



**World Health  
Organization**

**SIXTY-THIRD WORLD HEALTH ASSEMBLY**  
**Provisional agenda item 13**

**A63/INF.DOC./7**  
**14 May 2010**

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## **Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan**

At the request of the Government of Israel, the Director-General has the honour to transmit to the Sixty-third World Health Assembly the attached report by the Ministry of Health of Israel.



## ANNEX

**REPORT OF THE ISRAELI MINISTRY OF HEALTH  
TO THE SIXTY-THIRD WORLD HEALTH ASSEMBLY**

1. The position of the State of Israel has always been that a politically motivated debate and resolution on the item “Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan” has no place on the agenda of the World Health Assembly. The Health Assembly should not discuss the health situation of a population in a specific conflict, as it is not of a general public health nature. The Health Assembly is not the forum to discuss the narrative of an ongoing conflict nor the place to decide on political matters.
2. Israel has previously provided information on the health conditions of the Palestinians in the West Bank, at the request of the Secretariat.<sup>1</sup> Following this, the Palestinians stopped most of their existing cooperation in health matters on the grounds of that information having been published. The outcome of the agenda item and the associated requested information was that the population’s good health conditions were disrupted. For this reason Israel will not provide any information on the cooperation in health matters between Israel and the Palestinian Authority, instead preferring to keep this information far from the public domain.
3. Resolution WHA62.2 requests the Director-General to support the establishment of medical facilities and provide health-related technical assistance for the Syrian population in the occupied Syrian Golan. Presently, 18 000 Druze inhabitants of the Golan Heights have comprehensive health coverage under the National Health Insurance Law. Residents living in the four Golan Druze villages of Buq’ata, Ein Quinya, Majdal Shams and Mas’ada are members of one of the four sickness funds/health maintenance organizations operating in Israel, including the Golan Heights.
4. According to the national health insurance law, residents of the Golan Heights, as well as all other residents of Israel, have access to any primary, secondary and tertiary medical facility throughout Israel.
5. The four health maintenance organizations have clinics in the Golan Heights and also work with affiliated private doctors. In addition, there is a unique health centre with a 24-hour emergency room in Majdal Shams – the largest Druze village in the Golan Heights – staffed by Druze, Muslim, Christian and Jewish doctors. This health centre offers high-quality primary and secondary medical care, and therefore attracts patients from other communities living in the Golan Heights.
6. As such a small number of people live in the Golan Heights there is no immediate need for a hospital there. According to Israeli standards, hospitals are built to serve populations of 150 000 or more. However, the 24-hour health centre in Majdal Shams as well as other state-of-the-art clinics in the Golan Heights together meet the needs of the local population. If needed, all Golan Heights residents have full access to hospitals in northern Israel, the closest of which are located in Afula, Tiberias and Tsfat.

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<sup>1</sup> For example, document A61/INF.DOC./3.

7. The Israeli Ministry of Health and medical practitioners in the Golan Heights have found no specific medical problems among the residents of the Golan Heights, whether Druze or Jewish. The Ministry has received no claims or complaints from the Druze population in the Golan Heights regarding medical care. The health situation of residents in the Golan Heights is identical to the rest of Israel, which has some of the best medical facilities in the world.

8. In 1967, medical facilities and personnel in the Golan Heights were minimal. Today, there are 40 doctors based in the Golan Heights as well as 96 dentists and dozens of nurses. All doctors in the Golan Heights have an Israeli medical licence and can practise throughout the country, as many do, especially in northern Israel. The doctor–patient ratio in the Golan Heights is better than in all other parts of the country, and waiting times to see specialists are very short compared with most medical facilities in the rest of Israel.

9. Druze students from the Golan Heights can attend medical school in the Syrian Arab Republic and return to the Golan Heights to practise when they complete their studies, or choose to study in one of Israel’s medical schools. This reinforces the commitment to fair social and medical rights for all residents of Israel.

10. The health situation in the Golan Heights is of an extremely high standard and does not require the intervention by WHO requested in resolution WHA62.2. A politically-motivated resolution such as this has no place in a professional organization like WHO, and therefore should be removed from the agenda.

11. There are other areas of the world that are in real need of urgent medical support, and could greatly benefit from WHO discussions and resolutions.

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