



**President's Update**  
**Holy Family Hospital**  
**Bethlehem**  
**July 20, 2020**  
**Ambassador Michele Bowe**

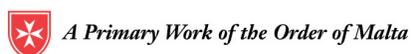
What began as a contained and isolated outbreak of the Covid virus in Bethlehem, has now grown to infect over 9,000 people, mostly from the Bethlehem and Hebron regions. This is the catchment area for Holy Family Hospital. Today there are over 81 infected healthcare workers and 30,000 people in isolation because of exposure. These figure likely only capture a fraction of the numbers infected as the desperate economic situation forces those who have work to do so, even with a sick household member. Sick people are not getting tested because of the road closures and the fear of breadwinners being quarantined without income.



In early March, COVID-19 found its way into Bethlehem resulting in an immediate and complete lockdown and curfew of the region. Manned checkpoints separated neighborhoods, the streets emptied, and no one dared to go outside. The exception was the doctors, nurses, midwives and staff of Holy Family Hospital. They bravely crossed through neighborhoods, sometimes escorting women in labor and made their way to work at the Hospital. Babies don't stop for pandemics and our hardworking Hospital staff doesn't stop caring for the Mothers and Babies of the greater Bethlehem region.

During the first three months of the shutdown, most economic activity stopped. Schools closed, businesses shuttered, and all non-essential medical services were stopped. Only 10% of the people were receiving salaries due to the heavy reliance on the pilgrimage and tourism sector. Families took care of each other and paychecks were stretched to cover necessities for extended family members. The Hospital staff came to work every day, suited up in their protective gear and delivered 1,300 babies. To keep the patients and employees safe and healthy, the medical director split the employees up into teams and created 12-hour shifts. Any virus exposed teams would quarantine as a group to prevent the spread.

The Hospital is very careful and diligent about infection control and mitigation, as it is the only hospital in the region that can deliver and care for babies born before 32 weeks. The 18 bed NICU has been full to overflowing with babies as small as one pound. The staff has been putting in long hours at personal risk.



To protect the lives of the smallest and most vulnerable babies of the region, the Ministry of Health designated a wing of a health facility as the Covid treatment center with an isolation unit. Holy Family Hospital repurposed an operating theater into an isolation unit to deliver sick mothers staff by a dedicated isolation team. These staff members volunteered for this hazardous isolation duty knowing they were helping their colleagues with fragile family members stay healthy.

This 3-month shutdown of Bethlehem, the Hospital clinics and the closure of the Hebron Road contained the spread of the virus but had a great economic impact on the Hospital. Most families could no longer contribute at all toward their care or deliveries creating a large unplanned deficit of \$600,000 in the Hospital budget. To maintain operations, the Hospital board voted to reduce employee salaries for three months by 18%. This was a difficult decision, but given the finite resources of the Hospital, an unavoidable one. In June, the Hospital board voted to reinstate full salaries because of the great economic hardship and the high-risk work conditions the staff face in today's medical environment.



As the virus was contained in early May, some businesses began to reopen, but few came to spend money because of the economic situation. Bethlehem is no stranger to economic hardship. While it is the most Christian Governorate, in Palestine, it is also the poorest after Gaza. The presence of the Church creates regional stability through employment and economic stimulation, but livelihoods are dependent on pilgrims or day labor in Jerusalem. Families are accustomed to sharing their tables, rationing their water and electricity usage and waiting out the hardship. Monies saved for deliveries or medical care had to be diverted to buy food and a few hours of water and electricity each day. The hardship of this pandemic is unlike any past hardship experienced in the region.

In early June, the cases of Covid began to grow exponentially in Bethlehem and Hebron, from where the Hospital draws its patients. The crowded refugee camps, jam packed lines of laborers going into Jerusalem and crowded city centers created a surge of infected people. The Hospital was not able to stay free of the virus. A pre-symptomatic mother delivered her baby at the Hospital and when she became sick, her whole care team had to be tested and quarantined. Only one resident doctor tested positive and that team was able to come back to work. The head of Obstetrics was also exposed to Covid and had to isolate, but ultimately did not test positive.

In early July, the Government reinstated the second shutdown including the complete closure of all churches, mosques, businesses and schools. The border to Jerusalem is also closed to all, including day laborers. Only grocery stores and pharmacies remain open with restricted hours. A complete twenty-four hour a day curfew has been imposed for the weekends allowing only medical personnel, grocery workers and pharmacists to move between neighborhoods. The refugee camps have been sealed closed only allowing for the exit of major medical emergencies or the delivery of babies. This will remain in effect through the end of July at a minimum.





The Ministry of Health is counting on these drastic measures to slow the spread of the virus which has been growing at a rate of as much as 5% per day. The fragile health system could collapse with this increased rate of cases. This forced a second closure dramatically impacting the Hospital. There will be even fewer patient contributions for care, an increase in complicated deliveries due to the lack of prenatal care from the closure of clinics and a higher rate of admittance to the NICU. The NICU is running at or over capacity with more complicated and cost intensive cases than usual. The hospital is busy with daily births ranging from twelve to nineteen.

The protective gear required by staff has become hard to acquire and is increasingly more expensive. Increased expenses coupled with the lack of patient contributions has created a projected deficit for the year of \$600,000. Holy Family Hospital Foundation is working harder than ever before to find funding to keep the doors of our Hospital open during this crisis. **Bethlehem needs Holy Family Hospital now more than ever before to keep the**

**mothers and babies safe and Holy Family Hospital needs you more than ever before to keep hope alive and to allow our staff to continue to care for all without regard to creed our need at our modern day manger.**



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