

Health 4 Palestine (H4P)

is a community health worker program conducted in partnership with Harvard Medical School. The program supports training for local health workers providing in-home care for diabetes monitoring and hypertension, serving over 100 patients. In 2020, 1for3 plans to expand the outreach of H4P to over 200 patients.

Healthcare delivery is fragmented into poorly connected networks in the occupied Palestinian territory. Aida and Al-Azza Refugee Camps (~7500 people) are adjacent to Bethlehem, highly population-dense, and comprised of refugees from more than 27 villages inside the state of Israel. Aida and Al-Azza have no dedicated clinic within the camps, and health access has been a longstanding community concern. In 2018 the Trump Administration announced the cutting of all funds to UNRWA, with additional cuts affecting key public and NGO hospitals.

Given the UNRWA cuts by the US government, the need to coordinate, organize, and improve refugee patient care in the West Bank has never been more urgent.

Between March 2018 and March 2019 H4P's community health workers completed over 1100 patient visits in Aida and Al-Azza Camps. Average visit lengths are 30 minutes, allowing a balance between social accompaniment, relationship-building, and efficiency. Because we have abundant data on workflow, estimates on expansion needs can be built into our grant applications.

The Lajee Center Health for Palestine H4P Program

in Aida Refugee Camp,
Bethlehem, Palestine



An investment in a brighter future



**Donations to the H4P Program can be made to 1for3
by check (payable to 1for3) and by credit card online at 1for3.org.**

<https://www.classy.org/give/108654/#!/donation/>

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Developing the H4P program

Defining the Agenda

In order to develop an effective program that is both community derived and driven, the Lajee Center conducted focus group interviews with refugees in Aida Camp in 2016–2017. Numerous barriers to care were identified, including poverty, transportation difficulties and expense, regular army incursions and tear gas in the camp, the lack of a local clinic, medication and procedure costs, and perceived poor quality and inconsiderate treatment. The diseases of heaviest burden noted by participants were very similar to the most common and deadly diseases throughout the West Bank: diabetes, hypertension, heart disease, strokes, cancer, and depression.

Project Design

A community planning team was assembled at Lajee in early 2018. The team includes the local medical director, manager, and coordinator, as well as the recent addition of a patient advisory board. International advisors include physicians affiliated with Harvard and Cornell teaching hospitals. Six CHWs were hired for the program's initiation, and they work fulltime in mixed gender pairs. CHWs provide social accompaniment, transportation facilitation, medication supervision and supply oversight, basic vital sign and glucose monitoring, psychological first aid, trauma-informed psychosocial counseling, resilience promotion, and supportive referrals to clinical services and hospitals.

The CHWs meet weekly with a social worker to discuss their work challenges as well as patients requiring additional social support. H4P utilizes an mHealth phone application called Kobo designed specifically for the project's health monitoring, evaluation, and data collection.

Expanding the Program

As of October 2019, we are following approximately 100 patients with eight community health workers, with plans to expand to 200 in 2020. Given the education and informal consults delivered by CHWs to family members, the overall project impact covers approximately 800 people in Aida and Al-Azza Camps, or 11% of the total population. In 2020, H4P will finalize its pilot phase with expansion to all poorly controlled diabetes and hypertension patients within Aida and Al-Azza Camps.

Conversations are underway with the UN and refugee organizations to utilize our model broadly through West Bank camps, as well as those in Gaza, Lebanon, and Jordan. The three-year plan is for our experienced CHWs to train the next generation of Palestinian refugee health workers in 3–5 additional camps, and to join global CHW leaders like *Partners in Health*, *Last Mile Health*, and *Possible* in continuing to advocate for improved and expanded CHW services around the world.

Project Successes

Since the start of the H4P home visit program in March 2018, preliminary data show that the majority of our uncontrolled diabetic patients have experienced an improvement in the control of their disease. Compared with UNRWA patients (including those in Lebanon, Gaza, West Bank, and Jordan), of whom only 28% are under good diabetic control with Hemoglobin A1C <7%, 55% of our patients are now controlled: nearly twice the UNRWA average. As of July 2019, only 15.2% of our patients have a HbA1C of >9, which is better than the average of 15.6% in the United States. An analysis of project impact is currently underway in partnership with Harvard researchers, with plans for publication in 2020.

Health for Palestine: Percentage of Patients with Excellent Diabetic Control (HbA1C <7)



UNRWA: Percentage of patients with Excellent Diabetic Control (HbA1C <7)

