

THIS WEEK IN

PALESTINE

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COVID-19 Is
Here to Stay. How Do We Cope?



Cover: Photo by Ahed Izhiman, courtesy of Sunbula.

forthcoming Issues

January 2021

Open Issue

February 2021

Palestine in the Nineteenth Century

March 2021

Women's Empowerment

This publication is



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Publisher: **Sani P. Meo**

Art Director: **Taisir Masrieh**

Graphic Design: **Tamer Hasbun**

Editor: **Tina Basem**

Intern: **Elias Tannira**



turbo-design

Telefax: +970/2 2-295 1262

info@turbo-design.com

www.thisweekinpalestine.com

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MESSAGE FROM THE EDITOR

A few years ago, during a trip to Southeast Asia, I hired a taxi for a day. After about ten minutes, the driver sneezed once. He apologized profusely, reached over to pull out a mask from the glove compartment, and wore it for the rest of the day. You could spot people all over town wearing masks. I was told that this is the custom: When you feel somewhat unwell, you go about your business but make sure to protect those around you. There was no notion of personal freedoms being infringed upon by this measure. I wish the Western world, including Palestine, would learn from the advanced, socially aware, caring culture in what is officially considered a third-world country.

As Palestine is under a partial lockdown due to as many as 1,946 new cases of COVID-19 (November 25, 2020), you will find in this issue articles that explain the measures that have been taken by governmental and nongovernmental organizations, stories of reactions, and accounts of successes in responding to the changing environment during the pandemic, as well as readers' comments regarding their experience of the crisis.

We thank UNDP's Programme of Assistance to the Palestinian People, the United Nations Population Fund (UNFPA), the Palestinian Medical Relief Society, Oxfam, and Sharek Youth Forum for their support of this issue, and all organizations and institutions that have used TWiP as a platform for communication. Special gratitude goes to our authors: H.E. Ambassador of Palestine to the Holy See Issa Jamil Kassissieh; H.E. Dr. Mai S. Al-Kaileh, Minister of Health; Haneen Qawasmi, project coordinator at the Palestinian Charity for Youth Economic Empowerment; the World Health Organization; Dr. Mustafa Barghouti, president of the board of the Palestinian Medical Relief Society; Dr. Abir Giacaman, CEO of BGU trauma clinic in Frankfurt, Germany; physicist Dr. Anan Copt, the developer of a new type of face mask; Ahmad Ramahi, co-founder and CEO of WeDeliver; Michele Cantoni, co-director of the Bethlehem Cultural Festival; and all readers who took the time and made the effort to reply to our questionnaire.

Our Personality of the Month is Dina Nasser, the Book of the Month is *Wondrous Journeys in Strange Lands* by Sonia Nimr, and our Artist of the Month is Amwaj Children's Choir. Cook delicious Swiss chard dishes using the recipes presented by Morgan Cooper in TWiP Kitchen, visit Emmaus Church, presented by Bassam Almohor in Where to Go? and enjoy the many listed events.

From the entire team at TWiP, we wish a Merry Christmas to all who are celebrating this month and a healthy, safer new year to all of you!

Sincerely,

Tina Basem





BETHLEHEM REBORN

6



INEQUALITY ON
THE RISE DURING
COVID-19

24



QUO VADIS?

44



WE DELIVER

68



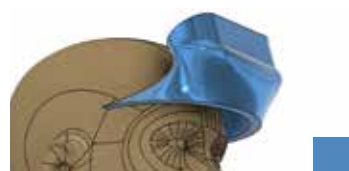
POLICIES AND
CHALLENGES:
COVID-19
IN PALESTINE

10



GOING VIRTUAL
DURING COVID-19

30



AN INNOVATIVE
FACE MASK FOR
THE CORONAVIRUS

52



CELEBRATING CULTURE
DURING COVID-19

70



A FORWARD- LOOKING
RESPONSE TO COVID-19

16



NURSE MUNA
AND COVID-19

34



MAJD

56



MOBILE CLINICS BRING
HEALTH CARE TO
REMOTE AREAS

20



TACKLING COVID-19

38



READER VIEWS

60

PERSONALITY OF THE MONTH 74

BOOK OF THE MONTH 76

ARTIST OF THE MONTH 78

TWiP KITCHEN 80

WHERE TO GO 82

EVENTS 84

CULTURAL CENTERS 88

ACCOMMODATIONS 90

RESTAURANTS 93

ATTRACTIONS 96

THE LAST WORD 98

By H.E.
Ambassador
Issa Jamil
Kassissieh



Bethlehem Reborn

The Wonders of the Nativity

It all started in the Vatican Museums where the Embassy of the State of Palestine to the Holy See exhibited the cradle of Christianity, the birthplace of our Lord Jesus Christ. The exhibition *Bethlehem Reborn* shows the fruit of the rehabilitation works at the church – the beauty of the mosaics, the columns, and the various types of tiles and crafted wood. The most precious part of this exhibition, however, is the spiritual message of the Church of the Nativity that was delivered on December 6, 2019, in the presence of the Vatican Secretary of State Cardinal Pietro Parolin and Italian dignitaries, along with the accredited ambassadors to the Holy See. This special, one-day event was meant to be held during the Christmas season to remind us of the spiritual message that emanates from the birthplace of Jesus when new life and new hope arise.

There was no better moment or place in which to bring the newly refurbished Church of the Nativity than Vatican City and its prestigious museums. That unique event encouraged us to highlight the success of the church's works in other places in our small world, as this church is the jewel of humanity and the cradle of civilization and, in its essence, belongs to our human community. The painstaking rehabilitation process that continued over a period of more than ten years was entrusted to the state of Palestine by the Presidential Committee for the Rehabilitation of the Church of the Nativity and executed by Piacenti, in full coordination with the three churches in charge of the Status Quo (the Greek Orthodox Patriarchate, the Franciscan Custody of the Holy Land, and the Armenian Orthodox Patriarchate). President Mahmoud Abbas was determined to preserve Christian heritage and highlight the Christian dimension as an essential element of the Holy Land.

The Rimini meeting was the next destination to exhibit the discoveries of the new archeological excavations and restoration works while showing the different layers of the church from the time of the first Christians to the age of the Byzantine emperors who built the most magnificent basilicas of antiquity, to modern times, as the Basilica of the Nativity in Bethlehem has been restored to its original beauty for the first time in 600 years. It goes without saying that there were enormous challenges in exhibiting the wonders of the church,

Actually, against all odds, the meeting took place from August 18 to 23 in Rimini, Italy. Visitors arrived at the exhibition in the thousands, and social media was the primary means through which the story of Jesus's birthplace was told. The main message of the *Bethlehem Reborn* exhibition is that life should overcome death and humans should always seek new life and new hope. Our aim is to keep in the minds and hearts of visitors the meaning of rebirth illustrated through the cradle of Christianity in the Holy Land.



The Church of the Nativity, photo by Matteo Piacenti.

COVID-19 being the most obvious among them. As Pope Francis put it while commenting on the pandemic: "We have realized that we are in the same boat... all of us called to row together."

An idea emerged from the experience of the pandemic and the ensuing travel restrictions: the Church of the Nativity could tour various cities and states, narrating the spiritual message of the mother of all



The Church of the Nativity, photo by Matteo Piacenti.

churches. This would remind the world that Bethlehem, the town of the Nativity, and Jerusalem, the city of the Resurrection, the centers of spirituality, are the bearers of a unique heritage and a must-see destination for millions of pilgrims, tourists, and visitors. In other words, until COVID-19 is defeated and tourism is back to normal, we intend to continue to tour the world with the exhibition *Bethlehem Reborn: The Wonders of the Nativity*. It offers the faithful an opportunity to live a moment of spiritual pilgrimage to the city of Bethlehem with its message of hope, justice, peace, tolerance, and joy.

As we approach the Christmas season, we hope to see *Bethlehem Reborn* be welcomed into several cities: Assisi in Italy, as the city that first depicted a nativity scene; Amsterdam, as the city with Saint Nicholas as its patron; Vienna, as the city that launched the first-ever "December Christmas Market" in 1294; Berlin, as the birthplace of the Christmas tree tradition started

by Martin Luther; and, Rovaniemi, Lapland, in Finland, as the official home town of Santa Claus.

We further envision *Bethlehem Reborn* to be part of the Christmas-choir festival program organized alongside the Christmas markets. Yes, COVID-19 and its ongoing implications are burdensome, but we should not surrender to the darkness. Christmas is the moment to assert that life and hope are stronger than disease and darkness. We should keep our eyes on the star which led the Magi to the grotto shortly after Jesus's birth. Here in Palestine we are filled with hope that the coming days will be better and that humanity will defeat the pandemic just as we believe that Palestinians will prevail and the occupation will be defeated, giving victory to justice and peace in the Holy Land.

H.E. Issa Jamil Kassissieh is Ambassador of Palestine to the Holy See.



The Church of the Nativity, photo by Alessandro Fichera.



Policies and Challenges: COVID-19 in Palestine

By H.E. Dr. Mai S. Al-Kaileh,
Minister of Health

Since the novel coronavirus (SARS-CoV-II) was identified in Wuhan, China, in December 2019, it has spread rapidly, initially all over China and then throughout the entire world, reaching Palestine on March 5, 2020, when the first imported cases of COVID-19 were identified in Bethlehem. The Palestinian government's response was swift and effective: H.E. President Mahmoud Abbas declared a state of emergency, and Prime Minister Dr. Mohammed Shtayyeh took responsibility for implementing the various measures necessary in this situation.

Prime Minister Dr. Shtayyeh established the inter-ministerial and multilateral High-Level National Emergency Committee, supported by national emergency subcommittees at the district level. The governmental approach in battling COVID-19 was built on the principles of preparation, containment, and communication. The Palestinian government issued its National COVID-19 Response Plan in March 2020, outlining its response strategy and actions, identifying critical support needs, and proposing an aid coordination approach.

The Ministry of Health (MoH) was attentive to the upcoming outbreak once it started to spread outside China in mid-January 2020, and devoted keen internal efforts to prepare for the pandemic on various sides. MoH early action included conducting health education and staff training regarding the virus and related infection-control measures followed by early-detection measures on borders.

The COVID-19 National Health Readiness Plan, developed by the MoH in coordination with various national stakeholders and continuously reviewed and updated according to the situation, aimed to scale up readiness capacities to face the pandemic while also ensuring the continuity of essential health services and the sustainability of the health system. The MoH approach was focused on containment, response, and resilience.

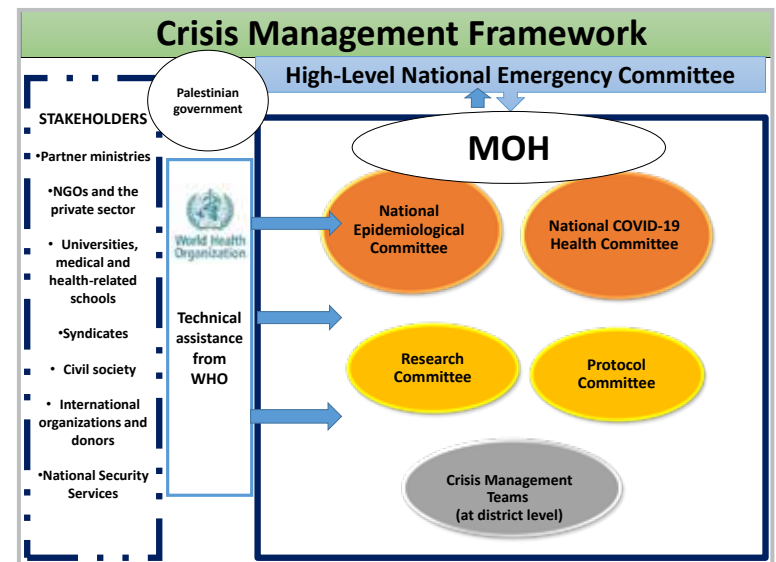
Epidemiological phases and crisis management

The management of the various health aspects of the crisis in Palestine is led by the MoH and technically supported by the World Health Organization (WHO). The MoH coordinates and cooperates with all sectoral stakeholders, including nongovernmental and private health sector institutions, civil society organizations, academic and research partners, partner ministries and security services, UN agencies, and the international community. Upon identifying the first cases in March, the MoH took the immediate decision to establish the National COVID-19 Health Committee and the National Epidemiological Committee to take on the responsibility for the continuous follow-up

of the epidemiological situation and give its recommendations to the High-Level National Emergency Committee. Both the National COVID-19 Health Committee and the National Epidemiological Committee include representatives of various relevant stakeholders and receive technical support from the WHO (Figure A). On the level of governorates, health teams were part of the various crisis management teams that operate at the district level, headed by the respective governors.

The Palestinian Ministry of Health responded quickly and effectively to the outbreak of COVID-19, mobilizing all its efforts and resources to contain the spread of the virus.

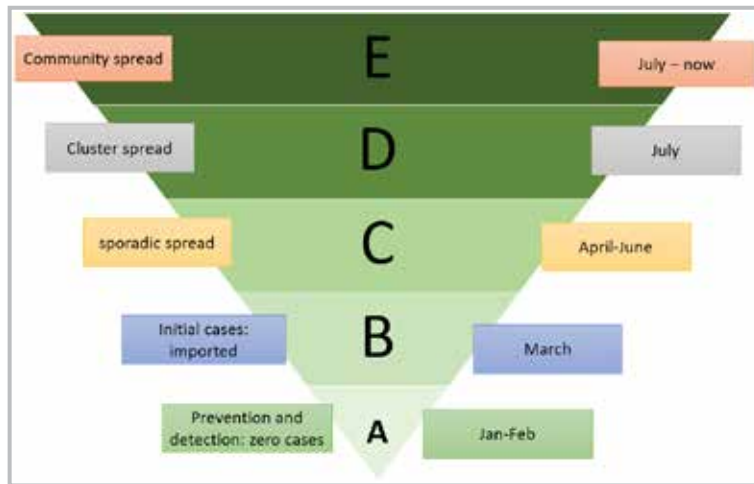
Figure A: Health Response – Crisis Management Framework, Palestinian Ministry of Health.



The crisis-management and response-planning process was built on predictable epidemiological phases or probable spread stages. Accordingly, the MoH started to develop its plans and prepare its health facilities according to expected probable spread of infected cases and epidemiological status (Figure B).

The Palestinian government has taken an evidence-based, proactive approach of containment and suppression in the early stages, supported by a national health awareness campaign to encourage our citizens to protect themselves and follow governmental guidance of movement restrictions and social distancing. This approach succeeded in limiting community transmission during the first three months (April through June 2020). Government actions aim to protect its citizens and prevent the uncontrollable spread of the virus and the resulting health system challenges that occurred in other countries. At the same time, substantial efforts were made to ensure adequate diagnostics and treatment services, on the one hand, and to prepare for a potential surge of cases on the other.

Figure B: Epidemiological Stages of the Pandemic, Palestinian Ministry of Health



COVID diagnostic services

One of the most preliminary preparatory actions that the MoH took was the capacity building of the Central Public Health Laboratory concerning the diagnosis of COVID-19 through staff training and the provision of laboratory diagnostic materials for the testing and detecting of the virus. The Central Public Health Laboratory in Ramallah has been able to conduct COVID-19 diagnostic tests since February 6, 2020.

As the incidence of COVID-19 cases increased in several governorates, the number of contacts and potential or suspected cases who required testing increased accordingly, and the urgent need arose to expand our diagnostic capacity. Thus, in partnership with several universities and nongovernmental hospitals, the MoH established PCR labs in governorates outside Ramallah and Al-Bireh. We now run seven active PCR labs in various governorates and have succeeded in raising our testing capacity from 300 tests per day in February to 7,000 tests per day in November.

Figure C: Number of reported daily COVID-19 cases in the West Bank. Palestinian Ministry of Health.



Quarantine and isolation policies

At the beginning of the pandemic outbreak in Palestine, in early March, the government adopted facility-based quarantining. It started to establish quarantine centers for suspected cases and individuals who came from outside the country through the border crossings at Jericho and Rafah. The Palestinian Academy for Security Sciences in Jericho was the first established quarantine center in the West Bank, followed by special centers established in each governorate in cooperation with various community organizations. The MoH adopted WHO instructions in this regard, requiring a 14-day quarantine period for contacts and suspected cases; later on, we adopted the home-isolation policy for mild and asymptomatic cases. Moderate and severe cases are admitted to specified treatment centers.

COVID-19 epidemiological surveillance systems

The MoH took steps to guarantee the early detection of cases as much as possible. In addition to screening services on borders and entry points, and establishing triage centers for any suspected case in all health facilities and hospitals, the MoH involved contact tracing and following up suspected cases, drawing up epidemiological contact trees through data collected from infected cases. Also, the MoH in cooperation with the National Security Services used geographical data to track home-quarantined cases.

In cooperation with the Palestinian National Institute of Public Health, the MoH established the Electronic COVID-19 Epidemiological Surveillance System accompanied by a publicly accessible website that presents regularly updated data on the situation in Palestine, including the distribution of cases by age and location and health maps.¹ Furthermore, the MoH developed two mobile applications for the community. The online portal lets people obtain their test results online,

Even though COVID-19 has spread widely in the Palestinian community since late June (Figure C), the recovery rate is considered very good, and the fatality rate in Palestine is relatively low compared to other countries in the region.

which made it much easier to follow up on suspected cases,ⁱⁱ and the newly developed application *Amankom* is intended to enable the tracing of potential COVID contacts via mobile phones.ⁱⁱⁱ



Amankom - Fight Covid-19 in Palestine
Palestine Ministry of Health

Hospital preparedness

The MoH developed a special emergency COVID response plan for Palestinian hospitals that aimed to upgrade the hospital sector's preparedness for COVID-19 and identify hospitals assigned for COVID treatment. Seven such hospitals have been established and equipped, including Hugo Chavez Hospital in Turmus Ayya, Dura Hospital, Security Academy in Jericho, Addiction Rehabilitation Center in Bethlehem, Military Services Hospital in Nablus, Azzoun Health Center, and Qashda Treatment Center. Several other general hospitals have some dedicated beds for COVID patients. Moreover, the MoH has made tremendous efforts to increase the number of beds, ICU beds, and ventilators allocated for COVID-19 patients, and we have succeeded in making available at this time a total of 603 beds, 189 ICU beds, and 152 ventilators.



A Guide for Procedures, Mechanisms of Action, and Prevention of COVID-19 in Palestinian Hospitals [in Arabic], issued by the Palestinian Ministry of Health.

Technical instructions and protocols

As the WHO is considered the main technical assistant worldwide in battling the novel coronavirus pandemic, the MoH and the National Epidemiological Committee have followed up continuously on WHO recommendations and technical updates and have issued their technical instructions for health teams and the general public accordingly. Several technical health protocols were developed, most importantly the Palestinian National COVID-19 Management Protocol, authored by a specially assigned national medical committee composed of medical experts and specialized doctors. Another important protocol issued by the MoH is the National Protocol for Living with COVID (And Life Continues [in Arabic]) that includes public safety guidelines and measures to be followed by citizens to protect themselves from becoming infected.

Health workforce

The COVID-19 pandemic has profoundly impacted the health care workforce. As cases surged across the country, the workload has increased tremendously, especially for staff working on the front line, such as diagnostic lab technicians, preventive medicine teams, those in treatment centers, and more. On the one hand, there has been the urgent need to build their capacities and enable them to face this new global pandemic, on the other, staff must protect themselves from the high risk of infection.

The MoH thus took immediate action to provide adequate PPE for its health care workers and train its staff. Special training materials and training curricula were developed, targeting the various health workforce specialty categories. Recently, a national training program was established with the support of NGOs, targeting health care workers in both the public and private health sectors. At the same time, the government has started to hire additional staff through temporary contracts supported by the World Bank and UNDP.



And Life Continues: Together, So We May Live in a Safe Palestinian Environment [in Arabic], Palestinian Ministry of Health.



Protocol for Work in Dental Clinics following the Outbreak of the Coronavirus [in Arabic], issued by the Ministry of Health and the Palestinian Dental Association.

Challenges

The Palestinian health care system has been suffering tremendous challenges due to the decades-long military and economic occupation. The COVID-19 pandemic coincided with the Israeli withholding of Palestinian tax revenues and annexation plans that further worsened the economic situation and deepened the ongoing financial crisis.

Thus, the State of Palestine is doubly handicapped in its fight to contain the COVID-19 pandemic. We lack the necessary sovereignty (such as control over borders, etc.) and national resources (medical, financial, etc.) to cope with a significant outbreak, particularly as our population has many high-risk characteristics (crowded cities and refugee camps, poverty, food insecurity, noncommunicable diseases, etc.).

The Palestinian humanitarian and health conditions were already fragile, even before COVID. Palestinians who live in overcrowded areas and miserable camps find it difficult to practice physical distancing; prisoners confined in Israeli jails are at a high risk of infection and deprived of their right to health; and Palestinian patients have been largely forbidden to seek treatment outside the country, as all borders are officially closed. Israeli occupation policies in East Jerusalem and the ongoing siege of the Gaza Strip have hindered our capacity to ensure the necessary services for large segments of COVID-19 patients. Palestinian workers inside Israel have posed a main challenge, especially those who travel daily to and from Israel without any protective measures and are considered a high risk for the wide spread of COVID-19 from Israel to Palestine, as for many months, the situation in Israel was much worse than in Palestine.

The health system is overstretched, with high rates of noncommunicable diseases, shortages in terms of a specialized health care workforce on both the governmental and private national levels, with shortages in hospital beds and gaps in specialized care services. Community beliefs and resistance to the reality of the pandemic have further hindered our efforts.

H.E. Dr. Mai Al-Kailah, Palestine's minister of health, is a physician who holds an MD and a PhD in public health.

ⁱ COVID 19 Epidemiological Surveillance System, MoH, published on MoH website, available at <http://site.moh.ps/index/covid19/LanguageVersion/0/Language/ar>.

ⁱⁱ Ibid.

ⁱⁱⁱ The MoH COVID-19 portal to view test results is available at <https://result.moh.ps/>.



A Forward-Looking Response to COVID-19

By UNDP's Programme of Assistance to the Palestinian People

alongside the health response, led by WHO, and the Global Humanitarian Response Plan.

Drawing on our experience with other outbreaks, as well as our long history of working with the private and public sectors, UNDP is helping countries to urgently and effectively respond to COVID-19 as part of its mission to eradicate poverty, reduce inequalities, and build resilience to crises and shocks.

public revenues and a 4.5 percent increase in unemployment, where the unemployment rate is already high at 31 percent overall and 38 percent among youth. GDP is estimated to contract between 5.1 and 7.1 percent, the largest annual contraction of the economy since reliable statistics began in 1994.

Although the Palestinian government's preemptive containment measures have contributed to preventing a rapid

The COVID-19 pandemic is the defining global health crisis of our time and the greatest challenge the world has faced since World War Two. We have now reached the tragic milestone of 1.41 million deaths, and the human family is suffering under an almost intolerable burden of loss.

But the pandemic is much more than a health crisis; it is also an unprecedented socioeconomic crisis. Stressing every one of the countries it touches, it is creating devastating social, economic, and political effects that will leave deep and longstanding scars. Extensive lockdowns, adopted to reduce the spread of the virus, restrict by necessity freedom of movement and, in the process, freedom to enjoy many other human rights. Over 1.4 billion children are affected by school closures. Every day, people are losing jobs and income, with no way of knowing when normality will return. Countries such as the State of Palestine, that are heavily dependent on tourism, have empty hotels and deserted sites. According to estimates by the International Labour Organization (ILO), the equivalent of 345 million full-time jobs were lost globally in the third quarter of 2020 due to the pandemic. Many of those hardest hit were young people.

Observing the crisis and its impact through a human rights lens puts a focus on how it is affecting people on the ground, particularly the most vulnerable among us. UNDP's report titled "Human Development Perspectives COVID-19: Assessing the impact, envisioning the recovery," highlights that human development is on course to decline this year for the first time since 1990. Declines in fundamental areas of human development are being felt across most countries – rich and poor – in every region. This is not counting other significant effects, for instance, in the progress towards gender equality. The negative impacts on women and girls span economic matters – earning and saving less and greater job insecurity – reproductive health, unpaid care work, and gender-based violence.

Today, the UN system's full capacity is mobilized, including the socioeconomic strengths of over 40 UN Development System entities. UNDP was assigned as the technical lead in the UN's socioeconomic recovery,



Seeking education in Gaza amid COVID-19. Photo by © UNDP/PAPP - Abed Zaqout.

In the Palestinian state, repeated lockdowns and restrictions associated with the spread of the COVID-19 virus have deepened already-existing multidimensional vulnerabilities. The Palestinian Monetary Authority (PMA) estimated in April 2020 that the COVID-19 crisis would lead to at least a 2.7 percent decline in

outbreak, the mitigation of potential socioeconomic repercussions is as important as protecting public health.

As such, UNDP has leveraged its extensive presence and global and regional networks across the humanitarian and development sectors to build the resilience of the Palestinian

people by effectively preparing for, responding to, and recovering from the COVID-19 crisis. Our approach is nestled firmly within the overall UNDP's programmatic framework of "transformative resilience" that places at its core national ownership and leadership, self-reliance, and Palestinian identity.

In partnership with the Palestinian government and the international community, we have linked our short-term COVID-19 response with longer-term initiatives to ensure sustainability and reprogrammed existing cash-for-work/dignified-jobs projects to

protective equipment, conducted training sessions, and raised awareness about COVID-19 within the community. In addition, UNDP scaled up medical waste interventions by procuring two microwaves to treat medical waste, as there are currently no properly functioning treatment devices of sufficient capacity in Gaza; and assisted in a medical-waste-management training program for 3,200 Ministry of Health personnel, including doctors, nurses, medical laboratory specialists, and cleaners. We are strengthening business resilience post-COVID-19 by



Youth economic empowerment programme in Gaza. Photo by © UNDP/PAPP - Shareef Sarhan.

strengthen the health sector and basic service delivery. In the health sector, we provided more than 942 medical staff, including doctors, nurses, and lab technicians. We provided

supporting the operationalization of a national micro-, small-, and medium-enterprise (MSME) help desk that will provide nonfinancial services to test and streamline MSME recovery



Closure and increased fragility in East Jerusalem. Photo by © UNDP/PAPP - Ahed Izhiman.

and resilience packages, hence strengthening the national economy and labor force. We are partnering with universities or start-up incubators to solicit innovative solutions through the Hack the Crisis initiative, reduce misinformation, provide academic counseling, and enhance e-learning. Our response is designed to help decision makers look beyond recovery, towards 2030, making choices and managing complexity and uncertainty in four main areas: governance, social protection, green economy, and digital disruption.

Governments and societies are facing unprecedented policy, regulatory, and fiscal choices as they act to save lives and set a course for a sustainable future. The choices made today, if made well, could be the tipping points that transform our societies and our planet for the better. A forward-looking response to COVID-19 could end

an era where one-third of all food produced is wasted while one in ten people goes hungry, where ten times more is spent on fossil fuel subsidies than on renewable energy, and where more than two billion people live in fragility, conflict, or violence. It could transform the lives of those who were out of school, out of work, offline, and off the grid, even before the virus spread.

COVID-19 has brought to the surface deeply rooted and sometimes overlooked inequalities. In this context, COVID-19 is giving us the opportunity to consider once again the benefits that the human rights-based approach to policies, program planning, and program delivery can provide in addressing the vulnerabilities of some marginalized people.

Mobile Clinics Bring Health Care to Remote Areas

Courtesy of UNFPA



"This is the only health care service in this area."

Amina is a 31-year-old woman from Fahma Refugee Camp located southwest of Jenin in the northern West Bank. She lives with her husband in a small, old house with their five children and her husband's family. Fahma is in an isolated area, with no facilities such as schools or health centers.

Amina has been visiting a mobile clinic in Fahma on a weekly basis to check on her pregnancy and general health. In 2019, UNFPA started to support two Palestinian Medical Relief Society (PMRS) mobile-clinic services in Jenin and Hebron in the West Bank. Today, with generous funding from the Government of Canada, UNFPA supports five clinic teams across the West Bank. The clinics ensure access to basic primary health care for around 52,000 people in and around the Jordan Valley, Jenin, Hebron, Salfit, Tulkarem, and Qalqilya.

The mobile clinics visit communities in isolated areas of the West Bank or Area C, an area that represents 60 percent of the West Bank and is home to about 300,000 Palestinians. Israel maintains full military and civil control in Area C and bans Palestinian development and construction, including the building of permanent health clinics.

According to Dr. Mohammad Iskafi, the PMRS emergency program director, "With support from UNFPA, we now provide comprehensive and needs-based services to marginalized communities. What is unique about our service is that we provide training for our health care staff on sexual and reproductive health, gender-based violence (GBV), mental health, and disabilities. Peer-to-peer youth-education activities are also integrated into our mobile clinic services."

Amina explains, "Before the mobile clinics started to visit us, we never had any health care services in Fahma. I never had regular pregnancy checkups during my four

previous pregnancies. I would go to Jenin, an hour away by car, for an early-pregnancy checkup and then to the hospital there for the delivery eight months later."

Amina's last pregnancy was unlike her previous ones. In July, when the clinic started visiting Fahma, Amina was eight months pregnant. She had preeclampsia (a potentially fatal pregnancy complication characterized by high blood pressure and swelling in the hands, feet, and legs). The health care team visited Amina in her home on a weekly basis to carry out necessary tests and closely monitor the health of her and her baby. They informed her about preeclampsia and its risks, provided her with the needed medication for blood pressure and back pain, followed up with her regarding her weight and nutrition, and provided her with the required vitamins. The team helped Amina to coordinate with the hospital for labor to promote and ensure the care and safety of the mother and baby.

"For many women and girls, these mobile clinics may be the only realistic and affordable opportunity



to access health care,” says Kristine Blokhuis, UNFPA’s Representative to Palestine. “Having these services available makes it easier for them to make informed decisions about their lives and bodies, for example by accessing family planning services.”

A continuum of care is an essential element of this project. The mobile clinic team is now following up with Amina and her baby. They provided her with family planning advice and contraceptives. “I do not plan to have any more children,” she notes, “but I will continue to visit the mobile clinic for regular checkups and will continue to attend the health awareness sessions. I will visit the psychologist when I feel like talking to someone privately about my problems. She has been very reassuring and helpful.”

Dr. Iskafi adds, “What I consider the greatest achievement in this project is the initiation of home visits to the elderly, pregnant women, and people with disabilities. All our services, including home visits, have continued during the COVID-19 pandemic. UNFPA was the first to respond to our needs, providing our health care teams with masks, gloves, and disinfectants.”

“I would like to thank PMRS and the supporters of this mobile clinic service. We would really like this service to continue since it is the only health care service in this area and the best service in Fahma,” Amina says.

The United Nations Population Fund (UNFPA) is the UN’s lead agency for sexual and reproductive health and rights. UNFPA’s vision is to contribute to a world where every pregnancy is wanted, every childbirth is safe, and every young person’s potential is fulfilled.

For further information, please contact Laura Mandel at: lmandel@unfpa.org www.palestine.unfpa.org



Inequality on the Rise during COVID-19

Courtesy of OXFAM



In the Occupied Palestinian Territory (oPt), the level of inequality, the gap between the rich and the poor, dramatically increased in 2019. Globally, the OPT now ranks 118th out of the 158 countries assessed on the commitment-to-reduce-inequality index, a significant fall of 33 places compared to the 2018 placement – and alarming given the expressed commitment to reduce the inequality.

Weak policies exacerbate inequality in the oPt

Since 2019, the Palestinian Authority (PA) has experienced an escalating financial crisis that is due to the reduction in support from international donor governments, a drop in the safety budgetary aid from Arab countries, and the cessation of repayment of customs revenue from the Government of Israel. Since March 2020, the PA's ability to support the Palestinian people has been put under even more pressure with the COVID-19 pandemic. PA policies that in 2019 already had driven the rise in inequality, especially in terms of basic social services and taxation, were not ready to sufficiently deal with the impact of the novel coronavirus pandemic.

The lack of robust policies and practices has played a significant role regarding the impact of the pandemic on societies around the world. Pre-COVID-19, only 16 percent of countries assessed for the CRI Index 2020 were spending enough on health care, and only 30 percent of the global workforce had adequate social protection. These weak policies and insufficient allocation of resources has meant that COVID-19 has exacerbated global inequality. The OPT was one of the countries that were hit the hardest by COVID-19, greatly affecting not only the health and education sectors but also the socioeconomic status of its citizens.

The pandemic is causing a financial burden on the PA and increases pressure on households. As its economic impact seeps through all levels of society, the most vulnerable families have borne the brunt. Another 53,000 Palestinian families have fallen into poverty^{vi} due to weak social protection measures, while those with the means at their disposal have survived

Extreme poverty vs. extreme wealth: How large is the inequality gap?

New analysis by Oxfam and Development Finance International (DFI) ranked 158 governments across the world based on their commitment to reduce inequality (CRI). This third edition of the CRI Index report recommends that all governments adopt strong anti-inequality policies regarding public services (health, education, and social protection), taxation, and labor rights to radically reduce the gap between the rich and the poor.ⁱ



Photo by Tanya Habjouqa, courtesy of Oxfam.

relatively unscathed. As 41 percent of Palestinians have to pay for their own health care,^{vi} 23 percent of households that needed health care services during the pandemic were unable to access them because they could not afford to pay for them.^{vii}

The pandemic put immense pressure on the already struggling Palestinian economy that is expected to contract by at least 7.6 percent in 2020.^{viii}

As a consequence, the PA's local tax revenues will drop sharply, while the PA officially rejects accepting tax revenues owed by the Government of Israel, as the latter has unilaterally decided to make deductions. This extra financial pressure on the PA has resulted in the failure to pay full wages to public servants, including doctors and teachers, from May 2020 to the date of publication of



this article. The PA managed to pay full salaries to workers who earn 1,750 shekels or less and paid only 50 percent of the owed salaries to those who earn more.

Other factors have also contributed to the ailing economy and increased financial pressure at the household level, such as Israel's tightening movement restrictions for workers between the OPT and Israel and the collapse of the tourism sector. This sector recorded losses of US\$1.15 billion in the last 10 months, as revenues decreased by 68 percent in comparison to 2019.^{ix} As a consequence of all these interlinked factors, the income of 42 percent

of Palestinian families was halved during the March-April 2020 lockdown period.^x The Palestinian Central Bureau of Statistics stated that during the first lockdown, there was a 10 percent drop in employment rates while 52 percent of wage earners did not receive their salaries and 25 percent were given only partial salaries.^{xi} Moreover, young Palestinians have been disproportionately impacted, as the unemployment rate among youth increased to 42 percent.^{xii}

To deal with the crisis, households in the West Bank and Gaza have adopted negative coping mechanisms as the overall impact

on Palestinian families has been devastating. Since February 2020, at least 30 percent^{xiii} of families in the West Bank have fallen below the poverty line, which is more than double the rate of 2017.^{xiv} In Gaza, a staggering 64 percent of the families now live below the poverty line.^{xv} This has caused many households to adopt negative coping mechanisms. Over a quarter of the families in Gaza (26 percent) and more than a third in the West Bank (36 percent) are now consuming a lower quality of food compared to before the pandemic. Many families are borrowing money and receiving food from relatives or friends.^{xvi} A clear variation can be observed in student participation in online education, as only 53 percent of Palestinian households with children between the ages of 6 and 18 years participated in education during the

lockdown, and 40 percent of the households evaluated the experience as "bad" and did not fulfill the desired tasks. Women, who are already severely underrepresented on the labor market, have been hit particularly hard by the lockdowns. They now earn less, save less, and are overrepresented in precarious jobs that lack income security.

Palestinian women and girls' access to social, health, and economic rights and social-protection services is seriously hampered. The CRI showed that women's rights in the OPT ranked 124th globally. During the pandemic, gender-based violence incidents increased by 18 percent in calls from women seeking support, and a 38 percent spike has been reported regarding incidents of abuse and domestic violence from partners.^{xvii}

Inequality is multidimensional.

Distribution of wealth: The world's 2,153 billionaires constitute 0.000002 percent of the world's population yet own more wealth than the 4.6 billion people who make up 60 percent of the planet's population. Meanwhile, around 735 million people are still living in extreme poverty.ⁱⁱ

Wealth is undertaxed: The wealthy enjoy some of the lowest tax levels in decades. Worldwide, only four cents of every dollar of tax revenue comes from taxes on wealth.

Underfunded public services: Public services suffer from chronic underfunding or are being outsourced to private companies that exclude the poorest. Thus, 258 million children – 1 in every 5, will not be allowed to go to school.

Denied a longer life: Having money is a passport to better health and a longer life, whereas being poor all too often means more sickness and an earlier grave. People from poor communities can expect to die ten or twenty years earlier than people in wealthy areas.ⁱⁱⁱ

Inequality is sexist:

Women make up the largest segment of the world's poorest individuals. While women are more likely to be found in poorly paid and precarious employment, they support society through billions of hours of unpaid or underpaid care work, the value of which is estimated at US\$10.8 trillion per year.^{iv}

Some sectors, however, have flourished during the pandemic, such as the leasing and insurance sectors. The number of leasing contracts increased by 46 percent, in real terms an increase of US\$9 million over the three months from March to June, while the insurance sector's net income increased by 106 percent over the same period.^{xviii}

"Besides my daily teaching, I had to take on a second job in a sports center. I earned 50 shekels a day. Otherwise, I could not have afforded the transportation costs to the school. I did not want to let my students down."

Ibrahim Sawafi, a teacher from Ithna

Recommendations

COVID-19 is a significant factor that drives global inequality and serves as a wake-up call for governments to rethink their policies. In the oPt, the people hope that the PA will follow suit and rethink the impact of its current strategies so that those Palestinian families who can least afford it must no longer shoulder the burden of poor policies that have done little to protect or allow them to prosper.

The Palestinian Authority must increase its spending on health care and social protection and ensure that a larger portion of social spending is received by the poor by improving transparency and accountability. Furthermore, it must increase its financial resources for social security and social service programs that benefit particularly the poor. This includes reallocating resources within the general budget and giving more support to public social services. In addition, the government must create, design, and fund programs that generate jobs for young women and men.

It must restructure the tax policy towards more progressiveness by focusing on direct tax revenues (income and wealth), notably imposing a net wealth tax and a tax on exceptional profit rather than indirect taxes (consumption taxes). The number of tax brackets must be increased to ensure improved social equity, and marginal tax rates must be raised for the personal income of high-income categories and investment activities (which yield large and rapid profits) while tax rates must be reduced for low incomes and SMEs. Thus, it is necessary to adopt a progressive income tax policy.



Photo by Tanya Habjouqa, courtesy of Oxfam.

- ⁱ "5 shocking facts about extreme global inequality and how to even it up," OXFAM, 2020, available at <https://www.oxfam.org/en/5-shocking-facts-about-extreme-global-inequality-and-how-even-it>.
- ⁱⁱ "World's billionaires have more wealth than 4.6 billion people," Oxfam, 2020, available at <https://www.oxfam.org/en/press-releases/worlds-billionaires-have-more-wealth-46-billion-people>.
- ⁱⁱⁱ "5 shocking facts," Oxfam.
- ^{iv} "5 shocking facts," Oxfam.
- ^v "COVID-19 Emergency Situation Report 4 (7–13 April 2020)," OCHA, available at <https://www.ochaopt.org/content/covid-19-emergency-situation-report-4>.
- ^{vi} "Overview of Public Health in Palestine," the Palestinian National Institute of Public Health, <https://www.pniph.org/en/about/about-pniph>.
- ^{vii} "Impact of COVID-19 Pandemic (Coronavirus) on the Socio-economic Conditions of Palestinian Households Survey" (March-May), 2020, Palestinian Central Bureau of Statistics (PCBS), available at <http://www.pcbs.gov.ps/site/512/default.aspx?lang=en&ItemID=3825>.
- ^{viii} "Palestinian Economy Struggles as Coronavirus Inflicts Losses," World Bank, June 1, 2020, available at <https://www.worldbank.org/en/news/press-release/2020/06/01/palestinian-economy-struggles-as-coronavirus-inflicts-losses>.
- ^{ix} "Palestine: The losses of the tourism sector exceed one billion dollars due to Corona" [in Arabic], Al-Arabi Al-Gedid, September 27, 2020, available at <https://bit.ly/33oePUG>.
- ^x PCBS, "Impact of COVID-19."
- ^{xi} "H.E. Dr. Ola Awad, president of Palestinian Central Bureau of Statistics (PCBS), highlights certain Key Statistical Indicators in Palestine for the year 2020 on the anniversary of World Statistics Day 20/10/2020," PCBS, 2020, available at <http://www.pcbs.gov.ps/site/512/default.aspx?lang=en&ItemID=3833>.
- ^{xii} Palestine Youth Unemployment Rate, *Trading Economics*, 2020, available at <https://tradingeconomics.com/palestine/youth-unemployment-rate>.
- ^{xiii} World Bank, "Palestinian Economy Struggles."
- ^{xiv} "Poverty Percentages Among Individuals in Palestine According to Monthly Consumption Patterns by Region, 2017," PCBS, available at http://www.pcbs.gov.ps/Portals/_Rainbow/Documents/Levels%20of%20living_pov_2017_01e.htm.
- ^{xv} World Bank, "Palestinian Economy Struggles."
- ^{xvi} "COVID-19 Emergency Situation Report 21 (20 October–2 November 2020)," OCHA, available at <https://www.ochaopt.org/content/covid-19-emergency-situation-report-21>.
- ^{xvii} 121 Emergency Helpline Update {Factsheet #2}, SAWA, 2020, available at <https://www.facebook.com/Sawa.Organizations/posts/sawa-organization-121-emergency-helpline-update-factsheet-2-sawa-organization-sa/2979405392121386/>.
- ^{xviii} "Statistics," Palestine Capital Market Authority, 2020, available at https://www.pcma.ps/portal/english/StudsAndPubs/Pages/InsSectData_Stat_2020.aspx.

By Haneen
Qawasmi



Going Virtual during COVID-19

The Palestinian Charity for Youth Economic Empowerment (CYEE) was established formally in 2011. It envisages a Palestine where young people have the skills needed for economic success and enjoy access to broad and durable networks of business owners, entrepreneurs, and decision makers. CYEE believes that providing youth with these opportunities will contribute to building freedom and equality in Palestinian society. The organization is committed to a strategy that recognizes yet attempts to overcome the prevailing local challenges with a responsive, tailored, and effective approach to youth. CYEE encourages youth to perceive themselves as stakeholders in their society and work towards a lively community through advocacy and awareness raising, focusing particularly on women's economic empowerment. The organization tailors its programs to address the obstacles women face in the job market and strives to offer them the educational and vocational skills they need to excel in their careers.

Since its establishment, CYEE has worked to lay the groundwork in the West Bank and Gaza for a broad network of partnerships with various local, national, and international stakeholders from the public and private sectors and with youth from all over the Palestinian territories. It has worked closely with educational institutions and vocational centers on upgrading their capacities to provide better service for youth in general and women in particular.

CYEE continues to serve as the International Youth Foundation's (IYF) main implementing partner in the second phase of the Equip Youth Palestine program. This program aims to create a sustainable enabling environment that fosters youth employability in Palestine and leads to improved job and life outcomes for more than 1,800 young women and men. In collaboration with IYF and in coordination with its 15 partner vocational training centers (VTCs), CYEE plans to implement training workshops and coaching sessions for staff at the Ministry of Labor and VTCs and presently provides ongoing technical support to VTCs. The charity furthermore conducts outreach to the community and employers, provides career-preparation support, and facilitates job and internship placement for youth.

Equip Youth Palestine program

The Equip Youth (EY) Palestine program creates a sustainable environment to foster youth employability in Palestine through life-skills and career training. Despite the challenges of the COVID-19 pandemic, the program has made good progress towards its midterm goals, equipping over 400 students with technical and life skills in the first year. EY plays a significant role in changing the social perception of gender roles and of men and



women's contribution to the labor market as well as the stereotypical image of VTCs by fostering activities that target youth of both genders who are enrolled in VTCs. More virtual and physical activities must be implemented to create such a change of norms and perceptions through gender-awareness and mainstreaming campaigns. Building on experience gained through prior EY program activities, CYEE aims to organize and implement activities that focus on increasing awareness of gender issues in Palestinian vocational workplaces. It hopes to

The Palestinian Charity for Youth Economic Empowerment has turned the challenges of the COVID-19 pandemic into a successful program that likely will be continued once the health crisis has subsided.

increase young women's awareness of career pathways and improve their access to the vocational sector's labor market. We hope to reach more than 2,000 youth through gender-awareness workshops, posters, short messages recorded by young men and women, and other activities that focus on female careers by inviting guest speakers, holding roundtable and panel discussions, and implementing workshops with the participation of VTC staff, employers, and youth.

The first steps in going virtual

The COVID-19 pandemic necessitated many changes and adjustments to CYEE's program. In June, the Passport to Success (PTS) training of teachers (TOT) in Gaza was conducted virtually for the first time, resulting in very successful teacher-training sessions. In efforts to cope with the COVID-19-related school closures and the cancellation of in-person extracurricular activities, project activities were adapted and an innovative method that blends virtual and in-person training was developed. The participants came from five partner VTCs in Gaza, and the training was conducted as part of the EY Palestine project. Likewise, as Palestine's infection rate increased over the summer, the team shifted to a fully remote PTS TOT in the West Bank in September. The sessions were augmented by a series of virtual workshops to build the trainers' capacity in using technology as a teaching tool. This project received high praise from the Palestinian Ministry of Labor.

Implementing these sessions has not been easy. In Gaza, the team had to navigate challenges that ranged from frequent power cuts in the region to inconsistent internet connections, impacting the trainees'

Through online teacher training, trainers and their trainees at vocational training centers in Gaza can overcome access limitations imposed for political reasons.

ability to attend. To overcome these obstacles, the team designed the course to combine remote training via Zoom with small in-person group teaching by local teachers from Gazan VTCs. By dividing what under normal conditions would be a single large group into two smaller groups, it was possible to practice safe social distancing while connecting every trainee to the digital technology they needed in order to access the training. The master trainer, dialing in from the West Bank, was then able to communicate with the groups individually via Zoom and facilitated the interaction between the two groups.

But even though this virtual training may have begun as an experiment necessitated by COVID-19, it is quickly morphing into an opportunity to reach more trainees and beneficiaries even after the pandemic subsides. Following positive feedback from VTC leaders and the trainees themselves, plans to conduct more virtual training sessions in Palestine are already under way. It is the next step as we strive to improve our training and outreach to young people in a changing world.

Today, the implementation of these virtual training sessions at

VTCs in Gaza and the West Bank is considered a success story, as people manage to create success despite the challenges and lack of resources they face. VTCs suffer from several shortcomings that negatively impact students' employment, including a lack of systematic engagement with the labor market, poor infrastructure and equipment, and the failure to add new technologies and specializations to the curricula, as well as a lack of career guidance, internship support, job-placement services, and integrated life-skills training. Considering the skill gaps that have been created by these challenging circumstances, business owners have expressed a need for skilled workers to fill available positions. Therefore, VTC students will face greater employment opportunities if their education is supplemented with more on-site training and links to private sector enterprises, as well as greater emphasis on practical and life-skills training and improved familiarity with recent technologies in their fields.

A case study

Yasmeen Al Dani is a teacher at Al-Shafei Vocational Training Center in Gaza. Yasmeen teaches beauty care to her students and faced challenges in finding good sources for life-skill topics, specifically for young women. She believes that teaching life skills is as important as teaching technical skills to her students. "Gaining the skills required to successfully deal with customers," she explains, "is more challenging for workers at the workplace than their ability to provide the service itself."

Yasmeen heard about the EY program and its offer of life-skills training to VTC teachers. She waited patiently for the training because the imposed

closure of Gaza made it difficult for the team to enter the Gaza Strip. With the COVID-19 pandemic exacerbating her situation, Yasmeen was about to lose hope when she was invited to participate in the PTS remote TOT. Yasmeen admitted, "I never imagined myself attending virtual training like the one we had! We felt as though the trainer were here in Gaza among us. I will never forget this TOT; it has left a clear impact on me, both on the personal and professional levels."

Yasmine asserts that the PTS training helped her to be more organized personally and professionally, especially when covering technical material with her students. She emphasized that she benefitted greatly from the PTS training methodology in developing her annual teaching plan and is looking to integrate the PTS topics within her curriculum.

As a female teacher, Yasmeen is trying to reach as many female students as possible. With PTS, she hopes to make them competitive in the labor market because she understands the value of life-skills training for a young person, both personally and professionally.

Yasmine likes to call herself an ambassador for Passport to Success in Gaza. She is looking forward to training as many students as possible, especially the most marginalized and less fortunate students in Palestinian society.

Haneen Qawasmi is a project coordinator at the Palestinian Charity for Youth Economic Empowerment.

Nurse Muna and COVID-19

Training to Beat Back Coronavirus in Gaza



Courtesy of
World Health Organization

“I was afraid for my children,” Mona Abu Omar, 40, recalls of the first days of the COVID-19 outbreak in the Gaza Strip. “They said, ‘Don’t be afraid to hug us, Mama, we know that you are taking all precautions.’” In late August, Muna was sent with a day’s notice to staff a tent triage center in front of the local hospital. Every day she saw dozens of people believed to be infected with the deadly virus. The mother of five worked eight-hour shifts, returning to the triage center after lunch to make sure the second shift was ready to go. There are countless reasons for Muna and her family to be concerned about COVID-19 and its spread among the Gaza Strip’s two million residents. Gaza is one of the most crowded places on earth, with limited access to essential medical equipment and pharmaceuticals due to a 12-year blockade. “The blockade is a real problem,” Muna says. Medical supplies and pharmaceuticals are often in low supply, as are laboratory testing kits and supplies for COVID-19. For a year and a half, the health system struggled to keep up with debilitating injuries, including gunshot wounds, incurred at weekly demonstrations at the fence with Israel. The demonstrations ended last December. Many believe that Gaza’s hospitals and clinics remain on the verge of collapse.



Muna, pictured above, had always wanted to be a doctor. “I didn’t have the chance,” she says, still wistful. Instead, she studied nursing, seeing tens of patients a day at a Khan Younis clinic where she is the head nurse. As the COVID-19 pandemic began, Muna and other frontline health workers took up new training opportunities, where for five days, they learned how to identify and manage suspected COVID-19 patients and how to use protective gear and prevent transmission. “The training was excellent. [It showed us] how to treat for the virus...After receiving the training, I feel confident that I can help those infected and stay safe at the same time,” Muna said after the course. Training and mitigation measures are vital to preventing COVID-19 from spreading unchecked through the territory. Recognizing this in the early stages of the pandemic, the World Health Organization (WHO) worked with the European Civil Protection and Humanitarian Aid Operations (ECHO), a key donor, to adapt its Trauma and Emergency Care Programme to the COVID-19 pandemic – while focusing on injuries and emergency preparedness.

Despite the immense challenges that face the health system in Gaza and her early fears, Muna was satisfied that she knew how to protect herself and her family, because she and nearly 350 Ministry of Health staff and emergency responders from the Palestine Red Crescent Society, such as nurses, doctors, and paramedics, had been trained in handling COVID-19 patients through WHO’s simulations. The training courses, where health workers practiced on actors (see photo at the top of page 36 with Muna looking on), were set up and delivered by the WHO and MDM-France in partnership with the local health authorities. The training ensured that Ministry of Health health workers were able to operate in newly established respiratory triage centers set up by the WHO and partners outside Gaza’s five main hospitals. The centers screen patients for COVID-19 prior to entry to help prevent further spread of the virus into the health system. The WHO provided personal protective equipment and infection prevention and control materials to ensure that frontline health workers, such as paramedics, are able to do their jobs safely.



have been able to fund and establish training and mitigation measures, and the people of Gaza could be left to suffer in this pandemic, given their weakened medical system and lack of access.” In the photo below, a paramedic in protective gear cleans a Palestine Red Crescent Society ambulance after a COVID-19 simulation exercise supported by WHO.



In August 2020, after four individuals tested positive for COVID-19 inside Gaza, Muna and other trainees received suspected cases at one of five tent triage centers. Through the use of a computerized system, patients were given a score, tested for the virus when needed, and treated for respiratory or other symptoms. Once the outbreak slowed, the hospital took over operations at the tent triage center, and Muna returned to her work at the clinic. Patients are met at the door by a nurse who does the initial screening and temperature check before directing incoming cases to Muna and another doctor.

“Humanitarian aid from the EU has been vital in heading off a real disaster here in the Gaza Strip,” says Dr. Gerald Rockenschaub, WHO Head of Office for the occupied Palestinian territories. “Without their agile response, allowing us to adjust our trauma program to the COVID-19 pandemic, we would not



“The role of the WHO is to provide technical and practical support to the medical teams at the Ministry of Health,” says Dr. Rockenschaub, “allowing them to carry out their work safely and effectively.” Muna has gone on to use her experience to train some 30 members of Ard El Insan, a local health services organization where her husband is employed as a doctor, in basic infection prevention and use of protective equipment. “The core of my job as a nurse is to help people,” she says. “It’s very nice to help people and to empathize with them.” In the photo above, health workers consult with other medical staff as they train in COVID-19 preparedness.

Tackling COVID-19

The Palestinian Medical
Relief Society

By Mustafa
Barghouthi



The Palestinian Medical Relief Society (PMRS) was founded in 1979 by a group of health professionals to close the gaps identified in the existing but impoverished health care system in Palestine. It aims to deliver a rights-based approach to health for all Palestinians who live under the occupation. It remains the largest and only united Palestinian grassroots health organization, operating across the West Bank, including Jerusalem, Area C, Hebron, and the Gaza Strip.

From our inception, we have endeavored to care for our most vulnerable population segments, including women, children, the elderly, Bedouin communities, and individuals with disabilities or from lower socio-economic backgrounds. We have also built a network of mobile clinics to deliver health care to persons who live in the most remote and rural areas and who frequently

lack equitable access to quality health care, cut off from mainstream services by checkpoints and settlements. Our mission is to ensure that all Palestinians are empowered and equipped to access equitable, quality health care, enabling them to enjoy their full human rights and live healthy, prosperous lives.

In March 2020, amidst the seemingly intractable and ongoing preexisting humanitarian crisis caused by the occupation, the first cases of COVID-19 were confirmed in Bethlehem. Since that initial outbreak in Palestine, PMRS has reacted expediently and with agility to ensure the safety of our communities. We remain guided by our overarching principle and longstanding ethos and operating modus: applying a collective and collaborative approach to efforts to reduce the infection rate, limit the spread of the novel coronavirus, and flatten the curve – while continuously supporting our communities and caring for their everyday, primary health care needs. We extended our outreach model to ensure that we reach the most vulnerable, isolated population groups while supporting the already overburdened hospital and over-extended public health care systems in dealing with COVID-19 cases and the usual noncommunicable (chronic) conditions.

Engaging and leading a collaborative approach involved coordinating and working with local communities and established organizations such as community-based organizations (CBOs), women's organizations, other local institutions, and international nongovernmental organizations (INGOs). Furthermore, all our actions continue to be planned and carried out in collaboration

As schools and universities have reopened, and some localities have eased lockdown measures, PMRS continues to collaborate with local entities to help prevent a sharp rise in the second wave. We have worked closely with schools and universities to provide them with adequate support in educating the students about social distancing and safety measures.

and compliance with the relevant national and international authorities, including the World Health Organization, the emergency health cluster, the Ministry of Health, and other relevant government bodies. Such proactive collaboration and coordination are essential to achieve the best possible outcomes. During this process, we found that the resilience of our staff, volunteers, communities, and local organizations has once again proven to be an inspiration and an asset, and has supported our efforts to act expediently and flexibly when conditions rapidly changed. They managed to act while facing the daily challenges of living under military occupation. We struggled to ensure our communities' compliance concerning the implementation of self-isolation and social distancing,





and engaged in safeguarding support of our efforts to maintain a robust primary health care function while working within the confines of the lockdown laws.

While all primary health care services have been adapted to and redesigned in line with current safety precautions to reduce the rate of infection, home visits are conducted when possible, mobile-clinic visits continue, and we have

PMRS continues to work with isolation centers and conducts home visits and checkups for those isolating at home.

funneled existing staff and volunteers from other nonessential services/projects into our COVID-19–related efforts. We have utilized the technologies available to us to ensure that essential services, such as women’s health and mental health, are not forgotten or left un-serviced. One of our greatest innovations has been the establishment of various needs-specific Facebook pages and hotlines that provide real-time support and advice, including one with COVID-19–related content and another one specifically to support women and create a safe space that provides online consultation and is ready to respond to emergency calls. In addition, we established hotlines for mental health support and other health-related support/advice. Our hotlines, staffed by health workers that include psychologists and doctors, proved to be a popular and essential service during the pandemic. We especially noted an increase in calls related to mental health and gender-based violence (GBV). This is a service that we will consider continuing post-COVID-19, as the geographical restrictions imposed by the military occupation can somewhat be surpassed using such a tele-health model.

Overall, 50 (plus) primary health care and various other project functions continue to operate across Palestine, including the West Bank, East Jerusalem, Hebron, Area C, and the Gaza Strip. In many instances, our staff has operated two shifts in areas with high caseloads. We have worked to adapt our women’s health programs to help prevent GBV and support those affected by GBV, given that during high-stress periods, including financial stresses (due to job loss), there

is an undeniable increase in such incidents. Therefore, we offer online courses to support women who have various concerns, including how to cope with increased pressures in their homes, as husbands and children may be self-isolating, how to keep children engaged and compliant with lockdown restrictions, what to do in case of GBV-related concerns, and other up-skilling opportunities, including vocational and advocacy training. We continued to work very closely with women’s shelters, supporting them with COVID-19–related materials and hygiene kits and assisting their efforts to support women during such a stressful period. Overall, our women’s health programs have reached more than 50,000 women.

Within the communities, we have activated the PMRS-run youth groups and our own volunteer network to support the health workers or those most vulnerable, such as single mothers at home, the elderly, orphans, and other less-mobile community members. These

PMRS endeavors to scale and further galvanize its mental health and psychosocial health care services, with a particular focus on youth, who have found the social restrictions particularly devastating, as this is often their only outlet for dealing with the daily reality of military occupation.

volunteers deliver medication and treatment at home or provide other essential support services, such as distributing food and care packages of essential items. Furthermore, our teams positioned themselves at village entrances to educate workers returning from Israel and to conduct



infection screening. Many youth and other volunteers had already been trained in first aid and emergency response, and we provided further COVID-19-specific training to support their efforts.

One of our paramount efforts was the delivery of COVID-19-related public-health-specific education and awareness programs. Our experience informed our face-to-face approach, whereby our health teams and volunteers mobilized to deliver flyers and engaged in conversations with various community members regarding their role and responsibility concerning lockdown rules and the need to use PPE, such as masks and gloves. In addition, we distributed information flyers and booklets outlining ways in which the communities could take care of their overall health, including their nutrition and mental health. We delivered a total of over one million flyers, booklets, and posters across more than 650 communities in the Gaza Strip and the West Bank.

Further assisting local communities, our volunteer network worked with local businesses and organizations to ensure that they were COVID-19 safe and prepared. Hundreds of localities received support in sterilizing communal areas such as supermarkets, ATMs, banks, and more in efforts to assist the communities in flattening the curve. Food supplies, medications, and PPE were provided to all homes for older people and to older individuals in the West Bank and Gaza Strip.

Our mobile outreach teams and clinics delivered hundreds of thousands of masks, thousands of units of sanitizer and gloves, hundreds of thermometers and gowns. In addition, thousands of

packages of food or other essentials have been distributed across the most vulnerable groups to serve the communities' everyday needs during such unprecedented economic distress, hoping to ameliorate some of the more immediate ramifications of a population facing rates of more than 60 percent unemployment and persons living below the poverty line. In an effort to strengthen the work of those attempting to flatten the curve, hundreds of hygiene packs were distributed to those in need; to support our women's shelters and programs, we distributed hundreds of dignity packs for women to equip them with essential feminine hygiene care. Lastly, we are working to support our own staff/volunteers to stay safe both by providing mental health support and debriefing and by aiming to ensure that any risk associated with the occupation is considered and mitigated as much as possible. Our health college is conducting online education sessions to continue supporting the growth and development of the community and our staff – who have consistently risen to the challenges associated with the complex reality of life under military occupation, amidst a global pandemic.

As of November 2020, we continue our efforts to flatten the curve and tend to the social, mental, and physical needs of our communities. According to OCHA's most recent report as this article is being prepared for publication, there have been 81,294 confirmed cases of COVID-19, with 7,455 active cases currently. The total number of deaths since the initial outbreak stands at 687. The Palestinian Ministry of Health and WHO indicate that these figures are likely to underrepresent

the actual number of cases due to testing constraints. PMRS continues to work with the emergency cluster and local authorities to coordinate and adapt its efforts in weekly meetings, developing the relevant policies in accordance with the Inter-Cluster Coordination Group (ICCG).

We understand that the work continues and that great gaps remain in the available health care services and equipment. According to OCHA, two million masks, gloves, and laboratory test kits are lacking, and there is a shortage of ventilators and hospital beds, including ICU beds. Due to the preexisting health care-budget deficit, the oPt now urgently requires US\$31,304,992, with only 41 percent of the budget needs covered thus far. We intend to continue our focus on the most vulnerable population groups, in particular women, youth, the elderly, and those with health complications. Of particular concern is the rise in mental health complications, including suicidal ideation and attempts, with an increase in the number of deaths by suicide.

Overall, we are pleased with the impact we have had thus far and with the overall collective effort we have witnessed within each community. When comparing the statistics to other regions globally and considering our impoverished infrastructure, we see that the Palestinian people have responded extremely well to the situation and adapted individually while keeping their community in mind.

Over the years, PMRS and the Palestinian people have repeatedly proven to be resilient in the face of adversity. Once again, this can be seen to be true, and it is this agility, experience with emergency situations, preparedness, and overall

PMRS considers this crisis to be an opportunity to work collaboratively with our communities, our local organizations, and INGOs to hopefully, in the short term, protect people from COVID-19 and, in the long term, support their right to access quality, equitable health care for all.

civic-mindedness that has contributed to the positive results until now. While a lot of work remains to be done and we can continue to reduce the rate of infection and flatten the curve, some comfort can be drawn from our recent successful responses during what has been, for most, a disconcerting and uncertain time.

PMRS sees this as an opportunity to grow and learn as an organization, building on our existing internal, organizational resilience and overall emergency preparedness. Furthermore, we see this as a chance to galvanize existing relationships and to find new ways of cooperation that could overall and collectively lead to long-term positive impact beyond the pandemic. This mindset will certainly be necessary for the post-COVID-19 recovery phase.

Dr. Mustafa Barghouti is the president of the board of the Palestinian Medical Relief Society.

Quo Vadis?

By Abir
Giacaman



How Hospitals in Germany Are Managing the Novel Corona Pandemic

In mid-March 2020, the first wave of COVID-19 confronted Germany with full force. Today, we are in the middle of the second, more vicious – in terms of numbers – wave. Nothing we have ever seen is in any way similar to the ongoing COVID-19 pandemic. Ebola did not reach our borders, the 2009 flu pandemic, including the new strain known as swine flu, caused “only” around 85,200 cases and 30 deaths in Germany.

Before the novel coronavirus hit us in Germany, the conditions in various countries, particularly the pictures from Italy and Spain, caused alarm and immediately put us in crisis-management mode, giving us a bit of preparation time. At our hospital,¹ we activated our already-defined crisis task force in early March. This included the hospital board, hygiene doctor, technical director, and

quality management. Initially, we met daily online; currently, we meet once a week. Furthermore, during the first wave, the CEOs of all hospitals that belong to our company met online every day with our headquarters and their experts in Berlin.

It is worth noting that each hospital in Germany has its individual pandemic plan, as part of a comprehensive plan of a city and the various states, and in accordance with official health guidelines. At the local level, we are embedded in Frankfurt’s crisis task force that coordinates the work between hospitals and health bodies and other states or countries. ICU and ventilating capacities are uploaded daily on a nationwide platform to coordinate capacities and prevent the collapse of hospitals.

The number of decisions we make and the volume of information that arrives from the official bodies is immense. We are being provided with input on all aspects of the novel coronavirus and on new or altered laws and regulations.

Simultaneously, many existing regulations are being put on hold, enabling hospitals to focus on and better deal with the tremendous new challenge. The most concise piece of information, however, was a letter we received on March 13, 2020, from the federal health minister, Mr. Jens Spahn, who, in an unusual manner, addressed the hospital heads directly. Referring to the alarming situation in Italy, he asked us (then formally requested per decree) to postpone all medically postponable treatments and surgeries. This aimed to create capacities for COVID-19 patients, enable adequate health care, and avoid a collapse of the health care system, as seen in neighboring countries – a main goal pursued diligently until today. Furthermore, Mr. Spahn asked us to double our ICU ventilation capacities. We currently no longer apply the first part of the plan of medical-treatment cancellations, at least so far.

The reactivable plan to restructure the hospital to meet the needs of

Berufsgenossenschaftliche Unfallklinik (Trauma Clinic), Frankfurt, Germany.



“It is well known that coronaviruses generally do not lead to long immunity. On average, it is one year for the normal ‘corona cold viruses.’

***Professor Sandra Ciesek,
director of the Institute of
Medical Virology at the
University Hospital Frankfurt***



Christoph 2 Federal Government helicopter stationed at our hospital.

the pandemic entailed a number of measures, the first of which concerned safety. We immediately closed down unsuitable facilities such as group-therapy units, medical pools, and the cafeteria, offering alternative services with hygienically packed food. We made sure to shield every contact point, such as reception desks, with plexiglass. The option of working from home for administrative staff was promptly introduced, and all nonessential activities, such as training sessions and conferences, were halted. We altered visiting regulations in accordance with state requirements. A main task was to define and regularly update a comprehensive testing strategy for patients and staff, recently adding antigenⁱⁱ and pool testingⁱⁱⁱ to the PCR-test, which remains the gold standard. In our hospital, we decided against antibody tests. Currently, we test every patient before admission or as a point of care in the emergency room.

As requested by the government and during the first wave only, the chief doctors decided which treatments could be postponed; cancellations were processed in

June. At the same time, guidelines for diagnostics and therapy for the new disease were issued and are regularly updated. Training staff members simultaneously for hygiene and other measures was a priority. In order to reduce contact, videos were produced and streamed on the intranet.

Another preventive measure was implementing a new entrance to the emergency rooms with a “sorting area” to pre-assess self-referrals while correspondently activating the fever clinic. Here “suspected cases” are referred and, if confirmed, they are transported in a dedicated lift to the isolation ward, which was designed for this purpose, meeting specific hygiene demands. We introduced screening for outpatients via phone prior to fixing an appointment; furthermore, we coordinated with emergency services on safety measures prior to emergency deliveries.

The ongoing worldwide shortage – to varying degrees – of personal protective equipment (PPE) means that securing PPE continues to be one of the main challenges. In addition to PPE, we purchased

special equipment for COVID-19 patients (e.g., shielded transporters). An exchange platform on available PPE with affiliated hospitals was created to bridge emerging bottlenecks.

At the same time, matters such as expanding capacity for a potential increase in deaths (cold rooms) – which gladly, we have not yet needed – had to be taken care of. Ethical guidelines for borderline situations and triage for our doctors on the

for other critical areas in case of increased incidents of sickness.

With changes taking place at such a breathtaking pace, we put special attention on regularly informing the staff members via intranet and offering support services such as virtual professional counseling.

Currently, the number of persons in Germany who test positive for COVID-19 is rapidly increasing at rates that are explained not only by



Our staff campaigning for people to stay at home: “We remain here for you, please stay at home for us.”

front line were issued in accordance with guidelines of *des Deutschen Ethikrats* (German Ethics Council) – and which, fortunately, we have not yet needed in Germany.

As requested, we doubled the ICU and ventilation capacities, including building up a new area, while securing extra reserves of medical gases. For this purpose, we trained medical staff with related expertise for deployment to the expanded ICU. Likewise, we trained backup teams

expanded testing. Hospital capacities in some areas are becoming critical. Mainly, we are facing a shortage in medical staff, which hinders our use of the expanded capacities. Activating trained staff for COVID-19 care would mean reducing the regular treatment of other patients. Furthermore, testing capacities are getting tight, as the health bodies are partly overburdened with the once excellently performed job of tracking. Thus, the national testing

strategy is currently being altered. A partial lockdown for four weeks has been implemented for November that entails some closures and a series of rules that apply especially to social and cultural fields and defines the number of private contacts allowed at one time. There is the hope that we might still manage to flatten the curve, as we did in the spring. The reported R-values,^{iv} one of several indicators, were stable well above 1 throughout October; fortunately, they reached 0.88 on November 10, 2020, falling from 1.10 on the day before, which indicated a steady downward trend over a few days, according to the Robert Koch Institute.^v A value of < 1 is the targeted level. A comparison: the lowest value reached since March 2020 was around 0.6, the highest 2.76.

The mortality rate per million inhabitants is, as of today, 126, ranking 31st in Europe and 72nd in the world.^{vi} Germany managed to flatten the curve during the first wave and is shown to generally be doing well in international and European comparisons. The reasons are numerous: a mix of potential statistical distortions and factual differences. The latter includes the strategy of early, quick testing and isolating positive cases; the prevailing decentralized, flexible federal structures; a graduated health system (with health departments testing outpatients only seeking to be tested for COVID-19, not the hospitals); a well-structured hospital system; and, according to my observation, a general culture that is perceptive and ready for commitment and “acting reasonably,” not to forget the crucial factor of general trust in the current government and its leadership. A recent study showed that 80 percent of the population

Leading scientists in Germany, along with many of their colleagues worldwide, strongly oppose the idea of focusing only on the protection of the elderly and other at-risk and vulnerable groups while the rest of society returns to business as usual – aiming to achieve herd immunity during the corona pandemic. Too many factors make this strategy unfeasible.

supports the government’s measures in dealing with the pandemic.

On November 9, 2020, the world received the encouraging news of a breakthrough in developing the first vaccine against COVID-19 by BioNTech and its partner Pfizer. Many other candidates from numerous countries are expected to be following soon. In this regard, there are many important issues to be dealt with, such as fair access to the vaccines for all countries and setting the right priorities in each country as to who should get it first. Vaccination centers are now being built here to prepare for this challenging task. The current plan is to start with risk groups, members of the medical sector, and persons with intensive contacts. One of the most renowned virologists in Germany, Professor Christian Drosten,^{vii} the chair and director of the Institute of Virology at the Charité Hospital in

Berlin, explained that the pandemic, seen at a global level, has “only now really started.” According to Drosten, the approval of a vaccine does not immediately solve the problem, due to logistic challenges. “It might be a job for the entire year 2021,” he predicted.

So where do we go from here?

Leading scientists in Germany and worldwide have strongly opposed the idea of focusing only on the protection of the elderly and other risk groups, while the rest of society returns to business as usual – aiming to achieve herd immunity. It is not possible to completely shield the elderly, they argue. On the other hand, there are many at-risk patients in the younger age groups, and we are currently seeing in our ICUs young patients with no underlying diseases. According to a recent statement by Angela Merkel, a third of the German population can be considered at-risk regarding COVID-19. Her statement was endorsed by several experts.

Uncontrolled contamination would thus lead eventually to an escalating increase in deaths because risk groups are far too numerous, heterogeneous, and partly unrecognized to actively shield them. The increased risk of severe COVID-19 progression occurs with many factors such as obesity, diabetes, cancer, renal insufficiency, chronic lung disease, liver disease, and stroke, as well as following transplants and during pregnancy. A possible complication for survivors of COVID-19 disease is the so-called “long COVID” syndrome, a term that summarizes various late damages to the respiratory, vascular, and nervous systems or other organs, severely restricting quality of life, the ability to work, and probably life expectancy.^{viii}

The currently imposed mini-lockdown, as described above, which is considered a circuit breaker, intends to prevent the overwhelming of the health care system. It is not the preventive measure that scientists prefer (see below) but rather a compromise that attempts to keep a balance in efforts to save both the economy and public health. In a popular, award-winning podcast, Professor Drosten^x used the following imagery to describe the idea of a mini-lockdown(s) as a circuit breaker: “It’s like a truck rolling down a mountain. Suppose we drive down a mountainside with a heavy truck that cannot stop, and we know that we will fly off the curve. The brakes are broken, and we are allowed to step on them only for five seconds. What to do? It will not be enough to pull the brakes once, we have to do it every few hundred

In addition to requiring effective crisis management and dealing with immediate, urgent needs, the current situation calls on us as intelligent individuals, institutions capable of continuous learning, and empowered societies to seize this historic occasion for change as a fundamental duty in light of this catastrophic event. Evolution teaches us: those who adapt survive!



The hospital cafeteria is closed.

meters. And we must do it early on, while we are still driving slowly downhill.” Accordingly, several mini-lockdowns that are spread over a long period of time are a potential measure to prevent rapid spread “until spring, when the situation gets better again, a vaccine is available, and temperatures rise again,” Drosten suggested. “The advantage of such a circuit-breaker over a more diffuse general lockdown, as was imposed in Germany in the spring, is that everyone knows from the outset: it is temporary. This way, everyone can adjust to it,” he concluded.

After a mini-lockdown, it is hoped that the number of new infections would be significantly reduced, allowing the system to better manage case-tracking again. This method is helpful, however, only if a certain threshold of infection numbers is not exceeded.

Regarding the much-debated school openings, the current consensus is to keep them open, as their closure in the spring of 2020 caused much controversy. Currently, schools are implementing various creative measures, from dividing larger

groups to prevent super-spreader events to hybrid classes and applying – in addition to known hygiene rules – new technologies such as ventilation machines, recently designed for the purpose, or CO₂ measuring devices that indicate when it is time to ventilate!

As a number of lessons have been learned, experts speak of another consensus: the novel coronavirus – as stated in the theme of TWiP’s current issue – is here to stay. We must learn to live with it. Eventually, vaccines will be available and, hopefully and successfully, will reach all parts of the world. We must rely on eventually having better medicines. We will learn to take the vaccine (the durability of which is yet unknown) in the required rhythm. Those who fall sick could then enjoy adequate treatment. Moreover, the experience we are gathering and the measures we will have taken will be a valuable reference and always “reactivable.”

Beyond the health issue (and the socio-economic impact not dealt with here), there is the emerging question as to how our lives will

be organized in the aftermath of the crisis. Zukunftsinstitut (Future Institute)^x has outlined four potential scenarios: Total Isolation, System Crash, Neo-Tribes, and Adaptation. I will depict only the fourth scenario here.

Scenario 4: Adaptation

The world is learning and emerges stronger from the crisis. We adapt better to the circumstances and are more flexible in dealing with change. The global economy continues to grow but at a much slower pace, partly showing stagnation. Companies in such environments need new business models to become more independent of growth. This automatically raises the question of the purpose of economies: is it the constant striving for more profit? Alternatively, perhaps better, we find solutions that are socially and ecologically more advantageous for

all stakeholders. One thing is clear: our pursuit of and striving towards the objective of humanity’s collective survival of this crisis helps us reconcile differences and treat each other with care.

Abir Giacaman was born in Bethlehem, Palestine, and lives in Germany. She finished her studies in business administration at Saarland University and followed up with two years of further education in hospital management in Freiburg. She has held senior positions in the management of acute-care hospitals since 2001, and is presently the CEO of the Berufsgenossenschaftliche Unfallklinik in Frankfurt, a highly specialized acute-care polytrauma hospital that treats over 50,000 patients per year.

ⁱ Berufsgenossenschaftliche Unfallklinik (BGU) Frankfurt.

ⁱⁱ Antigen tests detect viral proteins expressed on the outer surface of the coronavirus. Antigens, a term for any foreign substance, such as a virus or bacteria, are recognized by the body to induce an immune response to fight off infection. These tests are less accurate than PCR tests.

ⁱⁱⁱ In the so-called pool tests, not one sample is examined individually for the coronavirus. A test of combined smears of several, usually ten, persons is made (pools). If the test is negative, all ten people in the pool are also considered negative. If the test is positive and the virus was detected in the pool sample, the ten samples must be analysed individually to determine the infected person.

^{iv} The reproduction number, or R-value, indicates how many other people an infected person infects. For example, at a value of 1.3, 10 infected people infect an average of 13 more people.

^v The German federal government agency for disease control and prevention.

^{vi} Worldometers.info.

^{vii} Prof. Drosten is also the director of the Department of Virology of “Labor Berlin,” the largest laboratory in Europe. Some of his research focuses on emerging viruses. He was one of the co-discoverers of the coronavirus SARS-CoV in 2003. For the coronavirus SARS-CoV-2, the research group led by Drosten developed a test that was made available worldwide in mid-January 2020.

^{viii} Elizabeth J. Williamson, et al., “Factors associated with COVID-19-related death using OpenSAFELY,” *Nature*, July 2020, available at <https://www.nature.com/articles/s41586-020-2521-4>.

^{ix} The WHO requested to have the podcast translated for world accessibility, but Prof. Drosten declined, explaining that a translation of such content bears the high risk of misinterpretation or faulty reproduction, which might cause much harm. For those who understand German, I strongly recommend listening to it. <https://www.ndr.de/nachrichten/info/Coronavirus-Update-Der-Podcast-mit-Christian-Drosten-Sandra-Ciesek.podcastcoronavirus100.html>.

^x “The Corona Effect: Four Future Scenarios for the Economy and Society” (in German), available at <https://www.zukunftsinstitut.de/artikel/der-corona-effekt-4-zukunftsszenarien/>.

By Anan
Copty



An Innovative Face Mask for the Coronavirus

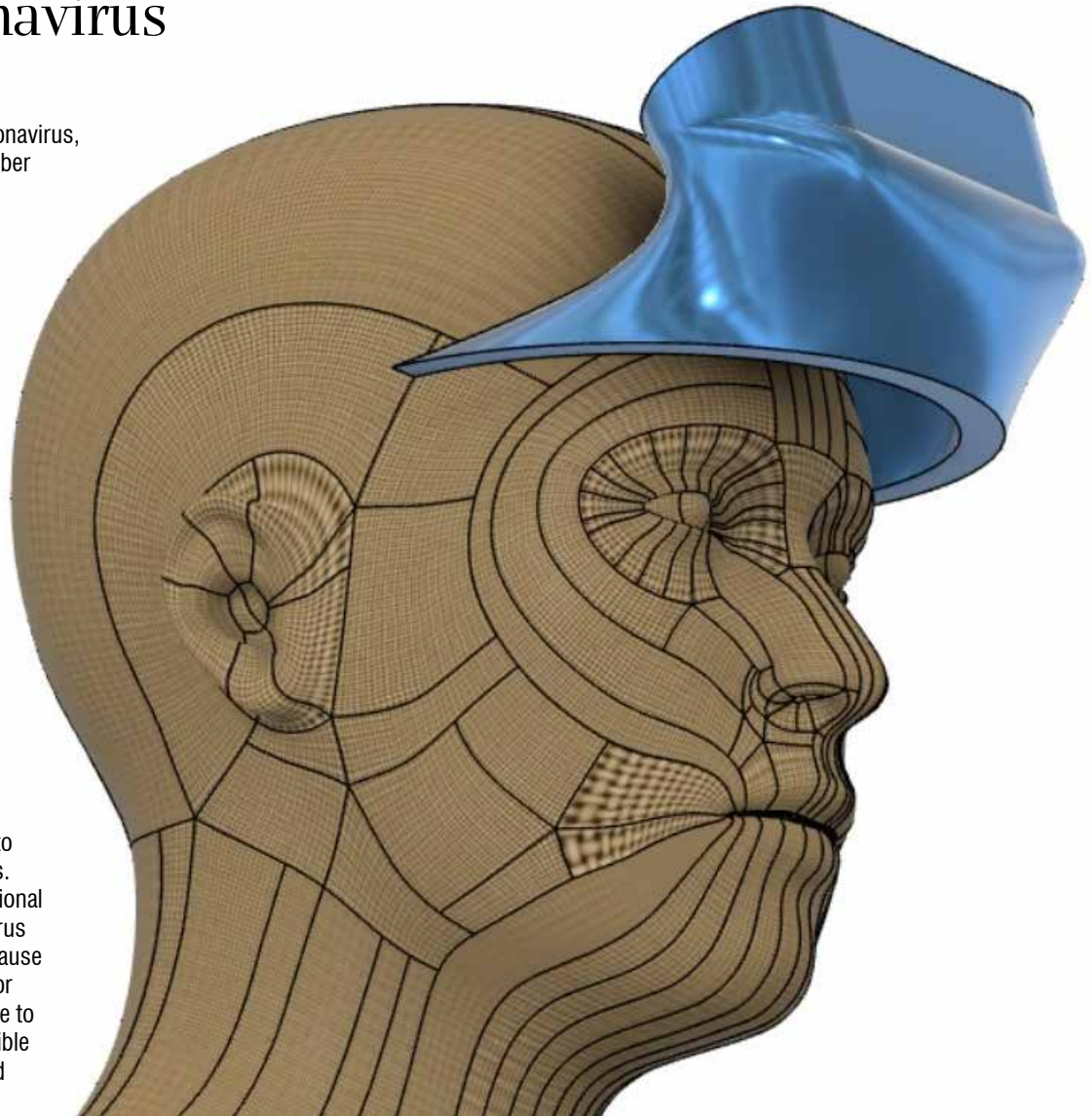
with face masks. It also prevents hearing-impaired people from reading other people's lips. Crucially, many masks do not provide a completely filtered environment around the mouth and the nose. This is because in many masks, the edges of the mask do not fully conform to the contours of the face, leaving unfiltered spaces typically on the cheeks below the eyes.

The bottom line is that alternative solutions are required, and this is where the idea of the air shield mask was born. The concept is very simple and is shown in the accompanying figure. It consists of a device worn on the forehead, which generates a powerful airflow through an air slot in such a way that an invisible shield is created in front of and around the face. The shield

C OVID-19, also popularly known as the coronavirus, hit the world by surprise starting in December 2019 in China, and then the rest of the world in 2020. Entrepreneurs and the start-up scene took a real blow as a result. If one has a creative solution for environmental issues, traffic, education, or a cure for diabetes, then that is great. But this is not the appropriate time for these ventures.

The focus today for governments and the investor community has shifted mainly in the direction of finding solutions that address COVID-related problems. In March 2020, we saw a huge demand for purifying gels, gloves, and cleaning solutions as physical contact was considered the biggest disease spreader. Later, it was found that the virus is airborne, and this has prompted the widespread use of medical face masks and face shields to prevent the virus spread.

Conventional face masks typically apply a filter cloth that is placed over the mouth, nose, and cheeks of the user. The filter may be tied through a ribbon that is placed around the ears. Face masks, however, have presented several issues to the public. For example, masks cause breathing and talking discomfort for users, especially when the masks are worn for extended periods. In addition, viruses can stick to the masks, which can transform the masks into virus carriers. Moreover, most masks do not cover the eyes unless an additional transparent face shield is used. It has been shown that the virus can also spread by contact with the eyes. Face masks also cause discomfort in hot weather as they can make people sweat. For people who wear glasses, the masks may fog the glasses due to exhaled air being directed upward by the mask. It is not possible to see the facial expressions of people when they are covered



would block airborne viruses from touching the human face based on the concept that the pressure inside this shield is much higher than that of the surrounding air pressure, therefore creating a differential pressure system that would block viruses or other airborne containments. It is imperative that the incoming air to the device be filtered such that the device's generated airflow is clean and virus free. Therefore, air filters are added to the design. The shield is not only helpful to protect the wearer from surrounding people who carry the virus, but it would also protect the surrounding people, as the air shield would slow or dampen a sneeze generated by the carrier wearing the device because the air shield generates a downward force on the exhaled air.

Technically, the challenges are not very simple. The device cannot be heavy on the head, it has to be esthetically pleasing, it has to generate a strong air flow while maintaining a long battery life for the user, and it has to be designed in such way that it can be mass produced at a reasonable price. Fortunately, we have the help of Saeb Shweki (mechanical engineer), Abu El Ez (electronic engineer), and Laila Salah (mechanical engineer), who have been volunteering their exceptional talents to make this happen. The invention has been patented. The team is currently developing and testing initial prototypes using 3-D printers. Intensive computer simulations have been taking place to optimize air-flow dynamics. So far, the results have been very promising. We are also seeking initial investments to

work with a manufacturing facility to produce the mask device in large quantities. This is to be followed by crowdfunding activities where the device will be sold to initial enthusiasts. Our first market will focus on people who wear glasses and suffer from fogged lenses when they use conventional masks. Currently, there are over one billion people worldwide who wear glasses. Beyond the coronavirus era, this mask may be used for medical staff, weak-immune-system patients, people who live and work in dusty or polluted environments, firefighters, agricultural workers, and home cleaners, amongst other users.

Anan Coptly received a BS from Gordon College, an MS from Boston College, and a PhD in physics from the Hebrew University of Jerusalem. He has worked at the Harvard Physics Department in particle-trapping experiments, the Harvard-Smithsonian Astrophysics Center, the Harvard Medical School, and as staff scientist at Radiation Monitoring Devices, Boston. Anan joined Intel in 2004 where he worked in the area of research and development of new technologies. He founded Noninvasive Medical Devices in 2015, and later SynergyMed in 2018, a start-up involved in cancer-tumor treatment through noninvasive thermal ablation. Anan is married and the proud father of two children.



Barenboim-Said for Music

Barenboim-Said for Music
Al Jihad Street 22, Al Masyoun
Ramallah, Palestine
Phone: +970 (02) 297 2276
Email: press@barenboim-said.ps
Website: barenboimsaidformusic.org

November 20, 2020

Ramallah, Palestine

The Barenboim-Said Center for Music will present a workshop for the Filasteen Young Musicians Orchestra Ensemble (FYMO) and the Beginners Student Orchestra of the BSCFM.

The workshop will include over 50 young students from the Barenboim Said Center for Music and will give our children the opportunity to learn from the FYMO musicians through a musical exchange between younger and older generations of Palestinian classical musicians.

The first concert will be held on Sunday, November 29, at 2:00 p.m. at Bethlehem University.

The second concert will be held on Monday evening, November 30, at 4:30 p.m., at the Barenboim-Said Center for Music.

The program includes:

- Mozart - Symphony No. 40
- Songs by Fairuz
- Traditional children's songs

Both concerts will be live streamed on Facebook.

In-person audiences are not allowed due to the current COVID-19 restrictions.

www.facebook.com/barenboimsaid.ramallah

About BSCFM

Barenboim-Said Center for Music advocates for an informed and vibrant Palestinian society in which music plays an integral part in educational development and shapes the identity of children.

The workshop is supported by:
the German Federal Foreign Office



Auswärtiges Amt وزارة الخارجية

In Cooperation with:



Daniel Barenboim
Stiftung



Majd

Accompanying Youth through Turbulent Times via a Virtual Character



Courtesy of Sharek Youth Forum

Palestinian society today needs new tools and methods to help adolescents and youth safely transition from adolescence into adulthood. Sharek Youth Forum works closely with the United Nations Population Fund (UNFPA) to promote gender equality and positive behavior through animation characters who serve as “virtual ambassadors” to change children’s behavior.

As the recipient of generous financial support from Belgium, UNFPA has enabled Sharek Youth Forum to develop a virtual character – a brave student – who promotes gender equality and plays an active role in standing up for the rights of women and girls.

Majd... a virtual ambassador for positive change

Majd (the same name is used for both the male and female characters) is our virtual ambassador, a 12-year-old who advocates for positive change in the lives of Palestinian adolescents, who number approximately two million. Majd is brave, curious, and engaged, and wants to be a healthy, educated, and active Palestinian citizen, contributing to the good of the community, promoting gender equality, and combating gender-based violence. Majd takes young people on a journey through adolescence using animated videos, a mobile application and educational diary, educational games, and theater-based awareness-raising activities, including school contests.

Many challenges occur as Majd navigates the complex road to adulthood: physical changes brought on by puberty coupled with rapid psychological development and an increased desire for autonomy and stability; peer pressure and potential harmful social norms; and many, many questions. To become a healthy and educated adult, Majd needs a supportive environment, a great deal of information, and many learning opportunities to facilitate the safe transition from adolescence to adulthood.

The journey

Majd’s long journey started in 2018, accompanying Palestinian children and adolescents through various tools and methods. This journey invites young people and others, including the media, to engage in an innovative and

unconventional initiative, bringing gender inequality and gender-based violence into mainstream narratives, rather than simply viewing them as issues relevant only to women.

Majd’s journey raises awareness about gender inequality within Palestinian society and how to change attitudes towards all forms of gender-based violence; it encourages young people to challenge dominant stereotypes and promotes young men’s engagement in advocacy for gender equality while at the same time increasing young women’s awareness and empowering them to reject all forms of violence against their peers, both female and male.

Majd’s “Brave Student Diary”

Majd’s “Brave Student Diary” was developed and updated based on the “Brave Man Diary” developed in 2017 through Spanish Cooperation’s support of UNFPA. The diary focused at first on teaching boys the concept of positive masculinity and their engagement in promoting gender equality. In 2018, Majd’s Brave Student Diary was updated to raise awareness among both boys and girls on concepts related to gender-sensitive roles and responsibilities among school students and their families, teachers, friends, and others, aiming to change misperceptions and stereotypical behaviors of





Students at a school for girls enjoy a Majd Diary workshop.

gender inequality associated with norms and traditions that leads to gender-based violence in Palestinian society. The diary has been used as an educational tool in selected public, private, and UNRWA schools, in partnership with the Ministry of Education, and UNRWA. Teachers and counselors have been trained on the use of the diary in order to facilitate class sessions that invite students to reflect on notions of bravery and the perceptions of gender norms and violence. Students are encouraged to talk about the value of domestic work and their mother's role at home. They also discuss the fine line between societal gender roles and whether they can be crossed or not. Can men cook? Can women work outside the frames of the home? etc. This leads to helping these students become advocates for women's rights and roles.

The diary is one of the tools used by teachers, counselors, and parents not only to talk about the change in understanding gender roles but also to enhance the dialogue with parents, friends, and teachers on topics that include violence and discrimination in society.

Majd mobile application

The application introduces an electronic version of the diary through games and worksheets for positive practices in a variety of situations that the child may face at home, in school, and in the neighborhood and public places. The application includes digital-security materials, animated videos, awareness-raising posters, and interactive games. Currently, more than 500 children have downloaded the application, which is currently



Boys during a Majd Diary school workshop.

available on Google Play under the name رحلة مجد (Majd's Journey).

Majd against COVID-19

To respond to the worsening situation during the coronavirus outbreak, Majd decided to stay at home and engage virtually through an online platform under the name رحلة مجد (Majd's Journey) on Facebook. Through this platform, various programs were introduced to keep children and adolescents engaged during their homestay. Forty-seven young volunteers worked to develop content and introduce it through a variety of means, including an online summer camp, reading competitions, health and well-being sessions, online Majd diary sessions, digital security and early-marriage campaigns, and question and answer sessions. Around 300 items of educational material (videos, posters, and posts) have been created and introduced, attracting 137,699 views and 11,150 accounts.

You, too, are invited to meet Majd and Majd and join them on their journey.



A 12-year-old boy solving diary exercises.

To learn more, visit the Facebook page ([sharekmajd](#)) and YouTube channel (رحلة مجد 2020) for videos, news and events; or contact alami@unfpa.org or zamareh@sharek.ps.

Sharek Youth Forum is an independent, nonpartisan Palestinian organization that tackles development issues from a unique perspective. Sharek was established in 1996 and works to develop and empower youth as active participants in civil society and encourages them to participate in Palestinian political, economic, and social affairs. As a nationally and internationally recognized platform, Sharek provides space for Palestinian youth to come together, develop their ideas, and implement projects aimed at community development and policy change.

COVID-19 Is Here to Stay. How Do We Cope?

R E A D E R V I E W S

TWiP asked a few of its readers to comment on one or more of the following questions. Below are their responses.

- ☐ 1. Do you think that the Palestinian government is in a position to handle the pandemic? How would you rate its performance?
- ☐ 2. How much faith do you have in the vaccines that are starting to appear? Would you get the vaccine?
- ☒ 3. How much has the virus changed your life?

☐ 1. We do not have the resources or the infrastructure to tackle the pandemic. Therefore, I do not think it is fair to hold the government responsible for the current situation. It could raise awareness, however, and encourage the COVID-responsible behavior of wearing masks and practicing social distancing – but the government has failed completely. I am inclined to grade it as follows: N/A for the first point and 0.00 for the second.

☒ 2. I have complete faith in the vaccine and the scientists behind it. I will absolutely get vaccinated and ask my family and friends to do the same.

☒ 3. Not only have I changed, humanity has. The virus has treated everybody equally. Wealth in terms of material goods meant nothing.

Bishara Dabbah

☐ 1. Like other governments, with the prime exception of China, the Palestinian government does not possess the means to enforce decisions across the Palestinian territories that could check the spread of the virus. It's not only the ongoing Israeli occupation that hampers its work, we citizens are not helping either, as we have become fatalistic towards the spread of the virus. Some point out that the Palestinian government did a superb job in March 2020, when the first infections appeared in the Bethlehem area. But the virus has become quite intelligent in the face of the nonintelligence of people who refuse to follow safety instructions, wear masks, practice social distancing, and maintain good hygiene. We continue to hold weddings and other social occasions and pay heavily for it. Maybe we should adopt the Chinese model if we can!

☒ 2. Initially, I hesitated to be among the first to be vaccinated, but I am more willing nowadays for several reasons: First, the vaccine has been proven by manufacturers, Pfizer and others, to be 90+ percent effective; these manufacturers cannot stake their reputation on causing unwanted severe outcomes. Second, immunologists and health experts in the field say that we will get rid of the virus if more people get vaccinated; such advice would not be offered if the vaccines in preparation posed a risk to those who will be vaccinated. I trust health experts more than politicians on this!

☒ 3. In March and April 2020, the virus locked me up for over a month, six weeks to be exact. I love to walk, so I continued doing it in confined quarters. After the lockdown, I decided to "live with the virus," so I started to go out again, working some days from the office while complying with health and safety recommendations. I rarely visit others, which I used to love, and the visits of close family members are welcome as long as everyone takes safety precautions. I stopped flying, which I did a lot before the pandemic, but keep dreaming about it. I do most of my meetings for work and keep in touch with our daughters abroad via Zoom and other social media. While in September 2020, we could not attend our youngest daughter's wedding in Dublin, we joined them via social media. I am happy that they went ahead with their wedding as planned. *C'est la vie*. Life needs to go on, and we have to learn how to live with the pandemic – safely and wisely.

Bernard Sabella, Jerusalem



☒ Art project by artist Amal Ramlawi.

☐ 1. No, but it is not fair to use this against a government that cannot financially sustain itself. Our medical sector strives to provide basic health services, but this pandemic has made things even worse.

☒ 2. I think the vaccine will work. But as producers said, only 90 percent. Researchers will continue to develop its level of efficiency until they are satisfactorily able to cure COVID.

☒ 3. I consider this the most important point. Now I see my old self as unhealthy. When buying from any store, I make sure I put things in my bag and sanitize everything at home. I also changed my personal contact behavior: if I can make a phone call, it can replace meeting friends. Our self-awareness has increased at home and work. We make sure any meeting room is adequately ventilated, and we practice distancing. We must use microphones, pens, cups, and even doorknobs differently. We exchange fewer things with each other. The pandemic has made us realize that health matters more than anything else.

Nader Dagher, A.M. Qattan Foundation

□ 1. The government's response is typical so far (among regional Arab countries) and can be rated as average if infection rates stay within the medical capacity. The government is not solely responsible. All stakeholders must participate in the effort, including the media, researchers, and civil society, raising awareness and fighting information disorder. This is only possible if detailed health and other (non-personal) government data are made available and lead to coordinated transparent processes that build trust and counter rumors and misinformation.

There are various aspects to handling COVID-19 beyond public, physical, and mental health. Socioeconomic and educational consequences are vital and require attention.

Abed Khooli, data scientist and open data advocate

□ 1. The Palestinian government is trying its best to handle the pandemic despite facing resource shortages and constraints imposed by Israel. Prime Minister Shtayyeh himself oversees the situation and follows up closely on a daily basis, indicating commitment at the top level of leadership. Of course, the government could do better if responsibilities were decentralized and local government units empowered.

■ 2. I trust science and scientists and believe that countries and international companies are trying their best to make sure that the vaccine will be effective.

■ 3. The virus has changed my life dramatically. My interactions with my friends and family have been reshaped totally. I started a range of health and safety measures that I will continue for a long time.

Hazem Kawasmi, director of operations, Municipal Development and Lending Fund



□ 1. Considering the limited resources to which the Palestinian government has access, I believe it did a good job early on by imposing highly restrictive measures that enabled control of the pandemic. The government guidance was clear but, unfortunately, like countries worldwide, it faces two issues: economic ramifications and government inability to provide real support to the most affected – and the people who took the situation lightly and refrained from adhering to the simplest recommendations.

■ 2. I have good faith in any vaccine for which I can see reliable scientific reviews and endorsement by specialized global agencies. Yes, I would get vaccinated.

■ 3. The pandemic has affected me significantly, like most people worldwide. Most important is the continuous anxiety of possibly being infected and infecting people close to me who might have serious health issues. It affects our business drastically. It limits my social life and has created a new reality to which I must adapt. It has also enabled me to reflect, not taking anything for granted anymore. I have been closer to my small family, particularly during the lockdown, and recognize that we can make virtual platforms work for rather than against us.

Lana Abu Hijleh, country director, Global Communities Palestine



□ 1. The PA responded quickly and forcefully during the first phase of the pandemic in early 2020, mainly in the West Bank. It even extended its support to East Jerusalem testing facilities when Israel failed to do so sufficiently, faced with a growing number of affected Palestinians. Even the WHO praised the PA for its rapid steps in closing infected areas and producing and distributing public awareness materials. Palestinians greatly respected these steps and keenly followed the daily official reports. The PA's efforts to bring back Palestinian students studying abroad were also appreciated by their families and the wider society.

Citizens began to question the government's ability to deal with the growing spread of the virus; but the shortcomings are caused primarily by the PA's lack of control over its borders, the movement of Palestinian workers from and to Israel, and its inability to provide support and enforce its containment measures in the sealed-off Gaza Strip. Now, some doubt whether the PA has the willingness and sufficient medical infrastructure to face a severe second wave, in light of the recent increase in COVID-19 cases.

■ 2. The news about the vaccines gives hope to people worldwide. I am ready to get vaccinated if the WHO approves it. But the news of competition among powerful governments and the practical requirement to keep the vaccines at -80 degrees Celsius dispel that hope. In our highly polarized world, there is a huge imbalance of power. In the West Bank and in Gaza in particular, the lack of stable electricity and the poor infrastructure raise justified questions regarding our possibility to access and administer the required vaccines. In the discourse on the fundamental right to health for all, we witness with concern the enormous competition for survival between those who are rich and those who are poor or between white people and people of color worldwide.

■ 3. The virus has turned my life upside down. As a working mother, I still find it difficult to convince my children or elderly parents that I am overwhelmed with office work and cannot meet their needs for food or socializing – even though I am

still in my pajamas. The accepted catchphrase “social distancing” has been most concerning; it denotes an important measure to limit the spread of the virus, but I would have preferred the term “physical distancing” because we humans remain “social beings.” It is the essence of our humanity, even if we cannot continue to be *physically* close. Online meetings have filled our daily lives; they are tiring and frequently frustrating yet keep us socially close, engaged, and on top of our work. They enable us to deliver needed services and voice our ongoing demand to end the Israeli occupation while we seek freedom, good governance, and human rights.

Terry Boullata, East Jerusalem



■ 3. I was once an avid traveler and intensely gregarious, but COVID-19 has moderated my penchants and led to a sedate, introspective state of mind. I have reconnected with myself. On my walks in nature, a newly acquired daily routine, the romantic metaphysical poetry of Keats, Wordsworth, Blake, and Baudelaire and the paintings of Turner, Corot, Constable, and Caspar David Friedrich were my companions. Inspired, I painted profusely. As spring gave in to summer, my country rides revealed new horizons wherein I could pursue my ethnographic fieldwork and document Palestinian cultural heritage. As I've been liberated from my disposition to travel, COVID-19 has provided a refuge in which I live, intensely painting, researching, and writing.

Ali Qleibo, artist and anthropologist

□ 1. No, the government cannot. It cannot obtain enough tests, and people refuse to comply with government rules.

■ 2. No, we will not get vaccinated. But it would take more space to explain our family's particular health circumstances.

■ 3. Completely. Our entire immediate family is in the United States, and they have not met our new baby. The Israelis have leveraged the virus to deny travel (and especially reentry to Palestine for my foreign wife), so even once we managed to secure permission to leave, after a four-month effort, we knew we would not be able to come back home. Our business stayed closed from March until November, and our son took his first-ever yearbook photo wearing a mask. That might sound silly, but we must think about the long-term effects on our children: They don't see smiles at school. That's huge.

Saleh Totah, owner of Café La Vie

□ 1. The Palestinian Authority has not been able to deal well with the pandemic. First a complete lockdown of three months, and then no clear rules and coordination to control the situation, nor any support for the people affected financially by the lockdowns and lack of tourism.

■ 2. We are not medical experts, so it is hard to say whether vaccines will be good. And the problem will be mainly with equal distribution worldwide and whether it will be affordable for everyone or depend on your wealth to have access to it. Testing is still in its first stage, and we would rather wait to see more results before getting vaccinated.

■ 3. Our life and business changed a lot due to the pandemic. We would have been out of debt last summer if COVID-19 had not happened. We did not have any income for four months and had to cancel several events. Instead of finally being able to save some money, we have incurred more debts. We did not manage to travel and see my wife's family in Holland and haven't done many things or seen a lot of people. But we try to stay positive. We have spent more time together at home as a family, which is very precious time. My wife managed to continue studying, and her happy achievement is the podcast *Stories from Palestine* with a new episode every week. We live exactly on the Green Line (in Beit Safafa) and have experienced the lockdowns on both the Israeli side of the wall, where we live, and on the Palestinian side, where we have our businesses and where the kids go to school. We have had to deal with a lot of restrictions and uncertainties. I think we have learned to be extremely flexible, to deal with disappointments, and to focus on what *is* possible and not on what isn't, to appreciate small things.

Tariq Elayyan



□ 1. It took time for the Palestinian government to decide how to handle the pandemic after the first COVID-19 cases were detected in Palestine, but its immediate response with a total lockdown was a good step. It proved efficient in containing its spread early on, giving it time to prepare the medical system to handle the situation, treat patients, and prepare a plan to screen new cases and trace their contacts. But soon after the reopening, control was lost.

■ 2. I think there will be an effective vaccine because the ongoing efforts will produce several successful options. But I am concerned about its safety and will not get vaccinated until a few months or even years have passed and its efficiency and safety have been proven.

■ 3. The pandemic has changed my life. My work as a physician in outpatient care was affected. I saw fewer patients and did more consultations and follow up online and by phone (telemedicine). This was a new approach and has resulted in slower care for the patients. The number of doctor visits has been reduced for two reasons. Parents are afraid of catching the virus in a crowded clinic, and the economic situation is deteriorating, leaving some people unable to pay for doctor visits or medication – so they try other ways, such as consulting a pharmacist and getting over-the-counter medicines directly from the pharmacy. As has been observed worldwide during the pandemic, patients have arrived at hospitals sicker than usual and in some cases in larger numbers because of the delay in outpatient-sector care. For example, more diabetes type 1 cases have needed admission because the patients have developed ketoacidosis.

The health system as a whole has changed in Palestine, as have the state's priorities; it has been more ready to invest in the health system.

On a personal level, I have fewer social interactions and am placing more focus on my nuclear family and my core group of friends.

Najwa Abdulhaq, pediatrician, Ramallah

☐ 1. Yes, I think the government is doing a good job.

☐ 2. I have faith in the vaccines, and I would get vaccinated.

■ 3. It has made a big difference as it has impacted the way we do our work and disrupted daily activities, and the travel restrictions have prevented me from seeing my family abroad.

Salam Kanaan, country director, CARE Palestine (West Bank/Gaza)



Art project by artist Amal Ramlawi, photos by Majdi Fathi.



Photo courtesy of UNDP/PAPP.

By Ahmad
Ramahi



WeDeliver

Providing Logistic Solutions during the Pandemic

Innovation is at the core of survival in a world of constant change. The ability and courage to take initiative and stand out define the businesses that excel in the market. One need only glance at the current global struggle against COVID-19 to see how fear and uncertainty can paralyze progression. But simultaneously, the pandemic has expanded possibilities and allowed the seizing of new opportunities for those who do not wish to stand by idly while a crisis occurs.

WeDeliver has never failed to fight the constant struggles that start-ups face in the Palestinian market, mainly because the occupation imposes on Palestinians limitless restrictions that exist as physical infringements and psychological caps on our potential to succeed. But as an early-stage start-up, WeDeliver realized that this situation would last for some time and that taking immediate action could help it not only to survive but even scale and grow.

Whereas all businesses faced significant obstacles and economic pressures during this pandemic, small companies and start-ups were particularly affected. But the crisis caused by lockdown also offered the opportunity to evaluate the effectiveness of running a business. Thus, as COVID-19 caused significant economic shocks in all markets, it became crucial for WeDeliver to deploy its well-established business resilience

and teamwork to tackle the problems brought on by the pandemic. We seized the available resources and turned them into the best possible opportunity. During these challenging times, WeDeliver has successfully expanded its work scope in both the Palestinian and Saudi Arabian markets. Our team tripled the number of employees to respond to every opportunity, adopting the slogan “Every Delivery Matters.”

Social-distancing restrictions and health- and economy-driven shifts due to COVID-19 were expected to shutter small businesses and entrepreneurial ventures. However, WeDeliver not only seized expanding markets, the company introduced and enhanced new business lines to support the market and fill demand as much as possible by providing new delivery services, such as delivering groceries, expanding its operations to nine new cities across Palestine and Saudi Arabia since the beginning of the pandemic.

Being a start-up, WeDeliver sees the opportunity in every risk. Taking fast action and adapting to the situation are important not only from a business perspective but also in providing support to our customers and community during the pandemic. Most shops were closed due to the lockdown, so selling online was the rescue that required reliable logistics, which we provided. Moreover, WeDeliver employs 600+ freelancer captains (company



drivers), many of whom depend on us as their primary source of income, so we had to keep the business running to sustain their earnings. This responsibility required huge operations, including issuing special permits to captains and making arrangements with local authorities on a daily basis.

As the barriers against WeDeliver grew, our determination grew even more. We immediately took action, especially concerning the safety and security procedures that came along with COVID-19. This included retraining the captains. Moreover, the onboarding process to train captains shifted from an in-person model to virtual sessions. After having completed these sessions, our captains can now handle all types of delivery while ensuring thorough compliance with COVID-19 safety procedures. They are also equipped with high-end technology to deploy real-time tracking for WeDeliver’s customers.

We hope that this situation will end soon! Even though our business has experienced growth during these times, we prefer to run it in a stable, healthy environment.

Ahmad Ramahi is WeDeliver’s co-founder and CEO.

Celebrating Culture during COVID-19

By Michele Cantoni

A Warm Welcome to the First Edition of the Bethlehem Cultural Festival

The Bethlehem Cultural Festival was planned initially as a series of performances, screenings, exhibitions, and talks in the United Kingdom in December 2020 to honor Bethlehem as it celebrates its role as Arab Capital of Culture. It was determined to open a window for UK audiences to discover and enjoy Bethlehem's cultural scene in what was to be the first edition of a yearly independent cultural festival dedicated to this not-so-small-anymore Palestinian town.

A walking tour of the wall with young Palestinian artists.



BETHLEHEM

CULTURAL FESTIVAL

Then, COVID-19 intervened, and everything had to be reinvented, at least for this year.

While it is still unclear how the "Bethlehem, Arab Capital of Culture 2020" celebrations will be held, the 2020 edition of the Bethlehem Cultural Festival will go ahead online, allowing the participating institutions and organizations to reach audiences well beyond the United Kingdom. So, join us from December 3 to 7 and enjoy a rich program of events.

A brainchild of Melissa Scott – writer and chair of the charity Friends of Alrowwad UK – the Bethlehem Cultural Festival is a result of her innumerable visits to Palestine, and to Bethlehem in particular. For this first edition of the festival, Melissa was able to rely on the tireless efforts of teams of volunteers from Alrowwad Cultural and Arts Society and Al-Harah Theater – led by Abdelfattah Abusour and Marina Barham, respectively, as co-directors of the festival – as well as on the efforts of a mixed production team in the UK and Bethlehem.

The spirit of the festival is one of inclusivity (in terms of access for artists and audiences alike), collaboration, and continuity over time. This independent festival for all reunites within a common space Bethlehem's cultural riches, traditions, and creativity.

The online event programming, which started on a modest scale earlier this year, has recently snowballed almost uncontrollably to include a variety of exciting performances, screenings, virtual tours, practical demonstrations, panel discussions, a virtual Souk, and more – involving cultural figures from all generations and well-established artists alongside emerging ones.

Even now, as this article is being written, young local artists continue to propose interesting additions every day. Due to limited space and resources, however, this wave of cultural proposals must necessarily

From December 3 to 7, 2020, the first edition of the Bethlehem Cultural Festival shares with the rest of the world a virtual celebration of this famous town's rich and eclectic – but perhaps little-known – arts and cultural scene.



- Dabka show by Alrowwad Cultural and Arts Society.
- Virtual tour of Bethlehem (video produced by Bethlehem Municipality).
- Documentaries by young Palestinian filmmakers. (The still in this photo is from *Ambience*, by Wisam Al Jafari.)

be contained. Although the 2020 calendar of events might not be comprehensive, it should be noted that this first edition of the festival aims to offer a taste of what to expect in the years ahead. Indeed, if adequate resources are secured, the Bethlehem Cultural Festival website may well become a platform available throughout the year for artists to present their Bethlehem-related cultural projects.

Artists, wherever they are, need to have access to dedicated, independent, and noncompetitive spaces that offer them visibility year after year. The Bethlehem Cultural Festival attempts to provide one such space in Palestine, engaging artists and encouraging them to combine creative independence and cooperative spirit, and to look forward to brighter prospects when shaping their future.

This is all the more urgent in the Palestinian context, where the increasing suffocation from Israeli occupation and policies is more

than ever fragmenting societies and depriving the population of its freedom and basic rights. Frustration and a sense of isolation can easily dominate under such circumstances, but creativity, energy, and determination have always distinguished generations of Palestinian artists – the older ones, who have lived through decades of dispossession and abuse, as well as the younger ones, who have known only the reality of separation and segregation imposed on their country by Israel's "separation" wall and relentless colonization.

The Bethlehem Cultural Festival hopes to succeed not only in conveying to its audiences the remarkable traits of Palestine's cultural actors, but also in accompanying them for many years to come, starting with this first edition online, at a time when Bethlehem is on its knees because of the global pandemic that serves to aggravate an already challenging situation.

The 2020 edition of the Bethlehem Cultural Festival, in partnership with Al-Harah Theater and Alrowwad Cultural and Arts Society, is supported by the British Council and the UK Department for Digital, Culture, Media & Sport.

The events, which you can find listed on the Bethlehem Cultural Festival website <https://www.bethlehemculturalfestival.com/>, feature (at time of writing) numerous artists, institutions, and cultural figures that include Abdelfattah Abusour, Al-Harah Theater, Alrowwad Cultural and Arts Society, Amal Mukheirez, Amwaj Choir, Amer Shomali, Annemarie Jacir, Ayed Arafah, Baha' AbuShanab, Baladi Dance Group, Basma Al Hussein, Bethlehem Municipality, Brandeán de Gallai, Caitlin Mcleod, Catherine Young, CharqGharb, Chœur de Jeunes de l'Orchestre de Paris, Dan Saladino, David Greig, Elias and Yousef Anastas, Fadi Kattan, George Al Ama, Hani Abudayyeh, Ibrahim Handal, Issam Juha, Jacob Norris, James Greenan, Larissa Sansour, Leila Sansour, Mafar Band, Maha Saca, Manal Odeh, Marina Barham, Mark Khano, Miara Kawwas, Michael Awad, Milad Fatouleh, Mitri Raheb, Mohamed Abu Haniyeh, Nadia Wardeh, Nicola Zreineh, Omniya Abdel Barr, Palestinian Heritage Center, Phyllida Lloyd, Raed

Saadeh, Ramzi Shomali, Rana Musallam, Rania Elias, Rima Mesmar, Rionach Ní Néill, Sameh Shaheen, Sami Khoury, Sami Metwasi, Sir Vincent Fean, Sliman Mansour, Tamara Abu Laban, Victoria Brittain, Vivien Sansour, Wisam Al Jafari, Wisam Salsaa, Xanthe Clay, Zaid Hilal, and more to come...

The festival is free but welcomes donations during the online registration process to access the events (please allow a few minutes to complete the registration process).

Wherever you are, please join us in Bethlehem from December 3 to 7!

Michele Cantoni is a co-director of the Bethlehem Cultural Festival, co-founder of Amwaj Choir, and director of the Palestine Philharmonie initiative.



- Mafar, the group who will perform at the closing event of the 2020 BCF.
- A culinary journey through Bethlehem with Chef Fadi Kattan.

Dina Nasser

Dina Nasser is a Palestinian public health nurse with a post-graduate specialization in operating room nursing. She received her RN degree from the Nightingale School of Nursing, St. Thomas' Hospital, in London, United Kingdom, and her operating room specialization at Lewisham Hospital School of Nursing before obtaining her master's degree in public health at Birzeit University. Her main areas of expertise are infection prevention and control and emergency-care training.



Dina has dedicated the majority of her career to improving the quality of health care services for all Palestinians. She has 35 years of clinical experience in the Palestinian health system and in the capacity building of health professionals. Her work has led to the development of national protocols and guidelines for infection prevention that have been endorsed by the Palestinian Ministry of Health. She has the ability to work with teams and adapt current settings to international standards to mitigate the risks of work in environments with limited resources in fragile economies. She is both a mentor and a role model for the new generation of nurses.

Dina facilitated the development of the infection-prevention program at Augusta Victoria Hospital and played a leadership role in the team working to ensure sustainability and alignment with international standards required for the International Joint Commission accreditation.

She began her clinical career at Makassed Hospital as an operating room nurse where she set out safety and infection-prevention standards. She worked with a Norwegian NGO to support operating room nurses who trained at Al-Ittihad Hospital in Nablus and helped develop the national curriculum for operating room nurses taught at Al-Quds University. Dina



then assumed the position of deputy field nursing officer at UNRWA, moving on to the post of field nursing officer, where she remained for eight years, supporting the capacity building of nurses, promoting teamwork, and fostering the adoption of systems and standards in infection prevention and control for Qalqilya Hospital, particularly in the operating rooms.

She is among the founders of Juzoor for Health and Social Development and set up the first American Heart Association training center in Palestine, where she remains on the national faculty for basic life support, preparing new instructors and supporting national centers.

At Augusta Victoria Hospital (AVH) on the Mount of Olives, Dina started as a part-time health adviser in 2008 and served as the chief operating officer (COO) from 2019 to November 2020. In 2014 and 2018, she led the AVH missions to Gaza during some of the most tumultuous times, liaising effectively with stakeholders and the WHO in supporting care for the injured.

Dina has presented the work of the AVH infection prevention team at three conferences of the Association of Professionals in Infection Control (APIC) in the United States. At an APIC plenary session in 2019, she presented AVH's national engagement in addressing antimicrobial stewardship and infection-prevention practices through a quality-improvement collaborative effort of 22 hospitals, including all Ministry of Health hospitals.

Her accomplishments in putting in place the protocols of infection prevention and hand hygiene at AVH became all the more important during the COVID pandemic when, as COO, she played a pivotal role on the front line with the emergency response team, supporting the staff and working with the ancillary teams to ensure readiness and safe practices to safeguard the health of AVH staff and patients.

Reflecting on the pandemic, she says, "I am grateful that we achieved some advances in hand hygiene during our national quality improvement collaborative, even though some health managers had been skeptical about our efforts in focusing on hand hygiene. Imagine what would have happened under COVID had the nation been three years behind!"

Guided by the nursing code of practice, Dina is a leader and a resource. Yet when the need arises, she works hand in hand to get the job done. She is particular about work quality and always encourages teams to communicate effectively and do better. Her trademark debriefing questions: "What went well? And how can we do better?"

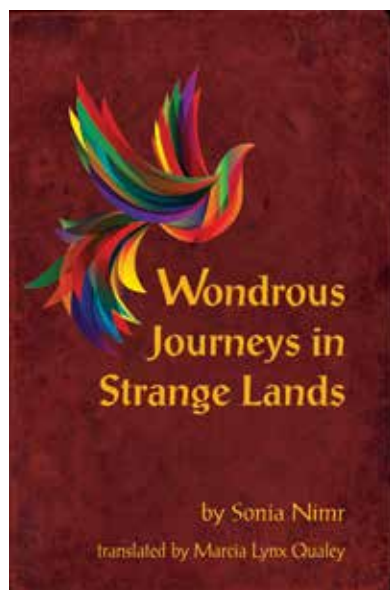
Wondrous Journeys in Strange Lands

By Sonia Nimr

Translated by Marcia Lynx Qualey

Interlink Books, 2020, 224 pages,
paperback, US\$15.

In this book, Sonia Nimr, who in an interview confesses to being a 62-year-old woman who feels as though she is still 16, tells tales of a young woman's travel adventures across perilous deserts, seas, and empires with the intention of letting young (and young-at-heart) Palestinians (and others) who are stuck somewhere travel vicariously. *Wondrous Journeys in Strange Lands* was written before the COVID-19 pandemic confined people all over the world to their homes.



Attracted to reading and storytelling since her mother took her to a bookstore in Nablus as a child, Sonia writes mainly for children and young adults – although a book for adults is in the making. In *Wondrous Journeys*, hundreds of years ago, in a tent at the foot of a mountain in Palestine, our storyteller and her twin sister are born. Her parents name her Qamr (Moon) and her sister Shams (Sun). Their small caravan is journeying from their mother's city back to their father's remote ancestral village atop the mountain.

This village suffers from isolation and a curse, which her young family tries to undo. But when both parents' lives are cut short, Qamr and her sister are left orphaned. Thus, Qamr decides to pursue her mother's and father's dreams of discovering the world, its people, places, and stories. With the red book "*Wondrous Journeys*" in hand that brought her parents together, she sets out on a daring journey, in caravans and on ships, across empires.

Telling tales to survive, Qamr crosses deserts and seas to reach Jerusalem and Gaza, Egypt, Tangier, Andalusia and Genoa, Abyssinia, India, the Maldives, and Yemen. Kidnapped by bandits, sold as a slave to the house of a mad king, engaged in studies with a polymath, disguised as a man to join a pirate ship, and falling in love for the first time – with a pirate: in endless stories within stories, Qamr searches irrepressibly for life.

Sonia Nimr's richly imagined historical fable recalls the famous travel narratives of the fourteenth-century Moroccan traveler Ibn Battuta. But the captivating adventures of our heroine are the wondrous journeys we take when we discover we can do more than we ever dreamed possible, even in strange lands that decree we cannot.

Sonia Nimr is an historian, an academic who specializes in oral history, and a leading Palestinian author and storyteller who weaves together contemporary stories with folklore for readers of all ages. She won the prestigious 2014 Etisalat Award and was shortlisted for the prize for *Thunderbird*, the first title in a fantasy trilogy. She is also the author of two books in English: *Ghaddar the Ghoul and Other Palestinian Stories* and *A Little Piece of Ground* (co-written with Elizabeth Laird). You can hear and see her storytelling on YouTube at https://www.youtube.com/watch?v=sBYsfwKk8gk&t=200s&ab_channel=lbbYUk (starting at minute 25).

Marcia Lynx Qualey is a writer and editor who founded ArabLit and ArabLit Quarterly. She co-hosts the BULAQ podcast and has co-translated with Sawad Hussain the novel *Ghady & Rawan* (2019), co-written by Fatima Sharafeddine and Samar Mahfouz Barraj.

Amwaj

Established in 2015 in Bethlehem and Hebron, Amwaj (Arabic for "waves") Choir engages children and youth in an independent educational program that leans on cultural centers of the two Palestinian towns. Led by a mixed team of French and Palestinian educators, Amwaj allows children and youth to access high-quality music tuition through an intensive pedagogical program based on collective singing. Today, Amwaj counts 60 girls and boys aged 8 to 18 years from the Bethlehem region (towns, refugee camps, rural areas) and Hebron (old city and new city). In October 2019, Amwaj's pedagogical team began to work also twice a week with 30 children and youth of the SOS Children's Village – Bethlehem.

Thanks to Amwaj's inclusive social vision (gender equality, non-affiliation to any specific social, religious, or political context) and focus on cultural exchange and intercultural dialogue, the choir members have access to a vast music repertoire and extensive artistic partnerships. Central to the development and success of Amwaj's young singers is an ongoing exchange and dialogue with other artists and pedagogues from within Palestine and abroad.

Between 2018 and 2020, the choir toured three times in France to perform with major youth ensembles, such as DEMOS orchestra, and prestigious

children's and youth choirs, such as the Chœur de Jeunes de l'Orchestre de Paris and Les Petits Chanteurs de Lyon. This led to concerts in Paris (Philharmonie de Paris, Conservatoire National, Notre-Dame de Paris, UNESCO, Institut du Monde Arabe) and various other French cities (Lille, Saint-Omer, Lyon, Saint-Étienne, Arcueil, Aubervilliers).

The choir performs a wide repertoire, from medieval music to contemporary music premieres, world music, and traditional Arabic songs. It has commissioned and premiered compositions by Naji Hakim, Patrick Lama, Dina Shilleh, and Moneim Adwan in France and Palestine.

The COVID-19 emergency has led to the postponement of projects planned for 2020 and 2021, now rescheduled for 2021 and 2022, including tours in Palestine and Europe to premiere the opera *Amal – Over the Wall* by Camille van Lunen, based on the award-winning children's novel *The Oil's Secret Tale* by Walid Daqqa (Amwaj commission, 2020), and joint residencies in Palestine with Les Petits Chanteurs de Lyon and Chœur de Jeunes de l'Orchestre de Paris. Video documentation of these projects will be carried out in collaboration with the sound engineering department of the Paris Conservatoire.

For more information, please visit Amwaj's Facebook page or Youtube channel. Access the following links for selected performances:

First residency of the Petits Chanteurs de Lyon in Palestine (July 2017) – <https://youtu.be/9KyeuUctHbl>.

Concert at the Philharmonie de Paris with DEMOS (June 24, 2018) – <https://youtu.be/PJc1GJMZYs>.

Excerpts from the UNESCO concert in Paris (November 29, 2018) – <https://youtu.be/YQIPdZFu1Y>.

A live concert (with strict adherence to social-distancing measures) is planned for December 18, 2020, 3 pm, at Bethlehem Convention Palace.

To support Amwaj, please visit <https://www.helloasso.com/associations/soutien-amwaj/adhesions/adhesion-membership-soutien-amwaj-2020> or contact Michele Cantoni via email at mic.cantoni@gmail.com or by phone at + 33 6 76 28 59 84.

Amwaj is a member of the MEDINEA network <https://medinea-community.com/>.



By Morgan
Cooper

SWISS CHARD DELIGHTS

I've only recently come to know and love my husband's elderly cousins, Grace and Khawla. My friendship with them was born in the kitchen and fostered at the table – the location that for me symbolizes the Palestinian family; it is the place where bread is broken and passed around, literally. And the dish that symbolizes my friendship with Saleh's cousins is *siliq mahshi*, stuffed Swiss chard. This seasonal green grows wild in most gardens or empty plots in Palestine. It regenerates quickly and can be a kitchen staple from autumn to spring. Just throw a bag of Swiss chard seeds on some dirt, reap the rewards, and enjoy it with your family!

As we are from the dwindling population of Ramallah's founding Christians, December is a festive month, and this dish is found on our table every Friday. First, we harvest the Swiss chard from the organic rooftop garden above our Café La Vie. It is enough for two dishes, so I'll share both recipes!

I break off the Swiss chard stems at the plant's base – and it continues to regrow. Even though we have an organic garden, I wash the leaves, soaking them in salty water to rinse off any pollution or fertilizer. Then, I break off the stems and leave them for Swiss chard *mtabbal*, a dip introduced to me by my wonderful neighbors Im-Nabeel and Im-Bashar.

To start, Grace, Khawla, and I come together in the kitchen. Grace brings the water to a near boil and submerges the leaves for a minute to wilt them; they become soft but remain solid enough to handle and roll. As she does this, I help Khawla prepare the rice mixture by soaking the rice in water.

Since we make this vegetarian, we add extra spices and vegetables to our stuffing for flavor. For the rice, I blend the tomatoes in the food processor and add the parsley, onions, and garlic cloves.

Grace stirs this into the drained rice and adds salt, a heaping tablespoon of cinnamon, ground coriander, black pepper, and garlic and onion powder, squeezing a lemon into the mix.

Now the fun (read: labor) begins.



Each of us places a leaf into the palm of our hand, drapes it over our fingers, and places a line of rice down the middle. Unlike *warak dawali* (vine leaves), Swiss chard leaves don't need to be wrapped perfectly; we simply roll them. Then, after gently squeezing the rolled leaf to let the juice drop back into the bowl, we place our rolled leaves in a pot and start over. Once the pot is filled, we pour the remaining juices over the top. We mix the hot water with tomato paste and salt and pour the mixture over the leaves.

We bring the covered pot to a boil and turn down the heat to let it simmer for an hour.

When the leaves are tender and the rice fully cooked, we turn off the heat. We give the pot a good hard shake to make sure the leaves don't stay stuck to one another, otherwise we wouldn't be able to take them out without ripping them. We pile our plates high and together enjoy the most memorable moments of the week.

Siliq Mahshi

- 2 kilos of Swiss chard leaves (remove the stems and set them aside to use for Swiss chard *mt'abal*)
- 1½ cups white rice, rinsed and soaked
- 6 large tomatoes
- 1 large onion
- 8 garlic cloves
- 2 bunches of parsley
- 1 tbsp each of cinnamon, ground coriander, black pepper, garlic powder, and onion powder
- Salt and pepper to taste
- 3 tbsp tomato paste
- 1 liter boiling water



Swiss Chard Mtabbal

Chop around 15–20 stems of Swiss chard into 2-inch-long pieces, place them into a pot of boiling water, and cook until soft (about 10 minutes). Drain the water and mash the stems. Add 2 to 4 tablespoons of tahini, depending on taste; I usually start with a bit and keep tasting until I like it. Squeeze a lemon into the mix, and sprinkle on salt to taste. Mix it all up and eat with bread.

Morgan Cooper and her husband run the recently reopened Café La Vie in the middle of Ramallah, where they grow vegetables on the rooftop, raise chickens in their garden, and compost all organic waste, using the compost on the rooftop.

By Bassam
Almohor

EMMAUS CHURCH

Fr. Arturo welcomes visitors to his church with a big smile. Seven miles to the west of Jerusalem lies the basilica of Emmaus, situated in the village of Al-Qubeibeh, overlooking the Mediterranean coast (31.840196° N, 35.134884° E).

According to Fr. Arturo, 69, Al-Qubeibeh was suggested as St. Luke's Emmaus by the Franciscan believers who came to the Holy Land in the thirteenth century searching for the places of Jesus's life and ministry that are mentioned in the Bible.



Emmaus Church, or St. Cleopas Church, is built over a Crusader fortress and church, which was built over a Byzantine one, which in turn was built over an ancient room believed to be the house of Cleopas and Simon who met the resurrected Jesus in Emmaus three days after his crucifixion. "Now that same day two of them were going to a village called Emmaus, about seven miles from Jerusalem" (Luke 24:13–32). Visitors can still find the Roman road in the ruins behind the church. A one-meter section of floor from what is believed to be the house of Cleopas and Simon is preserved in glass in the middle of the church.

The Franciscans adopted the site in 1335 and began an annual pilgrimage. They built a three-aisled basilica, the same structure found today, with a vaulted choir and an apse. During subsequent centuries, with the ongoing successive rulers of the Holy Land following the expulsion of the Crusaders in 1099 by Salah Eddin Al-Ayyubi, the church again fell into ruin. The nave, the central part of the church, was almost destroyed,

leaving only a three-meter-high wall in place of the apse. In 1852, the Franciscan Custody of the Holy Land renewed pilgrimage to the site, an area of 21 dunums (5 acres), known as ad-deir (the monastery). Ten years later, the site was acquired by Marquise Pauline de Nicolay (1811–1868), who restored the barrel-vaulted structure as a chapel and gave it to the Franciscans. Later, rooms were added to accommodate not only the friars but also the pilgrims and visitors who came to study.

In 1902, the Franciscans obtained *faraman* (permission) from Sultan Abdelhamid to rebuild the church in a manner similar to the original plan. It was completed in 1907 and, in 1919, it was awarded the status of minor basilica (a building designated by the pope to be important and distinguished from other churches for ceremonial purposes).

Following the world wars, Emmaus Church was used as a hospital, and locals took refuge inside the deir. A structure of such grandeur inside this small village attracted many locals for protection, work, and prayer. Fr. Arturo, who moved here only a year ago, tells stories of the importance of the deir to the peasants around his church. For him, this is a great place for worship, a place of tranquility even though it is not easy for pilgrims to visit due to the current political situation in the occupied territories. Despite that, Emmaus Church hosts a procession on Easter Monday to commemorate the resurrected Jesus.

Fr. Arturo is a fun-loving priest. Clad in his brown robe, he tells of how the Franciscans embrace a life of simple detachment and poverty. You can visit Emmaus during the day from 8:00 to 16:00, but you have to arrange it first with Ashraf Zahran, the local custodian, at 056-845-3980 or 02-247-3612. Due to the current pandemic, admission to the church is restricted.



Bassam Almohor can be reached at almohor@gmail.com, +972-52-458-4273, or Facebook @tourismore.

JERUSALEM

SPECIAL EVENTS

Friday 11

14:00–17:00 Film analysis workshop organized by Yabous Cultural Centre to research the tools used by filmmakers and help the audience understand the film by reviewing levels of cinematic analysis based on image elements, events, conflict, and characters. Yabous Cultural Centre.

Friday 18

14:00–17:00 Animation and Moving workshop organized by Yabous Cultural Centre to give an introduction to the world of animations through the formation of the character from playdough and moving it through a specialized application of graphics. Yabous Cultural Centre.

SYMPOSIA

Wednesday 16–Thursday 17

10:00–15:00 Fourth International Conference on Promising Electronic Technologies (ICPET 2020), organized by Al-Quds University in collaboration with Palestine Technical College. Al-Quds University, Abu Dis.

BETHLEHEM

BOOK LAUNCH

Thursday 17

16:30 Bethlehem: City of Great Joy and Capital of Arab Culture, by the historian Dr. Qustandi Shomali, organized by Bethlehem Municipality as part of Bethlehem Christmas Festivities 2020. Bethlehem Peace Center.

CHILDREN'S EVENTS

Friday 11

10:00 Christmas Cookies Workshop is a children's activity organized by Bethlehem Municipality as part of Bethlehem Christmas Festivities 2020. Participation is by registration only. Please call 02 276 6677. Bethlehem Peace Center.

Monday 21

11:00 Christmas activity for children with special needs, organized by the Bethlehem Youth Council as part of their program to integrate people with special needs into society and as part of Bethlehem Christmas Festivities 2020. Participation is private. Mary Doty Children's Park.

Tuesday 22

17:30 Christmas event for children with Santa Claus and the clowns. Organized by Bethlehem Municipality as part of Bethlehem Christmas Festivities 2020. Participation is only by registration. Please call 059 291 1535. Mary Doty Children's Park.

CONCERTS

Sunday 13

9:00–22:00 Sound from Palestine is an online fundraising concert organized by House of Hope Palestine, featuring Manar Wahhab, singer and songwriter, and William Vosgueritchian, classical musician, oud master. All donations will benefit the young students of House of Hope Vision School. Broadcast via <https://www.facebook.com/houseofhopepalestine/>.

Friday 18

15:00 Carols and Lullabies is a Christmas dialogue between two choirs performed by the Amwaj Choir (Bethlehem, Hebron) and Talitha Kumi Choir (Bethlehem), conducted by Mathilde Vittu and Wolfgang Weible, with pianist Ramzi Shomali. Organized by Amwaj Choir and Talitha Kumi Choir. Bethlehem Convention Palace – Lobby and Conference room.

EXHIBITION

12:00 Opening of Night Shots from Bethlehem Sky, an exhibition by the photographer Jimmy Michael, organized as part of Bethlehem Christmas Festivities 2020. Bethlehem Peace Center.

SPECIAL EVENTS

Tuesday 1

11:00 Press conference to announce the Christmas message of Bethlehem, organized by Bethlehem Municipality. Bethlehem Peace Center.

12:00 Tête-à-Têtes is a lockdown radio conversation with Radio Alhara about new internet radio in a time of restricted movement, organized by the Sled Island Music and Arts Festival and Byta, with Elias Anastas from Bethlehem and Saeed Abu Jaber from Amman. Radio Alhara. Please register at: https://us02web.zoom.us/j/.../reg.../WN_x8_hGcxzRYObytUx0PMcuw.

Thursday 3–Monday 7

Bethlehem Cultural Festival 2020 is a virtual celebration of Bethlehem's rich and diverse cultural scene through music, film, cookery, dance, and discussion, offering a variety of over 30 online events to honor Bethlehem and its cultural actors. Organized in partnership with Alrowwad Arts & Cultural Society, Al-Harah Theater and Amwaj Choir. For registration and live streaming, visit <https://www.bethlehemculturalfestival.com/>.

Saturday 5

18:00–19:00 Bethlehem Christmas Tree Lighting Ceremony. Organized by Bethlehem Municipality under the Patronage of H.E. President Mahmoud Abbas, President of Palestine. Live broadcast via Bethlehem Municipality social media channels.

Saturday 19

16:00–21:00 Opening of the 20th Annual Christmas Market, offering a variety of Christmas foods, products, and artworks, and featuring various Christmas and musical performances and several children activities. Organized by Bethlehem Municipality as part of Bethlehem Christmas Festivities 2020. Manger Square.

Sunday 20

11:00–15:00 The second day of the 20th Annual Christmas Market offers a variety of Christmas foods, products, and artworks, and features various children's activities, musical shows, and other events. Organized by Bethlehem Municipality as part of Bethlehem Christmas Festivities 2020. Manger Square.

RELIGIOUS EVENTS

Thursday 24

11:00 Scout parades celebrate Christmas prior to the entrance into Bethlehem of His Beatitude Pierbattista Pizzaballa, Latin Patriarch of Jerusalem. Star Street to Manger Square.

13:00 Reception of His Beatitude Pierbattista Pizzaballa, Latin Patriarch of Jerusalem. Manger Square.

18:00–22:00 Christmas Eve with choirs and Christmas carols to celebrate the birth of the Prince of Peace, Jesus Christ. Organized by Bethlehem Municipality as part of Bethlehem Christmas Festivities 2020. Live broadcast via Bethlehem Municipality social media channels.

23:45 The Midnight Christmas Vigil, presided by His Beatitude Pierbattista Pizzaballa, Latin Patriarch of Jerusalem, followed by a procession to the Grotto of the Nativity. Saint Catherine Church.

Friday 25

10:00 Christmas mass presided by His Beatitude Pierbattista Pizzaballa, Latin Patriarch of Jerusalem. Saint Catherine Church.

10:30 Christmas Mass. Christmas Lutheran Church.

SYMPOSIUM

Tuesday 1–Monday 7

10:00–15:00 Online International Symposium on Cultural Heritage in Palestine, held in the framework of the EU-funded project "My Heritage! My Identity!" and the French-Palestinian decentralized cooperation between Bethlehem and Grenoble, and organized by RIWAQ, aims to foster a collective reflection and exchange about the preservation and promotion of cultural heritage in Palestine. To participate, please register at <https://form.jotform.me/203262845115450>.

THEATER

Tuesday 22

17:00 The Magical Bell is a Christmas play for children organized by Bethlehem Municipality in cooperation with Al-Harah Theater as part of Bethlehem Christmas Festivities 2020. Live broadcast via Bethlehem Municipality social media channels.

Tuesday 29

17:00 Christmas and Family is a Christmas play for children organized by the Bethlehem Municipality in cooperation with Al-Harah Theater as part of Bethlehem Christmas Festivities 2020. Live broadcast via Bethlehem Municipality social media channels.

BIRZEIT

SPECIAL EVENTS

Friday 4

14:00–17:00 Armenian ceramic furniture design workshop organized by Yabous Cultural Centre in partnership with The Palestinian Museum to offer skills to design and build a living room from different materials for the purpose of teaching production design. The Palestinian Museum.

RAMALLAH

EXHIBITIONS

Sunday 6

14:00–15:00 The Curators' Tour, Printed in Jerusalem: Mustamloun, is organized by The Palestinian Museum and presented by Baha Jubeh to explore the relation between Jerusalemites and the political, educational, commercial, cultural, and touristic publications printed in their city (in Arabic). An English tour is available upon prior request. The Palestinian Museum. To participate, please register at activities@palmuseum.org.

Monday 7

18:00 Virtual Tour, Printed in Jerusalem: Mustamloun, is organized by The Palestinian Museum to highlight newspapers' blank gaps that marked the Israeli military censors in the 1960s and 1970s to suppress any material of which they disapproved, and which left readers with a space to imagine and wonder about the censored item and about novel ways with which to maneuver around censorship. Presented by Baha Jubeh, Abdel-Rahman Shabane, and assistant curator Sandy Rishmawi (in Arabic with English subtitles). English Palestinian Museum social media platforms.

FILM SCREENING

Monday 14

14:00 Five Minutes from Home is a documentary film streaming and discussion presented by film director Nahed Awwad and moderator Samah Bsoul to explore the Jerusalem Airport, occupied by the Israeli army in 1967 (in Arabic with English subtitles). Organized by The Palestinian Museum. To participate, please register at activities@palmuseum.org.

SPECIAL EVENTS

Tuesday 1

10:00–16:00 Rosette Interactive Day presenting an Arabic Calligraphy Workshop for locals and internationals, giving them the opportunity to practice writing Arabic letters in the most common fonts; Naskh and Roqa'a. The Arts and Handicrafts workshop "Rosette." Ramallah Al-Tahta, close to Kamandjati.

Tuesday 1

18:00–19:00 Artist talk – a photographic journey into Palestine by Rula Halawani organized by A.M. Qattan Foundation. Reservations are required for physical distancing purposes: <https://bit.ly/32NOH54>. Broadcast via <https://www.facebook.com/QattanFoundation/>.

SYMPOSIUM

Wednesday 9

10:00–17:30 Second Annual Conference, Unsettling Jerusalem: Academic Reflections and Societal Engagements, is an online conference organized by The Palestinian Museum to examine the centrality of Jerusalem in the Palestinian political, cultural, and social imaginaries. Presented by speakers Issam Nassar; Salim Abu Thaher; Nasab Adeeb Hussein, Daoud Alghoul; Maha al-Samman; Ahmad Asaad; Areej Sabbagh-Khoury; Fayrouz Sharqawi; Hanadi Qawasmi; Ali Muwasi; Yasser Qous; Camilio Boano, and others (in Arabic with simultaneous English translation). To participate, please register at activities@palmuseum.org.

GAZA

SYMPOSIUM

Wednesday 16–Thursday 17

10:00–15:00 Fourth International Conference on Promising Electronic Technologies (ICPET 2020), organized by Al-Quds University in collaboration with Palestine Technical College. Al-Quds University.



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Jerusalem



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Palestinian Heritage Museum

Abu Obaida St., P.O. Box 19377, Jerusalem.
Tel: +972 2 6272531, Fax: +972 2 6272341
Email: info@pta-museum.org
website: www.pta-museum.org



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Nablus Tel & Fax: 09-2387773
Gaza Tel & Fax: 08-2628903



Photo courtesy of ESNCM



Yabous Cultural Centre

10 Al Zahra St, P.O.Box 54874
Jerusalem, Palestine
Tel: 009722 6261045, Fax: 009722 6261372
Email: officemanager@yabous.org, Website: Yabous.org



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Email: daralsabagh@cchp.ps [@daralsabagh](https://www.instagram.com/daralsabagh)
[f](https://www.facebook.com/daralsabagh) Dar Al Sabagh Diaspora Studies and Research Centre

Bethlehem



Palestine Museum of Natural History

Mar Andrea, Antonia Street, Bethlehem
Tel. 979-22773553 info@palestinature.org
www.palestinature.org/visit
[f](https://www.facebook.com/palestinature) Palestine Museum of Natural History



A.M. Qattan Foundation

27 An-Nahda Women Association Street, Al-Tira,
Ramallah – Palestine, P.O. Box 2276, Postal Code 90606
Telephone: +970 2 296 0544/+970 2 296 3280, Fax: +970 2 296 0544
Email: info@qattanfoundation.org, www.qattanfoundation.org



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Sareyyet Ramallah- First Ramallah Group

Al-Tireh Street, P.O. Box: 2017, Ramallah- West Bank, Palestine
Tel: + 970 2 295 27 06 / + 970 2 295 26 90
Jawwal: + 970 597 777 096, Fax: + 970 2 296 05 83
E-mail: sareyyet@sareyyet.ps / art@sareyyet.ps, www.sareyyet.ps
[f](https://www.facebook.com/SareyyetRamallah) SareyyetRamallah



The Palestinian Circus School

Al Manzel Street, Birzeit
Telefax: +970-2-2812000, Mobile: +972-59 2812001
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[f](https://www.facebook.com/ThePalestinianCircusSchool) The Palestinian Circus School



The Palestinian Museum

Museum Street, PO Box 48, Birzeit, Palestine
Tel: +970 2 294 1948, Fax: +970 2 294 1936, Email: info@palmuseum.org
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Jerusalem



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Via Dolorosa 37, P.O. Box 19600, Jerusalem 91194
Tel: +972 2 6265800, Fax: +972 2 6265816
Email: office@austrianhospice.com, Website: www.austrianhospice.com



Casa Nova - Jerusalem Hospice Guesthouse

Casanova Street, New Gate
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Tel: 02 627 1441, 02 626 2974, Fax: 02 626 4370
Email: casanovaj@custodia.org, <https://casanovaj.custodia.org/>



Christmas Boutique Hotel

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Jerusalem Hotel



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Tel: 627 9111, Fax: 627 1995, www.notredamecenter.org

Pontifical Institute Notre Dame of Jerusalem Center



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Mount of Olives, Jerusalem, 91190
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St. George Hotel

6 Amr Ibn Al A'as Street – Jerusalem
P.O. Box 69272 Jerusalem 91544
Tel: +972 2 627 7232, Fax: +972 2 627 7233
E-mail: info@stgeorgehoteljerusalem.com



Tantur Hills Hotel

Hebron Road 303 (before Rachel's Tomb)
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reservations@tanturhills.com, www.tanturhills.com



Ramallah



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Taybeh Golden Hotel

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Tel 289-9440
info@taybehgoldenhotel.com, www.taybehgoldenhotel.com

ACCOMMODATIONS

Bethlehem



Ambassador City

By Ambassador Collection
Star Street, Bethlehem
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Ibda'a Cultural Center Guesthouse

Dheishah Refugee Camp, Bab al-Mohayem, Bethlehem
Tel: +970 02 277 6444, info@ibdaa48.org www.ibdaa48.org
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Jacir Palace Hotel

Jerusalem-Hebron Road, P.O.Box 1167, Bethlehem - Palestine
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Manger Square Hotel

Manger St., Manger Square, Bethlehem
Tel: +97022778888, Fax: +97022778889
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Nativity Bells Hotel

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Rawabi 666, Palestine
Mobile: 059 420 4378
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RESTAURANTS

Jerusalem



360°

Casanova Street, New Gate
P.O.Box 1321 Jerusalem 9101301 Israel
Tel: 02 627 1441, 02 626 2974, Fax: 02 626 4370
Email: casanova@custodia.org, https://casanova.custodia.org/



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f Jerusalem Hotel Mediterranean Cuisine



La Collina Bistro and Restaurant

Tantur Hills Hotel, Hebron Road 303
Tel: +972 2 5658800 Fax: +972 2 5658801
Email: reservations@tanturhills.com, www.tanturhills.com
On Waze: Tantur Hills Hotel

Opening Hours:
17:30 - 23:00

RESTAURANTS



Meejana Lounge (at St. George Hotel)

6 Amr Ibn Al A's Street – Jerusalem
P.O.BOX 69272 Jerusalem 91544
Tel: +972 2 627 7232 , Fax: +972 2 627 7233
E-mail: info@stgeorgehoteljerusalem.com



Al-Jisser Pub

Al Madares Street, Beit Sahour
Mobile: 0597492175

f Al-Jisser; i aljisser



Bab idDeir Gallery & Kitchen

D'eik Quarter, Manger Street, Bethlehem
Tel: 02 276 9222

f Bab idDeir Gallery & Kitchen

Opening hours:
Tuesday-Sunday
(9:00 AM - Midnight)



Fawda Restaurant Chef's Table

A modern take on Palestinian cuisine
Hosh Al-Syrian Guesthouse, off Star Street, Bethlehem
Tel: 02-2747529, Email: reservations@hoshalsyrian.com
Bookings required at least a day in advance



Q Lounge

Nativity Street (opposite Arab Bank), Bethlehem
Tel: 02-2771481, Email: salibaasfour@gmail.com

f Q Lounge 1 i qlounge1

Closed only on Tuesday
11:00 AM till 1:00 AM



Singer Café

Old City Street, Beit Sahour
Tel: 02-2771171, Email: info@singercafe.com

f Singer Café



Azure Restaurant Our home is yours

Mediterranean and Steaks
Tel and fax numbers +972-2-2957850, Email: Azure.rest@gmail.com

f www.facebook.com/Azure.restaurant



Pronto Lounge Italian Restaurant Est. 1997

Dr. Issa Ziadah Street, Ramallah, Palestine
Tel: 02-298-7312 or 0599-795-978, prontocafe@ramallah@gmail.com

f Pronto Restocafe i prontoramallah

RESTAURANTS



Zeit ou Zaater

Rukab St., Ramallah
(02) 295 4455, Email: zeitouzaater@gmail.com

f zeitouzaater



Zest

Issa Ziadah Street, Ramallah, Palestine
Tel: 02.295.3555, E-mail: info@zest.ps

f ZESTRestaurantOfficial i zestrestaurantofficial



Artoos

The Art of Gelato

Q Center, Rawabi 666, Palestine
Tel: 02 282 5599

https://www.facebook.com/QCenterRawabiOfficial/



Lilac

Pizza, Pasta, & Pastries

Q Center, Rawabi 666, Palestine
Tel: 02 282 5599

https://www.facebook.com/QCenterRawabiOfficial/



Qburger

Burger

Q Center, Rawabi 666, Palestine
Tel: 02 282 5599

https://www.facebook.com/QCenterRawabiOfficial/



Shrak

Shawerma & Falafel

Q Center, Rawabi 666, Palestine
Tel: 02 282 5599

https://www.facebook.com/QCenterRawabiOfficial/



Siroter

French Café & Bakery

Q Center, Rawabi 666, Palestine
Tel: 02 282 5599

https://www.facebook.com/QCenterRawabiOfficial/



عالم السريعة

Quick sandwiches, fresh juices and cocktails

Q Center, Rawabi 666, Palestine
Tel: 02 282 5599

https://www.facebook.com/QCenterRawabiOfficial/



Zeit ou Zaater

Tel: 09 233 3555 Fax: 09 233 3666
Info@alyasmeen.com, www.alyasmeen.com

f zeitouzaater

Bethlehem

Ramallah

Rawabi

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ATTRACTIONS

Jerusalem



Levantine Gallery

Affordable originals, top quality prints and Arabic calligraphy.

16 Christian Quarter Road, Old City Jerusalem
Tel: +972-2-970 7790 Mob: +972-52- 675 4276

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Ramallah



Birzeit Brewing Co. Shepherds Beer

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Municipality street, Old town, Birzeit
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Email: info@bbdc.ps, Website: www.shepherds.ps

Shepherds Beer

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Facebook: poster.zawyeh, Online shop: www.zawyeh.net/poster



Taybeh Brewery

Proudly Brewing & Bottling Premium Palestinian Beer since 1994

Near the rotary, Taybeh Village, Ramallah District
Tel: 02-289-8868, taybeh@palnet.com, www.taybehbeer.com

<https://www.facebook.com/taybehbeer/>

Opening Hours: Monday- Saturday 8 AM-3:30 PM



Taybeh Winery

Making Boutique Palestinian Wines since 2013

Main Street, Taybeh Village, Ramallah District
Tel: 02-289-9440, info@taybehwinery.com, www.taybehwinery.com

<https://www.facebook.com/Taybehwinery/>

Opening Hours: Daily 9 AM-5 PM



Zawyeh Gallery

Current exhibition: "Silent Garden" by Bashar Alhroub
From September 5 to October 31 2020

7A President roundabout, Al-Balou', Albireh
Tel: 02 2426486 Mob: 0599150049
zanani@zawyeh.net | www.zawyeh.net

Jericho



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Info@jericho-cablecar.com, www.jericho-cablecar.com

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ATTRACTIONS

Rawabi



Fun Factory Rawabi

Spacious indoor amusement park that introduces fun, comfort, and happiness for all ages.

Q Center, Rawabi 666, Palestine
Tel: 059 594 9026, <https://www.facebook.com/funfactoryrawabi/>



Rawabi Extreme

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WaDina, Rawabi 666, Palestine
Tel: 059 420 4377, <https://www.facebook.com/RawabiExtreme>



Museums



Sa'adeh Science & Technology House- Alnayzak

We bring joy and science together! and it's for everyone!

Location: Al Haq Street in The Old City of Birzeit
Tel: +970 2 281 9523 +970 2 281 9040
Email: sciencehouse@alnayzak.org, www.sciencehouse.ps

Al Nayzak - Science and Technology House
النايذك - بيت العلوم والتكنولوجيا

Twenty-Two Years

It's all relative. You might think that 22 years is a long time in the life of a magazine, but you'd be humbled to know that *Al-Quds* newspaper, a daily publication, has been in print since 1951! Still, with all the ups and downs in Palestine, I believe that any publication that survives 22 years of closures, raids, invasions, a poor economy, and yes, COVID-19, is nothing short of a miracle. Some years ago, we ran an article on businesses in Ramallah that were over 50 years old. We were overwhelmed by how many there were! We must be *sha'ab al-jabbareen* (a mighty people), as Yasser Arafat used to say. Come rain, come shine, we keep going. We swallow our pride, cry secretly, but we refuse defeat, and we pretend that all is well. Call it *sumud* (steadfastness); call it resilience; call it stupidity for that matter; but we still keep going. Whoever said, "You only fail when you stop trying" must have understood the Palestinian mentality!

Twenty-two years on, without missing a single issue, *This Week in Palestine* has become a rich source of information on Palestine. Our archive today boasts thousands of non-news articles about Palestine and Palestinians. For over two decades, our print edition and Web version have never ceased to promote artists, musicians, women, youth, peasants, industrialists, bankers, nurses, and professionals from all walks of life, among others. We have shed light on hundreds of sites and shrines, and encouraged both locals and tourists to visit them. We have listed cultural events from all over Palestine, including some in 1948 Palestine. As much as possible, we've made it a priority to feature Jerusalem, women, Gaza, and historical Palestine in every issue. We have promoted and documented Palestine in the best way we know how, in total honesty and transparency, and with conviction. The fact that we have distributed each issue free of charge has not stopped us from checking and double-checking every word, image, and caption. The two words that summarize our work are pride and passion.

As for the *TWiP* team, words literally fail me when I try to describe their dedication, compassion, and yes, professionalism. It is one thing for a team to possess these qualities and attributes under normal circumstances, but it's a whole different ball game when the circumstances are dire. Thank you Taisir, Kathy, Bettina, Tamer, and every person who has added value to *This Week in Palestine*. As we say in Arabic, Your reward is in heaven!

Keep an eye out for the new *TWiP* website in January. We hope to reach as many people as possible who are interested in the question of Palestine. *TWiP* is shooting for the moon!

Long live Palestine!

Sani Meo
Publisher



Filistin Ashabab

December issue #168



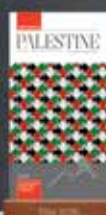
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<https://www.facebook.com/Filistinashabab>

THE LANDING PAGE OF
THIS WEEK IN PALESTINE'S
NEW WEBSITE THAT WILL
BE LAUNCHED WITH
THE JANUARY ISSUE.



TWiP IS SHOOTING FOR THE MOON!