



**World Health
Organization**

SIXTY-FIFTH WORLD HEALTH ASSEMBLY
Provisional agenda item 15

A65/INF.DOC./3
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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-fifth World Health Assembly the attached report by the Ministry of Health of Israel (see Annex).

ANNEX

**REPORT OF THE ISRAELI MINISTRY OF HEALTH
TO THE SIXTY-FIFTH 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.¹ 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, preferring instead to keep this information far from the public domain.
3. In the context of operative paragraph 5(3) of resolution WHA64.4, 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, 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.
6. Due to the small number of people living in the Golan Heights, there is no immediate need for a hospital there. Based on 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 meet the needs of the local population. If needed, all Golan residents have full access to hospitals in northern Israel, the closest of which are located in Afula, Tiberias and Tsfat.
7. The Israeli Ministry of Health and medical practitioners in the Golan Heights have found no specific medical problems regarding 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 regarding

¹ For example, document A61/INF.DOC./3.

medical care. In fact, the health situation of residents in the Golan is identical to the rest of Israel, which has some of the best medical facilities in the world.

8. The health situation in the Golan Heights is of an extremely high standard and does not require the intervention by WHO requested in resolution WHA64.4. 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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