



COHI in the Middle East

Coexistence and Gender-Based Violence Projects



Circle of Health
INTERNATIONAL

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COHI gender-based violence Middle East researcher Stephanie Chaban with assessment participants, Summer 2007

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COHI in the Middle East

Circle of Health International (COHI) is an international non-governmental organization (INGO) founded in 2004, with the mission to build the capacity of women's health care professionals in crisis settings. We operate on the tenets of consensus-based decision-making, non-violence, and the grassroots model of social change. In doing so, we hope that our transparent, conscious, and compassionate approach to addressing the growing needs of crisis-affected women leaves the world more peaceful and equitable than we found it.



Map of Israel and Palestine

COHI's work in the Middle East focuses on coexistence and gender-based violence (GBV). While these two areas of focus clearly overlap, this report will

address them separately for the sake of clarity. The first section focuses on COHI's coexistence initiatives, and the second on COHI's efforts to combat GBV.



Israeli midwife participants in coexistence project

I. Coexistence Project

Introduction, Assessment, and Goals

COHI's coexistence work in Israel and Palestine focuses on bringing together midwives from both sides of the conflict to expand their commitment to peace and to their profession.

In May of 2004, COHI was invited by The International Women's Peace Service to conduct a women's health needs assessment in the Salfit region of the West Bank. COHI accepted this invitation and subsequently undertook an additional needs assessment in Israel. The objective of these assessments was to determine the self-identified needs of midwives in Israel and Palestine. During our research, COHI encountered two widespread needs: one, to develop updated standards of midwifery practice; and two, to learn more about what is occurring on the "other side."

Based on these early assessments—including interviews with concerned and affected individuals (particularly midwives and women of childbearing age), as well as reports from NGOs and government agencies—COHI developed goals and programming to address these needs. COHI's primary goals included:

- ❖ Developing professional midwifery standards of practice

for both the Israeli and Palestinian communities.¹

- ❖ Promoting separate professional associations for midwives within Israel and Palestine, as well as a shared association for Israeli and Palestinian midwives.
- ❖ Providing opportunities to expand midwife skill through shared trainings and professional development workshops that will allow Palestinian and Israeli midwives to work side by side, including field visits so that participants can see and experience the daily lives of their counterparts.
- ❖ Designing and implementing outreach targeting potential midwifery students, professional midwives, and the public at large in order to expand awareness of both midwifery as a profession and the successes and challenges of this project in particular.
- ❖ Facilitating an ongoing dialogue among the parties involved to work toward peaceful coexistence.
- ❖ Working with all stakeholders to draft and present policy proposals to the Israeli Ministry of Health that would enable Palestinian midwives to work inside Israel.

1 These standards will be based on the midwifery model of care, the educational requirements of each population, and international best practices.



From left to right: Palestinian coordinator for Palestinian and Israeli participants on a small

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*"We [midwives] speak the same language, regardless of our politics: women come first."
– Palestinian midwife*

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As in all of COHI's work, local women and girls are setting the priorities and providing the direction for this initiative. These women will also be intimately involved in evaluating this project at its conclusion.

Action

In October 2006, COHI began conducting outreach for its coexistence project focusing on Israeli and Palestinian midwives. Two coordinators were identified: Mindy Levy, an Is-



COHI Salam Kanaam, working with group exercise

Israeli home-birth midwife and Salam Kanaan, the Director of Midwifery at Red Crescent Hospital in East Jerusalem. These leaders each selected a group of local nurses and midwives to serve as spokespeople for their health care communities. In May 2007, COHI held its first coexistence training, arranging for 12 Palestinian pediatricians, OB/GYNs, nurses, and midwives to travel to Israel and meet with their Israeli counterparts for a one-day professional development seminar on neonatal resuscitation. In October 2007, COHI secured a grant from the Euro-Mediterranean Human Rights Foundation to support the coexistence initiative. That same month, COHI's Israeli and Palestinian midwife participant groups held their first formal meetings.

Since then, COHI held a training in May 2008 with waterbirth expert Barbara Harper, founder of Water-

birth International, a US-based organization. The focus of her training was on the uses of water in labor and delivery. British midwife Diane Garland, an expert in waterbirth, joined her to share information on evidence-based findings of the positive effects of water in labor and delivery for women and practitioners. This workshop took place in East Jerusalem and was hosted by COHI's partner, Red Crescent Hospital.

In June 2008, world-renowned midwife Ina May Gaskins generously gave her time to facilitate a private workshop for COHI's mid-east participants. The midwives passed an afternoon together discussing the role and leadership of midwives, techniques for difficult deliveries, and the various training and certification requirements for midwives around the world. This workshop was held in Jerusalem and organized by the Israeli participants.

Another great success for this project has come in the form of a supplemental project initiated by one Palestinian midwife and one Israeli midwife. Aisha Safi and Leslie Wolff will be traveling to an international midwifery conference in Sweden in October 2008 to share their work together on an infant care project they've begun after meeting through COHI. The project focuses on "Kangaroo Care," or skin-to-skin contact, for mothers and newborns to improve maternal and infant outcomes. They both received travel grants to attend, and are thrilled for this opportunity to expand their personal and professional relationship.

What's Next?

In the Fall of 2008 into 2009, COHI will host a series of workshops with our partners on suturing (to be led by the Palestinian group) and positions in labor (to be led by the Israeli participants). Additionally, COHI will bring in outside trainers for several workshops on trauma, violence, and communication. COHI is now looking ahead to the coming months to accomplish the following:

1. Supporting Israeli midwives who will provide technical support to Palestinian midwives as they prepare for their licensing exams;
2. Expanding our focus on trauma, violence, and the clinical manifestations of Post Traumatic Stress Disorder (PTSD) in delivery; and
3. Organizing and hosting of an international conference on women and coexistence showcasing COHI's work in the region.

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"My motivation is the result of my curiosity ... On one hand I felt the cultural distance between us, but on the other hand I felt a deep desire to make that distance go away and to get to know the midwives, who are my neighbors, and forget that we are on opposite sides of a political conflict. This is where peace begins, no? On a personal level." – Mindy Levy, Israeli midwife and member, COHI Board of Directors

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2. Gender-Based Violence

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"In Iraq, Israel and the Occupied Territories, violence against women was directly linked to conflict, or was exacerbated by the easy availability of arms and the social disruption of war. Across the region, violence within the home and family was perpetuated by state inaction, inadequate or discriminatory legislation, and social prejudice." - Amnesty International Report, May 25, 2005
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Introduction, Assessment, and Goals

Over the past six decades, the Israeli-Palestinian conflict has played out on a global stage. During that time, the world has watched as Israeli and Palestinian communities have undergone regular and violent upheaval. More recently, we have looked on with dismay as life in the region has become increasingly militarized, the West Bank has suffered economic freefall, suicide bombers have terror-

ized Israel's citizenry, and Gaza has undergone new trials.

During that time, however, the relationship between the conflict and gender-based violence (GBV) in the region has received scant attention. It is only within the last decade that international NGOs like COHI have joined feminist researchers to address the ways that the conflict affects women with particular intensity.

In the summer of 2007, COHI conducted a comprehensive gender-based violence assessment of each sector of Israel's and the West Bank's diverse populations.¹ The assessment included interviews with Israeli, Arab-Israeli, and Palestinian women's rights organizations, academics, activists, and local women from each population. Our findings mirror those of other international and non-governmental organizations. Since the escalation of conflict in 2000, GBV has risen sharply in Palestine,² remained at seri-

1 Because of safety and accessibility concerns, the Gaza Strip was not included in this assessment.

2 "Several Palestinian women's organizations have...reported a rise in already high levels of violence against women following the second Intifada." Family member and intimate partners are the most frequent perpetrators. See Human Rights Watch. (2006) A Question of Security:



Palestinian midwife participants in COHI's C

ous levels in Israel,³ and taken on new and frightening forms across the region.⁴

Violence Against Palestinian Women and Girls. New York: Human Rights Watch.

3 In Israel, gender-based aggression tends to be more psychological than physical; 6% of women are subject to physical violence in any given year, while the vast majority of women (76.8 percent) are exposed to emotional abuse, typically from domestic partners. See Eisikovits, Z., Z. Winstok, & G. Fishman. (2004). The First Israeli National Survey on Domestic Violence. Haifa: University of Haifa.

4 Since the second Intifada, "honor" killings have been on the rise in much of Palestine. In 2006, seventeen Palestinian women were reportedly killed in what were labeled "honor" crimes - twelve in the Gaza Strip and five in



Coexistence Project

COHI is now in the midst of distributing the results of our research – and particularly the experiences and insights of the women interviewed – among Israeli, Arab-Israeli, and Palestinian women’s rights organizations, activists, academics, and the public at large.

In the wake of our research, COHI has begun to open up dialogues and inaugurate partnerships with women’s rights

the West Bank. Palestinian women’s rights organizations are attributing these deaths to the changing relationships between men and women since the resurgence of conflict. See IRIN News. (2007, March 7). OPT: ‘Femicide’ on the Rise in Conflict Zone.



Palestinian midwife participants in COHI’s Coexistence project

organizations, health care providers, and the general public in order to formulate strategies for combating GBV in the region. We seek to improve the public’s access to GBV services, expand health care providers’ ability to address GBV, and generate greater understanding about the types of violence women face in conflict situations.

In the Spring of 2008, COHI will begin conducting GBV training for local women’s health care workers in Israel and Palestine. This training will focus on techniques for identifying, treating, and referring GBV survivors, and will continue through 2009.⁵

⁵ In addition to OB/GYNs, nurses, and other health care professionals, these trainings will include the midwives from COHI’s coexistence initiative.

Partners

COHI partners with and engages in dialogue with women’s rights organizations that share our goals: peaceful coexistence, women’s empowerment, and a commitment to understanding the variety of forms that GBV can take in conflict scenarios.

COHI has formalized relationships with two Israel-based partners. One is Ben Gurion University’s Center for Women’s Health Studies and Promotion in the Negev. The other is Kayan, a Haifa-based feminist organization. COHI is currently in the process of identifying Palestinian partners for our ongoing research and outreach efforts.



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