

PALESTINE REFUGEES TODAY



NEWSLETTER No 197
APRIL - MAY - JUNE



**UNITED NATIONS RELIEF AND WORKS AGENCY
FOR PALESTINE REFUGEES IN THE NEAR EAST**

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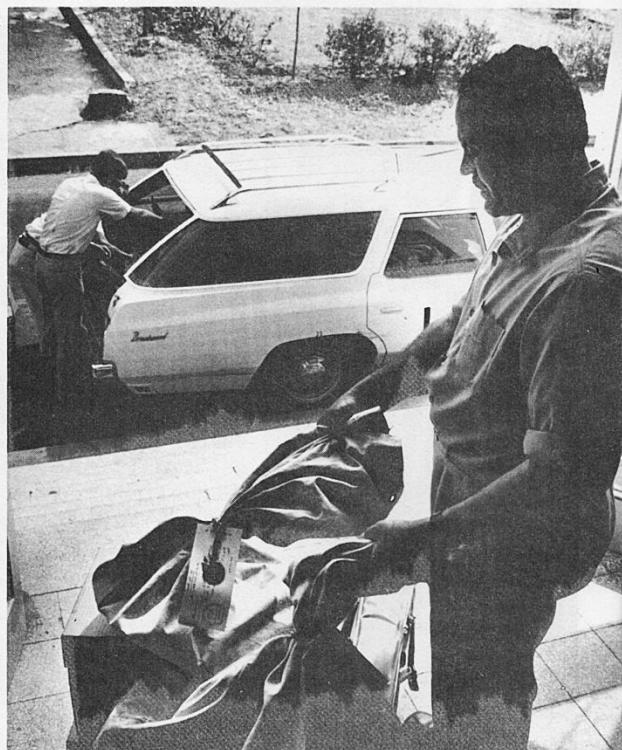
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FURTHER INFORMATION MAY BE OBTAINED FROM:
UNRWA Public Information Office
Museitbeh Quarter
Beirut Lebanon

UNRWA Liaison Office
Palais des Nations
Geneva Switzerland

UNRWA Liaison Office
United Nations
New York USA



Top: Ambulances donated by OXFAM to UNRWA. See "Spotlight on OXFAM", p. 22.

Above: The UNRWA courier between Headquarters and the Field offices. See "UNRWA on the Move", p. 20.

Front Cover: A pupil in an UNRWA/Unesco school in Syria.

COMMENTARY

27 March - UNRWA received \$25,000 from the Government of Austria -- the remainder of Austria's 1972 contribution of \$30,000. Austria increased its contribution by 50 per cent in view of the financial crisis facing the Agency.

31 March - The Norwegian Government announced an "extraordinary contribution" to UNRWA of one million kroner (about \$150,000) - in addition to the increased Norwegian contribution already pledged for 1972. The decision was a response to an appeal for urgent help for UNRWA made on 20 March by United Nations Secretary-General Kurt Waldheim (reproduced in Newsletter 71); it raised to approximately \$690,000 the total Norwegian contribution to UNRWA for 1972.

11 April - Ambassador Nuri Eren, Chairman of the General Assembly's Working Group on the Financing of UNRWA, began a tour of nine Arab countries, to discuss with those Governments the Agency's financial predicament. Ambassador Eren was accompanied by representatives of Unesco and of UNRWA (Dr. K. Kinani and Mr. M. Kreidie).

24 April - A donation of \$291,400 was received from the Government of Denmark, representing part payment of the Government's regular contribution for 1971/72 and a first instalment of \$660,000 pledged by the Danish International Development Agency for UNRWA's education and training programme for 1972/73. The amount of the Danish Government's regular contribution to UNRWA (\$137,000 for 1971/72) represents an increase of 14 per cent over the previous year's figure.

5 May - The first part of the Government of Canada's \$1,550,000 contribution to UNRWA for 1972 was received. Canada's 1972 contribution represents an increase of some \$200,000 over last year's figure. The remainder of the contribution -- some \$900,000 worth of flour -- is being shipped to the Agency.

10 May - A United Nations long-playing record to be sold for the benefit of the world's refugees -- including Palestine refugees -- by top international singing stars was launched in Lebanon with a presentation to the President of the Republic, H.E. Mr. Suleiman Franjieh. In a ceremony at the Presidential Palace in Ba'abda, the first copy of the record pressed in Lebanon was presented to President Franjieh by UNRWA's Commissioner-General, Sir John Rennie, and the Middle East Representative of the United Nations High Commissioner for Refugees, Mr. L.A. Goodyear.

The record -- "Top Star Festival" -- contains songs by 16 international stars including Johnny Cash, Donovan, Aretha Franklin, Engelbert Humperdinck, Mireille Mathieu and Nana Mouskouri. The singers and record companies have donated their services so that all the profits go to help refugees.

"Top Star Festival" has been described by leading musicians as "an unusually artistic achievement". The record, which will be sold all over the world, is issued by the Office of the United Nations High Commissioner for Refugees under a United Nations label: it is the fourth of its kind.

The last one, "World Star Festival", appeared in early 1969 and sold over one million copies, yielding one million dollars for the various United Nations programmes of assistance to refugees.

15 May - UNRWA received the first consignment of a total of 4,000 tons of rice, valued at \$744,500, to be contributed to UNRWA by the Government of Spain in 1972.

16 May - UNRWA announced an additional pledge of \$1 million from the United States Government. The donation is in response to the Secretary-General's appeal of 20 March and is in addition to the regular United States contribution of \$22.2 million to UNRWA in cash and commodities for the U.S. fiscal year ending 30 June 1972.

COMMENTARY (Con'td)

15 June - The Agency's financial position and outlook had improved considerably as a result of the appeals by the Chairman of the Working Group, the Secretary-General of the United Nations and Directors-General of Unesco and WHO and of the follow-up undertaken by the Working Group and the Agency itself. By the end of May the prospective short-fall of income for 1972 was down to \$2.4 million, including provision of \$1.4 million for medical and education subventions to governments. Efforts to raise funds were continuing and showed promise of some success. As a result, the threat of early cuts in services had receded for the time being.

Nevertheless, if the deficit were not eliminated entirely, the cash position, even allowing for withholding of the subventions, would be even more precarious at the beginning of 1973 than the previous year.

HELP FOR CHILDREN

Hip-joint displacement in infants leads to walking difficulties and predisposes to other disorders of the hip if neglected. This condition is being given special attention among refugee infants in Baqa'a emergency camp, east Jordan, by a Norwegian Refugee Council paediatrician.

The tendency to develop this congenital dislocation of the hip arises during the intra-uterine life of a child. After birth, the socket of the hip joint fails to develop normally and the head of the thigh-bone cannot therefore fit properly into it. Although this condition is found in children all over the world, its incidence is increased in societies where children are tightly swaddled by straitening the legs and binding them with long strips of cloth -- as Palestinian mothers have done since biblical days.

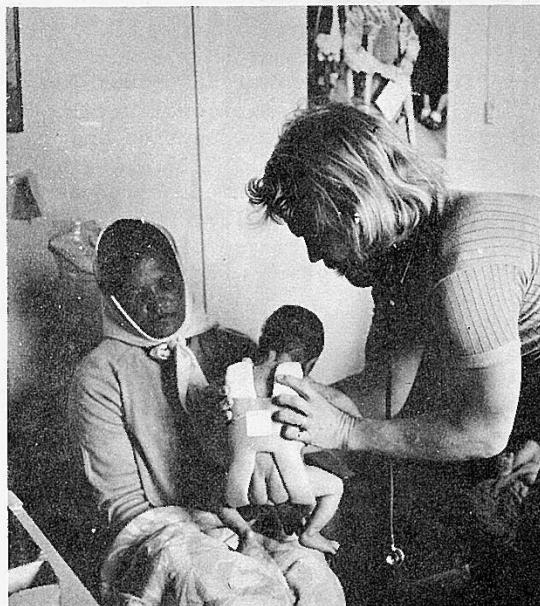
In all UNRWA clinics, mothers are advised against swaddling, and doctors are alert to the possibility of infantile dislocation of the hip. But Dr. Peer Skjaelaaen, who has been in Jordan for two years working in the small busy clinic housed

in a prefabricated hut in Baqa'a camp, is among those who believe in taking early preventive action rather than waiting until difficulties in learning to walk show the presence of the condition. Examining hundreds of newborn infants, he has detected 34 cases in the past year and has launched a campaign in Baqa'a against swaddling.

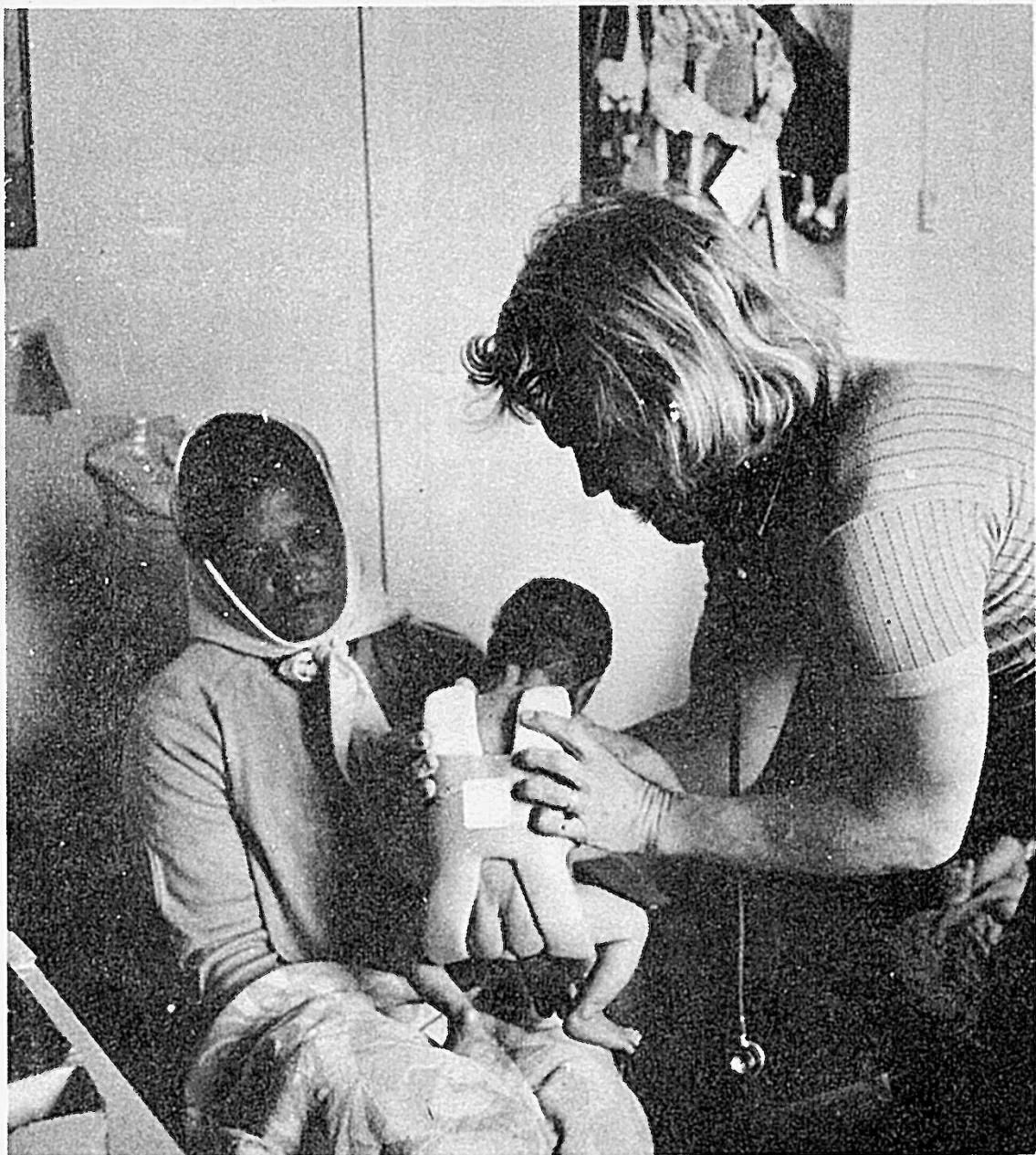
If congenital dislocation of the hip, or the tendency towards it, is recognized within the first year, it can be corrected by use of a brace which spreads the child's legs, maintaining the joint in the correct position -- as it is when the infant is wearing an ordinary napkin with the legs free. This brace must be worn for several months, depending upon the age of the child and the severity of the particular case. For children over one year old, surgery is very often required.

Dr. Skjaelaaen, who returns to Norway this summer, will be succeeded by Dr. Jostein Lotsberg as Head of the Norwegian Refugee Council's Medical Mission in Jordan.

Refugee infant in brace used to correct hip-joint displacement



*Refugee infant in brace used to correct
hip-joint displacement*



PRIMARY MISSION ACCOMPLISHED, UNRWA/UNESCO INSTITUTE OF EDUCATION REDIRECTS ITS SERVICES

The UNRWA/Unesco Institute of Education, which began in 1964, has, according to its Director, Dr. Paul Esseiva, largely achieved its original purpose of certification of unqualified teachers at the elementary and preparatory cycle levels in the UNRWA/Unesco school system. Some 90 per cent of elementary teachers employed by UNRWA and the majority of the preparatory teachers have gone through the Institute's courses.

The Institute was founded to meet an increasingly urgent need to instruct professionally underqualified teachers without withdrawing them from the schools. But the Institute's first programmes will be phased out in the coming two years. The time has come for redirection of the Institute's work.

The new emphasis will be two-pronged. First, the Institute's other current programmes will be re-organized and expanded, and second, with financial support from the United Nations Development Programme (UNDP) and in cooperation with UNICEF, the Institute will now provide assistance to countries in the region which wish to introduce similar techniques of in-service teacher training and materials and methods. This latter development is a result of the Institute's pioneering work in the fields of teacher training and the preparation of educational materials relevant to the lives of Middle Eastern people.

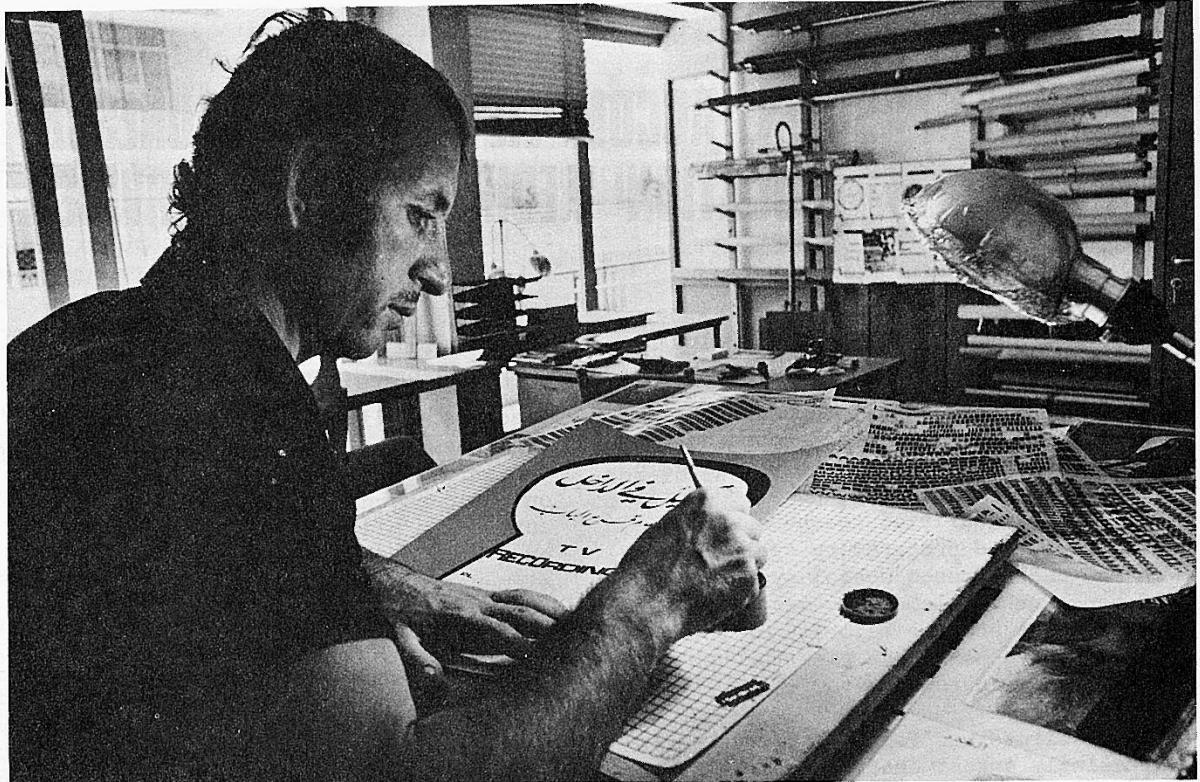
The Institute will maintain its usual internal activities. Self-study work assignments coupled with weekly seminars and intensive summer courses in the

teachers' individual areas of need will continue. The fight against rote learning, the infusion of concern through emphasis on child psychology, help in creative curriculum planning -- all these will go on. However, basic courses for training elementary and preparatory teachers will probably be phased out by 1975, although courses to meet special needs will still be given -- for example, to meet curriculum changes in Lebanon or the introduction of modern mathematics in upper elementary classes in Syria. The training of key educational personnel (such as head teachers, school supervisors and teacher training instructors) will be expanded and an enlarged research programme will aim at spotting weaknesses in the UNRWA/Unesco educational system and making recommendations to remedy them.

The second aspect of the new emphasis, assistance to governments - which might be called regional extension services - is under the direction of Dr. E.A. Pires, a former Director of the Institute, now serving with UNICEF. The Institute will receive, over the next two years, a total of \$480,000 from UNDP to enable it to continue its present programme and to expand the extension services, supplementing the support provided from the very beginning of the Institute by Swiss Technical Co-operation and Unesco.

Arab Countries' Interest

In April the Institute played host to a delegation of senior education officials from Sudan, headed by Mr. Tewfik Ahmad Suleiman, Assistant Under-Secretary for Teacher Training. The six officials, who



will provide leadership for a similar facility planned for Sudan, were briefed on how the Institute provides in-service training for teachers in UNRWA/Unesco schools. During May, a group of 25 Sudanese teachers, who will staff the new Institute in Khartoum, came to Beirut for training.

The Sudanese project, which has been supported by UNICEF, will be the second national in-service training institute in the area. The first, started in Jordan last year, also received support from UNICEF and was also begun after Jordanian officials had studied the results achieved by the UNRWA/Unesco Institute.

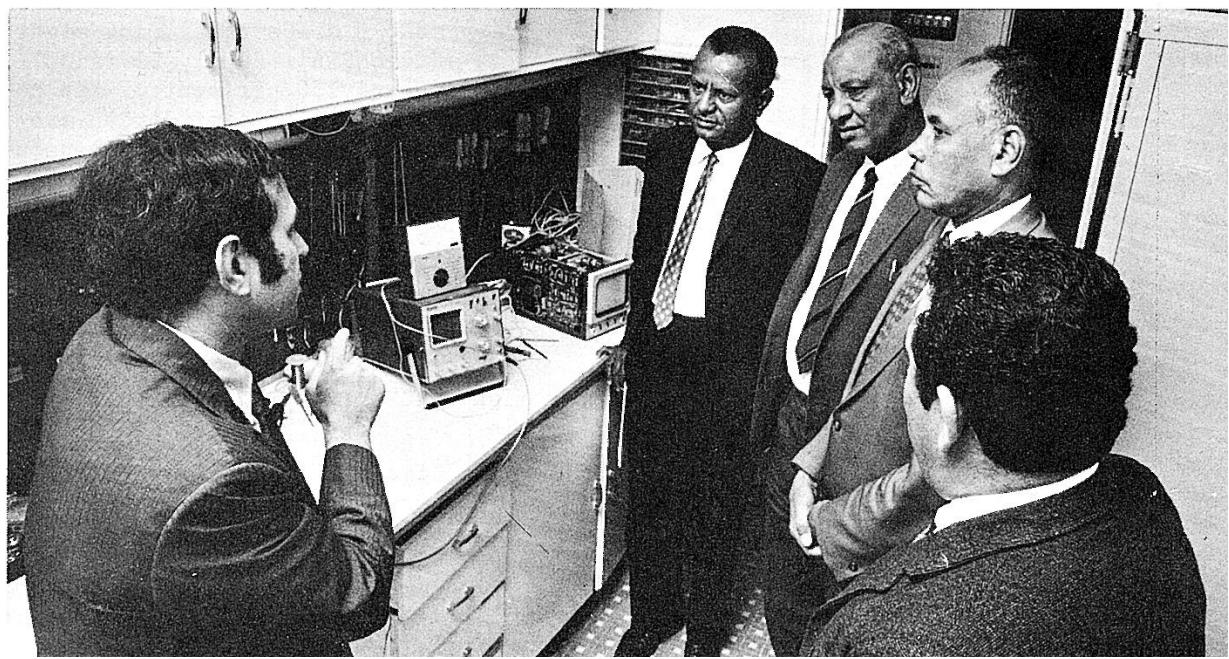
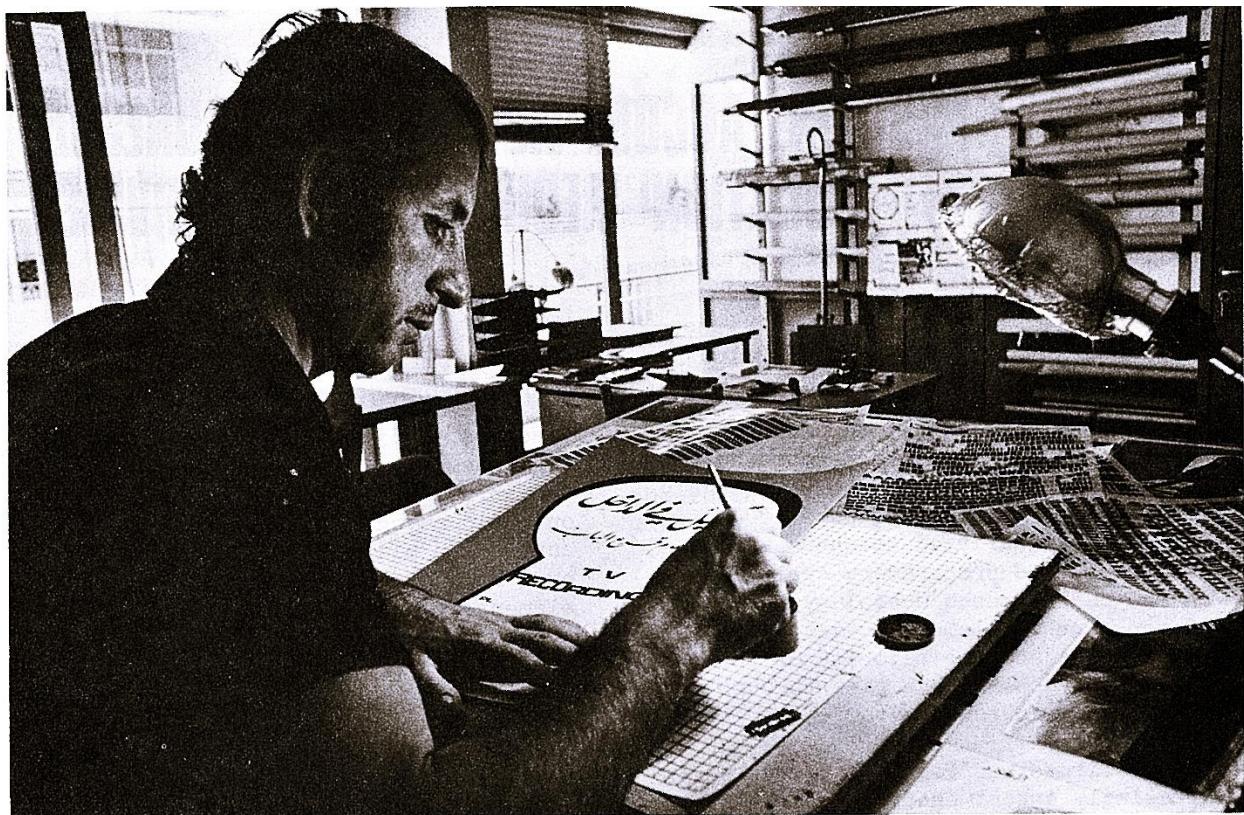
"The UNRWA/Unesco Institute has now a well-tried system", UNICEF's Regional Programme Officer explained, "and that is why countries in the area are eager to have their officials see some of the solutions it has found to the problem of training under-qualified staff without interrupting their work. And the same approach and techniques can be used to

train teachers who have been on the job for many years".

Commenting on his team's visit, Under-Secretary Suleiman said that the Sudanese had been impressed by the flexibility of the Institute's set-up, and the way in which the various methods - correspondence courses, seminars, and field inspectors -- interlocked to give a cumulative result. He commended the Institute system for being able to deal with a wide range of problems -- from basic qualifications for untrained personnel to modern techniques for supervisory personnel and curriculum research.

After eight years of operation, the Institute is now running about 15 different types of courses. And it was on the basis of the Institute's value for development in the region, that UNDP agreed to contribute more than half the Institute's operational costs.

Continuing to develop, as it has since



its creation in 1964, the Institute will during the 1972-73 school year begin a programme of one-year in-service refresher courses for teachers who were fully qualified when trained years ago, but now need to be brought up-to-date and challenged by new ideas.

"Teacher-training should be a lifelong business, because everyone needs fresh stimulation and exposure to new techniques". Dr. Esseiva explains.

The new refresher courses have already aroused considerable interest. A high-level Syrian delegation visited the Institute in June, as Syria is interested in setting up a programme of in-service refresher courses for its teachers. If the Institute's programme seems to offer a good solution, a full team will come to the Institute for training.

Other countries have likewise expressed interest in co-operation with the Institute. Lebanon, Iraq and the Peoples' Democratic Republic of Yemen have sent delegations to study the Institute's

An Institute of Education staff member explains to a visiting delegation from the Sudan the use of audio-visual equipment in in-service teacher education.

programmes and methods with a view to exploring possibilities of co-operation. The Yemen Arab Republic and a number of Gulf States have expressed an interest in programmes of correspondence education for their under-qualified teachers.

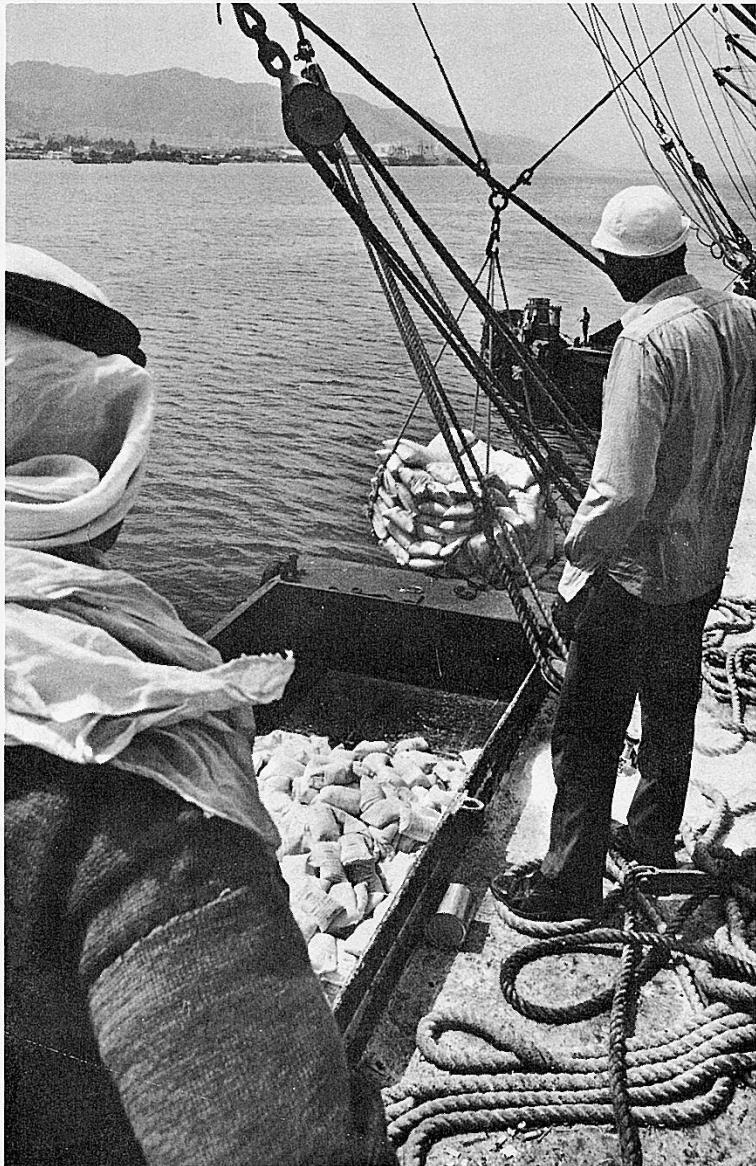
The services of Mr. A.M. Nashif, the Deputy Director of the Institute, were made available to Unesco for a mission to Oman during March and April 1972 to advise on an educational policy for the next five years. One of his recommendations was to introduce in-service teacher training on the Institute's pattern.

In addition a number of private institutions in Jordan and Lebanon have requested sets of the Institute's assignments for use by their own staff.

In co-operation with governments and educational institutions as well as UNICEF and UNDP, the UNRWA/Unesco Institute of Education has renewed its efforts to improve the quality of education among the Palestine refugees, and now in the Middle East in general, by raising professional qualifications of teaching staff at minimal cost and without disturbing the normal operation of the schools in which they work.



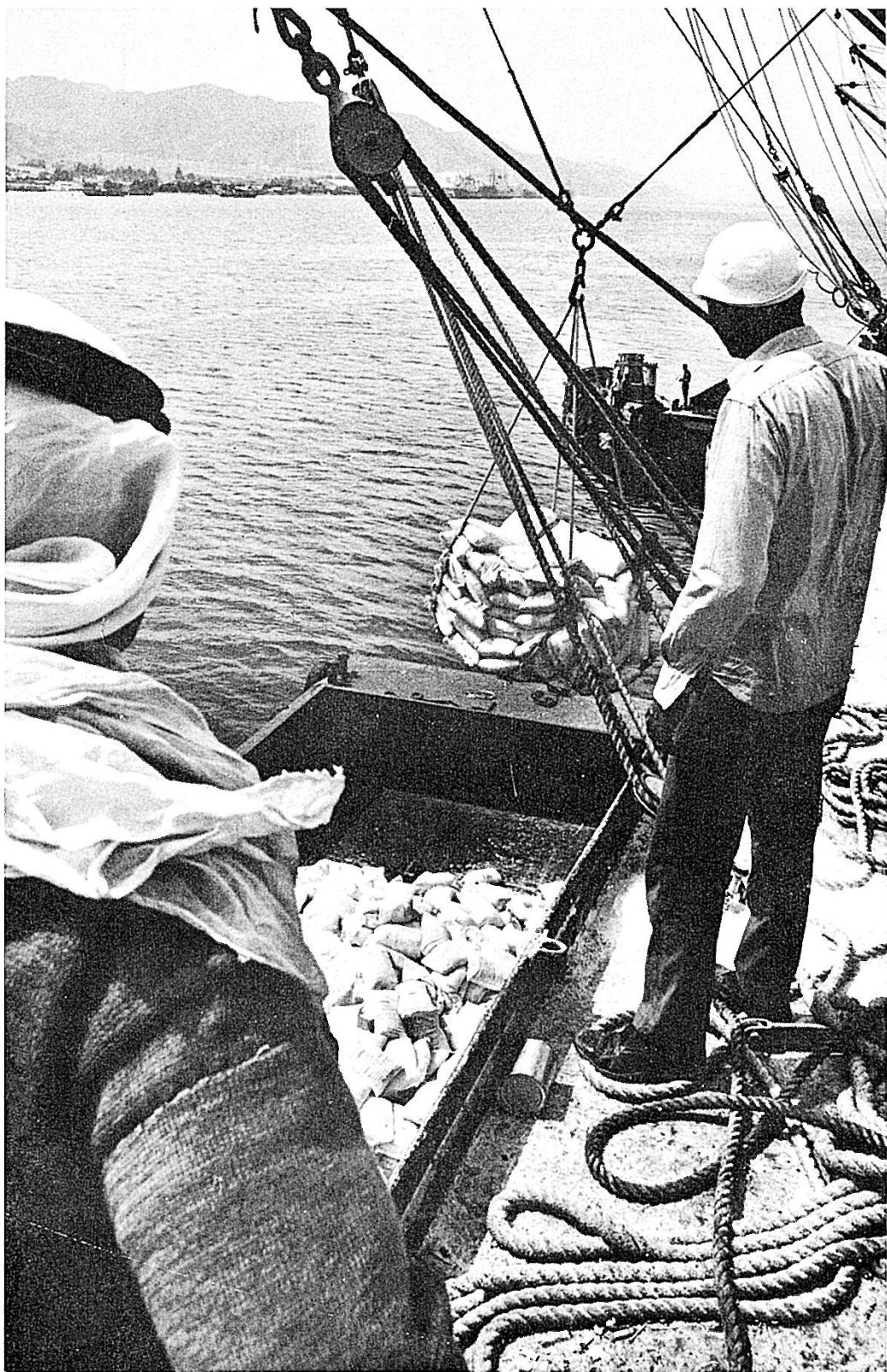
DAILY BREAD VIA THE RED SEA

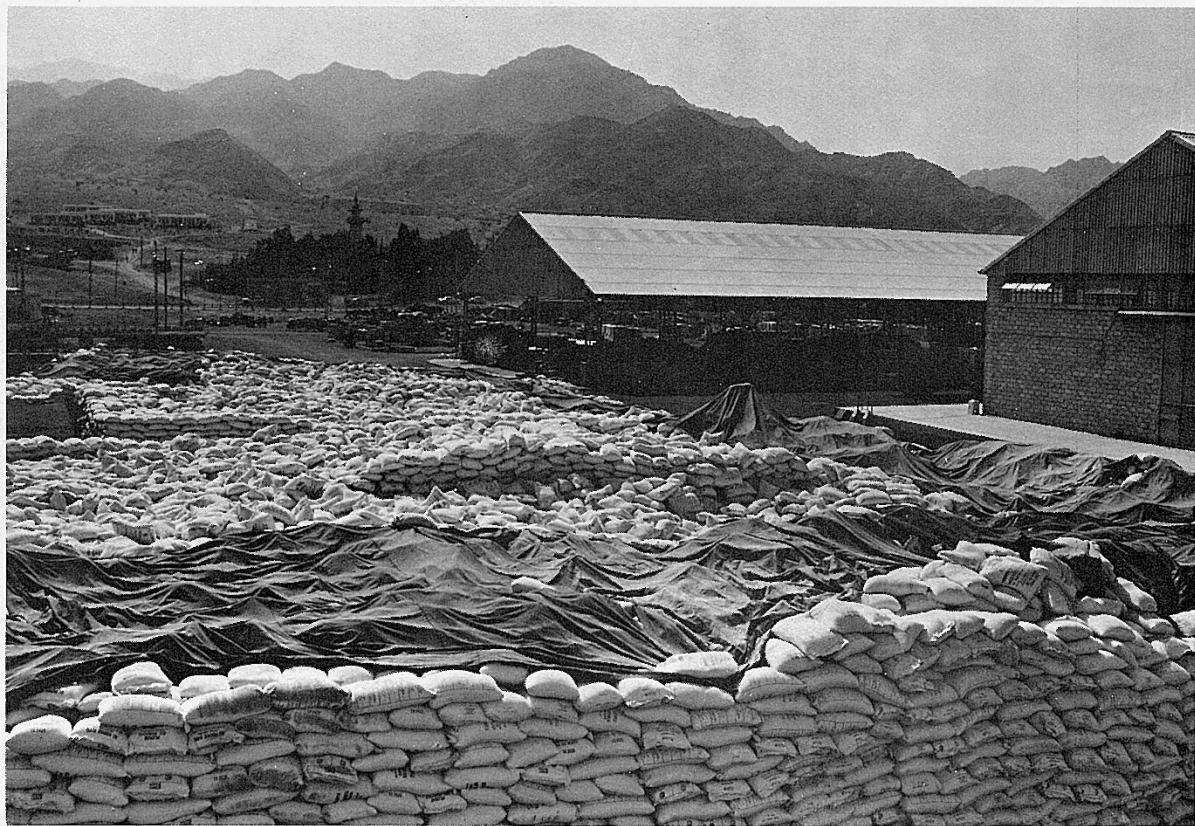


Twenty thousand tons of flour make a lot of bread. Standing on the quay in Aqaba, Jordan's Red Sea port, surrounded by tens of thousands of 50-lb sacks of flour, it is difficult to imagine that all the people in Jordan could use that much flour even if they ate nothing but bread for months. But UNRWA needs much more than that for the refugees alone. Walls of full flour sacks block the view to seaward where several ships - Japanese, Dutch, Pakistani and Greek - ride at anchor in the open roadstead.

However, mountains of flour sacks are a reassuring sight to UNRWA's Supply Division. Nearly 50 per cent of the population of east Jordan are refugees or displaced persons, and over half a million of them are issued with monthly rations by UNRWA (at the Jordan Government's expense in the case of the displaced persons). These monthly rations include up to 12 kilos of flour, depending on the availability of the other commodities. There must always be enough flour in the supply "pipeline" to keep the refugees fed.

The "Safina-E-Haida", a Pakistani ship anchored in the open roadstead, unloads a cargo of flour for the refugees.





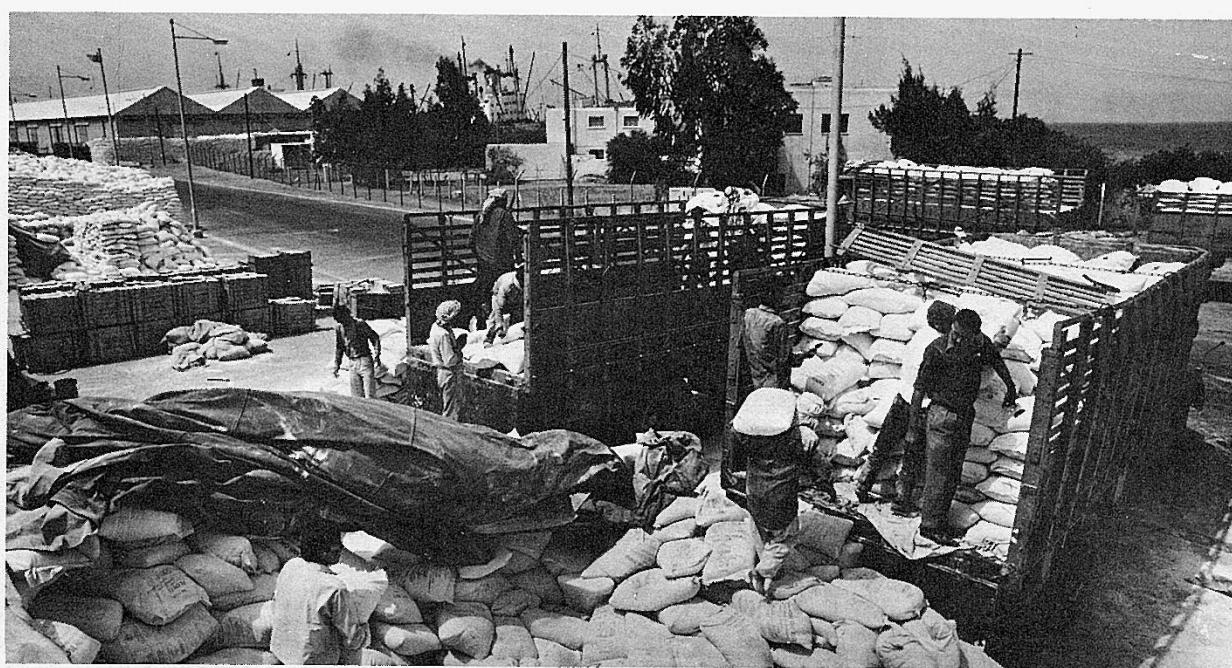
*Thousands of 50-lb. sacks of flour,
newly-arrived from the United States, crowd the quay in Aqaba*

Crisis comes when the pipeline empties -- as it nearly did in 1971 and early 1972 when a dock strike in the United States cut the flow of American-donated flour to Aqaba and resulted in a temporary reduction of the flour ration in east Jordan. Extraordinary measures were taken to move 29,000 tons of flour -- some of it purchased by the Jordan Government, some donated to UNRWA through the World Food Programme and the rest contributed by the United States and Canada -- to Beirut and then through Syria and on to Jordan. No one missed his daily bread, but it was a close thing.

The port of Aqaba, on the seacoast just north of Saudi Arabia, the ancient site of Ezion Gaber where King Solomon had his copper mines, is being developed as a tourist resort by the Jordan Government to take advantage of its full facilities for water-skiing, underwater fishing and

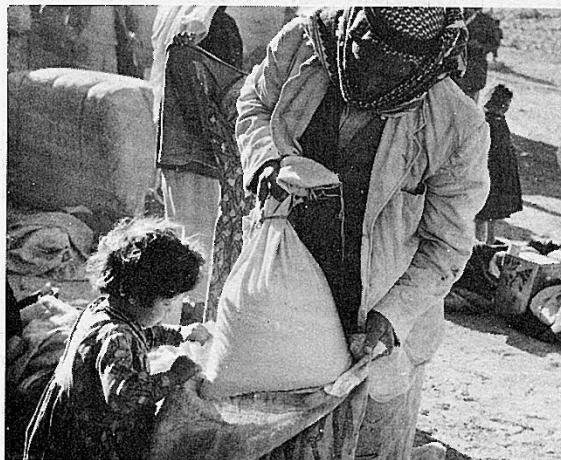
photography and other aquatic sports. It was used as a Crusader outpost by Baldwin I, King of Jerusalem, and during World War I became a headquarters for the Emir Faisal and Colonel T.E. Lawrence at the head of the Arab Army of the Hejaz. Today most of Jordan's imports, and phosphate, the country's main export, are shipped through Aqaba.

UNRWA's one-man team in Aqaba is Mr. Hassan Sirhan, who works as a liaison officer with the Jordan Government in the transport of UNRWA supplies through the port and on to Amman -- and occasionally even further to Syria or Lebanon. The main commodities received are flour and cooking oil from the United States, although from time to time a special purchase or contribution arrives, such as "horse beans" or foul from Ethiopia, canned meat from Australia and rice from Japan.



After reaching the quay, the flour will be loaded on trucks and later transferred to railroad cars for the trip north to refugee camps near Amman.

On the quay scores of flour-whitened stevedores labour to stack for storage or load into trucks the sacks of flour which other men have unloaded from a ship's hold into a lighter or directly from the ship to the quay. Normally supplies are carried in hired trucks to the railhead at Ras en-Nakb in the Jordanian desert about 100 kilometres north of Aqaba. From there they travel by railway -- over the only section of the old Hejaz railway still in service -- the remaining 200 kilometres to Amman.



UNRWA also handles the shipment through Aqaba of supplies intended for the voluntary agencies working in east Jordan with UNRWA. ^{1/} While UNRWA receives most of its Aqaba supplies from the United States, the Near East Christian Council, the Lutheran World Federation, the Save the Children Fund or the Mennonite Central Committee frequently receive shipments from countries such as Britain and the Federal Republic of Germany.

UNRWA has been receiving supplies through Aqaba since 1961. In 1971 the Agency received 37,000 tons of flour, 1,500 tons of rice and 1,500 tons of cooking oil through Jordan's Red Sea port.

Thirty-seven thousand tons of flour make a lot of bread -- but there are a lot of refugees.

^{1/} Voluntary agencies' services for the refugees are coordinated with UNRWA to avoid overlapping.



TELL ME ABOUT GAZA

Dear Sir,

Thornton Junior School
Birmingham,
England

Please will you send our class some information about Gaza. I am 8-years-old. Will you try and get it here as soon as you can. Only my group are going to draw and write about everything, what the children do at school and how they live and all about the country.

Thank you very much

KAREN

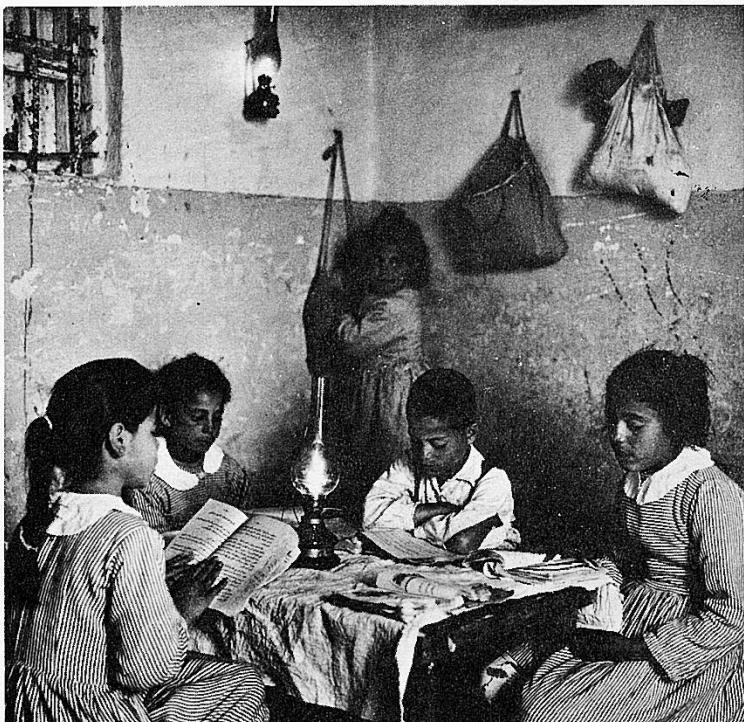
Dear Karen,

We were very happy to hear from you and to learn that you and your classmates are interested in knowing more about Gaza. There are more than 60,000 girls and boys in our schools in the Gaza Strip and I am sure they would be glad to know they have friends at Thornton Junior School in Birmingham.

Look at the map I am sending to you and you will see that the Gaza Strip is not very big. It is only 25 miles long and five miles wide. But about 400,000 people live there. Around 270,000 of the people crowded into such a small place are Palestine refugees and

their children. The Palestine refugees are people who during the fighting for Palestine (the Holy Land) in 1948 between the Jews and the Arabs left their homes and their jobs to get away from the fighting. Some of them went to Gaza, some to the countries of Lebanon, Jordan and Syria and some even further away. After the war was over they could not go back to their homes in what was now the Jewish State of Israel, and because the people in Gaza, especially, have very little opportunity of work, they became very poor. Of course, they needed houses and food and they needed medicine for those who were sick. They also needed schools for their children. That is why the United Nations

Refugee children studying by the light of a paraffin lamp





Employment in Gaza: a fisherman's son helps mend the nets and another Palestinian sorts oranges at one of the Strip's four citrus packing plants.



formed UNRWA. It is UNRWA's job to help the Palestine refugees in Gaza as well as in other parts of the Middle East.

Many of the boys and girls in Gaza live with their parents in places called refugee camps. There are eight camps in the Gaza Strip. There UNRWA has given people small huts to live in. If you look at the picture of the hut where the children are studying you will see a small paraffin lamp near the wall. The houses do not have electricity. Most of the houses in Gaza have no water coming into them either and the people have to carry water home every day for washing, drinking and cooking.

Because the Gaza Strip is so small and so many people live there, there are not always enough jobs for all the fathers. But sometimes they find work picking oranges or herding sheep or helping farmers in other ways. Nowadays, many people cross daily into Israel to work. After school the children often help their parents in the orange groves or by minding the younger children while their mothers go to the nearby open-air market.

You might think it would be fun to live near a beach or to help your father pick oranges and I'm sure the children in Gaza enjoy these things. But the Palestine refugee children have many problems that other, more fortunate children do not know about. Sometimes they are cold and sick because their houses are not heated in winter when it rains and the cold wind blows in from the sea. Sometimes they go hungry because their parents do not have money to buy enough food for a big family. Many times



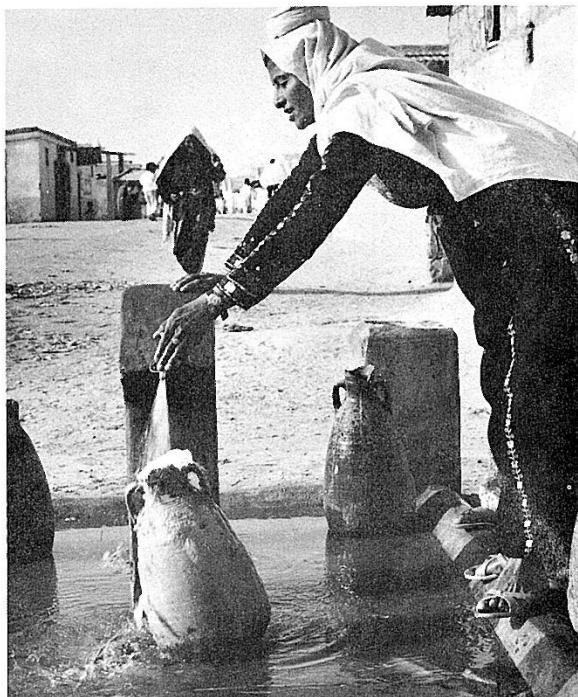


They find it difficult to do their homework because they must study in a small house full of noisy brothers and sisters and because they must do their lessons by the dim light of a paraffin lamp. And always the children remember that they are refugees and do not have a country of their own. Their parents fear that even when their children grow up they will still be unable to return to the homes they left long ago and they, too, will still be poor.

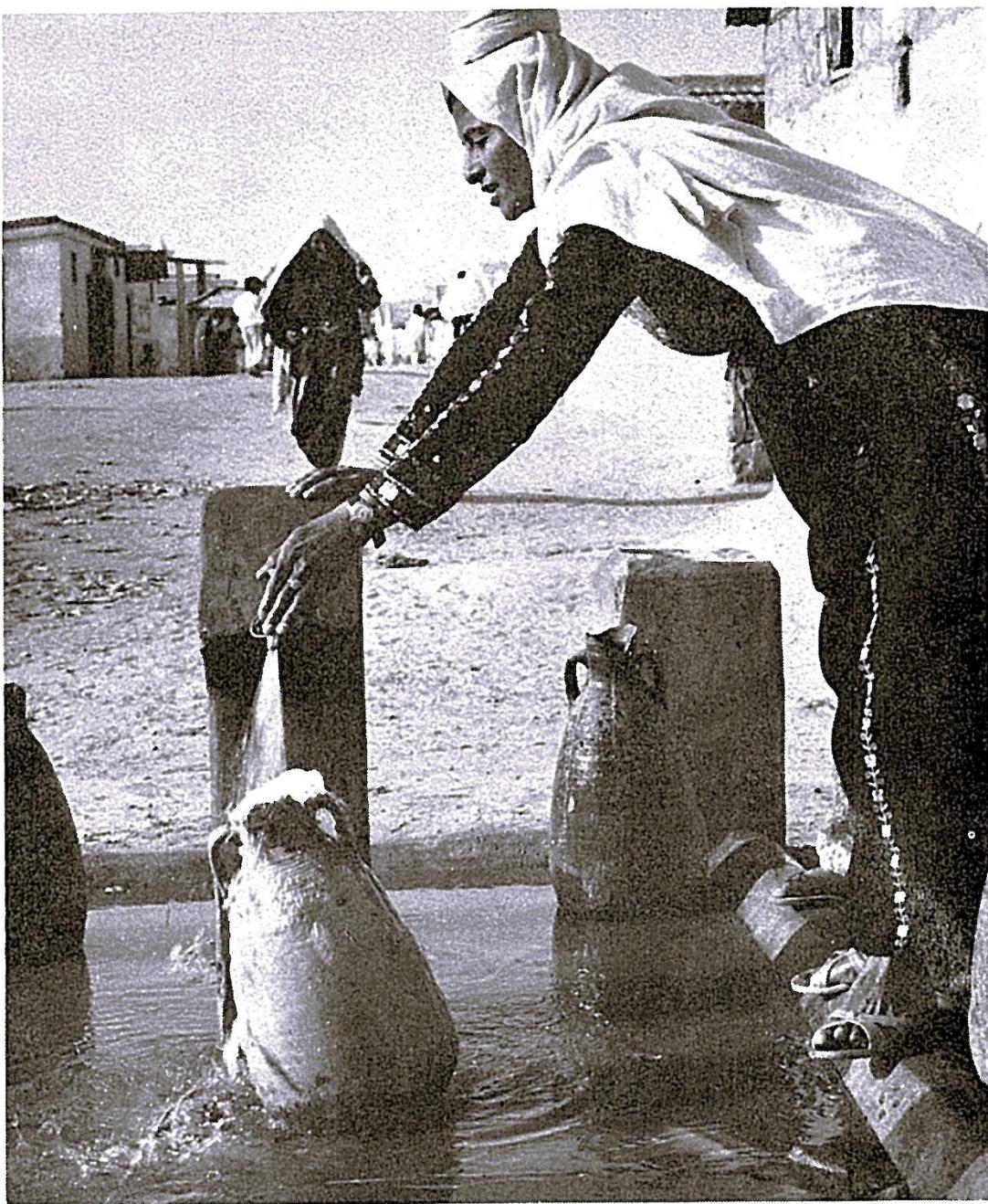
Life is difficult for people in Gaza in another way as well. Five years ago, in 1967, fighting began again between Israel and some Arab countries and this time some of the fighting happened right in Gaza. Gaza was captured by Israel and, of course, today many people in Gaza feel unhappy to see soldiers from the other side living in their town.

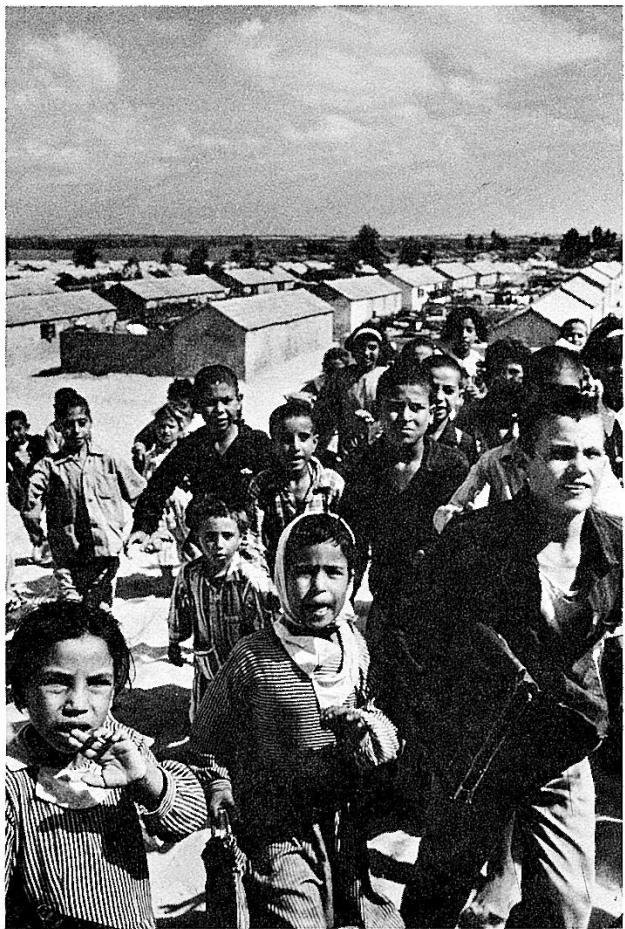
If the governments and peoples in the Middle East can some day all learn to be friends and all the soldiers on all sides can go home and become farmers, doctors and lorry drivers, then maybe the Palestine refugees will no longer be refugees. But in the meanwhile, the Palestine refugees in Gaza realise that education is the best chance they have to

"Most of the refugee shelter houses in Gaza have no water coming into them and the people have to carry water home every day for washing, drinking and cooking."



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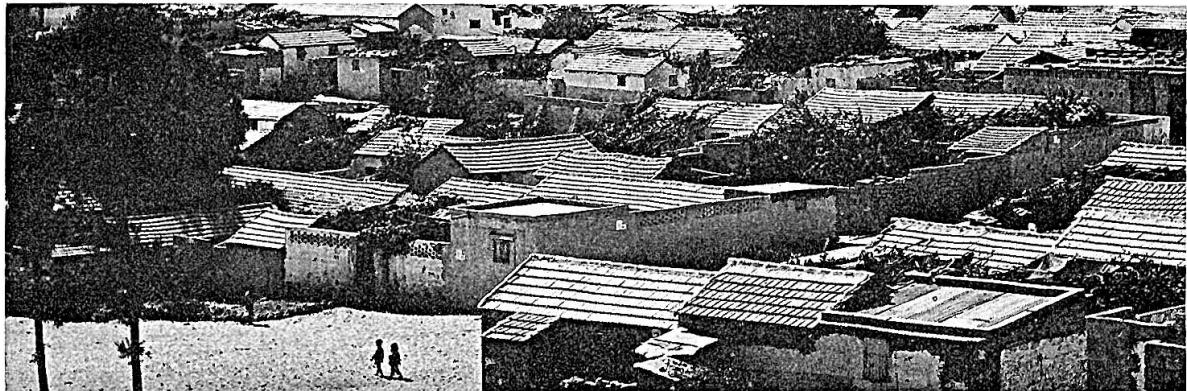
help themselves. They know that if their children go to school, when they grow up they will have a greater opportunity to find useful jobs. That is the reason almost every Palestine refugee child in Gaza chooses to go to school.

The lessons in the 112 UNRWA/Unesco schools in the Gaza Strip are taught in Arabic because that is the language the children speak. However, the children study English in school as well as arithmetic, history, science and the other subjects children study in England. Like children in England, the children in Gaza love to play football. The small children play hopscotch and drop the handkerchief, which I imagine you thought were only English games. Between lessons the children play tag and run and shout and sometimes even push one another rudely (which I am sure no one at your school ever does). So you see, children in Gaza are quite a bit like you except that they have special problems you don't have. And usually their names are Ibrahim, Samir and Leila instead of George, Arthur or Karen.

Thank you for writing to us. I hope this is enough information to help your group write and draw about Gaza.

"Parents fear that when their children grow up they too will be unable to return to the homes left long ago ... The United Nations is working to make peace possible. But in the meanwhile, the refugees realise that education is the best chance they have to help themselves."

A TYPICAL UNRWA HEALTH CENTRE



The Khan Yunis refugee camp in the Gaza Strip consists of mudbrick and cement-block shelters sprawled over sand dunes which are typical of much of the 25-by-5 mile Gaza Strip.

To oversee the health care of 47,000 refugees in and around Khan Yunis camp, UNRWA operates the Khan Yunis Health Centre -- which is typical of the 118 other health centres (including 13 run by voluntary agencies and 11 by Governments) where UNRWA provides out-patient care for the over 1.2 million refugees in the Middle East eligible for UNRWA health care.

The entrance to the clinic leads from the wide road which cuts through Khan Yunis camp. A concrete block wall, with wooden gate, surrounds the compound. Inside, scores of women and children and a few men sit in the courtyard or crowd the waiting rooms of the two-storey building. It is Wednesday, the day women patients are seen -- although naturally any emergency case is also accepted. It is not unusual for each of the Centre's two doctors to see 150 patients, babies included, during a day. An ambulance waits in the courtyard ready to carry seriously ill patients to their homes or to government hospitals in Gaza Town.

The Khan Yunis Health Centre is one of UNRWA's largest and consequently is staffed by three doctors, a dental surgeon, two staff nurses, six practical nurses, four trained midwives and eight dayahs (traditional midwives), two dispensers, three clerks and 13 other personnel

including cleaners, watchmen and ambulance drivers.

For the past four years, OXFAM has paid the lion's share of the Centre's operating costs, which now run at approximately \$55,000 a year (excluding the rehydration/nutrition unit).

Moving apologetically past the crowds of refugees in the waiting room, the visitor enters a consulting room. The doctor explains that the Centre comprises several clinics: a general out-patient clinic, a dental clinic and a maternal/child health clinic. Two years after the Centre opened in 1963, a 20-cot rehydration/nutrition centre was added.

The Centre is open daily except Sunday, under the direction of Dr. Zeidan Hassouna, a graduate of the University of Cairo and himself a Palestine refugee. In UNRWA clinics, many doctors (and other personnel) have been helped to get training by UNRWA: in the 1960s, nearly 300 refugees qualified as doctors, thanks to UNRWA sponsorship.

In the general clinic, urgent cases and small children are seen daily. In addition, Monday is the day set aside for diabetic patients, Tuesday for asthmatic and cardio-vascular cases, Wednesday for women patients, Friday for school children and Saturday for men. On Thursday only the emergency cases and pre-school children are seen -- and the staff try to catch up on their records. (The medical staff are also responsible for preventive medicine activities in the camp, school health,

home visits, the supervision of environmental sanitation etc.)

Along the corridor, is the consultation room of Dr. Muhammad al-Nabrisi, a younger doctor who is a graduate of Egypt's University of Alexandria. He explains that an UNRWA ophthalmologist calls once every two weeks to deal with serious eye diseases and injuries. A tuberculosis specialist comes over once a month from the tuberculosis hospital which is jointly operated by UNRWA and the local health authorities at Bureij, further north in the Strip.

For the convenience of both staff and patients, eye treatments, injections and dressings are administered in separate rooms. After examination by the doctor, each patient is given a paper to indicate his treatment and this is delivered at the appropriate room. In an average month, the Khan Yunis centre records about 8,300 general medical consultations, 4,500 ophthalmic treatments, 4,800 injections and 3,100 dressings.

That makes a daily average of 720 patients being attended by the general clinic staff.

Aside from the common gastro-enteric and respiratory infections, skin and eye infections and injuries, there is a whole array of diseases which afflict people anywhere. Nevertheless, tuberculosis, for instance, is gradually becoming less common (the disease is being detected and treated earlier), and in the past 20 years trachoma has been dramatically reduced. Acute conjunctivitis, however, is still common, especially during summer months when flies and blowing sand and dust are added irritants.

Under local conditions, gastro-enteric infections and other diarrhoeal diseases also reach their peak in the hot summer months. An acute attack of gastro-enteritis -- a condition with symptoms closely resembling cholera -- can cause death within a few days or even a few hours. Violent diarrhoea and vomiting bring dehydration and, if not death, weakened resistance to other diseases. Diarrhoeal diseases are endemic in Khan Yunis and

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necessitate a constant battle against the malnutrition which leaves children shrunken and listless and can, in early life, permanently impair mental development.

In the winter months, upper respiratory infections, bronchitis and asthma are most prevalent. Refugee shelters offer little protection against Gaza's cold, damp winters. Alternating winds from sea and desert help promote the common cold, which frequently leads to complications such as strep-throat and pneumonia.

Enteric group fevers and infectious hepatitis are relatively common, both being endemic in the Middle East. Over 600 cases of infectious hepatitis were reported in 1971 to 13 health centres serving the 312,000 eligible refugees in Gaza, more cases than in any other area of UNRWA operations. Still present, but steadily declining, is poliomyelitis: 27 refugee cases were reported in the Gaza Strip in 1971.

Measles, a disease which is not infrequently fatal in refugee children, was down to 326 refugee cases in the Gaza Strip in 1971. This compares with 699 cases in 1970 and 1067 cases in 1969. The reduced incidence has been brought about by an increasing use of immunization, although the vaccine is expensive and thus not available in sufficient quantity to UNRWA.

However, primary immunization in infancy is widely practised against a number of other diseases and this is followed by appropriate booster doses later in childhood. The child thus receives routine protection against tuberculosis, diphtheria, whooping-cough, tetanus, poliomyelitis, typhoid and paratyphoid fever and smallpox. This programme has been largely responsible, UNRWA's Health Department believes, for protecting the refugees from major epidemics. Even in 1970, when cholera swept over the Middle East, the outbreak was contained among the refugees quite quickly. Khan Yunis clinic was one of the command posts in an intense campaign of cholera shots and increased hygiene.

The centre's dentist, Dr. Levon Wahid, is

a graduate of St. Joseph's University in Beirut. He is the only UNRWA dentist available to refugees living in the southern half of the Gaza Strip and sees an average of nearly 40 patients daily. Under such pressure, his work consists mainly of extractions. The usual procedure is to give local anesthesia to 10 or 15 patients who have already been selected and then to call them in one by one for extraction.

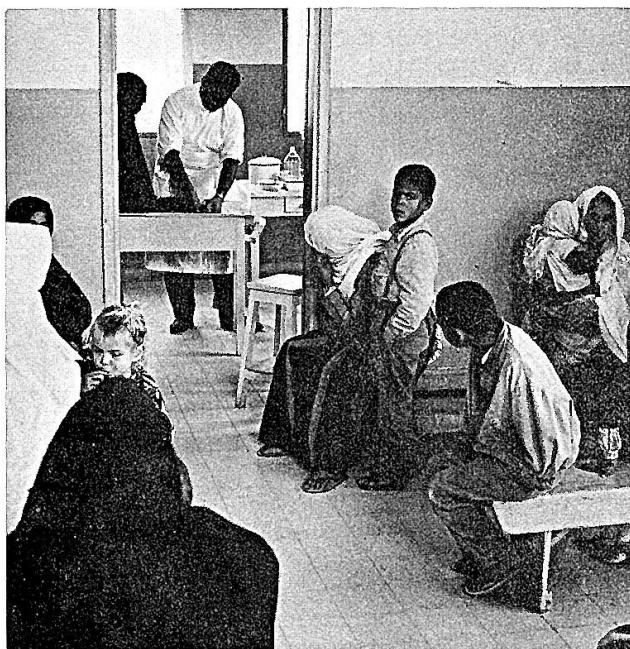
The maternal and child health clinic is in a separate section of the centre. Here expectant mothers visit at least once a month from the fourth month of pregnancy, for simple laboratory tests: checking of blood pressure, heart and lungs and obstetrical examination. An average of 135 new patients and 350 "old" patients attend this clinic during a month.

The dayahs attached to the clinic deliver approximately 150 babies a month in refugee shelters. Women for whom some difficulty is expected, or those who simply prefer to deliver at a centre, are delivered by midwives in the 12-bed maternity ward of the health centre, where about two births a day take place. The mothers usually stay in the ward for three days after delivery. When more serious problems are expected during the delivery, the woman is sent to a hospital where specialist care is available.

The Khan Yunis rehydration/nutrition centre, the operation of which is funded by the Canadian Save the Children Fund, occupies the second storey of the centre. It is one of 20 rehydration/nutrition centres operated by UNRWA. Here children with moderately severe malnutrition and those with acute gastro-enteritis are treated on a day-patient basis, after being referred to the unit by a doctor.

In 1961 UNRWA introduced into its services a new method of managing gastro-enteritis cases: babies are brought by their mothers daily to a rehydration/nutrition centre, where they receive antibiotic drugs to overcome infection and a balanced mineral solution to restore the body's

Women and children wait to enter a treatment room at the Khan Yunis Health Centre.



disturbed fluid and chemical balance. A special menu is also provided and the mothers are advised both on home treatment and on how to prevent recurrence of the disease.

There are 20 small cots but usually more than 20 patients. Infants and young children with more severe malnutrition are referred to the UNRWA/Swedish Health Centre pediatric ward or to a hospital in Gaza Town.

The rehydration/nutrition centre has four rooms, a kitchen and a bathroom. On an average day in February 1972, 26 children were being treated, but in the summer months when gastro-enteritis is more common, the centre frequently has up to 50 small patients per day for treatment. Around a low table in the main room, refugee women in colourful, embroidered dresses sit feeding their children the special high-protein, high-calorie post-diarrhoeal diet. The usual duration of treatment at the centre is two to three weeks. According to Dr. Hassouna, many of the conditions encountered in general clinics are in some way related to



A young patient receives assistance at the Khan Yunis Health Centre, the operating costs of which are paid by OXFAM.

malnutrition, which lowers resistance. At the rehydration/nutrition centre, this problem receives more specific attention -- including health education as well as treatment. Many cases of malnutrition in older infants, for instance, arise from incorrect use of powdered milk: some mothers dilute the milk too much in order to make it last longer, not realizing this practice undermines the child's nutrition. A few words from the doctor may prevent this recurring.

In the Gaza Strip the average refugee's diet relies heavily on bread, rice and such protein-rich foods as foul (beans) and hommos (chick peas). Unless home-grown, green vegetables are very expensive, and meat is out of reach of most incomes except on rare occasions.

If a child does not improve rapidly on the balanced diet of the centre, tests are made to determine whether some complicating disease is responsible. Ascaris (round worm) and other intestinal parasites are common in the Gaza Strip. The

UNRWA Health Department conducted a pilot project of providing 'blanket' therapy for ascariasis in the Beit Hanoun area of the Gaza Strip in 1970-71 for 1,822 school children and their younger brothers and sisters. All children received piperazine every three months for a full year. The prevalence of ascaris infestation dropped in 12 months from 37 per cent to 6 per cent in this study group.

At the rehydration/nutrition centre, a health education worker gives talks twice weekly to mothers on nutrition and child care. The staff nurses and midwives give similar child-care information while attending to their patients and demonstrate the preparation of baby food.

With its limited funds, UNRWA's Health Department has to follow a policy of making haste slowly in trying to safeguard and improve the refugees' health. But on the sands of Khan Yunis, the UNRWA clinic is one place where people who have been hurt so often, can find a little healing.



A young patient receives assistance at the Khan Yunis Health Centre, the operating costs of which are paid by OXFAM.

A FULL LIFE DESPITE DIABETES

While of necessity spending most of its limited funds on basic health services for the refugees, UNRWA's Health Department cannot neglect chronic disease, such as diabetes, which afflict the refugees. Working in co-operation with the World Health Organization - which in 1971 took as its 7 April World Health Day theme "A full life despite diabetes" - UNRWA has over the years established 11 part-time diabetic clinics to help diabetic refugees lead normal lives.

These clinics - two in Lebanon, three in Syria, four in east Jordan and one each in Gaza and the West Bank - are there to provide therapeutic management of diabetic patients in specialized units and to disseminate health knowledge about diabetes among the refugees, stressing early diagnosis, management and control. The diabetes clinic at the Jerusalem Health Centre is typical of the 11.

Dr. M.S. Faqih, an UNRWA School Health Medical Officer, who conducts the one-day-a-week Jerusalem clinic, calls diabetes "a neglected disease" despite evidence that at least one person in every 100 is a diabetic patient and at least one other a potential diabetic.

On Friday, when schools are closed in the West Bank, Dr. Faqih and two practical nurses hold the West Bank's only clinic for diabetic refugees. Their 244 patients receive both medication and advice. There are no specific "case finders", but the mere fact of opening a clinic has assisted detection through increased community awareness of diabetes. When the clinic began in 1968 only 25 diabetics were registered at the health centre.

Untreated diabetes leads to coma, blindness, kidney and nervous disease, skin infections, degenerative changes in the heart and blood vessels and even death. The isolation of insulin in 1921 has preserved the health of millions of diabetics. With treatment, which includes diet control as well as medication, the diabetic can live a full, normal life.

While there does not seem to be a higher rate of diabetes among the Palestine

refugees than among similar populations, Dr. Faqih sees a need for health education on the precipitating factors of the disease, many of which are common among the refugees. Hereditary predisposition plays a major role in development of diabetes, but precipitating factors include obesity and unbalanced diet, mental and physical stress, frequent pregnancy and infections. Diabetes is most frequent in overweight persons above the age of 40, but children also may be afflicted, and for them the disease is more severe.

The mortality rate among those who have registered at the West Bank diabetes clinic has been 3.6 percent. However, diabetes is often found in combination with hypertension, cardiac disease and other conditions which can lead to death.

Information about diabetes is offered by the clinic personnel to refugees seeking help for other medical problems as well as to diabetic patients. Patients are often grouped for lectures according to their educational level in order to make even the least-lettered understand how he or she can benefit from consistent treatment. However, Dr. Faqih stresses that personal contact is most important in restoring self confidence and in encouraging the diabetic patient. Many people, including the area welfare worker, the health education worker, the area nurse and the centre's staff nurse, help in this task.

The average cost to UNRWA of each visit to the 11 diabetes clinics, whether first or repeat, is 44 cents. Unfortunately, UNRWA has not been able to provide special funds for the diabetes clinics and has been forced to operate them from the general health services budget, which allows less than one and a half cents per day per registered refugee.

Yet while many undetected cases of diabetes undoubtedly remain among the refugees living in UNRWA's five fields of operation, the 11 diabetes clinics, limited as they are, have already proven to be places of hope providing a highly useful service for many.

UNRWA ON THE MOVE

White or blue station wagons, with "U N R W A" stencilled in large letters on the roof and sides, roll to a halt every day of the week, every week of the year, at Middle Eastern borders or cease-fire lines. These vehicles are a reminder of UNRWA's special international status in a war area, a status which enables the Agency to assist 1.5 million Palestine refugees living in three countries and two occupied territories.

To maintain communication and move supplies between the five "fields of operations", UNRWA mobilizes many facilities -- the United Nations radio network, a fleet of blue UNRWA trucks, a railroad and commercial aircraft. At present the fastest and most secure method of moving Agency staff and mail is by the "couriers" -- station wagons which circulate between UNRWA Headquarters in Beirut and the Agency's field offices in Syria, Jordan and the Israeli-occupied West Bank and Gaza Strip areas.

On a typical morning, passengers may include a nutrition specialist on her way to check supplementary feeding, a vocational training specialist en route to an UNRWA/Unesco training centre for young men or women, and an UNRWA Field Director returning from consultations at UNRWA Headquarters.

Diplomatic pouches, containing the Agency's official correspondence, ride on the rear decks of the station wagons. Small urgent freight, such as medical supplies, is also carried on the courier. Normal passport control measures are followed. Sealed by an international staff member, the Agency's diplomatic pouches are immune from search.

On the route between Beirut and the Israeli-occupied territories, international drivers -- currently, a Swede and a Norwegian, who alternate trips -- are responsible for safe custody of the pouches. The run to the occupied territories,

three times a week, takes the courier south 100 kilometres to the Israeli border and then on to east Jerusalem. Later in the afternoon, the car crosses back through Israel, south to the Gaza Strip. It returns to Beirut the following day.

Travelling UNRWA personnel can have breakfast in Beirut and lunch in occupied old Jerusalem, or vice-versa, a rare experience since 1967.

Crossing between Lebanon and Israel, the car pulls up for brief stops on either side of the no-man's-land between the two countries: passengers' names are checked against clearance lists, their United Nations laissez-passers scrutinized and stamped; and the driver bolts on new licence plates before continuing.

Many borders to cross

Communications across international borders, armistice demarcation lines and cease-fire lines are a problem UNRWA has faced ever since it began operations in 1950. Right from the beginning, the main problem has always been Gaza, isolated from the Arab world by Israel, the Mediterranean and the Sinai Desert. Difficult of access because of geography and politics, the Gaza Strip made air service a "must", and the Agency's main means of communication was therefore direct flights over the sea from Beirut (although road and rail links from Cairo were also used). For some years UNRWA used a chartered DC-3, then shared the Caribou aircraft of the RCAF in the United Nations Emergency Force stationed in Gaza.

After the renewed Arab/Israeli hostilities in June 1967, the situation changed. Extensive Arab territories came under Israeli occupation -- including the Gaza Strip and the West Bank, containing some 500,000 Palestine refugees. Arrangements were quickly made to allow UNRWA to continue its work there. For communications to occupied territory, the Canadian

Government offered to lend UNRWA an aircraft (to replace the Caribou after the withdrawal of UNEF) but Jerusalem airport and the air strip in Gaza did not reopen. The only solution -- almost as quick and considerably more economical -- was to operate a courier service by road. In the interests of the refugees, the Lebanese authorities agreed to let UNRWA cross in and out of Israel via the disused Nakoura border post south of Tyre. In the big yellow stone building, hallways now echo hollowly with the footsteps of UNRWA, United Nations Truce Supervision and Red Cross officials -- where crowds thronged past before 1948. As the courier passes through no-man's-land, rail tracks beside the narrow, crumbling road can still be seen, shattered in many places. Once an Orient Express spur down the eastern Mediterranean coast, linking Istanbul and Cairo, the train has not run since 1948. Its last trip was a one-way journey north, carrying refugees away from the fear which had engulfed their home.

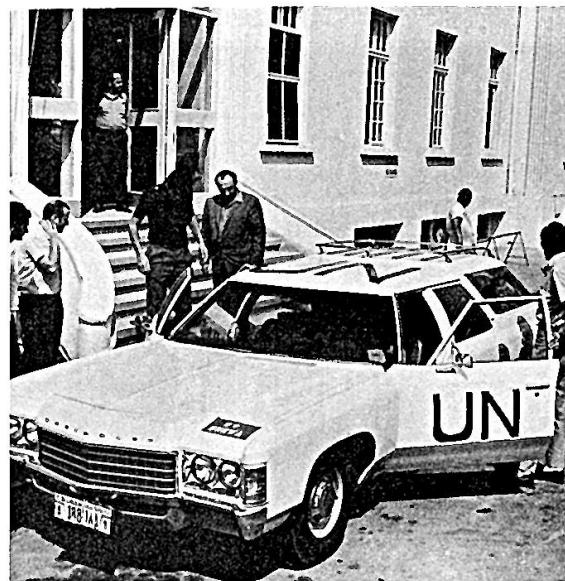
Bridge over the Jordan

In addition to the couriers linking UNRWA Headquarters to the Field Offices in occupied territory, UNRWA also moves staff back and forth between Jerusalem in the occupied West Bank and the Jordanian capital, Amman. Arab staff from Headquarters, with supervisory or specialist functions, also travel to the occupied territories by this route. Using the United Nations radio network, arrangements are made for cars to rendez-vous at the Allenby Bridge, now a sturdy Bailey bridge across the narrow Jordan River. Officials cross the bridge with Palestine Arabs entering occupied territory to visit relatives. This cease-fire line is open to traffic in general (unlike the Lebanese-Israeli armistice line or the Suez Canal cease-fire line, which latter is crossed only by officials of the International Committee of the Red Cross and ICRC-escorted persons), so UNRWA is not being accorded any special dispensation here. But without UNRWA's well-established courier routine, it would be much harder for the Agency to co-ordinate its work in occupied and unoccupied Jordan.

The need for quick, regular links also prompted UNRWA to begin a courier "shuttle" service three times a week between Amman and UNRWA Headquarters in 1971, when a Syro-Jordanian dispute halted direct flights by Arab airlines between Beirut and Amman. At one point, all road traffic into Jordan was stopped by the Syrian authorities, but the ban was partly lifted for UNRWA trucks carrying supplies from Beirut port to refugees in Jordan.

The volume of supplies moved by UNRWA -- more than 600 tons a day -- gives an idea of the scale of UNRWA's work. Similarly, the courier system, which enables the Agency to surmount distance and border problems, symbolizes the international status which alone enables UNRWA to carry out its mission, in a part of the world where too many lives have already been blighted by men's inability to overcome the barriers which separate them.

Outside UNRWA Headquarters, Beirut, the courier for Gaza and the West Bank is loaded for one of its thrice-weekly runs.



SPOTLIGHT ON OXFAM

Since 1960 OXFAM and UNRWA have been partners in a variety of efforts to help the Palestine refugees. With its 1972 contribution to UNRWA now set at £100,000, OXFAM (established in 1942 as the Oxford Committee for Famine Relief) keeps acquainted with both recurrent and emergency needs in UNRWA's programmes. UNRWA supplies OXFAM with quarterly follow-up reports, including photographs, on OXFAM-supported UNRWA projects. Part of the secret of OXFAM's success as a voluntary agency is the Committee's well-deserved reputation for being judicious about how OXFAM money is spent and for seeing to it that results have been achieved before any more is given. It is therefore encouraging for the Agency to see that OXFAM's support to UNRWA has not only continued but in fact risen over the years.

Mr. Bernard Llewellyn, Overseas Aid Appraiser of OXFAM, visited the Middle East in February in order to report current needs in the area to OXFAM headquarters.

Some 1,800 hot meals a day are served to needy children at the OXFAM-built Rafah supplementary feeding sub-centre in the Gaza Strip.

Mr. Llewellyn was particularly interested in seeing what had changed in the programme since his last visit 10 years before. Other than donations in times of emergency, OXFAM's assistance has tended to focus on the Gaza Strip, where there have been fewer opportunities of employment to relieve the deprivations of refugee status. OXFAM's 1971 donations to UNRWA included \$48,000 toward the running costs of the Khan Yunis Health Centre in the Gaza Strip, a centre toward which OXFAM has contributed since 1965.

Other OXFAM contributions to UNRWA in 1971 were \$48,000 toward the regular supplementary feeding programme in Gaza, \$37,150 each toward operating costs of the Gaza Vocational Training Centre and the Damascus Vocational Training Centre (equivalent to providing 135 training scholarships) and \$2,500 in university scholarships.

OXFAM has also been quick to respond to emergency situations. When Arab-Israeli hostilities erupted again on 5 June 1967 and over half-a-million Arabs were displaced, many for the second time, OXFAM was in communication with UNRWA before



Almost from its inception OXFAM identified itself in a special way with those areas of the world where refugee problems were acute and where poor host countries were overwhelmed by the demands of a refugee population. In Europe, the Near East, Hong Kong and later Algeria, its first substantial contributions to refugee programmes were made. And it was natural that UNRWA, with its wide responsibilities for the care of the Palestinians, should become a channel through which some of the OXFAM funds could flow.

Medical care and the nutritional requirements of children have always been important to OXFAM thinking, while the work of UNRWA's vocational training centres in fitting young Arabs for qualified jobs has always appealed to those OXFAM supporters who insist on some attention being given to tomorrow's world, and who look for personal solutions in a world where overall solutions still remain elusive.

OXFAM is concerned about people, concerned too that they should have a better future. What more natural, therefore, than that in the Near East we should be making contributions to the work of UNRWA?

mid-June over a forthcoming donation of nearly \$500,000 worth of emergency medical supplies.

In 1968 a grant of more than \$20,000 was made through UNRWA for the benefit of fishermen from the Gaza Strip who had fled with their families to Abu Kir in Egypt in 1967. The OXFAM gift enabled the refugees in Abu Kir to purchase boats and other equipment in order to become self-supporting.

In 1970, after the September fighting between Palestinian commando groups and the Jordan Government, OXFAM rapidly came up with a cash donation of over £5,000 for UNRWA to meet refugees' emergency needs and repair damaged medical installations.

In 1971/72 OXFAM raised a record of £3.7 million through its extensive fund-raising efforts. These vary from the traditional to ingenious efforts by young people and voluntary groups: they include hunger marches, hunger lunches, coffee parties in volunteers' homes and the sale of buttons which say "Forget OXFAM, Feed Twiggy". In addition to the money raised by OXFAM's Home Organization, its Overseas Aid Division was allocated this year another £860,000 by the independent OXFAMs of Canada, Belgium and America and other organizations which have chosen to route some of their funds via the OXFAM aid programme.

The Chairman of OXFAM is a Quaker, Mr. Michael H. Rowntree, who has himself visited UNRWA on more than one occasion. With less than 300 employees, almost half of them at its Oxford headquarters, OXFAM depends on volunteers to get much of its work done.

According to the London Times in an article entitled "Aid is Big Business Now", "OXFAM claims that 81 percent of cash received goes out in aid in the month that it arrives. Of the remaining 19 percent, 16½ percent is ploughed back in direct fund-raising efforts such as advertising. Only 2½ percent covers the administration expenses -- telephones, staff pay, stationery and offices" ^{1/}

OXFAM contributes to many humanitarian groups and projects around the world, including several organizations in the Middle East, such as the Near East Council of Churches, the YMCA and the Lutheran World Federation, organizations which also co-operate with UNRWA.

UNRWA's chronically difficult financial situation makes the Agency particularly glad to have such faithful and far-sighted supporters as OXFAM. OXFAM is a living demonstration of people helping people, the concern of the relatively comfortable few for the suffering many.

1/ The Times (London). 9 June 1971, p.21



Unloading flour for the refugees
at Aqaba, Jordan's Red Sea port

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