provides 80% of the radiation therapy for Palestine. A majority of these are for very late-stage oncology cases. Sixty percent of cases seen at the Center are for palliation and 40%

for curative care, which is the opposite of the proportion of cases seen in the industrialized world. Thirty percent of cases are for treatment of breast cancer, most of which present at a late stage. All patients at the hospital receiving radiation therapy are from the West Bank or Gaza, with about 50% from each area. In addition, many lung, head, and neck cancers are treated at the Center due to the high prevalence of smoking among the Palestinian population.

The staff emphasized the need for outreach and education to counter the stigma against cancer in the Palestinian population. NGOs in Palestine work to promote early detection of cancer, including increased mammography screening. The hospital currently uses a Siemens Primus radiation machine, as it was initially required that a German manufacturer be used due to the hospital's founders and benefactors. The staff underscored that at least one new machine is needed at the hospital for screening.

Augusta Victoria Hospital recently held a conference on breast cancer in cooperation with Israeli institutions. At the conference, Palestinian and Israeli breast cancer survivors talked together, sharing experiences and personal narratives. Most Palestinian women with breast cancer (approximately 90%) receive mastectomies. Lumpectomy exists as an option but is rarely used. More than 50% of cases at Augusta Victoria Hospital for the 40 – 70 age-group are for palliation.

The hospital conducts quality assurance assessments. However, Augusta Victoria's case load is rising so fast that hospital staff are concerned that the quality of care will be compromised. Staff underscored that \$2.5 million is needed for a new radiation machine. Because Augusta Victoria Hospital operates in Israel, issues related to the operation of the machine must be reported to Israeli authorities. The Radiation Center is checked by the IAE, and staff recently traveled to Vienna to present their program, where they also received an equipment donation.

Augusta Victoria Hospital conducts education and training at the Center. By law as from the Israeli Knesset, Augusta Victoria can only treat Palestinian patients from the West Bank and Gaza. Palestinians who have an Israeli Jerusalem ID card are treated in Israeli hospitals. The staff stated that it has taken up to three months to obtain a permit for a patient coming from Gaza. Patients are permitted to be accompanied by family members who have been approved by Israeli security. The hospital rents a hotel for patients coming to receive radiation therapy from Gaza, although many patients are only permitted to stay for one day. The hotel has a 6:00 pm curfew for the patients – a compromise reached after 4 months of negotiation with Israeli security. The hospital has one medical oncologist trained in the United States, two who trained at Hadassah Hospital in Israel, and several staff who trained at a Jordanian University, as well as at other international universities.

Augusta Victoria Hospital is the only pediatric dialysis unit for the West Bank. Many cases of renal failure seen at the hospital are genetic in origin and others result from untreated urinary tract infections. The hospital conducts over 950

dialysis sessions each month using 18 dialysis machines. Nurses are sent to Denmark for training. Augusta Victoria Hospital will continue to provide emergency 24 hour care as well as housing for patients until the political situation eases. The dialysis unit at Augusta Victoria Hospital was funded by USAID.

- April 28, 2008

Hadassah Medical Center, Ein Kerem, Jerusalem

Organizers of the CSP Palestine/Israel Health Initiative and participants in the Health and Medicine Working Group Meetings held discussions with health and medical experts at the Ein Kerem Campus of Hadassah Medical Center located in West Jerusalem.

Professor Shlomo Mor-Yosef, Director General of Hadassah Medical Organization, provided participants with an overview of Hadassah Medical Organization and its collaborative work with Palestinians. Hadassah's mission statement underscores that it is a "bridge to peace," and over the years Hadassah has been involved in numerous collaborations with Palestinian physicians and institutions. The hospital also provides treatment for Palestinian patients on a daily basis. Most of the collaborative projects involving Hadassah are direct physician-to-physician collaborations, but Hadassah is also now working on cooperative projects directly with the Palestinian Ministry of Health.

The two Hadassah hospitals in Israel include the Ein Kerem hospital and a hospital on Mt. Scopus in East Jerusalem. Both of these hospitals are public Israeli hospitals but are owned, funded, and maintained by Hadassah Women's Zionist Organization of America.

Hadassah Medical Organization is the second largest employer in Jerusalem, and has an annual operating budget of about \$440 million. The Ein Kerem Hospital complex contains several patient care buildings and a hotel for patients' families, and construction is underway on a new, fourteen story Maternal-Child Health building. The Hadassah hospitals are affiliated with five schools of Hebrew University: the Medical School, Dental School, Nursing School, Braun Public Health School and the Occupational Therapy School. In addition to patient care, Hadassah has a large research faculty and is at the forefront of the Israeli health sector in terms of technology and medical advance.

Hadassah's patient population is very closely matched to the population of Jerusalem with regards to religion and ethnicity. The hospital never turns patients away, particularly in cases of emergency. If necessary, Hadassah absorbs the cost of treatment for Palestinians.

Participants in the meetings were provided with examples of Israeli-Palestinian collaborative work at Hadassah. With regards to patient treatment, Hadassah currently has a fund for children with congenital heart disease, supported by The Peres Center for Peace (Hadassah funds 50% and The Peres Center funds 50% of

the expenses). The children are first examined by Palestinian cardiologists before they are transferred to Hadassah Hospital, and the Peres Center assists in tracking follow-up care. There is a similar program for pediatric oncology that the Palestinian National Authority assists with funding. For education and training, Hadassah Hospital provides specialist training for Palestinian nurses and physicians. These programs evolved from a request for training dialysis specialty care nurses from the Deputy Palestinian Ministry of Health.

Hadassah Hospital works with the Palestinian Ministry of Health to determine specialist training needs. Hadassah provides the funds to train approximately 10-12 Palestinian residents per year. Generally, one or two doctors receive training annually in a given specialty, with the eventual goal that the Palestinian trainees will complete a full Israeli residency. In addition to these efforts, Hadassah has worked in partnership with the Al-Quds University Dental School, and the Braun School of Public Health at Hebrew University has developed an international MPH program for individuals from developing countries that is fully funded for 30 students and taught in English. Several Palestinian students participate in this MPH program each year. Many Palestinian alumni from Hadassah collaborations currently have senior positions in the Palestinian Ministry of Health. The current Medical Director of the prominent St. Johns Eye Hospital in East Jerusalem was also educated at Hadassah.

Additionally, Hadassah is at present exploring beginning to start a new partnership with Augusta Victoria Hospital in East Jerusalem, assisting in building a Level I Trauma Center. In its first stage, this partnership will initiate a workshop with Palestinian doctors on how to best move forward with the development of the Trauma Center, as the hospital would have to be able to provide advanced services such as angioplasty and imaging in order to qualify as a full trauma center.

Hadassah Medical Center committed to working with Palestinians and to help bring peace to the region through health, although it has encountered challenges on the political level. Hadassah works the Israeli government to smooth passage for Palestinian patients through checkpoints and also tries to encourage Palestinian doctors to follow up with patients treated at Hadassah Hospital. Although Hadassah doctors used to visit the West Bank and Gaza to provide follow up for those patients who reside in Palestine, they are no longer able to do so because of the current political situation.

The meetings included a tour of facilities at the Hadassah Medical Center, and conversations with Palestinian and Israeli physicians, nurses, and technicians in various departments, including emergency medicine. The Hadassah Ein Kerem Emergency Department sees about 73,000 patients/year, a case load equivalent to that at a medium sized inner-city Emergency Department in the United States. This is a small Emergency Department in Israel (most see 140,000 year), but it is the only Level I Trauma Center in 50 km. It is also the only neurosurgical center in the area and additionally serves as a bomb shelter. The Emergency Department has a

helipad, but it is usually much faster to transport patients by ambulance. The lamps in each room in the Emergency Department have cameras inside them for teaching purposes and quality assurance review. There were 2.6 million hospital visits in Israel last year and 28-40 Emergency Department visits, which is about the same as in hospitals in the western world. About 40% of Emergency Department patients are internal medicine patients, 20% are pediatric, and 25% are for minor orthopedic injuries. The Hadassah Emergency Department also sees about 900 rabies cases annually and provides 300-400 vaccinations per year.

Adjacent to the Emergency Department is a first class Simulation Center with the latest technology simulation manikins. These manikins allow students and faculty to practice procedures and teamwork. In the event of a mass casualty incident, the Simulation Center can also serve as patient rooms because of its position adjacent to the main Emergency Department.

The Emergency Medicine residency program was established in Israel only seven years ago. Hadassah now has two emergency medicine residents and one board certified emergency medicine physician, but the other doctors in the Emergency Department are specialists in other areas, such as internal medicine or orthopedics.

Working Group participants spoke with the Chairman, Department of Emergency Medicine and other staff in the Department about cooperative projects with Palestinian healthcare providers and patients that they have been involved in. One nurse explained that she used to run a trauma course in the 1990's for Palestinian paramedics with funding from the Swedish government. However, this effort has not continued in recent years since the nurse can no longer travel to Ramallah to conduct the trainings.

The Chairman of the Emergency Medicine Department, Dr. Cobi Assaf, described the "Peace through Health Collaboration" between Hadassah Medical Center, Augusta Victoria Hospital, and Brigham and Women's Hospital in Boston. The goals of this collaboration are to improve health and advance emergency medicine in the region. The original funding of \$1.5 million was provided by the U.S. State Department for "people to people" collaborations.

As part of this collaboration, short fellowships at Brigham and Women's Hospital in Boston were designed for Palestinian, Israeli, and U.S. physicians on the topics of life threatening situations, toxicology and domestic violence. Workshops have also been held on these issues in Israel. The Simulation Center at Hadassah Hospital is also a product of this collaboration. Currently, the initiative is printing a manual in English, Arabic, and Hebrew to help emergency medicine physicians screen and cope with domestic violence in a culturally sensitive way.

- April 28, 2008

Dan Panorama Hotel, Jerusalem

This meeting convened the organizers of the Palestine/Israel Health Initiative, U.S. participants in the Health and Medicine Working Group Meetings, and the Director of International Affairs from the Ministry of Health, Israel for a discussion of the goals and objectives of the PIHI Working Group Meetings in Jerusalem, Palestinian-Israeli health collaborations and health systems, and preparation of presentations by U.S. participants for the Working Group Meetings.

- April 29, 2008

American Colony Hotel, East Jerusalem

The first day of the Working Group Meetings involved thirty Israeli, Palestinian, and U.S. health and medical experts at the American Colony Hotel in East Jerusalem. The morning consisted of introductory remarks by the PIHI Director, Dr. Susan Blumenthal, presentations by health and medical experts on primary care and prevention, health information technology, and emergency preparedness and disaster response, and a discussion of areas for new collaborations.

The morning also featured a presentation by Dr. Hasan Dweik, Co-Director, Israeli-Palestinian Science Organization and Executive Vice President, Al-Quds University, about Israeli-Palestinian cooperation in health and medical research. Dr. Dweik provided Working Group participants with an overview of current projects facilitated by the Israeli-Palestinian Science Organization (IPSO), discussed current challenges regarding cooperation, and highlighted goals for future cooperative projects.

During lunch, Palestinian, Israeli and U.S. participants engaged in informal discussions about collaborative projects currently underway and ideas and objectives for potential new joint initiatives.

The afternoon was spent in Working Group meetings organized around the areas of Health Information Technology; Public Health, Emergency Medicine, and Disaster Preparedness; and Health and Medical Education, Training and Research. Each Working Group included health and medical experts from Israel, Palestine and the United States. Working Group participants discussed past and present cooperative activities and challenges involved with these collaborations, and each Working Group produced a set of recommendations for future collaborations, including ideas for new cooperative initiatives in each of these areas. When the participants reconvened, one member from each Working Group gave a presentation summarizing the group's conclusions and ideas for future cooperative projects.

The day of meetings concluded with a presentation by Professor Ziad Abdeen, Al-Quds University, that highlighted challenges facing Israeli-Palestinian cooperation in the health field, lessons learned from past collaborations, and the actions needed to ensure the success of future projects.

- April 29, 2008

Dan Panorama Hotel, Jerusalem

This dinner meeting for Working Group participants included reflections on the issues discussed during the meetings and continued discussion of Palestinian-Israeli health collaborations and health systems.

- April 30, 2008

American Colony Hotel, East Jerusalem

The second day of Working Group meetings was scheduled to convene Palestinian, Israeli, and U.S. health and medical experts, including members of the Palestinian National Health Policy and Planning Council. The planned agenda for this day was developed jointly with the Palestinian Minister of Health and included presentations by the Palestinian Minister of Health, Director General of the Israeli Ministry of Health, as well as Palestinian, Israeli and U.S. health and medical experts in the fields of primary care and prevention, emergency medicine and disaster preparedness, education and training, health and medical research, and health information technology. Unfortunately, the meeting could not take place as originally scheduled. After some discussion, participants decided to proceed with the meeting although the delegation of Palestinian participants identified by the Minister of Health was unable to attend.

Dr. Avi Israeli, Director General of the Israeli Ministry of Health, presented on the relationship between the Palestinian and Israeli Ministries of Health and current cooperative efforts between them. He underscored the importance of cooperation and the excellent relationship Israeli hospitals have with Palestinians.

His presentation was followed by remarks from Dr. Tony Laurence, Head of Office at the World Health Organization (WHO), West Bank and Gaza. Dr. Laurence discussed the work of the World Health Organization in the region, which is focused on humanitarian work in the Gaza Strip, procurement of pharmaceuticals, and coordination of care with other UN agencies. Following Dr. Laurence's remarks, PIHI Director, Dr. Susan Blumenthal, moderated a discussion with participants about issues concerning pharmaceuticals and the treatment of Palestinian patients in Israeli hospitals.

Presentations were then given by approximately ten participants currently involved in cooperative projects. Each participant provided an overview of their project and highlighted achievements of the initiative, challenges encountered, and suggestions for future collaborations.

The day of meetings concluded with the launch of the PIHI "Health e-Commons" website, developed as a component of the Palestine/Israel Health Initiative for continued networking of Israeli, Palestinian, and U.S. health and medical experts. The "Health E-Commons" is designed to foster collaboration and health information exchange between professionals involved and interested in cooperative activities in health and medicine in the region. The presentation included discussion

of how to enroll in the internet workspace, plans for using it as a tool to facilitate continued discussion and dialogue about the recommendations from the Working Group meetings, and its use to sustain the networking facilitated by the Palestine/Israel Health Initiative.

- April 30, 2008

Palestinian Ministry of Health, Ramallah, West Bank

Organizers of the Palestine/Israel Health Initiative and several U.S. participants from the PIHI Working Group meetings travelled to Ramallah to meet with Dr. Fathi Abu Moghli, Palestinian Minister of Health. Working Group Meetings in East Jerusalem. Professor Ziad Abdeen, Al-Quds University, East Jerusalem, also participated in the meeting.

Dr. Abu Moghli discussed the challenges facing the Palestinian Ministry of Health and current initiatives underway to improve the health of the Palestinian people. There was also discussion of the current political tensions and the impact of this conflict on potential cooperative activities between Israelis and Palestinians. Discussions that took place during the PIHI Working Group meetings were summarized and recommendations from the Working Groups were reviewed. The potential for future cooperative health programs were discussed as well.

APPENDIX II

SELECTED INVENTORY OF ISRAELI-PALESTINIAN COOPERATIVE HEALTH PROGRAMS

Few studies have been conducted in recent years to identify ongoing partnerships and cooperative health program underway between Israelis and Palestinians. The most recent selected mapping of collaborative initiatives was published by the JDC-Brookdale Institute in 2000 and included information on “Israeli-Palestinian Cooperation in the Health Field, 1994-1998.”⁴¹ Much has changed, however, since the conclusion of this study period, including the Second Intifada, changes in government leadership, the emergence of new diseases and public health threats, and innovations in the fields of public health and medicine. Many of the programs previously profiled no longer exist and many new ones have been created over the course of the last decade.

The lack of knowledge regarding the landscape for ongoing cooperative initiatives between Palestinians and Israelis impedes investment in these activities and networking between those involved. As a first step to overcoming this knowledge gap, the Palestine/Israel Health Initiative (PIHI) has created a selected mapping of cooperative health programs underway between Palestinian and Israeli scientists and healthcare professionals. The PIHI Selected Inventory featured in this Appendix identifies cooperative programs from 2005 to the present between Israel and the Palestinian Territories as well as highlights organizations that have been deeply involved in collaborative activities over the past several years.

Because of the sensitive nature of these projects or due to lack of funding and publicity, many have not been well publicized. The majority of these cooperative projects and organizations were identified through structured internet-based research and field investigations carried out over the course of the Palestine/Israel Health Initiative. The Selected Inventory contains information on over forty cooperative programs in health and medicine between Palestinian and Israeli professionals, including a description of the program’s mission and goals, its partnering organizations, and key contact information.

Methodology

After identifying key individuals and organizations involved in cooperative projects through structured internet research and personal communications, the websites of these organizations were examined for joint projects that had been conducted since 2005. A cooperative health project was defined as an activity centered around improving health service delivery, health education and training, and/or research that involved at least one Palestinian and one Israeli health professional or organization. After examining the websites of these organizations, a search was done through Google Web and Google Scholar for news about these organizations and their cooperative health projects. Search

⁴¹ Barnea, “Study Report: Israeli-Palestinian Cooperation in the Health Field 1994-1998,” May 2000.

terms included the name of the organization, the name of the organization's leader, as well as the name of the organization and/or the organization's leader combined with the search terms below.

To identify further cooperative projects, both Google Web and Google Scholar searches were performed. The following search terms were used in both search engines:

"Palestinian Israeli Health Cooperation"
"Palestinian Israeli Collaboration"
"Joint Palestinian Israeli Health Projects"
"Middle East Health Cooperation"
"Middle East Health Projects"
"Israel, West Bank, Gaza Health Projects"
"Israel, West Bank, Gaza Health Cooperation"

As individual projects were identified, the names of those projects were searched for additional information, both individually and in conjunction with the search terms above, on both Google Web and Google Scholar for additional information. Key individuals from the identified projects and organizations were also searched on Google Web and Google Scholar.

To advance understanding of these activities and further identify additional joint health projects, participants in the Jerusalem Working Group meetings were asked to describe collaborative initiatives that they have participated in or are aware of. Through this method, several additional projects were identified and key contacts for these projects were identified for information about their programs.

Information about the projects and organizations included in this selected inventory was obtained either from documents published on the Internet or directly from individuals involved. All individuals involved in these projects were informed of the intent to publish information about these collaborative projects in this Selected Inventory.

NOTE: Several collaborative initiatives listed are umbrella organizations for many smaller projects. For example, the Middle East Cancer Consortium and the Israeli-Palestinian Science Organization help to coordinate and oversee numerous collaborations each year between Israeli and Palestinian scientists and healthcare providers. However, due to the lack of detailed information about most of these projects and their sensitive nature, the smaller collaborations under each of these organizations were not described independently.

Additionally, this inventory is not a comprehensive mapping of activities but rather highlights selected program as models for collaborative work on health and medicine in the region.

Selected Inventory

Bedouin Genetic Research Project

Mission and Goals: Dr. Ohad Birk (a Jewish-Israeli geneticist), Dr. Izzeldin Abuelaish (a Palestinian physician from Gaza), and Dr. Khalil Elbedour (a Bedouin-Israeli physician) are working together at Ben Gurion University to identify the mutant genes that cause genetic diseases that are prevalent in the Bedouin community due largely to marriages among relatives. In addition to working with the Bedouin population in Israel, Dr. Abuelaish, the physician from Gaza, is collecting data and constructing family trees from his patients in Gaza. The researchers are providing confidential and discreet genetic testing to interested families and are working closely with Muslim leaders to spread messages about the benefits of genetic testing. From 2004-2006, the team identified eight mutant genes not previously associated with a disease and dozens of new mutations in other genes previously associated with genetic diseases. The lab work is sponsored by Israeli philanthropist Morris Kahn.

Project Partners: Ben Gurion University, Israel

Information: <http://www.nytimes.com/2006/03/21/science/21bedo.html>

Key Contacts:

- Ohad Birk, MD, PhD - Acting Director, Genetics Institute, Soroka Medical Center, Ben Gurion University; Group Leader, Human Molecular Genetics Lab, Ben-Gurion University
Email: obirk@bgu.ac.il

- Izzeldin Abuelaish, MD – Genetics Institute, Soroka Medical Center, Ben Gurion University; OB/GYN, Jabalya refugee camp, Gaza strip
Email: izz_aish@yahoo.com

Brandeis University/Al-Quds University Partnership

Mission and Goals: The goals of this administrative and academic partnership between Brandeis and Al-Quds Universities include strengthening the Al-Quds University infrastructure, providing educational opportunities for students and faculty, and fostering cultural understanding. The Brandeis University/Al-Quds University partnership grew out of a 1997 visit to Brandeis by Al-Quds President, Dr. Sari Nusseibeh. The initial phase of the partnership, which ran through June 2007, focused on administrative and academic exchanges. For example, during this initial phase of the exchange, the Vice President for Administrative and Financial Affairs at Al-Quds University spent two years at Brandeis University developing a strategic plan for Al-Quds. During this period, four master's degree students from the American Studies Program at Al-Quds University spent two weeks at Brandeis University in March 2006. The second phase of the partnership runs through December 2009 and is focusing on teaching and academic exchanges, including

health programs. A description of the program and participant list can be found at <http://www.brandeis.edu/aqu/en/bios.html>.

Project Partners: Brandeis University, Waltham, Mass, USA; Al-Quds University, East Jerusalem

Website: <http://www.brandeis.edu/aqu/en/about.html>

Key Contacts:

- Dr. Daniel Terris - Associate Vice President for Global Affairs; Director, International Center for Ethics, Justice and Public Life at Brandeis University
Email: terris@brandeis.edu
Phone: 781-736-8577
- Dr. Khuloud Khayyat Dajani, Professor of Social Medicine and Health Policy, Al-Quds University
Email: khuloud@planet.edu
Phone: 972-2-627-4979

Bridges Magazine

Mission and Goals: Bridges Magazine, founded in 2004 and supported by the World Health Organization, is a bi-monthly publication written and managed by Palestinian and Israeli academics and health professionals. The mission of this magazine is to exemplify the paradigm of "health as a bridge for peace," bringing together Palestinian and Israeli health professionals to address health issues of concern to the people of the region. Guiding principles of the magazine include providing a balance between the presentation of the negative impact of the conflict on both sides and the positive cooperative efforts that are taking place, focusing not only on scientific and health issues but also dialogue, peace, right to health, women's and children's rights, and social determinants of health, with a particular relevance to the daily life on both sides and an emphasis on the human story. The magazine focuses on public health topics of importance to Israelis and Palestinians, analyzes the health impact of conflict in the region, provides a forum for reporting significant cooperative research and clinical activities between Israelis and Palestinians, and disseminates international health policy and strategic information of particular importance to the local regional context.

Project Partners: World Health Organization, Palestinian and Israeli health professionals

Website: <http://www.bridgesmagazine.org/>

Key Contacts:

- Dr. Tony Laurence - Head of Office, World Health Organization, West Bank and Gaza

Email: tla@who-health.org
Phone: 972-2-540-0595

Bridges Magazine Roundtable: Infectious Disease Knows No Borders

Mission and Goals: As an outgrowth of the September 2006 issue of *Bridges Magazine* (see above) entitled "Infectious Diseases Knows No Borders," a roundtable discussion was held on the topic in November 2006 at the Dan Panorama Hotel in East Jerusalem. The purpose of the dialogue was to extend the impact of *Bridges magazine*, and its outreach in the Israeli and Palestinian health sectors to enhance dialogue between professionals. The meeting focused on cooperative opportunities for Palestinian and Israeli healthcare providers, medical institutions and governmental entities. Based on the success of this meeting, the World Health Organization has continued to organize roundtable discussions to mark the release of each new issue of *Bridges magazine*.

Project Partners: World Health Organization; Palestinian and Israeli health professionals

Website:

http://www.healthinform.net/files/Bridges/Roundtable_report_14%2011%2006.doc

Key Contact:

- Dr. Tony Laurence - Head of Office, World Health Organization, West Bank and Gaza
Email: tla@who-health.org
Phone: 972-2-540-0595

Cancer Genetics Course for Palestinian Genetic Counselors

Mission and Goals: In January 2008, six Palestinian women participated in a Breast Cancer Research Foundation-funded course on breast cancer genetics and genetic counseling. These women are now completing their in-service genetic counseling training at Augusta Victoria Hospital in East Jerusalem and Shaare Zedek Medical Center in Israel. The training focuses on providing breast cancer genetic testing and counseling to Palestinian women for the first time in history. Mentoring these women is a team of Palestinians, Israelis, and Americans, including Dr. Ephrat Levy-Lahad from Share Zedek Medical Center in Jerusalem, Dr. Moien Kanaan from Bethlehem University, Dr. Samir Khatib from Bethlehem University, and Dr. Mary-Claire King from the University of Washington. This team will also begin genetic analysis of breast cancer in Arab women living in the Palestinian Authority and Israel. The group plans to apply the knowledge gained in studies of Ashkenazi Jewish families to understanding the genetics of breast cancer in Arab women, and to offer the first systematic care and follow-up program for women with inherited breast cancer risk in the region. The program is underway at Share Zedek Medical Center in Jerusalem and Augusta Victoria Hospitals, in collaboration with Bethlehem University. The genetic testing and counseling program is a first step in raising

public awareness about the disease, promoting early detection, and in these ways enhancing the possibility of positive health outcomes for Arab women who have breast cancer.

Project Partners: Breast Cancer Research Foundation, United States; Share Zedek Medical Center, Israel; Bethlehem University, West Bank; Augusta Victoria Hospital, East Jerusalem; University of Washington School of Medicine, United States

Website: http://www.bcrfcure.org/action_arabwomen.html

Key Contacts:

- Moien Kanaan, PhD - Dean of Science and Hereditary Research Lab
Director, Bethlehem University
Email: mkanaan@bethlehem.edu

Cerebral Palsy Collaboration

Mission and Goals: This initiative is investigating different approaches to improving motor function in Palestinian, Israeli, and Jordanian children with cerebral palsy through work at three clinical sites in Jordan, Israel and East Jerusalem. The objectives of the project are to both increase collaboration among healthcare professionals in Jordan, Israel, and Palestine and to disseminate and standardize a new form of cerebral palsy therapy. The program provides a consistent and evidence-based system of clinical care, establishes a small, cohesive consortium of clinical researchers, and fosters interdisciplinary communication in the region. The project was launched in February 2006 with an opening conference held in Aqaba, Jordan, under the auspices and with the participation of Princess Magda Raad, chairperson of the Al-Hussein Society in Jordan. This project is sponsored by a grant from the Middle East Regional Cooperation Program (MERC) and coordinated by researchers at Ben Gurion University.

Project Partners: United Cerebral Palsy Research and Educational Foundation, United States; Ben Gurion University, Israel; Al-Hussein Society Rehabilitation Center, Amman, Jordan; Basma Rehabilitation Center, East Jerusalem; Child Development and Rehabilitation Center at Assaf Harofeh Medical Centre, Israel

Website: <http://www.ucpresearch.org/newsandevents/111207-middleeast.php>

Key Contacts:

- Professor Jacob Kaplanski – Associate Professor Emeritus, Ben Gurion University Faculty of Health Sciences
Email: jacobk@bgu.ac.il
Phone: 972-8-647-7359

Child Nutrition in Israel and Palestine Conference: Fostering Joint Initiatives

Mission and Goals: Convened in February 2005, this conference was convened by the Friedman School of Nutrition and Science Policy, Tufts University, Al-Quds University, and Ben Gurion University, in association with the Environmental Protection and Research Institute in Gaza. The purpose of the conference was to address the current challenges of food insecurity and inadequate nutrition for children in some parts of Palestine and Israel.

Project Partners: Tufts University, United States; Al-Quds University, East Jerusalem; Ben Gurion University, Israel

Website: http://nutcent.bgu.ac.il/Final_Program%20Jan_29th-1.htm

Key Contacts:

- Drora Fraser, Ph.D – Professor of Epidemiology and Health Sciences Evaluation, Ben Gurion University
Email: fdrora@bgumail.bgu.ac.il
Phone: 972- 8-647-7452
- Irwin Rosenberg, MD – Friedman School of Nutrition Science and Policy, Tufts University
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Child Rehabilitation Initiative for Safety and Hope (CHERISH)

Mission and Goals: Project CHERISH is a partnership between the Israel Center for Treatment of Psychological Trauma of Herzog Hospital in Israel, the Center for Development in Primary Health Care at Al Quds University in East Jerusalem, and the JDC-Middle East Program. This multidisciplinary project focuses on psychological and social rehabilitation of Israeli and Palestinian children exposed to violence. It addresses two target groups – the professional community and children and their families. Since its establishment in November 2002, Project CHERISH has developed a circle of more than fifty Palestinian and Israeli health professionals who have participated in its various forums, workshops and activities. In 2006-2007, Project CHERISH trained over forty Palestinian and Israeli social workers and school counselors in cognitive behavioral therapy for children suffering from psychological trauma. The project's goal is to increase awareness of the symptoms of psychological trauma in children and to streamline procedures for children and their families to access treatment.

Project Partners: JDC-Middle East Program, Israel; Israel Center for Treatment of Psycho-trauma of Herzog Hospital, Israel; Center for Development in Primary Health Care, Al-Quds University, East Jerusalem

Website: <http://www.projectcherish.org/index.php>

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- Dr. Danny Brom - Director, Israel Center for Treatment of Psychotrauma, Herzog Hospital and Director, Israel Trauma Coalition
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Coexistence Through Medicine – Emek Medical Center

Mission and Goals: Over the past several years, Emek Medical Center in Afula, Israel, has hosted seminars for healthcare and hospital officials from the Palestinian territories. Attendees participated in a day-long series of medical lectures in Arabic and Hebrew presented by members of Emek's multi-ethnic staff.

Project Partners: Emek Medical Center, Israel; Palestinian health professionals and hospital officials

Website: <http://www.clalit.org.il/haemek/Content/Content.asp?CID=122&u=352>

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Coping with Breast Cancer among Palestinian and Israeli Women (Project COPE)

Mission and Goals: The mission of Project COPE is to address the needs of Israeli and Palestinian breast cancer patients and improve the skills of healthcare professionals to

diagnose and treat the disease in the region. The project ran from 2000-2006, and included joint Palestinian and Israeli meetings of breast cancer survivors, healthcare professional meetings, and training courses. Between 2000 and 2003, forty breast cancer survivors and fifty health professionals participated in twenty-five educational events. This project established a network of volunteers to advise women recently diagnosed with breast cancer, as well as created a breast cancer information and support hotline. Israeli and Palestinian participants also traveled together to attend international conferences, gaining skills and sharing their experiences with the global community.

Project Partners: JDC-Middle East, Israel; Israel Association for the Advancement of Women's Health (IAAWH); the Patient's Friends Society (PFS), Jerusalem; the Israel Cancer Association (ICA); Augusta Victoria Hospital, East Jerusalem

Website: <http://brookdale-en1.pionet.com/files/Project-COPE-Breast-Cancer.pdf>

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Delivery Systems for Substance Abuse Treatment: An International Conference

Mission and Goals: In September 2005, prominent substance abuse experts from Israel, the Palestinian Authority, and twenty-three countries gathered in Istanbul, Turkey to share information on the public health problem of substance abuse, promoting regional cooperation on substance abuse issues, and discussing the integration of substance abuse treatment services with primary care, mental health, and social service systems. Countries in attendance included Iraq, Iran, Israel, Palestine, Afghanistan, Russia, and the United States. The conference included presentations on diagnosing substance use and providing services for people with addictive disorders. The conference also addressed the benefits and limits of integrating substance abuse treatment within the health, social, and criminal justice systems. Based on the evaluations and follow-up to the meeting, many of the participants pursued professional cooperation based on discussions and contacts made at the conference.

Project Partners: Substance abuse experts from 23 different countries; UCLA Integrated Substance Abuse Programs, United States; World Health Organization; United Nations Office on Drugs and Crime

Website: <http://www.uclaisap.org/dssat2005/index.html>

Key Contacts:

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Dermatology for Peace

Mission and Goals: The Dermatology for Peace program, established by Hadassah Medical Organization, provides training opportunities for Palestinian physicians interested in the field of dermatology. Faculty at Hadassah Medical Center met with Palestinian dermatologists in Nablus and hosted these health care specialists at the Dermatology Department of Hadassah Hospital. A number of collaborative projects have been agreed upon, including a postgraduate training course for Palestinian dermatologists, monthly consultations rotating between Nablus and Jerusalem, and a series of symposia on dermatological issues featuring invited speakers from around the world. The program was established by Professor David Enk, a senior dermatologist at Hadassah Medical Organization.

Project Partners: Hadassah Medical Organization, Israel; Palestinian dermatologists, West Bank

Website: <http://www.hadassahinternational.org/news/article.asp?id=961>

Key Contacts:

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Empowering Communities through Home Safety (ECHOS)

Mission and Goals: Through the ECHOS project, JDC-Middle East and its collaborators are working to create community “agents of change” to educate policymakers that accidents are the leading cause of injury and death among children worldwide and to empower parents in creating safe environments for their children. The project is being carried out in partnership with the Patient's Friends Society - Jerusalem, the Jerusalem Princess Basma Center, and Beterem – Israel Center for Children's Safety and Health. The goal of the initiative is to engage community "agents of change" around the issue of home safety and to develop culturally appropriate materials. In 2007, a survey of home unintentional injuries was carried out in clinics in both communities. The findings are being used by the partner organizations to target safety education initiatives and will be presented in international forums and through a joint report.

Project Partners: JDC-Middle East, Israel; Patient's Friends Society – Jerusalem, Israel; Jerusalem Princess Basma Center, Israel; Beterem – Israel Center for Children's Safety and Health, Israel

Website: http://www.jdc.org/nonsect_currresp_mideast.html

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Empowerment and Resilience in Children Everywhere (ERICE)

Mission and Goals: Founded in 2004, ERICE has brought together child mental health professionals from Israel, the West Bank and Gaza to discuss how best to work together to improve the lives of children in the region. The first meeting was held in 2004 in Jerusalem, and the group continues to convene in the region and in Europe. ERICE is affiliated with a number of leading Israeli, Palestinian, Italian and American Universities. Six pilot programs have been partially funded: "Assessing Post-Traumatic Distress in Infants and Young Children: A Multi-Dimensional Approach", "Children in War: A Look at the Inner World of Palestinian and Israeli Children via their Dreams", "The Development of an Evidence Guided Approach to Child Mental Health in Arab Populations in Palestine and Israel", "An Evaluation of Special Education Programs for Palestinian and Israeli Children", "Pilot Surveillance of PTSD among Children in Israel and the Palestinian Authority", and "Enhancing the Psychosocial Health and Empowering the School Age Children in Gaza." The next round of grant requests will support capacity building projects that involve both Israeli and Palestinian professionals focused on positively impacting the lives of Palestinian and Israeli children. The work has been supported by the Fondazione per lo Studio e la Ricerca sull'Infanzia e l'Adolescenza, the Italian Government, the International Association for Child and Adolescent Psychiatry and Allied Disciplines. Thus far, the project has also secured external funding from the National Alliance for Research on Schizophrenia and Depression and the United States-Israel Bi-national Science Foundation.

Project Partners: Yale University, United States; Al-Quds University, East Jerusalem; Tel Aviv University, Israel; Hadassah Medical Organization/Hebrew University, Israel; Bar-Ilan University, Israel; University of Rome, Italy

Website: <http://studentpages.scad.edu/~rstern20/erice/index.html>

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Genetic Research Collaboration

Mission and Goals: Beginning in the late 1990s under the auspices of the Canada International Scientific Exchange Program's (CISEPO's) Middle East Association for Managing Hearing Loss (MEHA) initiative, Professor Moien Kanaan of Bethlehem University and Professor Karen Avraham of Tel Aviv University began collaborating on genetics research. Along with researchers at the University of Washington, they have been investigating the genes behind inherited deafness. These have received funding from the National Institutes of Health and other organizations to conduct research and sponsor Palestinians scientists to study at Tel Aviv University. A graduate research program has been established to enable Palestinian students to pursue post-graduate research in this field at Tel-Aviv University.

Project Partners: Tel Aviv University, Israel; Bethlehem University, West Bank; University of Washington, United States

Website: <http://www.bethlehem.edu/centers/hrl.shtml> and
<http://www.tau.ac.il/~karena/>

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The Hadassah Hospital - Augusta Victoria Hospital Exchange Program

Mission and Goals: The Augusta Victoria Hospital in East Jerusalem has established a Cancer Center to serve patients from the West Bank and Gaza. This Center includes basic radiation and chemotherapy services. The Hadassah Hospital has committed to help train staff and provide physicist expertise to ensure the delivery of quality oncology services at the Augusta Victoria Hospital. Furthermore, Hadassah's Department of Oncology provides treatment for complicated patient cases whose care requires specialized services that are not available at the Augusta Victoria Hospital. This cooperative program has helped foster

mutual understanding between Israelis and Palestinians as well as the development of a much needed cancer program to serve the Palestinian population of the West Bank and Gaza.

Project Partners: Augusta Victoria Hospital, East Jerusalem; Hadassah Medical Organization, Israel

Website: <http://www.jmeduk.org/portal/articles/30/1/Hadassah-And-The-Palestinian-Authority/Page1.html>

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Hadassah Medical Organization - Advanced Resuscitation Training

Mission and Goals: This two-weeks summer school education and social program has taken place annually over the past three years. The course is conducted in English and is intended for select 14-18 year-old high school students from Palestine, Israel, Palestine, Jordan and other countries in the Middle East. The course is convened at different locations in the region and allows students to learn from some of the world's leading cardiologists and educators.

Project Partners: Hadassah Medical Organization, Israel

Website: <http://www.hadassahuk.org/why.asp?IntID=147>

Key Contacts:

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The Hadassah-St. John Eye Hospital Human Resources Development Program in Ophthalmology

Mission and Goals: This project, dedicated to exchanging ophthalmic knowledge and resources between Palestinian and Israeli hospitals and health professionals, represents a unique opportunity to raise the standard of care in both communities while simultaneously harnessing medicine in the service of peace. The program involves joint specialist clinics at St. John Eye Hospital, a combined residency program at St. John Eye Hospital and the

Hadassah Department of Ophthalmology, and joint specialist clinics at Hadassah for patients who have been referred from St. John's Hospital.

Project Partners: St. John Eye Hospital, East Jerusalem; Hadassah Medical Organization, Israel

Website: http://www.stjohnseyehospital.org/content_subsection.asp?id=60&catid=23

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Email: meddir@sjeh.org

Healing Across the Divides – Breast Cancer Project

Mission and Goals: Partially funded by Healing Across the Divides, an NGO, and implemented by Physicians for Human Rights – Israel and the Union of Palestinian Medical Relief Committees, the Breast Cancer Project is working to increase awareness and promote screening and treatment for breast cancer in Israeli and Palestinian women. The objectives of this project are to enhance breast cancer self-awareness among high risk women, improve breast self-examination rates, increase the utilization of mammography, and improve self-esteem in the participants.

Project Partners: Healing Across the Divides, United States; Physicians for Human Rights, Israel; the Union of Palestinian Medical Relief Committees, Palestinian Territories

Website: <http://www.healingdivides.org/pages/breastCancer.htm>

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Healing Across the Divides - Diabetes and Hypertension Monitoring and Treatment System in Disadvantaged Israeli and Palestinian Communities

Mission and Goals: Sponsored by the Healing Across the Divides, a non-governmental organization, this project seeks to improve access to care and promote self-empowerment in Palestinian and Israeli patients with diabetes. This initiative represents a partnership between Healing Across the Divides, the Union of Palestinian Medical Relief Committees and The Galilee Society, a Palestinian non-partisan NGO operating in Israel. The project objectives are to establish a trilateral steering committee to oversee the development and

operation of a diabetes and hypertension monitoring system, develop and implement treatment protocols, train local project leaders in health promotion/self-management techniques, and establish a system for monitoring hospital admissions related to diabetes and hypertension cases. The project encourages interaction between Israeli, Palestinian, and American health professionals and exposes US organizations to the health issues faced by disadvantaged Israeli and Palestinian communities.

Project Partners: Healing Across the Divides, United States; Union of Palestinian Medical Relief Committees, Palestinian Territories; The Galilee Society – The Arab National Society for Health Research and Services, Israel

Website: <http://www.healingdivides.org/pages/projects.htm>

Key Contact:

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Holy Land Medical Project

Mission and Goals: The Holy Land Medical Project is a partnership of the Rotarian Medical Aid Charity in the United Kingdom called Saving Lives and the Universal Peace Federation's Middle East Peace Initiative. The founder of Saving Lives and several doctors and officials from Birmingham Children's Hospital in the United Kingdom have visited Israel and Palestine to meet with officials and identify areas for collaboration. The program has the support of several Palestinian and Israeli health professionals and leaders, including the staff at Caritas Baby Hospital in Bethlehem and several staff members at Hadassah Medical Organization in Jerusalem. Thus far, Birmingham Children's Hospital has agreed to support pediatric training, equipment needs and telemedicine support for Caritas Baby Hospital. The program is also exploring establishing medical training centers in the West Bank and a local committee of Israeli and Palestinian medical professionals to oversee the delivery of services.

Project Partners: Saving Lives, United Kingdom; Universal Peace Federation's Middle East Peace Initiative, Europe; Birmingham Children's Hospital, United Kingdom; Hadassah Medical Organization, Israel; Caritas Baby Hospital; West Bank; Hebron Government Hospital; West Bank

Website: <http://www.upf-deutschland.de/upfnews/medicalproject.htm>

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International Congress on Chronic Disorders in Children

Mission and Goals: Convened in April 2007, this conference brought together 300 Israeli and 100 Palestinian doctors and other health professionals to discuss the treatment and prevention of pediatric chronic diseases including asthma, diabetes and genetic disorders. The conference also marked the opening of Israel's first comprehensive center for the treatment of pediatric chronic diseases at Hadassah Hospital – Mt. Scopus. Four more annual conferences on chronic disease in children are planned.

Project Partners: Hadassah Medical Organization, Israel; Shalva, the Jerusalem Center for Mentally and Physically Challenged Children, Israel

Website: <http://ima.org.il/wf/atg/atg-jun-07/atg6591.pdf>

Key Contact:

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International Network of Knowledge through Electronic Learning

Mission and Goals: Created in 2005, the International Network of Knowledge through Electronic Learning is an education and distance learning system managed by the Peter A. Silverman Global eHealth Program at the Center for International Health at Mount Sinai Hospital, in Toronto, Canada. Telehealth rounds are delivered in real time in Canada and the Middle East on topics that include the diagnosis and current treatment of some of the most devastating neurological and psychiatric conditions afflicting aging adults, such as Alzheimer's Disease, depression, and Parkinson's disease. Medical experts and community health professionals, residents and students view the same patient cases and then engage in discussion, exchanging ideas and expert opinions.

Project Partners: The Peter A. Silverman Centre for International Health at Mount Sinai Hospital, Canada; Canada International Scientific Exchange Program (CISEPO), Canada; The Baycrest Center, Toronto, Canada; Department of Public Health Sciences at the University of Toronto, Canada; Edith Wolfson Medical Center, Israel; Tel Aviv University, Israel; Jordan University of Science and Technology; Al Quds University, East Jerusalem

Website:

http://www.baycrest.org/News_and_Media/News_Releases_2005/default_8832.asp

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Israeli-Palestinian Science Organization (IPSO)

Mission and Goals: The Israeli-Palestinian Science Organization (IPSO) is a non-political, not-for-profit organization based in Jerusalem. IPSO is dedicated to fostering and sustaining cooperation between Israelis and Palestinians to promote dialogue and interaction among scholars and scientists in the region. The organization's mission is to identify areas of science where cooperation between Israelis and Palestinians is feasible and productive, to build a science and scholarship-based bridge of good will, to create an environment for Israeli and Palestinian scholars and scientists to meet and establish dialogue, and to support joint scholarly and scientific projects through funding and administrative assistance. In 2004-2006, IPSO received over 100 proposals for collaborative work in the medical and environmental fields.

Project Partners: Israeli and Palestinian scientists and universities

Website: <http://www.ipso-jerusalem.org/>

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Master of Public Health Degree Program at the Braun School of Public Health, Hebrew University

Mission and Goals: Each year physicians, nurses and health administrators from the Palestinian Authority participate in a full time course organized by the Braun School of Public Health and Community Medicine at Hebrew University. Students who complete the training receive a Masters in Public Health (MPH) degree.

Project Partners: Hebrew University of Jerusalem, Israel; Hadassah Medical Organization, Israel

Website: <http://publichealth.huji.ac.il/eng/programs.asp?cat=100&in=0>

Key Contacts:

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Medilink - Training Palestinian Doctors in Israel

Mission and Goals: The objective of this program is to strengthen the Palestinian medical system by providing fellowships and training programs for Palestinian doctors in Israeli hospitals, thereby enhancing the services available through the Palestinian medical system and nurturing Palestinian-Israeli relationships. Over seventy Palestinian doctors have participated in this initiative so far, undertaking fellowships in Israeli hospitals in a wide variety of fields. Some specific training programs include Peace in Sight, a three year initiative to train Palestinian ophthalmologists, carried out in partnership with St. John Eye Hospital and Hadassah Medical Center and supported by the US State Department; and Bridging the Gap, a two year program of monthly meetings for Palestinian and Israeli pediatricians, carried out in partnership with Makassed Islamic Hospital, Augusta Victoria Hospital, Palestinian Red Crescent Society Hospital in Gaza City and the Pediatric Department of Hadassah Mt. Scopus Medical Center.

Project Partners: Peres Center for Peace, Israel; St. John Eye Hospital, East Jerusalem; Hadassah Medical Organization, Israel; Makassed Islamic Hospital, East Jerusalem; Augusta Victoria Hospital, East Jerusalem; Palestinian Red Crescent Society Hospital, Gaza City

Website: <http://www.peres-center.org/SectionProject.asp?cc=01140202>

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Memorandum of Understanding to Facilitate Cooperative Efforts in Public Health

Mission and Goals: Four institutions located in Israel, the Palestinian Authority, and the United States, signed a memorandum of understanding to facilitate cooperative efforts in public health. Participating in this initiative are three schools of public health - Braun School of Public Health of Hebrew University and Hadassah, Al-Quds School of Public Health, Rollins School of Public Health of Emory University, as well as the U.S. Centers for Disease Control and Prevention (CDC). The project recently obtained funding from the United States-Israel Bi-national Science Foundation to hold a workshop in January 2009 in Jerusalem as one component of a series of initiatives that will occur to implement the memorandum. Additional funding has been obtained from Hebrew University and Emory University. At the January 2009 meeting, teams from the four partner institutions, in addition to other invited participants, will discuss opportunities and develop research and programmatic proposals for funding in four thematic areas: (a) Non-infectious diseases and lifestyle; (b) Environmental health; (c) Reproductive health; and, (d) Health promotion and education. The initiative is now in the preparatory phase in which the four thematic groups moderated by Palestinian and Israeli researchers are working through the web to discuss ideas and prepare working documents. In addition, these researchers are developing a programmatic proposal to be submitted for funding to private donors as well as developing a proposal on family planning and contraceptives.

Project Partners: Braun School of Public Health of Hebrew University and Hadassah Medical Organization, Israel; Al-Quds School of Public Health, East Jerusalem; Rollins School of Public Health of Emory University, United States; Centers for Disease Control and Prevention, United States

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Middle East Association for Managing Hearing Loss (MEHA)

Mission and Goals: Facilitated by the Canada International Scientific Exchange Program (CISEPO), this initiative was established in May 1998 as the first joint Arab and Israeli professional association. As of 2005, six meetings of the MEHA steering committee have been held in the region. Through this program almost 17,000 Arab and Israeli newborns were tested for hearing loss between April 2001 to June 2004, and over 300 Canadian hearing aids have been distributed to infants in the region.

Project Partners: Canada International Scientific Exchange Program (CISEPO), Canada; University of Toronto, Canada; Al-Quds University, East Jerusalem; Jordan University of Science and Technology; Edith Wolfson Medical Center, Israel; Tel Aviv University, Israel; and other Palestinian and Israeli health institutions

Website: <http://128.100.113.105/Project1.html>

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Middle East Association for Mother and Child Health (MEMCHA)

Mission and Goals: MEMCHA's vision is to deliver quality medical and public health care for women and children in the Middle East through the cooperative efforts of Israeli, Palestinian and Jordanian professionals, institutions and non-governmental organizations.

Project Partners: Canada International Scientific Exchange Program (CISEPO), Canada; University of Toronto, Canada; Al-Quds University, East Jerusalem; Jordan University of Science and Technology; Edith Wolfson Medical Center, Israel; Tel Aviv University, Israel; and other Palestinian and Israeli health institutions

Website: <http://128.100.113.105/MEMCHA.html>

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Middle East Cancer Consortium (MECC)

Mission and Goals: The Middle East Cancer Consortium (MECC) was established in 1996 through an official agreement of the Ministries of Health of Israel, the Palestinian Authority, Cyprus, Egypt, Israel, and Jordan. (Turkey joined in 2004). The agreement was witnessed by the United States Secretary of Health and Human Services and the Director of the National Cancer Institute. The goal of the MECC is to raise cancer awareness in the Middle East and, ultimately, to reduce the burden of cancer in the region through the solicitation and support of collaborative research. Two specific projects include the establishment of population-based cancer registries in all six jurisdictions and the development of a collaborative research grants program. Many important collaborations have been carried out between Israeli and Palestinian researchers and physicians under the MECC small grants program. Additionally, numerous productive conferences and workshops have been conducted involving researchers and health professionals from the Middle East and United States.

Project Partners: Health Ministries of Israel, the Palestinian Authority, Cyprus, Egypt, Jordan, Turkey, and the United States

Website: <http://mecc.cancer.gov>

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Middle East Consortium on Infectious Disease Surveillance (MECIDS)

Mission and Goals: In 2003, an international partnership of two non-governmental organizations, Search for Common Ground (<http://www.sfcg.org/>) and the Nuclear Threat Initiative (<http://www.ghsi.org/about/index.html>), began facilitating regional cooperation in public health. They established the Middle East Consortium on Infectious Disease Surveillance, in which the Ministries of Health in Israel, the Palestinian Authority, and Jordan share data on food-borne disease outbreaks and other infectious disease concerns. The Egyptian Ministry of Health has also participated in this project. As part of the initiative, joint training courses have been convened on interventional epidemiology and on laboratory technologies for evaluating infectious diseases, further promoting collaboration in the region. With the support of IBM, a project is underway to develop innovative software for a data-sharing network for the MECIDS partners. MECIDS will strengthen the ability to detect, characterize, and analyze infectious diseases in the participating nations, creating a new mechanism for sharing medical information across borders.

Project Partners: Al Quds University, East Jerusalem; Cooperative Monitoring Center, Amman, Jordan; European Program on Interventional Epidemiology Training; Health Ministries of Israel, Jordan, and the Palestinian Authority; Sandia National Laboratories, United States; Search for Common Ground, United States; Tel Aviv University, Israel; Nuclear Threat Initiative's Global Health and Security Initiative, Washington, D.C., United States; World Health Organization

Website: <http://www.ghsi.org/projects/mecids.html>

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The Middle East Regional Cooperation Program (MERC), USAID

Mission and Goals: The U.S. Agency for International Development MERC Program funds collaborative research projects in the areas of agriculture, health, environment, economics, and engineering between Israel and its Arab neighbors. In general, MERC grants focus on research rather than institution building, with a developmental impact (economic, environmental, policy, etc.) expected in the near rather than distant future. MERC has two primary goals: promoting research for development and improving cooperation in the region. Established as a result of the Camp David Peace Accords to promote Arab-Israeli cooperation, it has expanded beyond its original participants, Egypt and Israel, to include many institutions throughout the region. To date, the program has also funded activities with participation from Jordan, Morocco, West Bank/Gaza, Lebanon, and Tunisia. MERC grants are funded at a level below \$1,000,000 (usually over a 3-5 year period) and pre-proposals are required.

Project Partners: Arab and Israeli institutions that develop and submit joint research proposals

Website: http://www7.nationalacademies.org/dsc/USAID_MERC_Program.html;
<http://usembassy-amman.org/jo/enviro/merc1.html>

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Middle East Symposium on Dental Medicine

Mission and Goals: This symposium on dental implants was held during the winter of 2006-2007. Al-Quds University Faculty of Dentistry and Hebrew University-Hadassah School of Dental Medicine signed an agreement to promote collaboration between academic faculty and students in research, teaching and clinical work. The symposium was conducted under the auspices of the Walter Cohen Middle East Center for Dental Studies at the Hebrew University-Hadassah School of Dental Medicine and also included Case Western Reserve, Drexel, Harvard, and the University of Pennsylvania in the United States and Hacettepe University in Turkey. Additionally, the Walter D. Cohen Middle East Center for Dental Studies offers a six-week course for dentists from the Palestinian Authority, Jordan and other countries in the Middle East. This program began in 1998 with the participation of eight dentists, two each from Palestine, Jordan, Turkey, and Cyprus. Last year, eleven participants participated, and in 2008, a course was held for six students. Another symposium is being planned for later this year.

Project Partners: Walter D. Cohen Middle East Center for Dental Studies, Israel; Al-Quds University Faculty of Dentistry, East Jerusalem; Case Western Reserve University, United States; Drexel University, United States; Harvard University, United States; University of Pennsylvania, United States; Hacettepe University, Turkey

For more information: <http://www.nature.com/bdj/journal/v202/n1/full/bdj.2007.6.html>

Key Contacts:

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- Dr. Musa Bajali - Dean, Al-Quds University Faculty of Dentistry
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Phone: 972-2-295-9490

The Mother and Child Fellowship Program at Hebrew University-Hadassah Medical Organization

Mission and Goals: A course for physicians from the Palestinian Authority is held in the field of maternal-child health issues at the School of Public Health and Community Medicine at Hebrew University-Hadassah Medical Organization.

Project Partners: Hadassah Medical Organization, Israel

Website: <http://www.jmeduk.org/portal/articles/30/1/Hadassah-And-The-Palestinian-Authority/Page1.html>

Key Contact:

- Ron Krumer - Director of External Affairs, Hadassah Medical Organization
Email: ron@hadassah.org.il

Palestinian-Israel Mental Health Students Working Group

Mission and Goals: In January 2007, the Peres Center for Peace, working with the Gaza Community Mental Health Program and Ossim Shalom – Social Workers for Peace, conducted a workshop for Palestinian and Israeli students who were studying mental health. The participants came from Israel and the Gaza strip. The workshop focused on the connection between mind and body in reaction to trauma and treatment techniques developed by the Center for Mind-Body-Medicine in Washington DC. Participants also were involved in group building activities and toured Jerusalem together. A second gathering was held in February 2007 for students studying social work, psychology and related fields.

Project Partners: Peres Center for Peace, Israel: Gaza Community Mental Health Program, Gaza Strip; Ossim Shalom – Social Workers for Peace, Israel

Website: <http://peres-center.org/SectionProject.asp?cc=0111020404>

Key Contact:

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Palliative Care Initiative

Mission and Goals: In cooperation with the Middle East Cancer Consortium, JDC-Middle East is planning regional training and research activities in the field of palliative care. The training program is focusing on the development of skills for medical professionals working with end-of-life patient cases. This research program is concentrating on understanding and addressing the needs of health professionals to better support end-of-life care for their patients. The Middle East Program is investigating opportunities to expand partnerships with health professionals in Jordan as well.

Project Partners: JDC-Middle East Program, Israel; Middle East Cancer Consortium

Website: <http://brookdale.jdc.org.il/default.asp?catid=%7BE6974578-E2BC-4A1E-955D-5104048B4ABC%7D>

Key Contact:

- Randi Garber – Director, JDC – Middle East Program
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Phone: 972-2-655-7516

Partnership on Specialist Graduate Training for Physicians

Mission and Goals: Initiated in 1987, this training program at Hadassah Hospital allows physicians completing a two-year full-time specialist training course to receive a diploma that will allow them to provide medical care in their home towns and villages in Palestine. Physicians who have completed this program often return Hadassah Hospital to participate in weekly meetings, receive medical consultations on their patients if needed, and in some instances, continue to operate at Hadassah Medical Organization from time to time. About 5-7 physicians from the West Bank participate in this program annually. Approximately thirty physicians have completed this specialty training program. The specialist training that these Palestinian physicians have received at Hadassah has made a major contribution to the advancement of medical care in the West Bank and Gaza and to the availability of medical specialist care that was not available in this region before, such as dermatology, endocrinology, hematology, radiology, anesthesiology and neurosurgery. For example, a doctor who specialized in neurosurgery at Hadassah is now the Head of Neurosurgery at Beit Jallah Hospital and a physician who received specialist training in neurology at Hadassah Hospital is now one of the most prominent neurologists in the West Bank and is also on the staff of the Beit Jallah Hospital located near Bethlehem.

Project Partners: Hadassah Medical Organization, Israel; Palestinian health professionals

Website: add hyperlink <http://www.jmeduk.org/portal/articles/30/1/Hadassah-And-The-Palestinian-Authority/Page1.html>

Key Contact:

- Ron Krumer - Director of External Affairs, Hadassah Medical Organization
Email: ron@hadassah.org.il

Peace of Mind Initiative – Peres Center for Peace

Mission and Goals: To promote cooperation between the Palestinian and Israeli mental health sectors, and to encourage the exchange of knowledge and expertise, the Civil Society Cooperation and Dialogue Unit of the Peres Center for Peace created the "Peace of Mind" initiative in 2004. This project brings together Palestinian and Israeli mental health professionals (psychologists, psychiatrists, social workers, educational consultants and others) through working groups activities led by joint professional teams that address relevant clinical topics. The Japanese Government has helped sponsor two working groups, titled "Socio-Emotional Development of Infants and Toddlers" (2004-2006), and investigating "Community Intervention in Times of Crisis" (2005). In addition to the working group activities, the Peres Center recently held a public meeting entitled "Dealing with Trauma: The Role of Mental Health Professionals in Conflict Societies, the Israeli-Palestinian Case" (2006).

Project Partners: Peres Center for Peace, Israel; Japanese government; Palestinian and Israeli Mental Health Professionals

Website: <http://peres-center.org/SectionProject.asp?cc=01110202>

Key Contact:

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Pediatric Hemato-Oncology Unit – A Partnership of Augusta Victoria Hospital and Hadassah Medical Organization

Mission and Goals: This initiative supports the strengthening of a Pediatric Oncology Center for the diagnosis and treatment of cancer in children at Augusta Victoria Hospital in East Jerusalem, in collaboration with the Department of Pediatric Hematology-Oncology at Hadassah Medical Organization in Israel. The program includes an intensive training program in specialized care for clinical and supportive teams and services, an acquisition program for equipment and supplies to establish a point-to-point broadband telemedicine network to enable the support team at the Hadassah Medical Center to provide medical consultations to the Palestinian Hemato-Oncology team at Augusta Victoria Hospital. Assistance is also being provided for the physical refurbishment of the Pediatric Department at Augusta Victoria Hospital. Fifteen Palestinian doctors and medical personnel completed a 2-year training program in Israeli hospitals.

Project Partners: Peres Center for Peace, Israel; Augusta Victoria Hospital, East Jerusalem; Hadassah Medical Organization, Israel

Website: <http://www.peres-center.org/SectionProject.asp?cc=01140203>

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Pediatric Rehabilitation Forum

Mission and Goals: The goal of the Pediatric Rehabilitation Forum is to bring together Palestinian and Israeli professionals in the developmental disabilities field (physiotherapists, occupational therapists and speech and language pathologists) to share information on current developments and discuss practical and culturally sensitive ways to

meet the special needs of children with developmental disabilities and their families. Israeli and Palestinian physical, speech and occupational therapists meet on a regular basis to review the latest developments in the field and discuss their application to the children they work with. In 2008, the Forum will begin supporting plans to research to evaluate the effectiveness of a parent-centered intervention to improve the participation of school-aged children in the region with cerebral palsy in the program.

Project Partners: JDC-Middle East Program, Israel

Website: <http://brookdale.jdc.org.il/default.asp?catid=%7BE6974578-E2BC-4A1E-955D-5104048B4ABC%7D>

Key Contact:

- Randi Garber – Director, JDC – Middle East Program
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Save A Child's Heart – Heart of the Matter Project

Mission and Goals: Save a Child's Heart (SACH) provides pediatric heart surgery and follow-up care for children from developing countries. The organization operates out of the Edith Wolfson Medical Center in a suburb of Tel Aviv, Israel. Since its founding 13 years ago, SACH has provided open-heart lifesaving surgery to over 1900 children from developing countries, including 900 children from the Palestinian Authority. Over the past four years, Save a Child's Heart has been conducting the Heart of the Matter project, which provides cardiac treatment for Palestinian children and offers capacity building for Palestinian physicians through an outreach training program in pediatric cardiac care. Under this project, over 800 Palestinian children have been examined at the cardiology clinic, and over 400 have received open-heart surgery. SACH has also provided in-depth post-graduate training in pediatric cardiac care for six Palestinian physicians in pediatric cardiology, anesthesiology and prenatal diagnosis, and coordinated joint medical conferences and seminars between physicians from the Palestinian Authority, Israel and the international medical community. The Israeli and Palestinian cardiologists examine children on a daily basis both in Israel and the Palestinian Authority, conduct joint consultations on the children's cases and when needed, the Palestinian children are referred for treatment at the Edith Wolfson Medical Center. SACH also conducted surveys and published two reports assessing the effect of the SACH activities on the attitudes of Palestinian and Israeli parents of children hospitalized during the program towards the members of each other's communities, as well as the level of cooperation and communication between Palestinian and Israeli physicians participating in the program.

Project Partners: Edith Wolfson Medical Center, Israel; West Bank and Gaza Hospitals

Website: <http://www.saveachildsheart.com/home1.html>

Key Contact:

- Simon Fischer, JD - Executive Director, Save a Child's Heart Foundation
Email: director@saveachildsheart.org
Phone: 972-3-558-9656

Saving Children Project

Mission and Goals: The "Saving Children" project was launched in 2003 to facilitate the referral of Palestinian infants and children to Israeli hospitals for complex case and diagnostic evaluations and surgical procedures, when such services are unavailable in the Palestinian Authority. The Peres Center facilitates logistical arrangements and covers the cost of the procedures for these children. The project is based on an extensive referral network of Palestinian pediatricians, who review, prioritize, and refer the cases accordingly. One specific aspect of the program pertains to children with severe hearing impairments who require cochlear implants (CI). As part of the program, Palestinian speech therapists as well as ear, nose and throat physicians are being trained in audiometry and advanced ears, nose, and throat (ENT) surgical procedures.

Project Partners: Peres Center for Peace, Israel; Hadassah Medical Organization, Israel; Al-Haadah Women's Association Center, Ramallah; Augusta Victoria Hospital, East Jerusalem; Micha Jerusalem Organization, Israel; Sheba Medical Center, Israel

Website: <http://www.peres-center.org/SectionProject.asp?cc=01140201>

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Educational Component of the Saving Children Project

Mission and Goals: To enhance the skills of Palestinian and Israeli pediatricians, the Saving Children Project has facilitated a number of conferences that engage Palestinian, Israeli and Italian pediatricians, providing a forum for the exchange of knowledge and expertise. Since 2005, two conferences have been facilitated each year in Israel, the West Bank or Italy. Past conference topics include Advanced Pediatric Life Support training at Augusta Victoria Hospital in East Jerusalem and a two day meeting on pediatric cardiology and cardiac surgery. Physicians participating in "Saving Children" also attended the 2007 International Conference on Chronic Disorders in Children organized by the Pediatric Department at Hadassah Medical Organization.

Website: <http://www.peres-center.org/SectionProject.asp?cc=0114020101>

Key Contacts:

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Slim Peace Groups

Mission and Goals: In February 2006, Director Yael Luttwak filmed a documentary entitled "A Slim Peace" that tells the story of American settlers, Palestinians, Israelis and Bedouins who participated in a weekly nutrition and weight loss group facilitated by both a Palestinian and Israeli dietician. In response to the film, the United Kingdom Foundation, Charities Advisory Trust, funded Slim Peace Nutrition and Weight Loss groups, led by the Head of Nutrition at Hadassah Hospital and a Palestinian nutrition expert. The groups were established in October 2007.

Project Partners: Hadassah Medical Organization, Israel; A Slim Peace Ltd

Website: <http://homepage.ntlworld.com/discodog/slimpeace/html/groups.html>

Key Contacts:

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- Yael Luttwak – Director, *A Slim Peace*
Email: yaelluttwak@hotmail.com

Student Summer Cooperative Program – Canada International Scientific Exchange Program (CISPO)

Mission and Goals: The CISEPO student summer elective brings Israeli, Palestinian, Jordanian and Canadian medical students and PhD candidates together to study international child nutrition issues at the Hospital for Sick Children at the University of Toronto. This summer student cooperative program, which began in June 2003 (2003 focusing on pediatric cancer, 2004 focusing on genetic hearing loss), is a component of CISEPO's mission in the Middle East to build trust and confidence across the Arab and Israeli divide by working with the next generation of community and health leaders. As the students work and live together, the bridges of human understanding developing from this experience in the common ground of the health sector is forging lasting people-to-people links across borders. The ultimate objective is for the returning students to foster a wider network of knowledge and cooperation among their colleagues using the CISEPO model.

Project Partners: Canada International Scientific Exchange Program (CISEPO), Israel; University of Toronto, Canada; Al-Quds University, East Jerusalem; Jordan University of

Science and Technology; Edith Wolfson Medical Center, Israel; Tel Aviv University, Israeli; Other Palestinian and Israeli health institutions

Website: http://128.100.113.105/Student_Projs.html

Key Contact:

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Email: arnold.noyek@utoronto.ca
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Trauma Care Training Course – A Partnership of the Palestinian Red Crescent Society and Hadassah Medical Organization

Mission and Goals: The Palestinian Red Crescent Society (PRCS) and the Hadassah Medical Organization have been working together to improve trauma care in the region. The major joint activity has been two trauma courses, organized and presented by Hadassah Medical Organization. The objectives of the course are: to improve trauma care in the region; to improve communication between the PRCS workers and the staff of the Hadassah Trauma Unit and to promote cooperation in their joint work by getting to know each other as people. The trauma courses were taught in Arabic and English – the first of which was attended by 18 people from the West Bank; the second was attended by 23 students from Gaza and the West Bank. The courses included three weeks of lectures, demonstrations, and on-site visits as well as one week of experience in related clinical areas including the operating room, the emergency room, the trauma unit, orthopedics, neurosurgery, the recovery room, and the respiratory and pediatric intensive care units. The course, originally designed for nurses, paramedics and ambulance drivers, has been extended to physicians. A specifically designed course for physicians is planned.

Project Partners: Hadassah Medical Organization, Israel; Palestinian Red Crescent Society, West Bank and Gaza

Key Contact:

- Ron Krumer - Director of External Affairs, Hadassah Medical Organization
Email: ron@hadassah.org.il

Umbilical Cord Blood Banking

Mission and Goals: Developed in partnership with Magen David Adom and the Palestinian Red Crescent Society, this initiative provides Palestinians with the opportunity to share in the benefits of cord blood banking. This contribution to local and international umbilical cord blood banks may be used for procedures such as bone marrow transplantation in the future. Relatively little HLA (Human Leukocyte Antigen – tissue type matching for transplant purposes) data is available from the Arab world, and thus the work of this initiative may enhance the

survival chances of Palestinian children with leukemia and other major blood disorders. Palestinian hospital nurses and midwives have undergone training on the extraction process both in an Israeli hospital as well as in Palestine, with Israeli hematologists and nurses.

Project Partners: Peres Center for Peace, Israel; Magen David Adom, Israel; Palestinian Red Crescent Society, West Bank and Gaza

Website: <http://www.peres-center.org/SectionProject.asp?cc=01140204>

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Youth Voices Middle East

Mission and Goals: This project, organized by CISEPO began in early 2004. The goal of the initiative is to examine ways to engage youth in health promotion and create youth driven community action in the Middle East. Using low-cost technologies such as photography as well as Internet-based technologies, young people participating in this initiative document the strengths and weaknesses of their communities and take action on selected issues of importance to them. Through these projects, youth learn cooperation, research and leadership skills. This initiative explores the potential of Internet technology to permit young people from diverse communities to interact in their own spaces, with the goal of creating innovative models for community health promotion. While the initial project was conducted in Israel's Bedouin community in 2005, it was expanded to include Israeli, Palestinian, and Jordanian schools in subsequent years.

Project Partners: Canada International Scientific Exchange Program (CISEPO), Canada

Website: <http://www.globalyouthvoices.org/middle-east/index.html>

Key Contact:

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Phone: 1-416-586-4633

SELECTED ORGANIZATIONS ENGAGED IN ISRAELI/PALESTINIAN HEALTH COLLABORATIONS:

Al-Quds University

Description: Al-Quds University was founded in 1984, with its official constitution written in 1993. It is the only Arab University in Jerusalem, and provides higher education and community services within the Jerusalem area and to the neighboring towns, villages and refugee camps in the West Bank. It has ten academic faculties on four campuses: Arts, Science and Technology, Medicine, Dentistry, Public Health, Law, Qur'an and Islamic Studies, Health Professions, Engineering, and Jurisprudence. These faculties accommodate more than 6000 students from the Jerusalem area and from the districts of Bethlehem, Hebron, Jenin, Jericho, Nablus, Ramallah and Tulkarem. Faculty and students from Al-Quds University have participated in numerous joint research and training projects with Israelis related to health and medicine.

Selected Projects: Brandeis University/Al-Quds University partnership; Child Nutrition in Israel and Palestine: Seeking Joint Initiatives; Child Rehabilitation Initiative for Safety and Hope (CHERISH); Empowerment and Resilience in Children Everywhere (ERICE); International Network of Knowledge through Electronic Learning; Middle East Association for Managing Hearing Loss (MEHA); Middle East Association for Mother and Child Health (MEMCHA); Middle East Consortium on Infectious Disease Surveillance (MECIDS); Middle East Symposium on Dental Medicine; Student Summer Cooperative Program

Website: <http://www.alquds.edu/>

Key Contact:

- Hassan Dweik, MSc, PhD - Executive Vice President, Al-Quds University
Email: hdweik@planet.edu

Augusta Victoria Hospital

Description: The Augusta Victoria Hospital, a project of the Lutheran World Federation, provides health services for Palestinian refugees in cooperation with the United Nations Relief and Works Agency (UNRWA). The hospital provides training programs for health professionals and has nine major medical departments. The Hospital is involved in numerous cooperative programs, including "Peace Through Health: Partnership in Emergency Medicine," a trilateral program between Augusta Victoria Hospital, Hadassah Medical Organization, and Brigham and Women's Hospital in Boston, Massachusetts.

Selected Projects: Hadassah-Augusta Victoria Hospital Exchange Program; Medilink - Training Palestinian Doctors in Israel; Peace through Health: Partnership in Emergency Medicine; Pediatric Hemato-Oncology Unit; Saving Children

Website: <http://www.avh.org/>

Key Contact:

- Dr. Tawfiq Nasser - Chief Executive Officer/Director General, Augusta Victoria Hospital
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Ben Gurion Univeristy

Description: Ben-Gurion University is a major center for education and research, with over 17,000 students enrolled in the faculties of Engineering Sciences, Health Sciences, Natural Sciences, Humanities and Social Sciences, the Guilford Glazer School of Business and Management and the Kreitman School of Advanced Graduate Studies. It also includes the National Institute for Biotechnology in the Negev, the Jacob Blaustein Institutes for Desert Research, the Albert Katz International School for Desert Studies and the Ben-Gurion Research Institute for the Study of Israel and Zionism. The University has campuses in Beer-Sheva, including the Marcus Family Campus, as well as in Sede Boqer and Eilat. The Faculty of Health Sciences includes the Health Sciences Graduate School, the Joyce and Irving Goldman Medical School, the Recanati School for Community Health Professions, the Medical School for International Health (in collaboration with Columbia University Medical Center), the School of Medical Laboratory Sciences , the School of Pharmacy, and the School of Continuing Education.

Selected Projects: Bedouin Genetic Research Project; Cerebral Palsy Collaboration; Child Nutrition in Israel and Palestine: Seeking Joint Initiatives

Website: <http://web.bgu.ac.il/Eng/Home/>

Key Contact:

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Canada International Scientific Exchange Progarm (CISEPO and the Peter A. Silverman Centre for International Health

Description: The Peter A. Silverman Centre for International Health is located at the Mount Sinai Hospital in Toronto, Canada. The Center works through its CISEPO program to develop relationships between the hospital and global partners to build a “Network of Knowledge” for health achieved in part. The Canada International Scientific Exchange Program (CISEPO) works to build peace in the Middle East by promoting collaboration between health professionals and enriching academic medicine, public health and health care. CISEPO was established in 1984, and began developing health collaborations

between Jordanians and Israelis in 1995; Palestinians joined the initiative in 1997. CISEPO has arranged for more than 2,500 Arabs and Israelis to meet in the Middle East through joint educational and research projects and public workshops. CISEPO also sponsors research and education initiatives, including continuing medical education exercises, joint planning meetings between heads of Palestinian, Israeli and Jordanian universities, and collaborative research projects between Israelis and Palestinians. The Peter A. Silverman Center has trained more than 100 health professionals and students in Canada and internationally and brought more than 2,500 health professionals across borders to cooperate in health projects, including health professionals from the Middle East. Furthermore, the creation of the Peter A. Silverman Global eHealth Program (PASGeP) and the development of the Canadian Connection Collaboration provides eHealth programming for capacity building in Canada the Middle East, including Israel and the Palestinian Territories.

Selected Projects: Genetics Research Collaboration; International Network of Knowledge through Electronic Learning; Middle East Association for Managing Hearing Loss (MEHA); Middle East Association for Mother and Child Health (MEMCHA); Middle East Youth Smoking Website Cultural Adaptation Project; Student Summer Cooperative Program; Youth Voices M.E.

Website: <http://128.100.113.105/> and <http://www.mtsinai.on.ca/PASCIH/default.htm>

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Edith Wolfson Medical Center

Description: The Wolfson Medical Center is located on the Tel Aviv / Jaffa border. It contains over 60 wards and departments. Over 100 doctors employed by The Wolfson Medical Center also hold positions at the Tel Aviv Medical University in Tel Aviv, Israel. The Edith Wolfson Medical Center also serves as the home for the Save a Child's Heart program and many Canada International Scientific Exchange Programs (CISEPO) initiatives.

Selected Projects: International Network of Knowledge through Electronic Learning; Middle East Association for Managing Hearing Loss (MEHA); Middle East Association for Mother and Child Health (MEMCHA); Middle East Consortium on Infectious Disease Surveillance (MECIDS); Save a Child's Heart; Student Summer Cooperative Program

Website: <http://www.wolfson.org.il>

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- Simon Fischer, JD - Executive Director, Save a Child's Heart Foundation
Email: director@saveachildsheart.org
Phone: (972)-3-558-9656

Emek Medical Center

Description: Known as Israel's "hospital of peace", Emek Medical Center is located in the city of Afula in Northern Israel. It is a community hospital with Arab and Jewish staff that serves a culturally rich population equally divided between Jews and Arabs. At the height of violence several years ago, Emek Medical Center treated hundreds of Palestinian men, women and children. Emek Medical Center treats any person arriving at its entrance who needs help – whether they are an Israeli Jew, Arab, Christian, Druze or Palestinian. Prior to the outbreak of violence in 2000, Emek was involved with the Jenin Hospital exploring ways to incorporate the Palestinian children into a healthcare network. It has hosted day-long seminars for health care and hospital officials from the Palestinian territories. The hospital also has exchanges with American institutions, such as The Miriam Hospital of Brown University and emergency medical teams from California. Because of Emek's expertise in trauma care, these exchanges often focus on emergency medicine and disaster preparedness.

Selected Projects: Coexistence through Medicine; Treatment of Palestinian patients

Website: <http://www.clalit.org.il/haemek/defaultEng.asp>

Key Contact:

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Hadassah Medical Organization

Description: Hadassah Medical Center in Jerusalem is the flagship of Hadassah, the Women's Zionist Organization of America. A leading teaching hospital and research institution, the Medical Center includes two university hospitals and five health professional schools operated in collaboration with Hebrew University. Hadassah health professionals have participated in numerous peace-building collaborations with Palestinians.

Selected Projects: Advanced Resuscitation Training; Dermatology for Peace; Empowerment and Resilience in Children Everywhere (ERICE); Hadassah-Augusta Victoria Hospital Exchange Program; Hadassah – St. John Eye Hospital Human Resources Development Program in Ophthalmology; International Conference on Aging in the Mediterranean and the Middle East, International Congress on Chronic Disorders in Children, Master of Public Health Course at the Braun School of Public Health; Medilink - Training Palestinian Doctors in Israel; Middle East Symposium on Dental Medicine; The Mother and Child Fellowship Program; Peace through Health: Partnership in Emergency Medicine; Pediatric Hemato-Oncology Unit; Saving Children; Specialist Graduate Training; The Trauma Course

Website: <http://www.hadassah.org.il/English>

Key Contact:

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Healing Across the Divides

Description: Healing Across the Divides assists Israeli and Palestinian health care organizations in implementing bridge building programs that improve the health of both Israelis and Palestinians within a community based framework. The organization has sponsored initiatives related to diabetes monitoring and treatment, breast cancer screening and treatment, and the challenge of dual loyalty (simultaneous obligations to patients and the state) among physicians. Healing Across the Divides has worked with numerous organizations in Israel and the Palestinian Territories. Rather than institute direct collaborative work, in each of its initiatives, Healing Across the Divides funds at least one Israeli and one Palestinian community-based organization, providing varied opportunities for them to interact as appropriate.

Selected Projects: A Diabetes and Hypertension Monitoring and Treatment System in Disadvantaged Israeli and Palestinian Communities; Breast Cancer Project; and Dual Loyalty Project

Website: <http://www.healingdivides.org/>

Key Contact:

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Jewish Joint Distribution Committee - Mid East Program (JDC – Middle East)

Description: The American Jewish Joint Distribution Committee (JDC) is an apolitical, non-partisan organization devoted to sponsoring rescue, relief and reconstruction programs for Jews throughout the world. In 1993, JDC launched a Middle East Program to promote collaboration between health and rehabilitation professionals in the region. Program activities aim to develop service delivery models, provide professional-to-professional seminars and training, and build local capacity. Currently, the program is focused on pediatric health, disability and rehabilitation, and the empowerment of women in the health field. In collaboration with other organizations, JDC is working on the Child Rehabilitation Initiative for Safety and Hope in the Israeli and Palestinian Populations (CHERISH) Project, the Empowering Communities through Home Safety (ECHOS) Project, and the Pediatric Rehabilitation Forum. As part of Project CHERISH, JDC helped orchestrate the development of a center for lending medical equipment. JDC-Middle East also has a partnership with Al-Quds University and the affiliated Center for Development in Primary Health Care (CDPHC) in Ramallah.

Selected Projects: Child Rehabilitation Initiative for Safety and Hope (CHERISH); Coping with Breast Cancer among Palestinian and Israeli Women (Project COPE); Empowering Communities through Home Safety (ECHOS); International Conference on Aging in the Mediterranean and the Middle East; Palliative Care Initiative; Pediatric Rehabilitation Forum; Study of Israeli-Palestinian Cooperation in the Health Field, 1994-1998

Website: <http://www.jdc.org/>

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Peres Center for Peace

Description: The Peres Center for Peace is an independent, non-profit, non-partisan, non-governmental organization founded in 1996 by Shimon Peres, Nobel Peace Laureate and current President of Israel. The Peres Center for Peace aims to further his vision of building peace through socio-economic cooperation, development initiatives, and people-to-people interaction. The Center has also been actively involved in bringing Palestinian physicians to train in Israeli hospitals. Initiatives include the "Peace for Sight" program (a three year

initiative to train Palestinian ophthalmologists, carried out in partnership with St. John Eye Hospital in East Jerusalem and Hadassah Medical Center in Israel supported by the US State Department) and Bridging the Gap (a two year program of monthly meetings for Palestinian and Israeli pediatricians, carried out in partnership with Makassed Islamic Hospital, Augusta Victoria Hospital in Jerusalem, PRCS Hospital and the pediatric department at Hadassah - Mt. Scopus Medical Center).

Selected Projects: Medilink - Training Palestinian Doctors in Israel; Palestinian-Israeli Mental Health Students Working Group; Peace of Mind Initiative; Pediatric Hemato-Oncology Unit; Saving Children; Umbilical Cord Blood Banking Initiative

Website: <http://www.peres-center.org/>

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Physicians for Human Rights -- Israel

Description: Physicians for Human Rights--Israel was founded in 1988 with the goal of advancing human rights, in particular the right to health, in Israel and the Palestinian Territories. Physicians for Human Rights conduct activities that integrate advocacy and action to enact policies to improve health and provide health care. Today, Physicians for Human Rights-Israel has more than 1150 members, over half of whom are health care providers. Currently, the organization is overseeing five projects in both Israel and the Palestinian Territories, as well as running a mobile clinic in the Palestinian Territories and a clinic in Tel Aviv.

Selected Projects: Overseeing five projects in both Israel and the Palestinian Territories; Running a mobile clinic in the Palestinian Territories and a clinic in Tel Aviv

Website: <http://phr.org.il/phr/>

Key Contact:

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Phone: 972-3-687-3718

Rambam Health Care Campus

Description: Rambam Health Care Campus (RHCC) was established in 1938 and is the largest medical center in northern Israel. The medical center comprises 36 departments with some 1000 beds, 45 medical units, 9 institutes, 6 laboratories and 30 administrative and maintenance departments. It also includes the Meyer Children's Hospital. Among the RHCC departments, some are the exclusive providers of comprehensive services for all of northern Israel, including trauma treatment, oncology, and neurosurgery. As an academic hospital, RHCC maintains teaching and research links with the Technion's Rappaport Faculty of Medicine, providing a clinical environment for diagnosis, treatment and research. Rambam Medical Center physicians treat Palestinian patients and also train Palestinian physicians, receiving financial support for these training programs mostly from the Middle East Cancer Consortium and the Peres Center for Peace.

Selected Projects: Medilink - Training Palestinian Doctors in Israel; Middle East Cancer Consortium

Website: <http://www.rambam.org.il/Home+Page/>

Key Contact:

- Rafael Beyar MD, DSc – Chief Executive Officer and Director General, Rambam Health Care Campus
Email: r_beyar@rambam.health.gov.il
Phone: 972-4-8542903

St. John's Eye Hospital

Description: St. John's Eye Hospital is the chief provider for expert eye care in the West Bank, Gaza and East Jerusalem. The Hospital is renowned for its teaching programs that are closely linked with Hadassah Medical Center and Al-Quds University Medical School. Additionally, the hospital operates three community centers, a health clinic on the Gaza strip, and mobile outreach teams targeting isolated communities. The hospital is committed to its goal of Vision 2020 aiming to eliminate the main causes of preventable blindness as well as to implement affordable eye care programs.

Selected Projects: Hadassah – St. John Eye Hospital Human Resources Development Program in Ophthalmology; Medilink - Training Palestinian Doctors in Israel

Website: <http://www.stjohneeyehospital.org/>

Key Contact:

- Dr. Jeanne Garth - Medical Director, St. Johns Eye Hospital
Email: meddir@sjeh.org
Phone: 972-2-5828325

Tel Aviv University/Tel Aviv Sourasky Medical Center

Description: Tel Aviv University is the largest university in Israel and the biggest Jewish university in the world. It is a major center of teaching and research, comprising nine faculties, 106 departments, and 90 research institutes. The Sackler Faculty of Medicine is Israel's largest institute of higher medical education, and includes the School of Medicine, the School of Continuing Medical Education, the School of Dental Medicine, the Stanley Steyer School of Health Professions, the Dr. Miriam and Sheldon G. Adelson Graduate School of Medicine, the Goldschleger School of Dental Medicine, and the School of Public Health. Faculty from Tel Aviv University and the Sackler Faculty of Medicine have been involved in numerous joint research and training projects with their Palestinian counterparts.

Selected Projects: Child Nutrition in Israel and Palestine: Seeking Joint Initiatives; Empowerment and Resilience in Children Everywhere (ERICE); Genetic Research Collaboration; International Network of Knowledge through Electronic Learning; Middle East Association for Managing Hearing Loss (MEHA); Middle East Association for Mother and Child Health (MEMCHA); Middle East Consortium on Infectious Disease Surveillance (MECIDS); Student Summer Cooperative Program

Website: <http://www.tau.ac.il/>

Key Contact:

- Yoseph A. Mekori M.D. – Dean, Sackler Faculty of Medicine, Tel Aviv University
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Phone: 972-3-640-9657

APPENDIX III

PALESTINE-ISRAEL HEALTH INITIATIVE HEALTH e-COMMONS

In addition to electronic medical records and data management systems, health information technology today also includes the tools of new media, which are reshaping the way that individuals and societies communicate and share information. The internet, email, cell phones, PDAs, iPods, satellite television, and other rapidly disseminating technological devices are only beginning to be explored as methods for advancing public health and medicine. Cell phones, for instance, owned by most Palestinians and Israelis, can help in ways such as data collection and public health outreach. Functioning as miniature hand-held computers, cell phones and PDAs have created an unprecedented level of connectivity, which can be harnessed for public health purposes and in support of cooperative activities in this and other regions of the world. These devices may soon take their place next to the stethoscope as essential instruments in health professional toolboxes as well as for consumer empowerment. Furthermore, serious games are being used to teach public and professional audiences healthy behaviors and emergency preparedness. Medical simulation robotics are teaching skills to students and healthcare providers in interactive ways to facilitate learning and practice before performing procedures on patients.

The Internet too can be used in new and creative ways to promote cooperative activities that advance health and medicine. Telemedicine systems, remote monitoring for conditions like hypertension and diabetes, online networking websites, and health information portals all represent powerful ways of connecting professionals and the public with critical information and with each other. In this region, in particular, new media tools can help to transcend geopolitical divides which can make communication and collaboration difficult. Online workspaces immunized from politics can facilitate cooperation between Palestinians and Israelis for the advancement of health in the region as well as to promote trust and reconciliation.

In order to facilitate interaction and knowledge exchange between its Palestinian, Israeli, and U.S. participants, the Palestine/Israel Health Initiative launched an online networking “health e-commons” workspace. The technology and the domain-name (<http://www.pihi.projectsaces.com>) were donated by an online strategy consulting firm. This workspace provides a password-protected forum for working group participants and other individuals interested in collaborative health work to convene online in an electronic commons to share best practices, health information, and data through the Internet. The space is intended to foster the sharing of information and the discussion and development of collaborative health activities in the region.

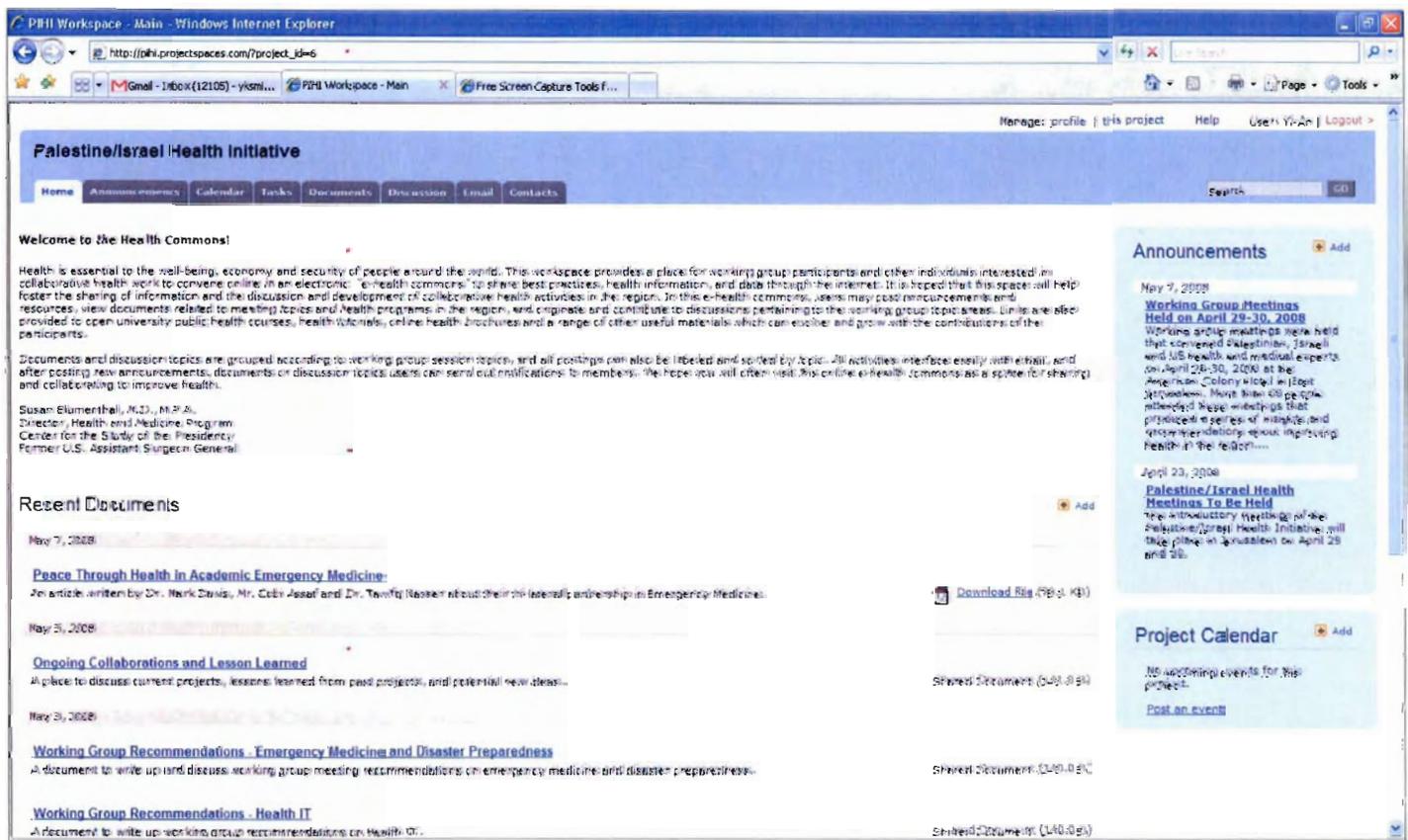
In this “health e-commons,” users may post announcements and resources, view documents related to meeting topics and health programs in the region, and originate and contribute to discussions pertaining to the working group topic areas. Links are also provided to open-university public health courses, health tutorials, online health

meetings are currently using the site to share insights and maintain connections facilitated by the working group sessions convened in Jerusalem in April 2008.

It is hoped that activity on this site will continue to grow and that it can be a model for the development of future online networking tools used by Palestinian and Israeli health and medical experts, including providers, researchers, and policymakers, for the advancement of cooperative projects in health and medicine in the region. It is building an online community of Palestinians and Israelis, with tools that facilitate active networking and the sharing of medical information and experiences.

Selected material from this password-protected site is included below. New users can access the PIHI Health E-Commons by invitation or by logging onto <http://www.pihi.projectsplaces.com> and requesting a username and password.

The Palestinian-Israeli Health Initiative “Health e-Commons” includes tools for announcements, scheduling, task management, resource sharing, and collaborative discussion as well as articles on and links to a wealth of information on public health and medical issues of concern in the region.



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Palestine/Israel Health Initiative

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May 7, 2008

Working Group Meetings Held on April 29-30, 2008

Working group meetings were held that convened Palestinian, Israeli and US health and medical experts on April 29-30, 2008 at the American Colony Hotel in East Jerusalem. More than 50 people attended these meetings that produced a series of insights and recommendations about improving health in the region.

Posted by [Susan Blumenthal](#) @ 1:00 PM EDT

Apr 23, 2008

Palestine/Israel Health Meetings To Be Held

The introductory meetings of the Palestine/Israel Health Initiative will take place in Jerusalem on April 29 and 30.

Posted by [Suzanne Rainey](#) @ 8:30 PM EDT

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http://pihi.projectsplaces.com/documents/

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Document Name	Download	Topics	Modified
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Primary Care and Prevention Resources	Shared Document (6.2 KB)		May 7, 2008
Ongoing Collaborations and Lesson Learned	Shared Document (141.0 B)	Collaborations and Recommendations	May 7, 2008
Health Information Technology	Shared Document (7.4 KB)	Information Technology and New Media	May 7, 2008
Peace Through Health in Academic Emergency Medicine	Adobe Acrobat (PDF) (78.1 KB)		May 7, 2008
Working Group Recommendations - Emergency Medicine and Disaster Preparedness	Shared Document (140.0 B)	Emergency Preparedness and Disaster Planning	May 3, 2008
Working Group Recommendations - Health IT	Shared Document (140.0 B)	Information Technology and New Media	May 3, 2008
Working Group Recommendations - Education, Training and Research	Shared Document (140.0 B)	Education, Training and Research	May 3, 2008
Epidemiology Resources	Shared Document (1.4 KB)	Primary Care and Prevention	May 3, 2008
Background Health Information	Shared Document (822.0 B)		May 3, 2008
Telemedicine by Email in Remote Cambodia	Adobe Acrobat (PDF) (157.0 KB)	Information Technology and New Media	May 3, 2008

General and Background Information

- Background Health Information
- Health Diplomacy Article by Dr. Blumenthal
- Peace through Health and Health Diplomacy
- Peace Through Health in Academic Emergency Medicine

Group Recommendations

- Ongoing Collaborations and Lesson Learned
- Working Group Recommendations - Education, Training and Research
- Working Group Recommendations - Emergency Medicine and Disaster Preparedness
- Working Group Recommendations - Health IT

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http://phi.projectsaces.com/discussion/

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Palestine/Israel Health Initiative

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Emergency Preparedness and Disaster Planning A place for working group members to continue the discussions on future Emergency Preparedness and Disaster planning initiatives.	1	May 08, 2008 09:45 AM EDT
Information Technology and New Media A place for working group members to continue the discussion on future Information Technology initiatives.	2	Jun 02, 2008 06:31 PM EDT
Education, Training and Research A place for working group members to continue the discussion on future Education, Training and Research initiatives.	0	
Primary Care and Prevention A place for working group members to continue the discussion on future Primary Care and Prevention initiatives.	0	

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