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**BOSTON UNIVERSITY
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Dissertation

**THE PALESTINIAN AUTHORITY AND CIVIL SOCIETY:
A CASE STUDY OF WOMEN'S AND HEALTH
ORGANIZATIONS IN THE WEST BANK**

by

RIMA HABASCH

M.A., Eberhard-Karls-Universität, Tübingen, 1989

**Submitted in partial fulfillment of the
requirements for the degree of
Doctor of Philosophy**

2000

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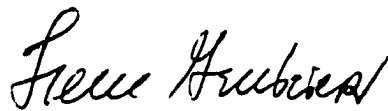
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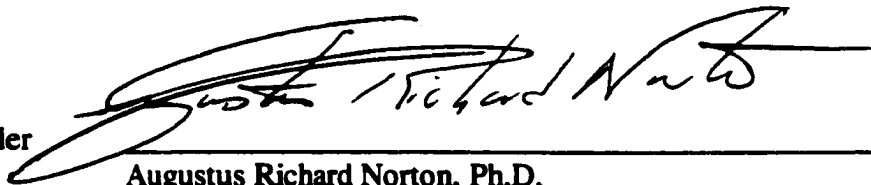
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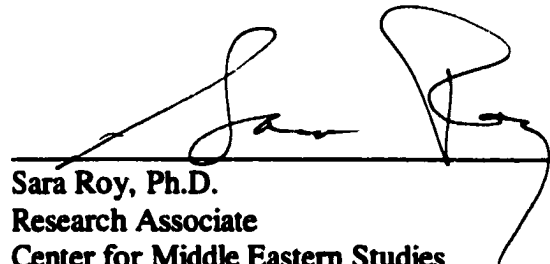
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*To my mother for her unconditional support and to
my late father who would have been proud to read this dissertation*

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Acknowledgements

Numerous people accompanied this work and contributed in one way or another to its completion. My immeasurable gratitude goes to Professor Irene Gendzier. Without her commitment, dedication and encouragement and her firm belief in the importance of my work, I could not have completed this dissertation. I also wish to express my immense admiration for Professor Gendzier's intellectual grandeur with which she constructively challenged my arguments. Her guidance in my research and writing has been invaluable.

I would like to thank Dr. Sara Roy from Harvard University for her dedication, support, advice, and for sharing her wealth of knowledge on Palestinian development with me. Despite her busy schedule, Dr. Roy always found the time to read and thoroughly discuss my work with me. Professor Perez dedicated numerous hours to evaluate and discuss the progress of my work. I would also like to extend my gratitude to Professor Augustus Richard Norton for his guidance in my research.

My stay in Palestine would have not been successful without the generous hospitality of the Abed Rabbo family, of Alfred and Fida Azar in Ramallah, of the Sheikh al-Jamal family, and especially that of my childhood friend, Dr. Rosina-Fawziyya Al-Rawi-Al-Rifai, who provided me with a home in Jerusalem.

I owe gratitude to all the people I interviewed, for dedicating their time and interest, especially to Dr. Helga Baumgarten, Dr. George Giacaman, Dr. Salim Tamari, Dr. Mustafa Barghouthi, and Raid Malki.

Dr. Roger Owen and Mr. Tom Mullins from Harvard University supported my research by making me an affiliate of the Center for Middle Eastern Studies, which gave me access to the Harvard Library System.

I would also like to thank the MIT-Mellon-Foundation for the generous grant that enabled me to finalize my field research and publish a chapter of my dissertation.

Finally, this dissertation could not have been completed without the encouragement and continuous support of my family. Special thanks go to my sister Mona whose critical comments of the various drafts always provided me with a fresh look at my work; to my cousin Spiro for providing the food for the soul, and to Luc Vanrobays for his friendship and continuous support.

**THE PALESTINIAN AUTHORITY AND CIVIL SOCIETY: A CASE STUDY OF
WOMEN'S AND HEALTH ORGANIZATIONS IN THE WEST BANK.**

(Order No.)

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ABSTRACT

Contemporary theories of civil society maintain that civil society contributes to the transition to democracy as well as to its sustainability. By establishing a positive correlation between civil society and democracy, this literature infers the capacity of civil society to favorably effect change of state policy. However, the factors that explain this outcome remain underexamined, leading to the impoverishment of contemporary theories of civil society. This dissertation is designed to remedy this deficiency.

The present work examines the conditions that enable civil society institutions to contribute to democratic development. This examination focuses on two organizational networks, those of women's groups and health organizations in the West Bank. It investigates the strategies the selected civil society institutions have adopted in their relations with the government of the Palestinian Authority (PA).

The methodology on which this study relies is based on findings from the literature on non-governmental organizations and the state. The literature on NGOs reveals that civil society institutions are most effective in inducing policy change by creating horizontal networks among themselves and vertical ones with the state. While horizontal networks constitute the institutional structure that enables civil society

institutions to replicate changes at the micro level on a large scale, it is through vertical linkages with the state that these changes are integrated into existing state structures. However, whereas networks constitute an effective means to further policy change, the responses of the state may vary. The variation in state policy responses, according to the literature, is explained by overall state capacity.

The Palestinian Authority's treatment of civil society institutions, which is examined in this dissertation, sheds light on the PA effort to marginalize and to control the non-governmental sector. In this the PA has sought to impose its own vision of a political order at the expense of NGOs. This in turn has resulted in important components of women's and health organizations renegotiating their relations with the state. The results are considered in the analysis and conclusion of this work.

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List of Abbreviations

1. POLITICAL PARTIES

DFLP: Democratic Front for the Liberation of Palestine

PFLP: Popular Front for the Liberation of Palestine

PCP: Palestine Communist Party

2. WOMEN'S ORGANIZATIONS

PFWAC: Palestinian Federation of Women's Action committees (affiliated with the DFLP)

UPWWC: Union of Palestinian Working Women Committees (affiliated with the PCP)

UPWC: Union of Palestinian Women Committees (affiliated with the PFLP)

WCSW: Women's Committees for Social Work (affiliated with Fatah)

3. HEALTH ORGANIZATIONS

UPMRC: Union of Palestinian Medical Relief Committees (affiliated with the PCP)

UHCC: Union of Health Care Committees (affiliated with the DFLP)

UHCW: Union of Health Work Committees (affiliated with the PFLP)

UHSSC: Union of Health and Social Services Committees (affiliated with Fatah)

CHAPTER I: INTRODUCTION

A. Hypothesis and Research Objective

Government officials, aid agencies as well as academic circles have been using the concept of civil society to assess the existence of a democratic political order and the potential for its development. This practice is based on the premise that there is a positive correlation between civil society and democracy and that civil society may promote the emergence of democratic states. In this view civil society effects changes in state policy. This literature, however, often fails to indicate the conditions that promote or tolerate such development. The failure to specify the contextual prerequisites of such positive change undermines the coherence of civil society theory.

The thesis that follows investigates selected case studies of the operations of women's and health organizations in the West Bank, both of which had played important roles in the grassroots movement that sought to democratize the then-existing Palestinian political order by combining democratic decision-making and decentralized solutions to development issues in the pre-1994 period. However, following its creation, the Palestinian Authority (PA) has attempted to impose its own non-democratic vision of political order, as a result of which women's and health organizations have faced the threat of being marginalized or repressed by the PA. In addition to the objective identified in the preceding paragraph this dissertation also examines the conditions that account for the success of both organizations in inducing change in PA policy in the face of this challenge.

The hypothesis that informs this research is that civil society institutions are most effective in influencing and altering state policies when they establish horizontal linkages among themselves and vertical linkages with the state. This hypothesis builds on the

literature on NGOs, which examines the means that issue-oriented NGOs choose to increase their influence in national development policy. While the literature on NGOs focuses largely on the effectiveness in replicating small-scale successes in development projects and neglects the implications for democratic development, its insights can nevertheless be used to understand the potential of civil society to contribute to democratization. The NGOs to which this applies are typically those whose agendas are embedded in the vision of a democratic order. It is in this role that NGOs constitute part of civil society. Women's and health organizations have assumed this very role. As their own agendas are embedded in a democratic order, women's and health organizations have not only advocated a change of policy related to women's and health issues, but have also lobbied for a comprehensive change of PA policy towards a more democratic order.

Finally the assessment of the success of civil society institutions in inducing change in national policy requires the examination of the properties of both civil society as well as the state, which in this instance refers to the PA as the Palestinian state in formation. Both, state and civil society constitute the conceptual foundation for the study of the selected cases of women's and health organizations in the West Bank.

B. The Selected Case Studies

The present study is based on a comparative analysis of women's and health organizations in the West Bank and their interactions with the Palestinian Authority. It focuses on the conditions that determine the struggle between two diametrically opposed visions of political order: namely an undemocratic one endorsed by the PA, and a democratic understanding of political order sought by women's and health organizations.

Women's and health organizations have developed their democratic experience as part of a social movement that took shape in the late 1970s to counter the Israeli occupation of the West Bank and the Gaza Strip. In this role the social movement not only provided services to the affected Palestinian population in the Occupied Territories, but most importantly attempted to address distortions in the political, social and economic order in the Occupied Territories.

In order to redress these distortions and to attain a more democratic society these movements advocated the comprehensive transformation of Palestinian society, rather than attributing development distortions solely to the effects of the Israeli occupation. The organizations which emerged from the activities of these movements constituted the most active part of the non-governmental sector of Palestinian civil society and expected to play an increased role in the formulation of national policy following the creation of the Palestinian Authority (PA) in 1994.

The PA, however, which since its inception has developed authoritarian traits, has sought to marginalize, repress, or control the NGO sector. This is particularly reflected in the PA's proposed associational law which represents the most obvious attempt of the PA to impose its own vision of its relation with civil society.

The proposed law has been regarded by a substantial number of NGOs as an attempt by the PA to control their activities by compelling them to obtain, in addition to registration, a license from the Ministry of Interior, and by subjecting their revenue to PA control and approval. In brief, the proposed law has been viewed as undemocratic as it aims at curtailing the freedom of associational life. In order to further their interests and lobby for a change of the proposed law, NGOs have responded by creating a network, through which they could forge a unified vision of their relation with the PA. By creating

a coalition of like-minded NGOs and by establishing vertical linkages with the PA in an effort to change the law, the network has enhanced its bargaining position toward the PA.

The PA has also sought to impose its vision on specific sectors of civil society through direct regulation of activities. This is most significantly reflected in the health sector, but is also true for other sectors. NGOs have not remained acquiescent, but have responded by establishing horizontal linkages among themselves and vertical linkages with the state. Through horizontal linkages NGOs have created a counter-hegemony to the existing political structure. Vertical linkages with the PA have provided the NGOs with a means to lobby for change of PA policy.

Both women's and health NGOs have been prominent in these endeavors. The aim of women's organizations has been to further their vision of a societal order based on gender equality. Health organizations, in turn, have attempted to influence national health policy towards a more egalitarian provision of health care. As the agendas of both are embedded in a democratic order, they have addressed larger questions of transformation of Palestinian political society in a democratic direction.

However, while both have employed the same mechanisms, their success to induce change in PA policy has varied, such that women's NGOs have been less successful than health NGOs. This dissertation examines the factors determining their success or failure by comparing strategies and means used by women's and health organizations and the responses of the PA to each.

This comparison allows us to identify the conditions under which the PA responds to some demands expressed by institutions from civil society and the situations under which it chooses to ignore these. Identifying these factors will shed light on the prerequisites of democracy.

C. The Concept of Civil Society

The concept of civil society has received attention in research on democratization of previously authoritarian regimes and on the consolidation of democracies. In the research on democratization it is argued that civil society institutions have become more assertive in demanding participation in political life and accountability from the state. Furthermore, according to this literature, civil society has provided the impetus for the demise of authoritarian regimes and the transition to democracy. In addition, civil society is regarded as essential for a sustainable democracy, in that it both controls and legitimates state power (Bernhard, 1993; Cohen and Arato, 1992; Harbeson, 1994; Walzer, 1991; White, 1994).

While most researchers emphasize the presence of formal organizations ranging from social, economic, to political institutions that are organized beyond the confines of the state, and are institutionally autonomous from the latter, other authors maintain that informal institutions also have an effect on the demise of authoritarian regimes. The informal sector, however, corresponds to survival strategies rather than to an overt demand for policy change (Bayat 1997; Colburn, 1989; Scott 1985; Starr, 1990).¹

The concept of civil society has also been used in research on the Middle East. While authoritarian states in the Middle East persist, there is evidence that the policies of states and their efforts to suppress civil society are increasingly challenged. Throughout the Middle East civil society groups and institutions, ranging from professional organizations, human rights and women's groups to environmental organizations, have become more assertive in challenging state policies and demanding greater participation in political life. The success of their challenges, however, varies considerably (Hudson, 1991; Ibrahim, 1993; Norton 1995; Norton, 1996).

¹ See Singerman, 1995 for the case of Egypt; and Chabal, 1992 for the case of Africa.

Evaluations of the causes leading to the increasing assertiveness of civil society institutions can be divided into two groups. The first position highlights the centrality of the state and its elites in this process. According to proponents of this view, the bankruptcy of state-led development and the attendant weakening of the state provides the opportunities for civil society institutions to become more assertive. The failure of state-led social and economic policies in turn has resulted in a shift of responsibilities from the state to previously excluded groups of civil society. These typically include civil society institutions that are viewed as supportive of this process. According to the literature it is the inclusion of new groups of civil society that provides the potential for democratization, as additional civil society groups may also demand their inclusion (Bahgat, 1994; Krämer, 1992; Leca, 1994; Perthes, 1994; Salame, 1994; Starr, 1990; Waterbury, 1994).

An important segment of this literature is that on rentier states. According to this literature, the availability of substantial external resources, in particular those resulting from oil, has enabled Middle Eastern states to sustain their authoritarian character. The decline of external revenue during the 1980s, however, forced these states to initiate economic restructuring programs and, as a result, to include new societal groups in power sharing-sharing and decision-making (Barkey, 1992; Beblawi, 1987; Glasser, 1995; Harik, 1992; Harik, 1994; Kazemi and Norton, 1996; Krämer, 1992; Perthes, 1994; Richards and Waterbury, 1990; Sivan, 1990).

While the above mentioned authors emphasize the failure of state-led development in accounting for an increased assertiveness of civil society, another group of scholars attribute a crucial role to elites in this process. According to them, a conflict within the elite provides the impetus for opening up the political system. Applying a game-theoretical approach, proponents of this explanation maintain that part of the elites

endorse liberalization of the political system as a second-best choice to the resolution of conflict. This development, in turn, can result in democratization (O'Donnell and Schmitter, 1986; Przeworski 1991; Rustow, 1970).

A second position in the debate on transition to democracy focuses on the structural changes civil society institutions have undergone. Representatives of this approach refute the central role of the state and state elites in this process. According to them, it is neither the state nor state elites that account for the increasing assertiveness of civil society institutions in challenging state policies. It is rather the qualitative changes civil society institutions have undergone during the last decade leading to an increase in their numbers, their members and their functional differentiation (Kazemi and Norton, 1996). As a consequence of this qualitative change civil society has become more assertive in challenging state policies by demanding increased political participation and government accountability thus providing the impetus for liberalization and democratization (Arato, 1981; Bratton, 1994; Carapico, 1993; Di Palma, 1990; Ghabra, 1991; Hardens, 1995; Hudson, 1996; Ibrahim, 1995; Kazemi and Norton, 1996; Norton, 1995; Norton, 1996). Proponents of this approach imply that civil society institutions have an agenda of their own, namely the demise of the authoritarian regime and the introduction of a democratic regime. The weakening of the state is treated here as only secondary in that it facilitates the actions of civil society institutions (Kazemi and Norton, 1996).²

According to this approach, civil society takes the form of an oppositional or a counter-hegemonic force to the state and its policies, which civil society perceives as failed. As an oppositional and counter-hegemonic force civil society demands increased

² See also Di Palma, 1990, p. 50 and 73.

participation and inclusiveness built on an image of societal, economic and political order that marks a departure from the one endorsed by the state.

Both explanations of the transition to democracy, i.e. those based on a state perspective as well as those focusing on civil society, imply a certain image of civil society, which is intimately linked to the concept of democracy. This concept can be traced to one of the following two traditions of democracy: namely liberal pluralism and Marxism (Hann and Dunn, 1996). Each of these traditions is rooted in the development of modern political organization and assigns particular characteristics to civil society and a particular relationship between civil society and the state (Cohen and Arato, 1992; Keane, 1988; Seligman, 1992). Both concepts attribute to civil society a crucial role in attaining and sustaining democracy. They differ, however, in their view of the nature of civil society and its relationship to the state.

While the following classification of civil society concepts employed in the various debates is arbitrary and the dividing line between the debates thin and not always as clear as depicted, it nevertheless reflects the emphasis and focus within each debate.

Representatives of liberal pluralism underline the existence of a multiplicity of civil society organizations as the principal characteristic of a democratic order. The chief role of civil society institutions is to socialize citizens into democratic norms and values, more specifically into the "norms of reciprocity" and "social trust", both of which are essential for the building of "social capital". The latter in turn is crucial for the existence of democracy (De Tocqueville, 1998).³

³ See in particular Putnam, 1993, p. 179-180 and Shils, 1991, p. 14.

The socialization into these norms produces a cohesive and harmonious civil society composed of equal civil society organizations with a “public spirit that is characterized by civility”.⁴

However, projecting an image of a harmonious civil society, representatives of liberal pluralism underestimate the conflictual nature of civil society (Foley and Edwards, 1996). This understanding of civil society suggests an apolitical civil society that is supportive of the existing political order. This is also true for the literature that views the transition to democracy as largely dictated by the state. According to this literature, the potential for civil society development is guided by the imperatives of the state, while civil society is apolitical and passive in that it only responds to actions taken by the state elite (Bahgat, 1994; Di Palma, 1990).⁵ Thus it focuses in its analysis on civil society institutions that remain supportive of the existing, though weakened, authoritarian state.

By failing to distinguish between different civil society institutions, scholars following such arguments neglect the diversity of interests followed by civil society institutions. While some civil society groups, such as human rights and women’s groups, may demand a more inclusive democratic order in that they challenge the very foundations of state legitimacy, others demand a more democratic order in pursuit of interests limited to their own goals (Heydeman, 1993). In this role they only act as strategic actors, rather than seeking a profound change of the existing political order. According to Sharabi, some Islamist groups can be regarded as such, since their ultimate goal is the establishment of an Islamic political order (Sharabi, 1988).

⁴ See Shils, 1991, p. 20.

⁵ See in particular Chapter 1 of Cohen and Arato, 1992, pp. 27-174.

Thus, basing its assumption on a harmonious civil society united in its antagonism towards the state, this literature neglects the struggle between civil society and the state in the process of transition to democratization.⁶

By projecting an outcome of democratization this literature does not shed light on how apolitical institutions are to bring about a transition to democracy. It is, however, the 'political variable', which, according to Foley and Edwards, is needed to highlight the "mechanisms by which micro-social effects are translated to macro-political outcomes".⁷ In brief this literature tends to describe successful outcomes of civil society demands rather than providing an analytical examination of the factors that account for these outcomes. The liberal concept of civil society therefore does not examine the conditions that enable civil society institutions to bring about democratic change. As a result it cannot explain the success or failure of civil society institutions in bringing about change.

In contrast to the liberal concept of civil society, Marxist approaches do not endorse the view of a harmonious civil society, but rather underline the conflictual nature of civil society. The conflictual nature of civil society arises from its domination by the ruling class, which renders civil society the sphere of both consent and dissent of the state, embodied in the ruling class (Carnoy, 1984). Gramsci is most explicit in this assessment. According to him, the ruling class not only sustains its domination over civil society through economic means, as Marx maintained, but also through ideological means. The ruling class, according to Gramsci, attempts to create support for the state and acceptance of its hegemonic dominance by creating a normative consensus in civil society.⁸ This is achieved through institutions of civil society and the state, specifically

⁶ See Hann and Dunn, 1996, for a discussion of this aspect.

⁷ Foley and Edwards, 1996, p. 47.

⁸ Gramsci, 1971, p. 12.

cultural and educational institutions.⁹ The domination of the ruling class, however, also creates the potential for conflict when the hegemony exercised by the ruling class is viewed by civil society institutions as illegitimate and is challenged as a result.¹⁰ These civil society institutions contest the legitimacy of state hegemony by creating a counter-hegemony and promoting a political order that differs from the existing. This challenge is mounted by politically mobilized groups that have emerged as a counter-force outside the traditional political establishment.

According to Gramsci, civil society is successful in creating a counter-hegemonic force when it establishes a coalition of like-minded institutions. This coalition constitutes an alternative political structure. In its role as a counter-hegemonic force, this coalition has the potential to effect a change in state policy or even lead to its demise. The challenges by these institutions in turn induces a response by the state (Arato, 1981). As the Gramscian concept focuses on civil society as the agent of change, it is particularly suited to examine the process of political transformation in an authoritarian setting. However, while the Gramscian concept underlines the crucial importance of coalitions among civil society institutions in forming a counter-hegemony, it neglects the actual mechanisms and means civil society institutions choose to induce change in state policy towards democracy. This deficiency can be overcome by applying insights from the literature on NGOs in the developing world.¹¹

⁹ Gramsci, 1971, p. 160; p. 235.

¹⁰ Gramsci, 1971, p. 210.

¹¹ In the literature there has been no consensus on the definition on NGOs. The definitions of NGOs range from classifications according to their geographic location (i.e. Northern-Southern NGOs), to their function, internal structure, or the nature of their membership. Categories have been also established to distinguish between the different approaches to development pursued by NGOs: namely between those providing relief services, those that focus on development projects confined to the local level, and finally those that as agents of development aim at introducing alternative approaches to development issues (Fisher, 1997).

A considerable share of the literature on NGOs deals with the conditions that enable them to increase their impact on development policy. As small actors with an influence that is limited to the local level, NGOs seek to overcome their limitations by influencing state policy in the sector which they serve (Bratton, 1989; Clark, 1995; Clark, 1996; Chambers, 1996; Fisher, 1997). In order for them to “achieve relevance and gain replicability for their initiatives on a large scale, NGOs must influence government bodies”.¹² To this end NGOs adopt a two-step strategy. As a first step like-minded NGOs create horizontal linkages among themselves. A network not only provides NGOs with a forum to aggregate interests and forge a unified vision, but also increases their bargaining position and leverage towards the state as they cease to act alone (Edward and Hulme, 1996; Fox, 1996; Frantz, 1987; Garilao, 1987; Ndegwa, 1994).

While linkages can range from loose, ad-hoc forms of cooperation to institutionalized networks, it is the latter that are most effective in inducing policy change at the national level (Bratton, 1989).

The second step NGOs pursue involves the creation of vertical linkages with state agencies through which NGOs attempt to lobby for change of state policy in development sectors of their concern (Chambers, 1996; Clark, 1996; Fox, 1996). The NGO literature thus focuses on the conditions that enable NGOs to increase their impact on development policy by incorporating successful small-scale development strategies into national policy.

With the exception of Ndegwa, who explores the contributions of NGOs to democratization in a systematic way, the NGO literature largely neglects the issue of democratization, as it focuses on a limited NGO agenda (Ndegwa, 1994).¹³ Combining

¹² Cernea, 1988, p. 50.

¹³ See Bratton, 1989, p. 572 for a discussion of this aspect.

the insights developed in this literature with Gramsci's concept of civil society allows us to examine the mechanisms civil society institutions choose to create a counter-hegemony to the state. In contrast to the NGO literature, this examination focuses on NGOs with an agenda that is not confined to the NGOs' narrow sectoral interests, but that involves a more comprehensive agenda with implications for the process of democratization. These typically include those NGOs that focus on marginalized social groups, which are often neglected in the development policy of the state. By addressing the needs of these groups they generally follow alternative notions and practices of development that differ from those of the state. As these notions of development are based on the empowerment of marginalized sectors of society, their implementation also requires the transformation of the prevailing political and societal order (Robinson, 1996).

These characteristics of NGOs are true for both women's and health organizations. While both have pursued an alternative vision of policy on women or health issues, they have also promoted a more comprehensive agenda involving the democratization of the existing political order under the authoritarian Palestinian Authority. In order to promote their agendas, women's and health organizations created horizontal linkages among themselves. As horizontal linkages constitute the institutional embodiment of an alternative vision of a political order, they constitute structures of a counter-hegemonic force.

D. The State

The creation of the Palestinian Authority (PA) in 1994 is based on the Declaration of Principles (DOP) signed by the Palestine Liberation Organization (PLO) and the

Israeli government in September 1993 to settle the Israeli-Palestinian conflict. Until a final settlement of all issues of the conflict, the PA constitutes an interim governing body with sovereignty confined to five administrative fields of health, education and culture, social welfare, direct taxation, and tourism. The extent of its territorial rule has been expanded gradually in line with a series of agreements concluded after the signing of the DOP.¹⁴

Although the PA does not constitute a state with full sovereignty, as the extent of its rule has yet to be determined in a final settlement, its establishment has created a new political situation in the West Bank and the Gaza Strip that provided the new context, in which civil society institutions have operated since then. The authoritarian nature the PA has developed since its formation has characterized this context. The examination of the PA's authoritarian nature is therefore critical to understanding its evolving relation with civil society.

Among Middle Eastern states, the PA constitutes the most recent example of an authoritarian political entity. Compared to other Middle Eastern states, however, the PA constitutes an exception as the extent of its sovereignty had remained undefined at the time of its creation and is subject to the results of negotiations between Israelis and Palestinians. Yet the context of its creation and the mode of its consolidation have created the trajectory for its future development. In this respect its development resembles that of other Middle Eastern states.

The analysis the authoritarian nature of the PA borrows from insights of the literature on Middle Eastern states. The arguments of this literature can be divided along two lines. While the first relates the nature of the state to its formative phase, a second set

¹⁴ Detailed arrangements for the implementation of the provision of the DOP were outlined in several consecutive agreements, the Agreements of Cairo, Taba, Hebron, Paris, Wye and Sharm el-Sheikh.

of arguments focuses on the mechanisms that sustain its authoritarian nature. Within the first set of arguments three positions can be discerned: One group of scholars views the characteristics of the Middle Eastern state as the result of external intervention, in particular the creation of states by colonial powers and their integration into the world economic system. External intervention has left its imprint on Middle Eastern states and has determined their subsequent development (Kelidar, 1993; Korany, 1987).¹⁵ The second group emphasizes the indigenous character of states in the region (Davis, 1991; Harik, 1987). Here, it is argued, a "core state" had existed before external intervention. The integration into the world economy and colonial influence have only transformed the then-existing political, social and economic order. A third group of scholars maintains that it is the interplay between internal and external factors that gave the state its current form. According to this argument the particular shape of states was determined by domestic factors as well as by the imprint left by colonialism, foreign intervention and the integration into the world economy (Brynen 1991; Richards and Waterbury 1990).

A second set of arguments seeks to explain the nature of the Middle Eastern state by highlighting the mechanisms employed to sustain its authoritarian character. According to these arguments, cultural, economic, ideological and social factors account for the authoritarian nature of the Arab state (Anderson, 1987; Crystal, 1994; Dawisha and Zartman, 1988; Farsoun, 1988; Gellner, 1977; al-Naqeeb, 1990; Sharabi, 1988; Zubaida, 1989). Among those explanations that highlight the mechanisms that sustain authoritarian regimes, a major contribution stems from the literature on rentier and semi-rentier states. Advocates of this approach argue that the reliance of authoritarian states on substantial external resources resulted in a high degree of state autonomy from civil society pressures. They argue that the direct access of states to external revenue has

¹⁵ See also Alawi quoted in Ayubi, 1995, p. 12.

released states from accountability towards civil society. Thus advocates of this approach postulate a positive correlation between the availability of external revenue and the level of state autonomy from societal pressure and thus the authoritarian character of states (Luciani, 1995).

In order to examine the nature of the PA, both external determinants, i.e. the agreements between Israelis and Palestinians, as well as the internal dynamics of its consolidation of power, are taken into account. The intertwined nature of external and internal factors has accounted for the nature of the PA. More specifically, while the peace agreements provided the context for PA development, the means the PA chose to consolidate its power have enforced the effect of external factors on its authoritarian nature. However, the PA has revealed varying degrees of authoritarianism in its dealing with different components of civil society. In contrast to the literature on state formation, which fails to indicate the varying levels of authoritarianism towards civil society, this study seeks to determine the causes for this variation. To this end it takes into account the capacity of the PA to pursue its policy towards civil society as well as the content of civil society demands for policy change.

Capacity refers to the capability of states to carry out policies regardless of civil society demands (Evans, Rueschemeyer, and Skocpol, 1985). This research is based on Crystal's examination of the capacity of Middle Eastern authoritarian states (Crystal, 1994). While Crystal endorses, in line with the arguments of the rentier literature, the positive correlation between high levels of external revenue and the authoritarian nature of states, she maintains that this correlation is insufficient for states to sustain their authoritarian nature. According to her, the authoritarian nature is also determined by the institutions and mechanisms states create. Her conclusion implies that the reliance on external revenue does not necessarily lead to authoritarian states. Her arguments suggest

that it is rather the institutions and mechanisms, which are created with the external revenue that determine the capacity of states to sustain their authoritarian nature.

While Crystal's insights are valuable, they cannot explain the incentives for states to use repressive means towards civil society. More specifically, they cannot answer the questions: Why do states choose to refrain from employing repressive means towards civil society institutions although they possess the capacity to do so by for example using their security apparatus? In more general terms, which factors are conducive for repressive state responses?

These questions can be answered by including the content of civil society demands in the explanation of state behavior. The demands of civil society for policy change do not constitute similar challenges to the state. For instance in cases where it would increase its legitimacy, the state is likely to give in to civil society demands. In other cases where civil society demands pose a challenge to its legitimacy the state is likely to react with repressive means. This is especially true for human rights and women's organizations, which criticize the foundations of state legitimacy. Therefore the analysis of state behavior involves, in addition to the state's fiscal and institutional capacity, the content of civil society demands and the extent to which they constitute a challenge to state legitimacy.

E. Methodology

The objective of the dissertation is to determine the strategies the two selected cases of civil society institutions have chosen to affect PA policy and to assess their effectiveness. Based on a Gramscian approach to civil society it seeks to analyze the

factors determining the success of current women's and health organizations to build a counter-hegemonic force to the Palestinian Authority.

This study combines secondary sources with empirical data. While secondary sources were instrumental for situating current women's and health organizations in the historical context from which they emerged, empirical data was used to identify the nature of linkages established by women's and health organizations.

The underlying assumption is that through institutional linkages civil society institutions enhance their effectiveness in promoting their agenda. This assumption is based on insights from the literature on institutions, which maintains that the latter shape and determine the goals of societal actors (March, 1989; Pérez-Díaz, 1990; Putnam, 1993; Steinmo, 1992).

Empirical data was collected during field research in the West Bank.¹⁶ The focus of the field research was to examine the nature of cooperation among women's and among health organizations, giving particular attention to institutionalized horizontal networks. In addition, the field research involved the examination of vertical linkages with the PA.

Preliminary research involved collecting background information on the development of both women's and health organizations. To this end, I made extensive use of the libraries of the Women's Studies Center, that of the Health, Development, and Information and Policy Institute (HDIP) as well as the library of the Palestinian Economic Policy Research Institute (MAS). Based on the preliminary research, I selected a sample of women's and health organizations. The sample covered the institutions that were the most active in attempting to influence PA policy. In addition to the information

¹⁶ The field research consisted of two trips to the West Bank. The first one covered a period of three months in fall 1997. The second trip of approximately two months took place in the fall of 1998.

compiled during the preliminary research I made extensive interviews with representatives from women's and health organizations as well as other civil society institutions. The most important representatives of women's organizations I interviewed were Suheir Azzouni Mahshi (Women's Affairs Technical Committee), Suha Hindiyyeh (Women's Studies Center), Inas al-Masri (Palestinian Working Women Society), Fatin Farhat (Jerusalem Center for Women), and Penny Johnson (Birzeit University, Women's Study Center).

Interviews with representatives from health organizations were conducted with Mustafa Barghouthi (Union of Palestinian Medical Relief Committees), Muhammad Jadallah (Union of Health Care Committees), and Umayyah Khammash (UNRWA),

Furthermore, I interviewed Rana Bishara from the Palestinian NGO Network (PNGO) and officials from the Union of West Bank Charitable Societies.

In order to situate the two selected cases in the broader context of Palestinian civil society development additional information and data was collected from representatives of other civil society institutions, such as George Giacaman (al-Muwatin) and Izzat Abdel Hadi (Bisan - Center for Research and Development). In addition, interviews with political activists proved a valuable source of information as they shed light on the development of Palestinian civil society in general.

Furthermore, interviews with officials from international development agencies provided me with information on the sources of funding for civil society institutions. These included the institutions Diakonia, Catholic Relief Services, and Care, as well as European Union.

The examination of vertical linkages between the PA and women's organizations as well as between the PA and health organizations involved interviews with PA officials,

in particular from the Ministry of Planning and International Cooperation (Zahira Kamal, and Khalil Nijm) and with officials from the Ministry of Health (MOH).

While the first few interviews conducted were based on a questionnaire, an open-ended interview proved more fruitful in that it provided more room for focusing on questions that relate to the specific nature of the institution. The questions around which the interview centered, however, remained unchanged. They related to the institutions' programs, their sources of funding, as well as the nature of their cooperation with other civil society organizations and the PA. Interviews with PA officials involved questions about the nature of cooperation with civil society institutions.

F. Outline of the Dissertation

Following the creation of the Palestinian Authority (PA), civil society institutions shifted the emphasis of their activities from countering the Israeli occupation to lobbying for change of PA policy. The chapter that follows introduces the new context in which current women's and health organizations have been operating since the creation of the PA. While the PA has not assumed all the attributes of a state, its creation has entailed a definition of its relation with civil society. The underlying argument of chapter II is that the evolving authoritarian nature of the PA is the result of both its mode of formation as well as the means it chose to consolidate its power. This chapter also discusses the means the PA has chosen to regulate its relation with civil society and in particular with women's and health organizations. It concludes by identifying the factors that account for the variation in the relation between the PA and women's organizations on the one hand, and the health organizations and the PA on the other hand.

Chapter III provides an outline of the development of Palestinian civil society and highlights the factors that have determined its development. In addition to outlining the strategies of political factions in using civil society institutions as a means to mobilize the Palestinian community against the Israeli occupation, this chapter gives special attention to the social movement that emerged in the late 1970s and 1980s.

Chapter IV traces the development of women's organizations and similarly focuses on the factors that shaped their development. While the discussion covers the period starting from the early 20th century, special attention is given to the intifada, the Palestinian uprising against the Israeli occupation of 1987. It was during this period that women's organizations assumed a prominent role in Palestinian civil society. This chapter further highlights the development of women's organizations in the 1990s and, more specifically, after the establishment of the PA. It analyzes the strategies and mechanisms that women's organizations have adopted to promote their agenda and concludes with an assessment of weaknesses and strength of these strategies.

Chapter V focuses on the health sector and in particular on the Union of Palestinian Medical Relief Committees (UPMRC), which has assumed a leading role in this sector. Although the UPMRC, has employed mechanisms and strategies similar to those of women's organizations it has been more successful in furthering its agenda. Chapter V concludes by highlighting the factors that have accounted for the UPMRC's success.

The final chapter highlights the major findings and provides suggestions for further research.

CHAPTER II: THE PALESTINIAN AUTHORITY

A. Formation of the PA

1. The Peace Agreements

Since its creation in 1994, the Palestinian Authority (PA) has developed authoritarian traits. These are reflected in its centralized mode of decision-making, the absence of the rule of law, its violations of human rights and in its dealings with civil society. While mainstream literature largely neglects the nature of the state in its assessment of civil society, its examination is critical to the understanding of civil society development as it forms the context in which the latter operates. The authoritarian nature of the PA has thus direct implications for civil society as it defines the relation between the two.

In the process of its consolidation, the PA has attempted to marginalize and repress civil society institutions it perceived as a threat to its rule. These include in particular those institutions affiliated with Islamist parties, such as the Islamic Jihad and Hamas, and those that emerged from the social movement of the 1970s and 1980s as well as other civil society institutions that have been critical of the PA's rule and/or have opposed the peace negotiations.

The evolving nature of the PA is the result of the modes of its formation as well as consolidation. Both modes have contributed to the authoritarian nature of the PA and furnished it with the means to marginalize and repress civil society institutions it perceives as a threat. As the modes of the PA's formation and consolidation have produced the authoritarian context in which civil society has operated their investigation is critical to the understanding of the evolving relation between civil society and the PA.

The formation of the Palestinian Authority (PA) in 1994 was based on the Declaration of Principles (DOP) signed on 13 September 1993 between the PLO and representatives of the Israeli government. While the DOP as well as the series of agreements that followed provided the context of its formation they also defined the parameters of the PA's consolidation of power. More specifically the gradual shift of the agreements towards issues relating to Israeli security concerns had direct implication on the mode of its consolidation.

The negotiations that preceded the signing of the DOP were initiated in October 1991 in Madrid between representatives of the Israeli government and a delegation of Palestinians from the Occupied Territories, while the PLO was excluded from this process. The Palestinian delegation consisted of personalities, who gained prominence through their political activism, as well as academics and independent personalities all of whom have enjoyed a broad community support.

When after ten rounds, due to disagreements on several issues,¹⁷ the negotiations reached an impasse, secret negotiations were initiated in summer 1993 between Arafat and PLO representatives close to him, on the one hand, and representatives from Israel, on the other hand. This 'secret channel' culminated in the signing of the Declaration of Principles (DOP) on 13 September 1993.¹⁸

¹⁷ The most important issues of contention were: first, the arrangements that would govern the interim period of five years, in particular whether UN Security Council Resolution 242 constitutes the basis for both the interim period as well as the final settlement to the Israeli-Palestinian conflict. According to UN Security Council Resolution 242, which was passed in 1967, a resolution to the conflict between Israel and Palestine is based on the withdrawal of Israeli forces from the territories occupied in 1967 war (Quigley, 1989). A second issue centered around the territorial jurisdiction of the Palestinian interim government and its legislative, executive, and judicial powers. Finally the question of Jerusalem as well as the issues of return of Palestinian refugees and Jewish settlements in the Occupied Territories constituted a major source of disagreement between the two parties (Mansour, 1993).

¹⁸ The DOP is also called Oslo I Agreement.

The conclusion of the DOP was reached without the consultation and the consent of the original negotiating team. The non-inclusive nature of the DOP led to the resignation of a number of its members in protest (Anderson, 1995; Giacaman, 1998; Hilal 1995).¹⁹ According to Sarraj, the peace accord was a “last resort for the PLO” and offered the PLO the opportunity to sustain its claim of leadership over the Palestinians in the Occupied Territories”.²⁰

Although the negotiations with Israel and the creation of the Palestinian Authority, the first-ever Palestinian self-governing body on Palestinian soil, received large support, the non-inclusive nature that characterized the formation of the PA faced opposition especially from left-leaning factions and Islamic organizations as well as from independent Palestinian figures. In their eyes the signing of the DOP constitutes a set back. The issues that had been subject to disagreement in the Madrid negotiations were postponed to negotiations on the final status. Furthermore, while the Madrid negotiations were based on the UN Security Council Resolutions 242 and 338, i.e. on the principle of ‘land for peace’, the DOP refers to the West Bank and the Gaza Strip as only disputed land.²¹ Furthermore, the DOP and consecutive agreements are limited to the arrangements that would govern the relation between the two parties for a period of five years (Mansour, 1993).

The major weakness of the DOP as well as consecutive agreements has been their failure to formulate a clearly defined political goal to be achieved after the interim period.

¹⁹ The conclusion of the DOP was achieved without the consultation of the PLO in general and the members of the negotiating team in Madrid. As a result several representatives of the negotiation team resigned in protest. Furthermore, Arafat faced opposition in the PLO’s Executive Council, which is reflected in the resignation of the following members: Mahmoud Darwish, Shafiq al-Hout, Khalid al-Hassan, Abdul Rahim Maluh and Abdullah Hourani (Mansour, 1993).

²⁰ Sarraj, 1995, p. 22; see also Jarbawi, 1995; Klein, 1997.

²¹ The UN Resolutions as foundation for the Madrid negotiations was expressed in a ‘letter of assurance’ prior to the negotiations (Mansour, 1993).

The postponing of issues vital to Palestinian sovereignty, such as the question of sovereignty over Jerusalem, the issue of Jewish settlements, and the right of return for Palestinian refugees represented a set back for the Palestinians. This was exacerbated by the PLO's failure to obtain a commitment from the Israeli side to a withdrawal from the Occupied Territories. The expansion of territorial rule for Palestinians was negotiated in separate agreements, as is discussed below.²²

The catalysts that led the PLO to agree to the disadvantageous provisions of the DOP are intimately linked to its weakening at both the international and the Palestinian levels. In order to rescue the PLO from marginalization, a small group of the PLO leadership seized the opportunity of signing the Declaration of Principles. The signing of the agreement entailed gains, in particular economic ones, for the elements of the PLO leadership involved in the signing of the DOP. Only two weeks following the signing of the DOP, on 1 October 1993, 43 countries pledged 2 billion US\$ to the Palestinians (Andoni, 1993; Anderson, 1995). This was accompanied by the consolidation of the 'external' PLO leadership with segments of the Palestinian leadership from the Occupied Territories on which the PLO had relied in the past. While the latter had been marginalized during the intifada, it now formed together with the parts of the 'external' leadership the pillar on which the PA has based its rule (Robinson, 1997a).

The Declaration of Principles of 13 September 1993, provided the framework for the interim period of five years. It was followed by the Cairo Agreement of 4 May 1994, according to which the Jericho area and parts of the Gaza Strip were transferred from Israeli control to Palestinian rule.²³ The agreement also outlined the legislative and executive powers of the PA in the five spheres defined in the DOP: education and culture,

²² Butenschön, 1998, p.31.

²³ Also Gaza-Jericho Agreement. Military installations and Jewish settlements were excluded from this transfer (Butenschön, 1998).

health, social welfare, direct taxation, and tourism (DOP, Article IV, 2). The agreement limits Palestinian jurisdiction to civil affairs, while at the same time subjecting Palestinian legislation to the review of a joint Palestinian-Israeli legislation sub-committee in which Israel has the right of veto. Thus, in cases, where Israel perceives Palestinian legislation as a threat to its interests, it can block the ratification of the proposed Palestinian legislation (Bindman and Bowring, 1994). This high leverage that Israel has retained over Palestinian legislation is exacerbated by the stipulation that laws and Israeli military orders that had been in effect prior to the conclusion of the Cairo agreement, are “to remain in force, unless amended or abrogated” (DOP, Article VII, 9). Moreover, Israel retained its perceived right to control external security and responsibility for the “overall security of Israelis for the purpose of safeguarding their internal security and public order” (DOP, Article VIII). This regulation has granted Israeli forces the right to enter the Palestinian areas if they regard their security as threatened.²⁴

Furthermore, the agreement excludes Israelis from the jurisdiction of the PA thus confining PA jurisdiction to Palestinians rather than tying it to a people of a defined territory (Rishmawi, 1995; Shehadeh, 1994). Thus in cases of an Israeli citizen committing a crime in a Palestinian controlled area, he or she is not subject to Palestinian law, but to the Israeli one.

While neither the DOP nor the successive agreements explicitly mention the goal to be reached at the end of the five-year-interim period, the Oslo II Agreement gives an indication of Israel’s projection for Palestinian rule.²⁵ The Oslo II Agreement, which was concluded on 28 September 1998, divided the West Bank into three separate zones, A, B, and, C, which are controlled to a varying degree by Israel and the PA. In addition to the

²⁴ Hagopian, 1997, p. 12.

²⁵ Also called Taba or Interim Agreement.

Jericho area and parts of the Gaza Strip, the towns of Jenin, Nablus, Tulqarm, Qalqilya, Ramallah, and Bethlehem were transferred to the PA. These towns constitute area A. There the PA has full responsibility for Palestinian civil affairs, internal security, and public order. This area comprises approximately three percent of the West Bank and twenty percent of the Palestinian population of the West Bank. Area B includes 450 villages (70 percent of the population) or approximately 24 percent of the West Bank territory. In this area Palestinian responsibilities include public order, while Israel is responsible for the overall security. In Area C, which constitutes more than seventy percent of the West Bank and where 150,000 Jewish settlers live in 144 Jewish settlements, Israel retains full control.²⁶ In the Gaza Strip, sixty percent of the territory is under Palestinian rule. Ten percent is under joint Israeli-Palestinian control while the remaining thirty percent is occupied by Israeli settlement or declared as military zones under Israeli control.

Thus, the largest part of the West Bank, Area C, has remained under Israeli control.²⁷ Furthermore, Israel consolidated its authority there by creating a network of by-pass roads that link the settlements of Area C with Israel, leaving the Palestinian areas fragmented and dispersed.²⁸ While Oslo II contained provisions for Israeli redeployment

²⁶ According to the Statistical Yearbook, Jerusalem, 1996, there were 250 settlements beyond the Green Line, i.e. in the West Bank (including East Jerusalem), and the Gaza Strip, in 1995, and 300 in 1996 with a population of 301,000 and 313,000 respectively (reprinted in *Journal of Palestine Studies* 27, no. 1 (Fall 1997): 126-135).

²⁷ Through consecutive agreements the PA expanded its control over approximately four percent of the West Bank. After full implementation of the Sharm el-Sheikh Agreement Area A would constitute 18.2 percent of the West Bank and Area B and C, 21.8 and 60 percent, respectively (*The Economist*, 17 October, 1998).

²⁸ That is roads that by-pass Palestinian towns and villages and that are designated for the use of Israelis only (Hagopian, 1997). According to Usher, Israeli authorities have constructed 62 new military bases in the West Bank in order to carry out the redeployment of their troops. In addition they built 30 by-pass roads for the exclusive use of Israeli settlers and military (Usher, 1998).

from Areas A, B, and C of the West Bank, it excluded settlements as those relate, according to the agreement, to the final negotiations on “permanent status issues”.

The absence of a regulation on the issues of Jewish settlements contributed to the unhindered construction of new settlements as well as the expansion of existing ones. Moreover, throughout the Oslo negotiations, the number of settlements has been increasing. Their construction and the building of by-pass roads not only violates the Geneva Convention, but has also resulted in the demolition of Palestinian houses and the confiscation of Palestinian land.²⁹

In addition to the fragmentation of territory under Palestinian control the Agreement introduced major modifications to the DOP. While initial rule in the Jericho Area and parts of the Gaza Strip followed the withdrawal of Israeli forces from these areas, according to the Oslo II Agreement, Israeli forces were only redeployed from areas to be transferred to the PA to other parts of the West Bank.³⁰ This reflected Israel’s intention to retain its authority over the West Bank and contributed to its consolidation of authority there.

Israel’s intention to maintain control over the West Bank is further reflected in the Hebron Agreement of 15 January 1997. Due to the unresolved issue of a minority of 400 settlers living among 120,000 Palestinians in the West Bank town of Hebron, redeployment of Israeli troops from there was not included in the Oslo II Agreement but negotiated in a separate agreement, the Hebron Accord. Based on this agreement, Hebron was divided into an Israeli controlled area (Area H 2), where 400 settlers and 15,000 Palestinians live, and a Palestinian controlled area (Area H 1). By establishing its de-

²⁹ Between January and June 1999 alone, 10,024 dunum of Palestinian-owned land were confiscated (LAW, Press Release, 26 July 1999).

³⁰ According to the Oslo II Agreement redeployment is planned in three phases over a period of one year (from October 1996 to October 1997). However, only the first redeployment was implemented (Aruri, 1999).

facto rule over Palestinians in a neighborhood in Hebron, Israel has continued its status as an occupying force in the middle of a Palestinian town.

The Hebron Accord also included provisions for Israeli redeployment that were previously agreed upon in the Oslo II Agreement, but not implemented. The most significant feature of the Hebron Accord is its explicit link between further redeployments with the PA's fulfillment of Israeli security requirements. Moreover, while in previous agreements the territorial extent of redeployments was not specified, the Hebron Accord stipulated in a separate document, the US Secretary of State Warren Christopher's "letter of Assurance to Israel", that the territorial extent of redeployment be defined by Israel only (Hagopian, 1997; Usher, 1998).

Linking further Israeli redeployments to the compliance of the PA with Israel's security demands is based on Netanyahu's notion of 'reciprocity'. 'Reciprocity' compelled the PA to fulfill the 'Palestinian responsibilities' as listed in the Hebron Accord, but did not include any provisions impeding the actions of the Netanyahu government. This became evidenced in Netanyahu's decision to open the Hasmonean Tunnel, which led to clashes between Palestinians and Israeli soldiers, leading to 63 casualties and 1400 injured Palestinians as well as 12 Israeli soldiers.³¹ Unrest further erupted when in March 1997 the Netanyahu government began to build the settlement of Jabal Abu Ghneim (Har Homa). This settlement would complete the circle of Israeli settlements around Arab East Jerusalem and separate it from the West Bank. As in previous cases Israel's policy of settlement led to an increased spiral of violence. Palestinian protests were countered by an armed Israeli response. After a bomb explosion in a café in 1997 in Tel Aviv the negotiations reached a complete standstill. However, as

³¹ Guyatt, 1998, p.40. The tunnel, which was excavated by Israel, is located below the Muslim holy site of the Dome of the Rock and runs along the Western wall of the Dome to a cistern beneath Islamic Waqf property.

the negotiations were halted, the Netanyahu government proceeded with the building of another settlement in East Jerusalem, Ras al-Amud, further confiscating Palestinian land while denying Palestinians the right to resist.

Against the background of unabated settlement expansion and the confiscation of land, then Prime Minister Netanyahu's 'reciprocity' proved to be a mechanism to delay further redeployments while at the same time expanding Israeli authority over Jerusalem and the West Bank.³² The link between further redeployment and the PA's compliance with Israeli security concerns is even more explicitly expressed in the Wye River Memorandum of 23 October, 1998. This memorandum was concluded following a complete standstill of redeployments agreed upon in the Hebron Accord. Israel had delayed or halted redeployment following the eruption of violence and dispute over the issue of settlements of Jabal Abu Ghneim (Har Homa) and Ras al-Amud.

By including the above mentioned letter of US Secretary of State, Warren Christopher, into the text of the Wye Memorandum, the latter has made Israeli security issues the overriding principle of further redeployments and the negotiations in general.³³

The Wye Memorandum divided Oslo II's second redeployment into three phases that are to be implemented over twelve weeks, linking each phase to the fulfillment of Israeli security requirements by the PA. According to the Memorandum, Israel was to redeploy from 13 percent of the West Bank.³⁴ It did not, however, mention a date for the third redeployment, which, according to Oslo II, was to be completed by October 1997.

Based on security requirements expressed in the Wye Memorandum, the PA was compelled to combat "terrorist cells and the support structures that plans, finances,

³² Kelman, 1998, p. 42.

³³ This contradicts Article XI,2f of Oslo II, which states that the extent of redeployment is subject to negotiations on the final status.

³⁴ Israel suspended the implementation after withdrawing from only 2 percent.

supplies and abets terror". Palestinian compliance with this task was subjected to US monitoring, more specifically CIA monitoring.³⁵ In addition to its involvement in a Palestinian-Israeli committee, the Palestinian side committed itself to inform the US in a bi-weekly US-Palestinian committee over its 'progress' in eliminating terrorism. While the Palestinian side faced an extensive list of obligations to fulfill, there was no comparable mechanism to ensure that Israel fulfills the agreement.

The explicit link between the PA's obligations and Israeli security demands reflects the structures that the 'peace agreements' have produced. These are characterized by the domination of Israel over the PA (Aruri, 1999; Bishara, 1999). The overriding issue of security furnished the Israeli authorities with a high leverage over the course of the redeployments, whereby the latter are based solely on Israel's evaluation of PA performance without granting the PA a similar mechanism to evaluate Israeli performance. Furthermore, the agreements have allowed Israel to revoke its commitments under the pretext of security concerns. Israel has repeatedly postponed the redeployment of its troops from areas to be handed over to the PA due to the latter's alleged failure to meet Israeli security demands.³⁶

The most explicit vision of Israel's projection for Palestinian rule was formulated in the Allon-Plus-Plan of January 1997 under the government of Prime Minister Netanyahu.³⁷ According to this plan approximately fifty percent of the Gaza Strip and forty percent of the West Bank would be transferred to Palestinians while the remaining

³⁵ See *Journal of Palestine Studies* 29, no.1 (Fall 1999), *Peace Monitor*.

³⁶ *Journal of Palestine Studies* 27, no. 2 (Winter 1998), *Peace Monitor*.

³⁷ This plan builds on the Beilin-Eitan Agreement of January 1997. The Beilin-Eitan Agreement, or "National Agreement Regarding the Negotiations on Permanent Settlement with the Palestinians", was concluded on 22 January 1997 between Yossi Beilin, a former minister of the Labor Party and Michael Eitan, the head of the Likud's Parliamentary faction. It is based on the Allon Plan of 1977 and represents an Israeli national consensus on the shape of a future Palestinian political entity (de Jong, 1998).

territory would stay under Israeli control. The plan envisages Palestinian rule over a territory that is fragmented by vertical and horizontal by-pass roads that link the settlements in areas under Israeli control to Israel. Israel would retain its control over Jerusalem within the borders that have been successively expanded since 1967. The Allon-Plus-Plan also foresees Israeli control over water resources, borders as well as external and internal security (de Jong, 1998; Hagopian, 1997).

In addition to the above mentioned security demands Israel has used the delay in implementing its economic obligations vis-à-vis the PA in order to pressure the latter to comply with its demands and to gain leverage over the pace of the negotiations. Economic relations between Israel and the PA were negotiated in the 'Protocol on Economic Relations', which forms part of the Oslo II Agreement. According to this protocol Israel is obliged to transfer income taxes collected from Palestinians employed in Israel as well as VAT and revenues from import taxes collected on behalf of the PA. Following bomb attacks in Israel, the Israeli authorities frequently delayed tax reimbursement.³⁸ The withholding of taxes not only constitutes part of Israel's strategy of collective punishment but has also had detrimental effects on the PA, as tax reimbursements constitute a high percentage of the PA budget.³⁹ Israel has used both security demands and economic arrangements as means of pressure to weaken the PA and to contain Palestinian expectations for further territorial expansion. An additional strategy that had political and economic repercussions has been Israel's policy of closure.

³⁸ Delay of reimbursements on 3 June 1999 is an example (Journal of Palestine Studies 29, no.1 Fall 1999, Peace Monitor).

³⁹ For instance, Israel held back tax revenues for PA after the Mahane Yehuda bombing in Jerusalem on 30 July, 1997 (Guyatt, 1998, p. 41). According to Frisch and Hofnung, approximately 80 percent of the imports of the West Bank and Gaza Strip originate in Israel. As of mid July 1995 Israel has transferred US \$ 126 million to the Palestinian Authority, which accounts for more than one fifth of the total external revenue the PA had received since 1994 (Frisch and Hofnung, 1997, p. 1251).

2. The Israeli policy of closure

The fragmentation of the West Bank and its isolation from the Gaza Strip that has been brought about by the agreements has been exacerbated by Israel's policy of closure. This policy refers to the partial or complete sealing off of the West Bank and the Gaza Strip from Israel (including Jerusalem) as well as from Jordan and Egypt.⁴⁰ In addition to sealing off the West Bank and the Gaza Strip from the neighboring countries, the Israeli authorities have also frequently imposed a "comprehensive closure" in the Occupied Territories. In these cases, areas under Palestinian rule are isolated from the remainder of the Occupied Territories, their residents prevented from leaving or entering.

During closure the movement of people and goods is either restricted or prohibited. Closure typically follows bomb attacks in Israel, or is based on considerations of what Israel perceives as a threat to its security. While prior to the 1990s the policy of closure was implemented only irregularly, it has been used increasingly since then. Moreover, since the bomb explosions in Jerusalem and Asqelon of 25 February 1996,⁴¹ it has led to a de-facto separation of the West Bank and the Gaza Strip and has limited Palestinian access to Jerusalem considerably.⁴² Access to Jerusalem has been regulated through a system of permits that are issued by the Israeli authorities to a limited number of Palestinians.⁴³

Israel's policy of closure not only constitutes a violation of Article 33 of the 4th Geneva Convention on the Protection of Civilian Persons in Times of War, but has also been detrimental for the economic and social situation in the Occupied Territories.

⁴⁰ Israel annexed Jerusalem unilaterally in 1970.

⁴¹ In addition to closure, the Israeli government reacted with mass arrests of Palestinians and the demolition of Palestinian homes.

⁴² The peace agreements stipulate the creation of a 'safe passage' between the West Bank and the Gaza Strip. This would allow Palestinians to move between the two entities without passing Israeli checkpoints.

⁴³ According to Roy, by early 1998 less than four percent of Palestinians from the West Bank and the Gaza Strip possessed a permit (Roy, 1999, p. 69).

According to World Bank estimates, the total loss resulting from closures between 1993 and 1996 amounted to US \$2.8 billion, which corresponds to 70 percent of the annual Palestinian GNP. Furthermore, frequent closures have contributed to the development of poverty in the Occupied Territories, reaching 40 percent of the population in the Gaza Strip and 10 percent of the West Bank population (Usher, 1997; World Bank, 1997).

Closure thus constitutes part of the structure that emerged during the Oslo process. Embedded in these structures the PA's survival became increasingly dependent on Israel. More specifically it had to comply with Israel's demands in order to ensure a continuation of the negotiations and further, though limited, redeployments.

3. The dual role of the PA

The evolution of the PA is embedded in the structure the negotiations have brought about. On the one hand, its survival is based on its ability to fulfill Israel's demands to guarantee its security. Only then would it be rewarded with further Israeli redeployments. This mechanism has also been reinforced by international donors who linked the disbursements of funds to 'progress' in the negotiations. Its extensive reliance on international funding, which supplements its limited tax base, has thus indirectly compelled the PA to comply with Israel's requirements, of which the most important item has been security concerns.⁴⁴ A major component of the security requirements constituted the fighting of the 'enemies of peace'. Equating any Palestinian opposition to the policy of Israel and that of the PA with 'enemies of peace', deprived Palestinians of means to oppose and resist the continuing consolidation of Israeli control over the West Bank and

⁴⁴ Pappé, 1995, p. 21. The share of tax revenue of the PA accounted for 17% of its GDP in 1997. Taxes include income taxes on individuals and corporations, property taxes, municipal taxes and fees (Alawneh and Jebri, 1997).

the Gaza Strip.⁴⁵ Thus in order to fulfill its obligation towards Israel and with the aid of international funds, a major component of the PA's budget was spent on the expansion of its own Security Apparatus, of which the PA has made extensive use to combat opposition towards its rule and the negotiations with Israel.⁴⁶

On the other hand, the legitimacy of the PA, as viewed by the Palestinians, hinges to a great extent on its ability to increase its territorial rule, end the Israeli occupation and most importantly improve the economic, social and political situation in the West Bank and the Gaza Strip. While the PA succeeded in expanding its territorial rule, though to a limited extent, it largely failed to improve the living conditions of Palestinians.⁴⁷

Caught between fulfilling Israel's security requirements and mounting Palestinian pressure the PA has assumed a dual role. The result of this dual role is that the "stronger the resentment of the political situation, the more internal suppression is required to keep the population at bay".⁴⁸

The PA created several mechanisms to consolidate its power and to establish its hegemony as a new political center. These include most importantly the strengthening of the executive at the expense of the legislative and the absence of the rule of law (Giacaman, 1998; Hilal, 1998; Usher, 1998). These are examined in the following.

⁴⁵ Article 12 of the Gaza-Jericho Agreement states that the PA should take 'legal measures to prevent incitement by an organization without, however, specifying the nature of the incitement. This, according to Muhsen, opens the door for arrests based on political motivation (Muhsen, 1996). Even the website of Fatah is considered a violation of the Oslo Agreement, as it is viewed by Israel as incitement of violence (Andoni, 1998).

⁴⁶ According to Abu Sitta international aid disbursement has proceeded according to progress made in the peace negotiations, rather than taking into account issues of transparency (Abu Sitta, 1998).

⁴⁷ Since the signing of the DOP real per capita declined by 30 percent and reached 1630 US \$ at the end of 1998. Unemployment averaged at 20.05 percent in June 1997, whereas when hidden unemployment is included this figure is estimated much higher (Roy, 1999, p. 76).

⁴⁸ Giacaman, 1998, p. 13.

B. The Consolidation of the PA

1. Strengthening of the Executive

The DOP and the Interim Agreement postulate the creation of a Palestinian self-governing authority with an executive, legislative and with an independent judicial body. Contrary to the stipulations, however, political power has been concentrated in one hand, the head of the PA's executive, Yasser Arafat. In addition to heading the executive, Arafat also holds the post of Minister of Interior. In this role he controls the security and police forces, which report directly to him. Furthermore, Arafat is also chairman of the Executive Committee of the PLO and the leader of the major political party, Fatah.

The strengthening of the executive is the result of the marginalization of the Legislative Council and the subjugation of the Judiciary under Arafat's control. Since its formation the role of the Council has been increasingly weakened in its legislative function and in its role to check and balance the government. Its role as legislator has been undermined as the head of the PA has failed to ratify legislation passed by the Council. From its formation until June 1997 the Council passed 167 resolutions and laws. It has discussed and adopted five draft bills, the Basic Law, the Civil Service Law, the Local Government Law, the Currency Law and the Election Law for Local Government. With the exception of the Local Government Election Law none of the laws adopted by the Council have been ratified (Abu Amr, 1997).

The weakness of the Council is due to several factors. The first one relates to the timing of its creation. As the PA's Executive has been created prior to the election of the Council on 20 January, 1996 the former had succeeded in centralizing power and monopolizing resources without accounting to the Council as a mechanism of checks and balances (Hilal, 1998). A second factor that led to the weakening of the Council constitutes the boycott of the opposition parties, i.e. Hamas and other Islamic parties as

well as the Popular Front for the Liberation of Palestine (PFLP), and the Democratic Front for the Liberation of Palestine (DFLP). The boycott resulted in the dominance of one party, Fatah, the chairman of which is also Arafat (Giacaman, 1998). Without an organized opposition bloc in the Legislative Council, Fatah became the uncontested ruling party. Only 26 of the 88 members of the Council are independents, the remaining 62 are either members of Fatah or affiliated with it. In addition to the boycott by the opposition, the electoral law also furthered the dominance of Fatah in the Council (Andoni, 1996; Shikaki, 1996). The choice of an electoral law based on majority rather than on proportional representation contributed to the victory of Fatah, while marginalizing small parties (Shikaki, 1996).

The dominance of Fatah has hindered the Legislative Council in its function as a counter-weight to the executive authority, which itself is dominated by Fatah members (Abu Amr, 1997). According to Abu Amr, opposition expressed by Fatah factions in the Council reflects either a 'power play' or an internal competition within Fatah.⁴⁹ Thus opposition expressed by factions of Fatah do not constitute a challenge to the PA, but rather constitute what Zartman termed an "opposition in support of the state" (Zartman, 1988, p. 86).

The marginalization of the Council has contributed to the concentration of power in the executive to the extent that the "PA, with its various ministerial departments, continues to operate without serious restraints".⁵⁰

This was reflected in a report prepared by the Palestinian Legislative Council (PLC) in July 1997. This report followed an Audit Report issued by the Public Monitoring and Audit Department of the PA. The Audit Report, which dealt with

⁴⁹ Abu Amr, 1997, p. 97.

⁵⁰ Abu Amr, 1997, p. 91.

efficient expenditure of PA budget funds, concluded that mismanagement had led to the 'disappearance' of US\$ 326 million in 1996, i.e. approximately one fourth of the PA's budget. The PLC responded by conducting its own investigation. Its report revealed that the Audit Report had neither covered all ministries nor the Security Forces of Arafat's Office.⁵¹In addition it objected the Audit Report's omission of public institutions that receive PA funding, such as the Palestinian Broadcasting Corporation, and that of the economic monopolies, which had been granted to PA members or persons with close ties to the latter.⁵²In its report, the PLC in contrast to the PA's Audit Report, stated corruption as the reason for the disappearance of US\$ 326 million and explicitly stated the main responsible persons (Ben Efrat, 1997).⁵³

Based on its results, the PLC voted on 30 July, 1997, with an overwhelming majority, 51 to 1 votes, in favor of a dissolution of the cabinet and gave Arafat an ultimatum to deal with the charges of corruption (Shain and Sussman, 1998). After the PLC threatened with a no-confidence vote in June 1998, Arafat responded with the forming of a new cabinet. However, he retained the very ministers who were accused of corruption. Moreover, he enlarged the cabinet by adding ten additional ministers, most of whom without portfolio, thus violating the Standing Orders of the PLC, which limit the number of ministers to 26 (Shkirat, 1998).

⁵¹ The annual expenditure of Arafat's office is estimated at US\$80 million, while that of the Security Forces at US\$ 248 million (Middle East News Items, 20 July 1997).

⁵² According to various estimates, more than twenty-seven monopolies have been created since 1994 by PA officials or by persons with close links to the PA. As partners in these monopolies they have acted as middlemen between producers, usually Israeli companies, and Palestinian distributors in the West Bank and Gaza Strip. In this role they receive large commissions that accrue directly to personal accounts (Robinson, 1997a; Robinson, 1997b). A characteristic feature of these monopolies is that their revenue is not subject to auditing nor does it appear in the official budget of the PA. The profits of the monopolies are said to be deposited in a 'secret account' under the PA's head of executive's name (Schwartz, 1997).

⁵³ These are in particular the Minister of Planning and International Cooperation, Nabil Sha'ath, and the Minister of Civil Affairs, Jamil Tarifi (PLC Report on the findings of the General Control Office, August 9, 1997) (in Arabic).

Arafat's response to the PLC's demands for the eradication of corruption in the PA reflects the unrestrained rule of the Executive. Devoid of any system of checks and balances, its unrestrained rule is enhanced by the absence of the rule of law.

2. Rule of law

In the absence of a Basic Law that would regulate the relation between the various government bodies, the independence of the judiciary has been curtailed substantially. Moreover, the judiciary has been subjected to the control of the Executive, a situation that constitutes an obstacle to the establishment of the rule of law. In addition to being appointed by Arafat the Minister of Justice, Chief Justice, and the Attorney General also report to him (Robinson, 1997b; Kassim, 1994).

Although the Legislative Council has adopted the Basic Law, it has not been ratified by the head of the PA as of this writing, and legislation continues to be promulgated by decrees issued by Arafat (Robinson, 1997b). The head of the PA Executive, Yasser Arafat, also maintained control over the judiciary by his failure to define the mandates of the various legal entities. This furnished Arafat with the leverage to manipulate the judiciary to his advantage. Thus, when Chief Justice, Qusai Abadla, criticized the Minister of Justice, a Arafat loyalist, for interference in the operation of the courts, he was dismissed.⁵⁴ The Attorney General, Fayez Abu Rahmeh, resigned for similar complaints in April 1998 to protest the Executive's 'repeated meddling in the judicial system'. Both posts remained vacant until early 1999 when they were filled after

⁵⁴ He was dismissed on 19 January 1998 (LAW, Press Release, 14 June 1999).

public and international pressure.⁵⁵ On 14 June, 1999, Radwan al-Agha was named Chief Justice and Zuhayr al-Surani, a veteran Fatah activists, Attorney General.⁵⁶

Furthermore, in order to maintain its control over the courts, the PA has refused to establish a supreme judicial council as demanded by West Bank judges during the 11 October 1999 strike. This strike followed the decision of the Chief Justice to transfer a number of judges in the West Bank, a decision based on a presidential decree that granted him extensive powers in managing the judiciary. According to West Bank law, however, the Judicial Council and the Minister of Justice are responsible for the operation of the judiciary and the supervision of its staff.⁵⁷

The impact of the absence of a Basic Law is also reflected in the unhindered actions of the Palestinian Police Force. The police force, which is composed of at least twelve different services, ranging from traffic police to the intelligence service, has been criticized for its continuous violations of human rights.⁵⁸ The most significant feature of the Police Force is that it is not accountable to any legal entity or the Legislative Council, but rather reports directly to Arafat. The Police Force was created in line with the DOP and especially the Oslo II agreement “to act systematically against all expression of violence and terror”, “to arrest and prosecute individuals suspected of perpetuation acts of violence and terror”, and “to cooperate in the exchange of information as well as

⁵⁵ Journal of Palestine Studies 27, no. 4 (Summer 1998), Peace Monitor; LAW, Press Release, 16 April 1999.

⁵⁶ Journal of Palestine Studies 29, no.1 (Fall 1999), Peace Monitor.

⁵⁷ Palestinian Independent Commission for Citizen's Rights, Press Release, 11 October 1999.

⁵⁸ According to Amnesty International there are 12 different security or police services (quoted in Usher, 1998). They are the Palestinian National Security Force and the Palestinian Civil Police, the Preventive Security Force (PSF), General Intelligence Service (GIS) or Mukhabarat, the Civil Defense Force and the Presidential Security Force or Presidential Guard, Force 17 and Special Security Forces (SSF). Other organizations are the Coastal Guard and Military Intelligence, University Security Guard, and Disciplinary Police, which can also enforce laws. According to Usher it is not clear whether these forces operate under one command or whether they have their own commands (Usher, 1998).

coordinate policies and activities” with Israel’s security services.⁵⁹ In this role, the Police Force, in particular the Preventive Security Service, has been used to repress opposition. In many instances the actions of the security services have been coordinated with Israel through the “joint security coordination and cooperation committees” (Usher, 1998).⁶⁰ Furthermore, since the Wye Accord activities of the security services against the opposition are directly monitored by the US. In addition to the Police Force, Arafat established a State Security Court in February 1995 to deal with the conviction of members of the opposition. In these courts neither the right to appeal nor access to legal counsel is given. They are presided over by members from the security apparatus and subordinated to the Executive while the Ministry of Justice has no jurisdiction over them (Jarbawi, 1995; Robinson, 1997b; Usher, 1998).⁶¹ Thus in addition to the Police Force, Arafat has created a machinery to eliminate opposition to PA policy and the Oslo agreements, which it has used frequently as examined below.

C. The Palestinian Authority and Civil Society

1. Policy of control

At its formation the Palestinian Authority (PA) faced criticism from various civil society institutions. Criticism centered on its non-inclusive and non-democratic nature as well as its relations with civil society. It was voiced largely by those institutions that

⁵⁹ Quoted in Usher, 1998. According to LAW there are approximately 300 prisoners, most of convicted for suspected involvement with Islamist or leftist groups opposed to the Oslo negotiations (LAW, Press Release, 11 May 1999).

⁶⁰ An understanding between Israel’s General Security Service and the Israeli Defense Force on the one hand, and the heads of the Palestinian Preventive Security Services, Dahlan and Rajoub, was concluded in January 1994 (Usher, 1998).

⁶¹ From 1994 until March 1999, 25 death sentences were issued by these courts (Human Rights Watch, Press Release, 11 March 1999).

emerged from the social movement of the 1970s and 1980s, of which both women's and health organizations formed part and Islamist parties and their affiliated institutions, as well as by other examples of civil society.

At its formation the PA faced a civil society whose major components had played an instrumental role in the intifada, the Palestinian uprising against the Israeli occupation of 1987. A characteristic feature had been their affiliation to various political factions. This feature was the defining element in the PA's attempt to regulate its relation with civil society. More specifically, the position political factions had assumed towards negotiations with Israel and the formation of the PA determined the PA's attitude towards them. Leftist factions within the Palestine Liberation Organization (PLO), the Popular Front for the Liberation of Palestine (PFLP) and the Democratic Front for the Liberation of Palestine (DFLP),⁶² rejected the negotiations. As a result, the PA viewed their civil society affiliates as a threat and attempted to marginalize, repress, or coopt their members. In contrast Fatah, which, under the leadership of Yasser Arafat, had endorsed the negotiations received support by the PA.⁶³ In addition, the PA attempted to repress other civil society institutions critical of negotiations with Israel, such as those affiliated with Hamas, the media as well as human rights organizations and independent personalities. The latter have also criticized the PA's authoritarian rule.

In order to silence opposition voiced by members from leftist factions, the DFLP and the PFLP, the PA arrested a number of their members. In February 1995, for instance, it arrested more than 45 members of the Democratic Front for the Liberation of Palestine. While the PA justified its arrests with the alleged involvement in attacks on

⁶² The DFLP split in 1991 into a pro and a contra negotiations wing, whereby the wing endorsing the negotiations developed into a separate party, the Palestinian Democratic Union (Fida) (Robinson, 1997a, p. 49).

⁶³ Arafat succeeded in marginalizing those elements within Fatah that had posed a threat to his rule (Hilal, 1998).

Israel, the high number of 45 suggests that their political affiliation formed the incentive for the PA action. Moreover, the PA has imprisoned more than 300 Palestinians for their political affiliation.⁶⁴ The PA also sought to deprive leftist factions of the means to disseminate their views. To this end it frequently prohibited assemblies organized by their members. It also closed down a number of their papers, such as the PFLP-paper *al-Umma* (Usher, 1998).

In addition to political factions represented in the PLO, Islamist organizations, the Islamic Jihad and Hamas have been the main targets of the PA. It closed down numerous of their affiliated institutions as well as conducted campaigns of mass arrests of its members. This was especially true after bomb attacks in Israel. Following bomb attacks in February and March 1996, the PA arrested some 1200 persons affiliated with Hamas. It also conducted mass arrests of members of Hamas and the Islamic Jihad on 4 September, 1997 after a similar bomb attack in Israel (Guyatt, 1998). The most severe blow to Hamas and the Islamic Jihad, however, was the closing of a number of its charity organizations, as occurred on 9 and 25 September 1998.⁶⁵ The outlawing of Islamic organizations had a devastating effect especially in the Gaza Strip, where their presence has been stronger than in the West Bank. Given the deteriorating economic situation there, many needy Palestinians have relied on assistance from charitable Islamic organizations.

In addition, as in the case of oppositional factions, the PA has attempted to silence Islamist opposition by outlawing newspapers affiliated with Hamas or the Islamic Jihad. In May 1995, the chief editor of *al-Watan* was sentenced to two years in prison for publishing 'provocative articles' against the PA in which he mentioned the PA's torture

⁶⁴ Palestinian Human Rights Monitoring Group, Annual Report, 1999.

⁶⁵ According to Regev, following the bus bomb in 1996, the PA had already taken over control of numerous Hamas-affiliated charity organizations by subjugating them to the PA (Regev, 1996).

of Hamas detainees (Guyatt, 1998; Usher, 1998). On 22 and 23 May, 1999, the PA detained the chief editor and reporters from *al-Risala*, a Hamas newspaper, for publishing articles which were critical of the PA. In a similar move, the editor of the *al-Istiqlal*, a newspaper affiliated with the Islamic Jihad, was detained on 5 July, 1999 by the PA police as a 'warning'. The editor had intended to publish an article which was critical of the PA.⁶⁶

Not only the Islamist press faced intimidation but even mainstream newspapers as well as opposition papers. On 28 July, 1994, the mainstream paper, *al-Nahar*, was closed and in December 1995 the editor of the newspaper *al-Quds*, Maher al-Alami, was arrested for refusing to print an article on the front page which would report about Arafat's meeting with the Greek Orthodox Patriarch during his Christmas visit to Bethlehem (Muhsen, 1996).

The PA has not only used repressive means to intimidate the media, but has, in a move to marginalize the existing media supported those that endorse the negotiations. The papers *al-Hayat al-Jadida*, *al-Ayyam*, and *al-Bilad* represent such examples, all of which are not only affiliated with Fatah, but are also financially supported by the PA (Usher, 1998). In a recent incident the PA voiced the threat to close down the recently launched newspaper, the Hebron Times. In an editorial on the Palestinian right of return, its editor-in-chief, Khaled Amayreh, wrote that "not even the Palestinian leadership has any right to concede, give up or compromise this right".⁶⁷ He was accused by the PA's General Intelligence to doubt the "leadership's commitment to the refugees cause" and to "incite the refugees against the leadership".⁶⁸ In addition, the PA has closed TV stations

⁶⁶ Journal of Palestine Studies 29, no. 1 (Fall 1999), Peace Monitor.

⁶⁷ Palestinian Human Rights Monitoring Group (PHRMG), Press Release, 21 February 2000.

⁶⁸ Amayreh was also summoned by the Israeli District Coordination Office. The latter insinuated that his editorial induce the PA to "take a tougher stance on the refugees' issue" (Palestinian Human Rights Monitoring Group (PHMRG), Press Release, 21 February 2000).

that were critical of its rule. In a recent incident, on the 18 February, 2000, the PA closed down the TV station, Nawras TV, for a week for airing interviews with striking teachers, who accused Arafat's regime for impoverishing teachers. The teachers have criticized the PA for its unwillingness to raise teacher salaries while it spends 60 percent of its budget on the security apparatus.⁶⁹

The PA supported all its actions with a Press Law, which was promulgated by the head of the PA's Executive, Arafat, in June 1995. This law grants the Minister of Interior, i.e. Arafat, to ban any publication that "jeopardizes national unity", while it does not define the nature of this jeopardy (Usher, 1998). This law clearly aims at silencing any opposition to the PA by repressive means. As a result and in order to evade the PA's repressive means the existing media often adopted a self-imposed censorship.

The PA not only attempted to silence the media but also targeted human rights activists for their criticism of the PA. Human right activists criticized the PA for the absence of the rule of law and the high level of corruption, which has characterized its Executive Authority. Human rights activists had voiced their criticism through publications and petitions. In an article published in LAW's *People Rights Magazine*, Iyad Sarraj, the Director of the Community Mental Health Program, criticized the PA for its corruption and the campaign initiated by the Minister of Justice, Freih Abu Mdeyyin, against human rights organizations. Abu Mdeyyin had accused human rights organizations of 'mismanagement' and 'politicization', after human rights organizations had complained of the unlawful interference of the Minister in judicial affairs. Following this publication Sarraj was arrested on 5 August, 1999 by the PA Police.⁷⁰

⁶⁹ PHRMG, Press Release, 11 January 2000.

⁷⁰ LAW, Press Release, 14 June 1999.

Other human rights activists were arrested for similar charges. Raji Sourani, the director of the Palestinian Center for Human Rights in Gaza, was arrested on 1 February, 1995 after criticizing the establishment of State Security Court by Arafat.⁷¹ The State Security Court was established by Arafat to combat opposition to his rule and those who opposed the negotiations or resist the Israeli occupation army. This institution allowed him to try oppositionists without giving them the right to appeal nor the access to legal counsel (Usher, 1998). During 1999 this court has sentenced 15 people, three of them with death sentence.⁷²

Criticism against Arafat's authoritarian rule was also expressed by independents. On 27 November, 1999, twenty individuals issued a statement entitled "A Cry From the Homeland" criticizing the PA's Executive for corruption and violation of human rights and demanded new elections. The statement accused Arafat in name with "opening the door for widespread corruption and exploitation of the Palestinian public".⁷³ The statement was endorsed by activists and academics as well as by nine members from the Palestinian Legislative Council (PLC). The signatories include physicians, political scientists and members from opposition parties.⁷⁴

The PA responded by arresting seven and putting two under house arrest, while the PLC members, due to their parliamentary immunity, could not be arrested.⁷⁵ All were only released after signing a statement drawn up by Khaled al-Qidrah, the public prosecutor of the State Security Court, that they would if summoned again, report and in

⁷¹ For a discussion of the State Security Court see section B2, of this chapter.

⁷² PHRMG, Press Release, 6 December 1999.

⁷³ LAW, Press Release, 2 December 1999.

⁷⁴ The signatories were Abdel Sattar Qasem, Abdelrahman Kittaneh, Adel Samara, Yasser Abusufiyya, Ahmad Katamesh, Atif Suleiman Judah, Ismat Shakhshir, Bassam Shakka'a, Anabta Waheed Alhamdalla, Ahmad Shaker Dodeen, Adnan Odeh, all of them public figures and activists.

⁷⁵ Three of them, Abdel Sattar Qasem, Adel Samara, and Ahmad Kattameh were transferred to the General Intelligence Detention Center- Jericho where they had awaited trial before the State Security Court (Palestinian Human Rights Monitor Group, Press Release, 4 December 1999).

the case of the failure to comply they would be subject to a fine of 50,000 Jordanian Dinar, i.e. approximately 75,000 US \$.⁷⁶

Following Arafat's failure to have the parliamentary immunity of the PLC members removed, two PLC members who had signed the petition, Moawiya al-Masri and Abdel Jawad Saleh, were assaulted by PA security forces.⁷⁷ In addition Hanan al-Masu, the coordinator of the Human Rights Action Project at Birzeit University, who had organized an appeal for the release of the detainees was attacked by unidentified assailants.⁷⁸

Thus in both cases Arafat has used the security forces as a threat and intimidation. The significance of the statement lies in the fact that its prominent signatories have in an unprecedented move explicitly singled out Arafat as the main responsible person for the lack of democracy and the high level of corruption, thus questioning his legitimacy. As such, the statement was viewed as a threat to the PA and accounts for the latter's recourse to its most repressive means, its security apparatus. This has also been true for the PA's dealing with human rights organizations and the media as well as with institutions it perceived as a threat to its rule.

In addition to using repressive means to silence the oppositional voices and intimidate potential ones, the PA sought to regulate its relation with civil society by proposing a legal framework in the form of its associational law. However, rather than regulating its relation with civil society, the stipulations of the proposed law suggest that

⁷⁶ Amnesty International, Press Release, 19 December 1999.

⁷⁷ Moawiya al-Masri was shot by three men, of whom one he recognized as from the Security Forces (Palestinian Human Right Monitoring Group, 23 December 1999). Abdel Jawad Saleh, a seventy-year-old PLC member was severely beaten by security forces (Amnesty International, Press Release, 20 December 1999).

⁷⁸ Amnesty International, Press Release, 18 December 1999.

the PA sought to control the operations of those institutions as well as their financial sources and expenditures.⁷⁹

The PA's proposed associational law was drafted in May 1995 in collaboration with the Ministry of Social Affairs and the Ministry of Justice and modeled after the quasi-authoritarian Egyptian law. The associational law not only required the registration of NGOs by the Ministry of Interior, but even their very licensing by the PA. Furthermore, the PA also sought to control NGOs' sources of funding. Thus the PA demanded that in addition to names of senior officers, sources of funds also be disclosed. The major concern of NGOs was that this legislation would constrain their activities. The NGOs demanded registration with the Ministry of Justice, as the Ministry of Interior is connected to Arafat and his security services. Furthermore, NGOs feared that the suggested law would empower the Ministry to revoke the licenses in an arbitrary fashion (Sullivan, 1995).

Following criticism from all sides and in particular from the Palestinian NGO Network, PNGO, the PA produced a second draft of the associational law in October 1995. The most contentious issue—the requirement for NGOs to obtain a license from the Ministry of Interior—was not removed, however (Sullivan, 1996).

After intensive lobbying with members of the Palestinian Legislative Council (PLC), PNGO succeeded in the adoption of its own proposed law by the PLC. The most important articles, those pertaining to registration were adopted and the law was ratified on 27 December, 1998.⁸⁰ In line with its procedures the PLC submitted the law to Arafat for approval who, however, returned it unsigned on 10 April, 1999 demanding an

⁷⁹ Prior to the creation of the PA, the NGO regulatory framework was inconsistent and stemmed from different legal traditions. West Bank NGOs were subject to Jordanian law as amended by Israel after 1967. Gaza's NGOs were regulated by Egyptian law, also amended by Israel. Palestinian NGOs in Jerusalem were registered with the Israeli authorities.

⁸⁰ Interview, Mustafa Barghouthi, UPMRC, October 1998.

amendment of the law, namely registration with the Ministry of Interior, instead of that of Justice. The PLC in turn voted 38 to 12 against the proposed amendment on 25 May, 1998.⁸¹ According to Article 71 of the Standing Order of the PLC, adoption of the amendment would have needed an absolute majority.⁸²

In response to the PLC's vote, the PA created on 14 June, 1999 a special committee to examine the operations of NGOs. The PA's intention was to redraft the law approved by the PLC.⁸³ It envisaged a law that would in particular silence human rights organizations. This was most explicitly endorsed in a statement by the Minister of Justice, Frayh Abu Mdayyen, in which he accused NGOs, in addition to their 'politicization' and 'mismanagement' of issuing "faulty reports that will harm our people".⁸⁴ The most important article on which the PA insisted was the registration of NGOs with the Ministry of Interior, would have provided the means to control the actions of human rights organizations and revoke their license when it deemed necessary. Despite the PLC's vote against the proposed amendment the PA's version of the law went into affect on 12 August 1999. The speaker announced that the result of the PLC's voting was not 'sufficient to challenge and overcome the objection submitted by the President of the PA'.⁸⁵ In the promulgation of the law, the PA has thus disregarded the PLC's decision as well as the procedures that govern the relation between the two entities.

The PA's attempt to submit the NGO sector to its control is also reflected in the operations of the World Bank's Trust Fund.⁸⁶ The Trust Fund, which disposes of a budget of 15 million US\$ for a period of three years was created in 1995 to provide grants to

⁸¹ Journal of Palestine Studies 28 no. 1, Fall 1998, Peace Monitor.

⁸² al-Haq, Press Release, 9 September 1999.

⁸³ LAW, Press Release, 14 June 1999.

⁸⁴ Journal of Palestinian Studies 29, no. 1 (Fall 1999), Peace Monitor.

⁸⁵ Al-Haq, Press Release, 9 September 1999.

⁸⁶ The Trust Fund is led by the Project Management, which is composed of the Welfare Association (an International Palestinian NGO), the Charities Aid Foundation (a British NGO), and the British Council.

NGOs to deliver services to the poor and needy in the West Bank, the Gaza Strip and Jerusalem.⁸⁷ While initially the NGO sector was involved in the creation of the Fund, it was increasingly marginalized.⁸⁸ This is reflected in the minimal role NGOs have played in the operations of the Fund, but also in the creation of three NGO networks with close ties to the PA, which have as the PA has maintained a high level of involvement in the operations of the Fund, especially in the final approval of proposed projects, benefited disproportionately at the expense of other NGOs. NGOs also feared that the fund will be used in the future as a centralized structure through which their funding will be disbursed, thus being subject to PA's approval.⁸⁹ The three networks are the Board Union of Palestinian NGOs with a membership of 210 NGOs, the Union of Palestinian NGOs with 180 members, and the Palestinian National Institution for NGOs, a network of 250 members.⁹⁰ In an interview the Secretary General of the Union of Palestinian NGOs explicitly expressed the view that these networks constitute an alternative network for NGOs who could not join PNGO, the Palestinian NGO Network,⁹¹ as a result of the latter's "strict admission criteria" (Rahmi, 1997).

As shown above, the PA has made extensive use of its security apparatus to deal with criticism and opposition from civil society institutions, which it perceived as a threat to its rule and legitimacy. The PA's authoritarian traits were also reflected in the creation of a legal framework that would regulate its relation with civil society. In this process it imposed its vision of the associational law, disregarding the legislative role of the PLC.

⁸⁷ Interview, Mira Rizq, Welfare Association, December 1997.

⁸⁸ Participating NGOs were in particular the Palestinian NGO Network, PNGO, and the Union of Charitable Societies (Interview, Rana Bishara, PNGO, November 1997).

⁸⁹ Interview, Rana Bishara, PNGO, November 1997.

⁹⁰ Palestinian NGO Project. Public Discussion Paper. 15 July 1997. The World Bank, Al-Ram, West Bank.

⁹¹ See Chapter III for further discussion.

While the PA has reacted to the above demands with authoritarian means, it revealed variations in its dealing with different civil society institutions. The variation of the PA's dealings with different segments of civil society is examined in the following section. Based on a comparison between health and women's organizations this section seeks to identify the factors that account for this variation.

2. Variations in PA - civil society relations

The health sector constitutes one of the five areas of responsibilities the PA took over from the Israeli authorities. When the PA assumed its responsibility for health care, it was faced with the task of reforming a health sector that was characterized by fragmentation and underdevelopment as a result of the Israeli occupation. In its reform of the health sector, it sought to impose its vision of health care as is reflected in its National Health Plan (Khammash, 1994).⁹² In order to implement this plan it created the Palestinian Health Council, as the central authority responsible for health policy. In addition it also attempted to establish its authority over existing health organizations. The most significant case is its decision to assign Fathi Arafat to head the al-Maqassed Hospital, replacing Haidar Abdel-Shafi, a critic of Arafat's policy.⁹³

The PA's intentions to direct health policy have not remained unchallenged. It was under the leadership of the Union of Palestinian Medical Relief Committees

⁹² The PA's evolving relation with health NGOs as well as its health plans are discussed in detail in Chapter V.

⁹³ Haidar Abdel Shafi, who was member of the negotiating team, resigned. He was also a member of the Palestinian Legislative Council, but resigned because of Arafat's authoritarian style.

(UPMRC) that health NGOs succeeded in a concerted effort to introduce important policy changes in various sectors of health care.⁹⁴

Whereas health organizations promoted a health care system that would focus on the needs of marginalized areas and segments of the population, the PA emphasized the rehabilitation of the health care infrastructure. Despite the contrasting views on health care, the PA responded to the demands for change in various sectors as expressed by the health organizations. Moreover, the PA is currently involved in a policy dialogue with health NGOs as well as in various coordinating schemes and subcontracting arrangements.

The properties of the health network, which was established by the UPMRC to promote the vision of health NGOs, were critical to the success of NGOs in inducing change of PA policy, but factors relating to the PA itself also accounted for its shift of policy from initial hostility to cooperation with health NGOs.

The PA possesses the means to repress health NGOs by, for instance, closing down their facilities, however, it refrained from doing so. If the PA had opted for this policy, it would have had to substitute for the health services provided by health NGOs. In order to fill the vacuum left by NGOs, it would have needed both the institutional and financial capacity to do so. However, the PA has been facing financial capacity constraints since its creation.

It has faced a consistently increasing deficit in its health budget which reached US\$ 62.892 million, i.e. 59% of its health budget (Barghouthi and Lennox, 1997, p. 28). This deficit prevented the PA from expanding its responsibilities and providing services previously provided by health NGOs. The latter continue to deliver an important share of

⁹⁴ The UPMRC's strategic moves to counter the PA's attempt of controlling health NGOs are examined in Chapter V.

primary health care (62%), secondary health care (50%), and rehabilitation services (100%) (Barghouthi and Lennox, 1997). As the PA assumed the overall responsibility for health care, a deteriorating health care system would have undermined its own legitimacy.⁹⁵ Thus capacity constraints represent an important incentive for the PA to refrain from repressing civil society institutions.

In contrast to the relation between health organizations and the PA, that between women's organizations and the PA has proved less cooperative. The demands of women centered around changes of existing laws affecting them and the promulgation of new ones that would protect their status, as well as structural changes within the PA. While women's organizations succeeded in introducing important changes affecting their legal status, these changes did not represent a threat to the PA, as in the absence of a Basic Law, the proposed changes remain regulations and are not legally binding.⁹⁶

As the role of women's organizations was largely confined to awareness campaigns and lobbying rather than to the delivery of social services as in the case of health organizations, the PA's response to their demands was not defined by its availability of resources to substitute for services provided by women's organizations. It was rather the content of their demands that determined the behavior of the PA towards women's organizations. Thus, in response to their demands of creating a Women's Ministry and a Women's Council affiliated with the Office of the PA's President, Arafat, the PA created several ministerial departments that each deal with women's issues. By embedding the women's departments in the structure of the respective ministry and thus

⁹⁵ As Macrae et als. showed for the case of health reform in Uganda, health care is not a neutral commodity, but its provision has political implications (Macrae et als. 1996).

⁹⁶ See Chapter IV for a detailed discussion.

subjecting them to its scrutiny and control, the PA aimed at preventing the emergence of a unified women department .

The creation of the latter would have provided women with the means to challenge the PA's broad exclusion of women, which characterized its consolidation of power. Furthermore, through a unified entity women would have been more effective in challenging the PA's vision of the role of women in Palestinian society. While the PA has endorsed a subordinate role for women, women's organizations envisioned one that is based on gender equality. As the latter would have required the transformation of the political order under the PA rule, the PA perceived the demands of women's organizations as a challenge to its rule. By fragmenting women's presence in its structure, the PA sought to weaken and marginalize, rather than repress them.

The above variations reveal that authoritarian regimes show different levels of repression. The PA has used repressive means towards organizations that have criticized its undemocratic rule and human rights violations such as the media, human rights organizations as well as societal forces opposed to its rule and to the negotiations with Israel. It did not refrain from using such means as it was not dependent on these organizations for the delivery of essential services. In the case of health organization, the PA's financial and resulting institutional capacity constraints have compelled it to seek cooperation with them. This case reveals that the potential use for repressive means by an authoritarian regime can be substantially constrained by its capacity to substitute for the delivery of social services. The PA did not view women's organizations as an immediate threat, but only as a potential one. Thus, in order to prevent a strengthening of women's position, the PA sought to weaken them by fragmenting their presence in the PA.

While there are variations in the different levels of repression towards the various segments of civil society, these levels can vary across time as well. More specifically a change in the PA's capacity or in the content of civil society demands can lead the PA to use repressive means or refrain from it. Thus in addition to the content of civil society demands the examination of the nature of the PA constitutes a critical variable in understanding its responses to civil society.

D. Conclusion

The authoritarian nature of the PA, which forms the context in which civil society institutions have operated has been shaped by its modes of formation and consolidation. The peace agreements and their increasing focus on Israel's security concerns had direct repercussions on the nature of the PA, as they provided the foundation for the PA's creation of its security apparatus. The availability of a security apparatus enabled the PA to silence opposition to its rule and/or to the negotiations with Israel. The PA, however, sought to deal with civil society institutions not only by using repressive means. Based on its assessment that some civil society institutions do not cause an immediate threat it chose to contain or weaken them.

The responses of Palestinian civil society institutions to the attempts of the PA to control them have varied. While in some instances civil society institutions have remained acquiescent, in others they have countered the PA. Further, not all efforts of civil society institutions proved successful. The following chapter provides an outline of civil society responses. In order to evaluate their actions the chapter situates the development of civil society in a historical context.

CHAPTER III: CIVIL SOCIETY IN PALESTINE

A. Introduction

Current Palestinian civil society in the Occupied Territories is the product of its historical development, which has been shaped by the social, political and economic implications of the Israeli occupation of the West Bank and the Gaza Strip. Until the formation of the Palestinian Authority (PA) in 1994, civil society institutions assumed an instrumental role as agents of development in Palestinian society. In the absence of a national authority, civil society institutions provided services to the affected Palestinian population in the Occupied Territories, and most importantly assumed the role of agents of development.

Since the onset of the occupation in 1967, civil society institutions developed, under different sets of leadership, various responses to the occupation. While each introduced a new strategy to counter the occupation, previous ones continued to exist. The first generation of civil society institutions attempted through the provision of financial means to alleviate the consequences of the occupation. Following its failure to improve the conditions in the Occupied Territories, a movement of grass roots committees emerged in the late 1970s and early 1980s, which sought to disengage from the Israeli occupation. Its vision was based on the understanding that the Israeli occupation was not the sole factor accounting for conditions in the Occupied Territories characterized by underdevelopment in the various sectors of society. Rather, in order to redress the inequalities and existing contradictions in Palestinian society, the committees sought to transform Palestinian society. In this they focused on the neglected needs of the marginalized segments of society, primarily the population in rural areas. To this end the committees formed a vast infrastructure of local committees, which not only served the

needs of Palestinians under occupation, but also involved the population in the operations of these committees.

By making democratic decision-making, accountability and participation of communities a central feature, the committees constituted the embodiment of a new vision of societal order.

This model of societal order combined with the vast infrastructure the committees had created provided in many respects the foundation for a future Palestinian state. Based on this role, the committees as well as their successor organizations expected an increased involvement in national policy design, following the establishment of the PA. However, the PA in its consolidation of power, adopted several strategies to marginalize or repress them. In contrast to some civil society organizations, which have remained acquiescent or were absorbed into the PA, an important number of committees and their successor organizations responded to the PA's attempts of marginalizing them. More specifically, these organizations attempted to counter the PA's effort to consolidate its own undemocratic vision of a political and societal order that stands in stark contrast to theirs. In order to effect changes of PA policy and to incorporate their own vision of political and societal order into national policy these organizations pursued a two-fold policy: As a first step they sought to integrate Palestinian civil society organizations in a network, the Palestinian NGO Network (PNGO), through which they can forge a unified vision on the political and societal order and on the relation with the Palestinian Authority (PA). Based on a common position towards the PA, the PNGO established, in as second step, vertical linkages with agencies of the Palestinian Authority (PA). Through these linkages the PNGO attempted to lobby for change of national policy.

The first part of the current chapter traces the historical development of civil society and highlights the factors that shaped it prior to the formation of the PA.

The second part deals with the development of civil society in the new political context following the creation of the PA. This part focuses specifically on PNGO and the strategies it has developed to change the PA's authoritarian policy.

B. The Context of Civil Society Development in the Occupied Territories

1. The Israeli occupation

The Israeli occupation of 1967 of the West Bank and the Gaza Strip generated economic, social and political changes that formed the context for Palestinian civil society development (Farsoun, 1989; Jad, 1995; Roy, 1996; Tamari, 1989).⁹⁷

Israeli policy towards the Occupied Territories has been characterized by the subjugation of the Palestinian economy, and by the maintenance of political control over the Occupied Territories. The economic subjugation and the mechanisms employed by the Israeli authorities to ensure political control over the Occupied Territories led to the distortion of endogenous Palestinian development at all levels as is reflected in the suppression of institutional development in the economic, political and social sectors (Farsoun, 1997; Roy, 1996).

The impact of Israel's policy, for instance, is reflected in the development of the agricultural sector. While prior to the Israeli occupation the Palestinian economy relied largely on the agricultural sector, this sector underwent a fundamental change following the Israeli occupation. In 1969, 44 percent of the total labor force in the West Bank were agricultural laborers. This figure dropped to 19 percent in 1984 due to Israeli policies.⁹⁸ Several factors account for this change. By integrating the Palestinian economy into its

⁹⁷ On the political, economic and social changes that the 1967 Israeli occupation of the West Bank and the Gaza Strip brought about see Heller, 1980; Hiltermann, 1991.

⁹⁸ Robinson, 1997a, p. 52.

own economy, Israel contributed to the decline of the Palestinian agricultural sector in that it sought to create a pool of cheap labor for its economy.

Israel's neglect of Palestinian agriculture was also mirrored at the institutional level. Prior to the Israeli occupation, the agricultural sector constituted a significant share of the economy. This is reflected in the high number of agricultural cooperatives that were created prior to the Israeli occupation. Of 238 new cooperatives that registered with the Jordanian authorities between 1952 and 1966, i.e. prior to the Israeli occupation, the vast majority, 74%, was agricultural. This trend was reversed. Of the 83 new cooperatives that were registered during the first decade of the occupation, only 25 were agricultural ones (Nakhleh, 1991). In addition most cooperatives that were registered before 1967 were frozen by the Israeli authorities (Nakhleh, 1991). Israeli policy of undermining agricultural development had a substantial impact on the Palestinian economy as it had been dominated by the agricultural sector.

Israeli authorities also undermined agricultural development in the West Bank and Gaza Strip by massive confiscation of agricultural land and by expanding their control over land and natural resources by the continuous confiscation as well as the restriction and/or prohibition of access to natural resources, such as water.

Generally, the subjugation of the Palestinian economy led to its integration into the Israeli economy, as a result of which Israel has emerged as the major beneficiary, which is most significantly reflected in the areas of labor and trade relations. Palestinians from the West Bank and the Gaza Strip became a pool of cheap labor dependent on employment in Israel, while trade relations between Israel and the Occupied Territories were characterized by a high surplus for Israel. The unequal relation between the two economies has been supported by Israel's efforts to contain and undermine any indigenous Palestinian economic development (Abed, 1988).

In order to consolidate their political control over the Occupied Territories, Israeli authorities prohibited any political activity that they perceived as a threat to their security. A major component of this policy consisted of the reliance on emergency regulations, imprisonment without trial, deportations, and military means as well as the continuous violation of human and civil rights (Cobban, 1984; Farsoun, 1989; Roy, 1996). With the Likud's coming to power in 1977 this policy was further intensified, as the increase in land confiscation, imprisonment and deportations of Palestinians demonstrated. As a result of the restrictions imposed by the Israeli occupying forces and the decrease of services provided by them, numerous Palestinian organizations emerged in the early and mid 1970s to meet the needs of the people affected by the Israeli occupation (Farsoun, 1997; Roy, 1996). Their creation was particularly aided by funds provided by the political factions represented in the PLO. Together with the already existing charitable organizations these new organizations were instrumental in delivering services to affected communities and thus in alleviating the impact of the occupation.

In contrast to those, which attempted to alleviate the hardships brought about by the Israeli occupation, a movement of grassroots organizations emerged during the late 1970s and early 1980s, which sought to disengage from Israel's control over the development of the West Bank and the Gaza Strip. Through their decentralized organization in local committees these organizations attempted to evade Israel's control as is reflected in their refusal to register with the Israeli authorities as non-profit organizations (Craissati, 1997; Roy, 1996).

Israel in turn employed various means to monitor and control the development of Palestinian civil society institutions. The most frequently used means of control was the

selective issuance of permits (Nakhleh, 1991).⁹⁹ Israeli control also included the requirement that indigenous organizations submit an annual report. Part of the monitoring process also involved the intervention of Israeli authorities in the elections of the organizations. Furthermore, the Israeli authorities retained control over the internal affairs of civil society institutions by approving funds for projects. The majority of the projects that were typically approved dealt with the maintenance of the existing infrastructure or the delivery of services. They thus aimed at sustaining current conditions rather than developing them. At another level the Israeli authorities approved only projects directed by Palestinians politically acceptable to them (Nakhleh, 1991).

The Israeli policies towards the West Bank and the Gaza Strip disallowed any development that would correspond to the needs of the Palestinian population there. In order to meet these needs, Palestinian civil society institutions developed several strategies. The development of civil society institutions as well as the strategies used by them to counter the Israeli occupation are examined in the following.

2. Civil society and the Palestinian political factions

a. Palestinian civil society before 1967

Palestinian civil society underwent a process of substantial transformation, corresponding to the creation of the PLO, the intifada – the uprising against the Israeli occupation – and the formation of the PA, all of which influenced its development.

⁹⁹ Under the Israeli occupation, civil society institutions in the West Bank were registered with the Jordanian Ministry of Social Welfare and with the Welfare Department of the Israeli military government. When Jordan severed its ties with the West Bank, three forms of registration emerged. Some institutions registered with Jordan, others with the Social Welfare Department, while a third category registered with both. However, in all three cases institutions were subject to the supervision by the Social Welfare Officer of the Israeli military government (Nakhleh, 1991).

Until the 1967 Israeli occupation civil society development had been shaped by the policies of the Jordanian government in the West Bank and the Egyptian in the Gaza Strip. The Egyptian government pursued a restrictive policy towards civil society institutions in the Gaza Strip. Similarly, in the West Bank, the Jordanian government regulated civil society development through tight social control, disallowing any politically oriented activities (Robinson, 1997).

Prior to the formulation of the PLO in May 1964 Palestinian civil society institutions were characterized by the dominance of an upper middle class leadership from the urban centers. This was true for all the sectors of health, education, social services as well as others. A major part of civil society, which developed in the wake of the creation of Israel in 1948 were charitable organizations (Nakhleh, 1991).¹⁰⁰ These were formed to provide services to the large number of refugees resulting from the creation of Israel and have since then been crucial in providing relief services. The latter included the delivery of services to marginalized groups of society, such as orphans, the elderly, and the disabled. The charitable organizations also offered literacy courses for women. In addition they provided financial assistance to needy Palestinians, and to families of prisoners, martyrs or wounded.

Under an upper and middle class leadership, which did not attempt to yield its traditional dominance, these organizations confined their work to service provision rather than addressing issues pertaining to existing inequalities within Palestinian society itself. Even the 'productive projects' introduced by some charitable organizations during the first year of the intifada did not aim at changing local economic structures, but were

¹⁰⁰ As will be discussed in Chapter IV women played a major role in the formation of charitable organizations.

rather designed as a means to meet the needs of Palestinians resulting from the boycott of Israeli goods (Hammami, 1995; Nakhleh, 1991).¹⁰¹

The interest of charitable organizations to sustain a status quo at the Palestinian level was a central feature of its non-political character. The latter is also mirrored in their perception of the Israeli occupation of 1967. Charitable organizations continued to focus on alleviating the impact of the occupation on the Palestinian population by providing services, rather than focusing on Palestinian development itself, as their successors, the committees attempted to.

Given their character charitable organizations never gained political prominence in that they overtly challenged the occupying authorities. Yet they remain important in providing services to the needy parts of society.

The creation of the PLO in May 1964 changed the character of Palestinian civil society by tying it to the national movement (Cobban, 1984; Rubenberg, 1983). Based on its policy of affiliating civil society institutions to the national struggle, the PLO developed its strategy of *sumud*, steadfastness, to counter the Israeli occupation. As is examined in the following section this policy had a transformative impact on the development of civil society.

b. *Sumud* - steadfastness

The formation of the PLO in 1964 represents the unification of the various existing political factions under one umbrella. This unification entailed the expansion of the PLO to a structure encompassing, in addition to political factions, a broad variety of

¹⁰¹ As is discussed in Chapter IV, the productive projects established by the women's committees during the intifada attempted not only to empower women by providing them with revenue, but also aimed at transforming the existing economic structures. Their successes, however, remained mixed.

umbrella institutions representing women, students, writers, labor unions, and journalists as well as others (Rubenberg, 1983).

The characteristic feature of the PLO was the division of all its institutions along factional lines, with Fatah representing the largest faction, followed by the Popular Front for the Liberation of Palestine (PFLP), and the Democratic Front for the Liberation of Palestine (DFLP) as well as a number of smaller factions. As it has been considered illegal in the Occupied Territories by the Israeli authorities, the PLO operated mainly outside the Occupied Territories. The PLO, however, maintained ties with Palestinians in the Occupied Territories by providing political guidance and financial assistance, which it channeled through its corresponding political factions.

Recognizing the ineffectiveness of military struggle in the Occupied Territories the PLO adopted the strategy of *sumud* - steadfastness. This strategy was announced on the 11th session of the PLO's parliament, the Palestine National Council, in January 1973. The strategy of *sumud*, steadfastness, was based on the assumption that the provision of financial assistance would aid the Palestinian population to endure the occupation. The primary political objective was to prevent the emigration of Palestinians from their land. Institutions receiving political guidance and financial assistance became in this manner, though not officially, affiliated with the respective political faction.

In addition to the political factions in the PLO, the Palestine Communist Party (PCP) had a large following in the Occupied Territories.¹⁰² In contrast to the other factions the PCP operated outside the PLO framework and provided, in addition to political guidance, financial assistance through its own funds. While it was a major political force in the Occupied Territories it continuously lost its influence to the benefit

¹⁰² The Palestine Communist Party became represented in the PLO in 1987.

of Fatah, which especially after the expulsion of the PLO from Lebanon in 1982 gained ascendance in the Occupied Territories (Hiltermann, 1991).

The provision of financial assistance and guidance by the PLO to the Occupied Territories had an instrumental impact on the development of civil society institutions. On the one hand, numerous institutions were created and existing ones expanded. On the other hand, this expansion was also marked by competition among political factions. Perceiving their affiliated institutions as a channel for mobilizing the Palestinian population the political factions sought to increase their political influence through them. As a result often the creation of civil society institutions did not necessarily respond to the existing needs of the communities but resulted from the factions' attempt to increase their political leverage (Hiltermann, 1991).

Each political faction represented on the PLO created its own civil society institutions, such as cooperatives, trade unions, students', youth and women's organizations (Muslih, 1995; Taraki, 1989). In addition a number of organizations emerged that focused on "strengthening municipalities and charitable organizations, establishing or expanding universities and colleges; founding newspapers and journals; and sponsoring housing projects, research centers, and a host of cultural, social, and charitable organizations" (Taraki, 1989).

In mobilizing the Palestinian population, Palestinian political factions pursued two related objectives, namely its organization as well as its control in its resistance to Israeli occupation (Hammami, 1995; Muslih, 1995; Taraki, 1989). Fatah, the largest faction within the PLO, explicitly states that 'disciplining the masses remains the most important task for Fatah. Fatah cadres have to be present in all institutions and sectors of

society. Only they (i.e. Fatah cadres) can ensure the disciplining of the masses. The Fatah cadres have to prevent the masses from initiating the revolution'.¹⁰³

In order to expand its institutions, the PLO channeled funds through the Joint Palestinian-Jordanian Committee. The provision of funds by political factions to civil society institutions proved an influential means to assert control over civil society. The PLO received substantial funding from Arab states, in particular the Gulf States. Funding to the PLO was channeled through the Palestinian National Fund that was established in 1964. Prior to 1967 contributions to the Fund came mainly from income taxes from Palestinians living in Arab host countries. Since the Arab summit meeting in Khartoum in 1967, Arab states contributed directly to this Fund (Cobban, 1984). Such funding was increased at the Baghdad Summit in 1978 to an annual sum of US \$ 150 million which was administered by the Joint Palestinian-Jordanian Committee. The availability of funds enabled political factions to build and expand their network of civil society institutions, although Fatah, received the bulk of the funds (Cobban, 1984; Taraki, 1989).

The close affiliation of civil society institutions to the respective political factions was not only mirrored in their financial dependence, but also the high leverage of the factions over internal development of the institutions. Decision-making in the civil society institutions was largely determined or influenced by the party leadership to the extent that the activities of civil society institutions were in line with the objectives of the factions with which they were affiliated (Jarbawi, 1995; al-Safadi, 1995; Hammami, 1995).¹⁰⁴

¹⁰³ Translated by the author from Baumgarten, 1991, p.190.

¹⁰⁴ The influence of parties on the development of civil society institutions has not been uniform. According to Muslih, especially cooperatives and mass organizations had succeeded to maintain some degree of autonomy from the influence of political factions. This is true for the initial phase of the intifada as well as for the 1990s when factions outside and within the PLO have weakened (Muslih, 1995).

The attempt of political factions to consolidate control over existing civil society institutions was best mirrored in the trade union movement. There, the trade movement was initially controlled by the two leftist factions within the PLO, the PFLP and the DFLP. As a consequence of Fatah's efforts to gain control over the trade union, the latter split along two lines in August 1981 resulting in the creation of two separate General Federations of Trade Unions, one being under the control of Fatah (Hammami, 1995; Muslih, 1995; Roy, 1996; Sahliyah, 1988; Taraki, 1989).¹⁰⁵

While the *sumud* movement was critical for expansion of existing and the creation of new civil society institutions, it revealed weaknesses, which ultimately led to its failure. Through its major feature, the attempt of the political factions to consolidate their position in the Occupied Territories, it failed to respond to the needs of all segments of society. Rather the *sumud* movement only befitted a small segment of urban-based Palestinian civil society institutions, which were led by members of the upper and middle class. In its social origin this leadership thus resembled that of charitable organization. Their major difference, however, was the strong links the institutions created by the *sumud* movement to the PLO.

Concentrating its efforts to the expansion and creation of institutions in urban centers, it largely neglected the needs of the marginalized Palestinian population (Taraki, 1989). More specifically it failed to address the needs of the rural population, which in addition to being exploited in Israel as cheap labor often remained deprived of access to basic services, such as those of health care and education. In response to the perceived failure of the *sumud* movement to improve the living conditions of the majority of Palestinians living in the Occupied Territories, a new approach to counter the Israeli occupation evolved in the late 1970s and 1980s (Taraki, 1989). The committees that were

¹⁰⁵ Fatah also played a role in the factionalization of the student movement.

formed at the grass roots level constituted the institutional embodiment of this approach, *sumud muqawim*, active steadfastness.

c. *Sumud muqawim* - active steadfastness

The *sumud muqawim* movement emerged as a response to the failure of the *sumud* movement. According to representatives of this approach, the only effective path in countering the Israeli occupation is a transformation of Palestinian society that would lead to self-reliance and halt the dependence of the Occupied Territories on Israel for employment and services. In this respect the committees stood in contrast to the *sumud* movement, which largely operated within the confines of the occupation, as its primary focus was to alleviate the hardship the occupation brought about.

By adopting a progressive social agenda the committees sought to redress inequities and existing contradictions in Palestinian society by involving neglected and marginalized groups of society in addressing these issues. In order to be responsive to the needs of the marginalized, the creation of local committees was required, according to this approach. The organizational structure of the committees was based on that of Voluntary Work Committees, in which a substantial number of committee members and leaders had gained their political experience.

The Voluntary Work Committees were created in 1972 by the Palestine Communist Party (PCP) and expanded from the Jerusalem and Ramallah areas to Nablus, Hebron and Jericho in the West Bank (Sahliyeh, 1988). The Voluntary Work Committees were formed by the volunteers from rural communities to provide services to neglected areas. These services included the paving agricultural roads, planting trees, and assisting in the harvest of fruits and vegetables (Hiltermann, 1991; Nakhleh, 1991; Sahliyeh,

1988). The Voluntary Work Committees underwent a considerable expansion. In the late 1970s the committees had increased to 37 with a volunteer membership of 1200 and to 96 committees with 6,500 volunteers in 1982 (Hiltermann, 1991; Nakhleh, 1991; Sahliyeh, 1988).

The committees of the *sumud muqawim* movement based their organizational structure and mode of decision-making on that of Voluntary Work Committees. All committees were organized at the local and regional levels under the umbrella of a union. Their decentralized structure was also characterized by democratic decision-making. More specifically, they involved previously marginalized groups from rural areas in the design and implementation of development projects that addressed the needs of these areas. A central feature of the committees was also the nature of its leadership which came from rural areas, refugee camps, and from lower classes.

There were, however, variations in the organizations of the committees. While the committees affiliated with the three leftist factions, the Palestine Communist Party (PCP), the Democratic Front for the Liberation of Palestine (DFLP), and the Popular Front for the Liberation of Palestine (PFLP) followed the above described mode of organization, Fatah had a more centralized structure. This structure also affected its agenda as it focused on the delivery of services defined by its leadership rather than involving the communities in the assessment of their needs and meeting them. In this aspect it resembled more the approach pursued by the charitable organizations.

While the emergence of committees was the result of an indigenous effort, rather than one that was directed by the PLO, their development was soon affected by the competition among the political factions. Thus, their formation was also influenced by "the factional constitution of the PLO, the competition to win and mobilize the

Palestinian public, and to secure a foothold in grass roots work among the people” (Nakhleh, 1991).

The influence of factional control is mirrored in the evolution of committees. Typically, the creation of a committee in one specific sector, was followed by the creation of further committees, each affiliated with one of the political factions. In the health sector, it was the Palestine Communist Party which formed in 1979 the first committee, the Union of Palestinian Medical Relief Committees (UPMRC). The UPMRC was followed by three additional health committees in the 1980s. The Union of Health Care Committees (affiliated with the DFLP) and the Union of Popular Committees for Health Services (later called the Union of Health Work Committees - affiliated with the PFLP) were both created in 1985, while the Union of Health and Social Services Committees, affiliated Fatah was formally established only in 1990 (Taraki, 1989).¹⁰⁶

A similar development can also be observed among agricultural committees. The Palestinian Agricultural Relief Committees, formed in 1983 by the Palestine Communist Party, was followed in 1986 by the Union of Agricultural Work Committees (affiliated with the PFLP) and the Centers of Agricultural Services (affiliated with the DFLP) (Nakhleh, 1991; Robinson, 1997a).¹⁰⁷

Women's committees underwent the same pattern in that the initial women's committee, the Federation of Women's Action Committees was followed by the Union of Palestinian Working Women Committees, the Union of Palestinian Women's Committees and Women's Committees for Social Work. Here it was the DFLP that created the first committee in 1978. The additional women's committees were created by the Palestine

¹⁰⁶ See Chapter V for an examination of their development.

¹⁰⁷ The agricultural committees gained importance during the intifada when their work focused on increasing self-reliance following the boycott of Israeli products by Palestinians (Nakhleh, 1991).

Communist Party, the Popular Front for the Liberation of Palestine and Fatah in 1980, 1981 and 1982, respectively.¹⁰⁸

Although the existence of various committees in one sector often resulted in duplication of their activities, their significance lies in their creation of a vast network of local committees. This network and its involving of previously neglected parts of the population constituted a shift from urban-focused development to one that encompassed rural areas. While their predecessors continued to exist, they were increasingly marginalized by the committees. This is especially true for the intifada during which the committees assumed a crucial role. Moreover, by involving large segments of society in their activities, the committees played an instrumental role in sustaining the uprising. In this role the committees not only formed part of an 'infrastructure of resistance' to the Israeli occupation, but also regarded themselves as the foundation of a future Palestinian state.

3. Palestinian civil society and the intifada

The intifada, the uprising against the Israeli occupation, began as a spontaneous uprising against the Israeli occupation. Its essential feature was civil disobedience, i.e. the withdrawal of Palestinian society from Israeli control. Actions during the intifada comprised the withholding of taxes to Israel, the boycott of Israeli produce, strikes and demonstrations, as well as mass resignation of police force and tax collectors working for the occupation authorities (Hiltermann, 1991; Robinson, 1997a; Tamari, 1991). In its initial phase, the intifada was not directed by the PLO but by Palestinian forces from the Occupied Territories, where factional divisions were subordinated in this common effort

¹⁰⁸ See Chapter IV for a discussion of their development.

(Hammami, 1995). The spontaneous character of the intifada was weakened with the creation of the United Leadership of the Uprising (UNLU) in early 1988, which consisting of representatives of the political factions, assumed the coordination of the activities of the various committees and the provision of political guidance (Robinson, 1997a; Taraki, 1989).¹⁰⁹

In addition to the existing committees, a vast network of so-called popular committees was organized at the local level to meet the needs of the Palestinian community, such as food storage and distribution. The latter also provided assistance during curfews and boycotts (Tamari, 1990).¹¹⁰ By coordinating their activities with the existing committees, in particular agricultural, health, and women committees, the popular committees formed together with the latter a 'vast infrastructure of alternative economic, social and political structures, thus enhancing communal solidarity'.¹¹¹ The expansion of the popular committees was substantial and reached 45,000 members in May 1988.¹¹² Similar to the previously created committees, the leadership of the popular committees came from refugee camps and villages thus leading to a further marginalization of the old traditional elite on which the PLO had relied (Sahliyah, 1988).¹¹³

Until the outlawing of the UNLU and its corresponding committees on 18 August 1988 by the Israeli authorities, popular participation had been extensive. As a result of its action popular participation decreased, centralization increased and factional division

¹⁰⁹ In the early phase representatives from Fatah, DFLP, and the PFLP were included. In March 1988 it was joined by the PCP. Islamic factions were not included. In the Gaza Strip the Islamic Jihad coordinated with UNLU, but the Muslim Brotherhood was not included. In August 1988, when Hamas was created, it issued separate leaflets and called for strikes on different days from UNLU (Taraki, 1989).

¹¹⁰ Baumgarten, 1991, p. 301.

¹¹¹ Tamari, 1990, p. 4.

¹¹² Robinson, 1997a, p. 66

¹¹³ On the loss of the PLO influence in the Occupied Territories see Abu Amr, 1994, p. 56.

intensified.¹¹⁴ This was true for the UNLU as well as its corresponding committees. The increased centralization resulted in the loss of grassroots and popular involvement. This loss weakened the role of the committees in sustaining the intifada considerably. In the case of the UNLU, the impact of its centralization was further enhanced through the appointment of prominent representatives from the four political factions in March 1990 (Urban, 1994).¹¹⁵

The appointment of prominent representatives to a centralized UNLU indicated a process of transformation through which the committees had been undergoing since their outlawing in August 1988. In this process the committees were transformed from organizations that promoted mobilization and self-reliance by involving the respective communities to ones that focused on development projects. The most central feature of the transformed committees as well as the institutions created by former committee members was that they ceased to rely on community involvement for their operations. In the transformation of the committees thus the leadership continued to exist, while the communities became insignificant in the operations of the committees.

This shift in paradigm took place in a changing political context, of which the most prominent features were the emergence of Hamas as a new political force, and the weakening of political factions caused in particular by the decline of their flow of funds.

The PLO's financial bankruptcy following the Gulf War had a direct impact on the institutions affiliated with the PLO's political factions. This is especially true for the leftist factions, while Fatah as the largest faction in the PLO, experienced only a relative decline. Moreover, following the creation of the PA a large number of Fatah-affiliated

¹¹⁴ Baumgarten, 1991, p. 301; Robinson, 1997a, p. 96.

¹¹⁵ These were Faysal al-Husayni (Fatah), Zahira Kamal (DFLP), Ghassan Khatib (PCP), and Hani Baydoun (PFLP) (Robinson, 1997a, p. 99). According to Urban this changed was reflected in the UNLU's Communique no. 41 of 12 June, 1989 (Urban, 1994).

institutions were either incorporated into the PA or became semi-governmental organizations (al-Safadi, 1995). The declining financial flow and the resulting weakening of the political factions decreased their leverage over the development of their affiliated committees, which in turn increased the latter's autonomy in determining their own agenda (al-Safadi, 1995; Hammami, 1995).

On the other hand, declining funds compelled committees to seek other sources of funding. These typically included European sources, which affected the structure and organization of civil society institutions as well as their agendas. Whereas the primary objective of funding originating from political factions was to mobilize as many Palestinians as possible against the Israeli occupation, European donors avoided supporting projects including political mobilization. This was reflected in their support of organizations that were not affiliated to one single faction but were rather cross-factional or even politically neutral. In order to meet these requirements, Palestinian institutions increasingly included political independents on their boards. While this development supported autonomy from factional control, it also initiated a dependency on foreign donors (Hammami, 1995). This was reflected in the change and adaptation of the committees in their agendas.

While previously the committees had relied on political mobilization and the inclusion of the communities for their operation, the use of European funds resulted in a shift to development projects, long-term planning and accountability to the funding institutions. As a consequence, this development corresponded to what Hammami calls the "professionalization of NGOs" (Hammami, 1995). The availability of Western funds not only aided the transformation of the committees into 'professionalized' NGOs, but also led to the creation of new institutions often by former activists of the committees. In contrast to the committees that had previously addressed the needs of marginalized

sectors of society, both, the newly created institutions and the transformed committees, focused on research and on the implementation of development projects without the involvement of the communities in their design and implementation.

However, the availability of Western funding at the end of the 1980s and beginning of the 1990s decreased substantially following the creation of the PA in 1994. While previously the NGO sector has been the primary recipient of funds, international donors subsequently diverted their funds to the PA. Until 1993 the NGO sector received an estimated US \$ 180 million per year. According to World Bank estimates, funding declined to US \$ 90 million in 1994 and to an estimated US \$ 60 million in 1995 and 1996.¹¹⁶ With the decline of PLO funds and the establishment of the PA, the number of NGOs decreased as many, especially those affiliated with the PFLP, DFLP and PCP, had to close down, while a large number of those affiliated with Fatah were absorbed into the structures of the PA.

Parallel to the weakening of political factions the changing political context was also characterized by the strengthening of Islamism as a new political force. This development is particularly reflected in the creation of Hamas as a wing of the Muslim Brotherhood in 1988 (Robinson, 1997a; Abu Amr, 1994). Similar to the political factions, Hamas created a network of committees, the *zakat* (charity) committees (Robinson, 1997a).

Hamas evolved as a political force that operated outside the PLO framework and without coordinating its activities with those of the committees, as evidenced in the intifada when Hamas called for its own days of strike and issued its own pamphlets through which it, similar to the UNLU, provided the population with political guidance during the intifada.

¹¹⁶ Palestinian NGO Project. Public Discussion Paper. 15 July 1997. The World Bank, Al-Ram, West Bank.

In contrast to the other committees which were largely secular, Hamas adopted Islam as its basic system of values. Its increasing influence during the intifada is reflected in its success in imposing the wearing of the veil.¹¹⁷ It was in particular the transformed committees which together with Hamas, represented a threat to the PA. Both were characterized by an agenda that clearly contrasted that of the PA. Both have emphasized the transformation of Palestinian society and have used their affiliated institutions to this end.

Charitable organizations, in contrast, which have been characterized by a conservative leadership composed of members from the upper and middle class did not, due to their non-political nature, possess the potential to develop to a significant political force and thus did not represent a threat for the PA at the time of its creation (Robinson, 1997a).¹¹⁸

Hamas envisaged the creation of a society based on Islamic values, while the committees, based on their experience during the intifada promoted a political order based on democratic and secular values. In order for the PA to prevent a further strengthening of the influence of Hamas and of its opposition to the negotiations and as part of its own obligations to meet Israel's security concerns, the PA aimed at weakening Hamas through the mass arrests of its members and the closing down of its affiliated institutions.

The PA's effort to control the development of the committees and their successor institutions was countered by the latter. To this end they established a network, the

¹¹⁷ See Chapter IV for a further discussion.

¹¹⁸ Charitable organizations are organized in the Union of Charitable Societies, which constitutes the oldest network of civil society institutions. Due to the decline of Arab funds in the late 1980s and 1990s the number of charitable organizations in the Union decreased from 400 in the 1980s to only 173 in 1995, as many charitable organizations ceased to exist.

Palestinian NGO Network - PNGO, which represents the institutional embodiment of their vision of a political order and of their relation with the PA.

It is through this network that this coalition of institutions has aimed at lobbying for change of PA policy. The strategies PNGO has employed to this end as well as its nature are discussed in the following.

C. Palestinian Civil Society and the PA

The creation of the Palestinian NGO Network, PNGO, was formed as a concerted effort of the committees and their successor organizations as well as newly created institutions, now NGOs, to promote their role in the new political context that followed the signing of the Declaration of Principles in September 1993.¹¹⁹ PNGO assumed a crucial role in the NGOs' response to the PA's attempt to control them and restrict their role as is reflected in the *Law Concerning Charitable Societies, Social Bodies and Private Institutions*.¹²⁰

The network consists of over seventy organizations of research centers dealing with issues of democracy, of human rights organizations, committees and their successor organizations as well as organizations from various sectors, such as education and health. PNGO's member organizations are unified in their view of their role as a complementary to that of the PA and the means in which their relation to the PA should be regulated. It explicitly states that "laws attempting to regulate relations between non-governmental

¹¹⁹ According to Nakhleh, the term non-governmental sector (as opposed to governmental sector) can only be applied after the creation of the PA. Only then was a political body created that possesses state-like features (Nakhleh, 1991).

¹²⁰ Interview, Rana Bishara, PNGO, October 1997.

organizations and the central Authority [i.e. the PA] must emerge out of the specificity of the Palestinian developmental experience, the democratic tradition, and human rights."¹²¹

In order to ensure a democratic political order, PNGO's major task in the new political context has been to influence policies in "various social structures, and fields".¹²² In order to do so a central requirement for membership is that NGOs be politically autonomous from the PA. More specifically their leaders are required not to occupy the position of a Minister, his or her Deputy, or that of a Director General in the PA. By excluding those NGOs that are affiliated with the PA, the PNGO has attracted many NGOs whose members have been affiliated with the leftists factions, such as the Democratic Front for the Liberation of Palestine (DFLP), Popular Front for the Liberation of Palestine (PFLP), and the Palestine Communist Party (renamed People's Party) (Hammami, 1995).

The PNGO outlined its objectives on the relations between the PA and NGOs in its *Suggested Framework for Relations between Palestinian NGOs and the Palestinian Authority*.¹²³ After forging a common point of view, the PNGO also succeeded in mobilizing the Union of Charitable Societies against the PA's proposed associational law.¹²⁴ While coordination with the Union of Charitable Societies was lacking in the initial phase after the formation of PNGO, it prepared a joint position paper in September 1996 presenting the principles that these two organizations believed should form the basis for a law regulating NGOs. This is reflected in its paper on the *Position of the Palestinian*

¹²¹ Documents of the Palestinian Non-governmental Organization Network (Jerusalem: The PNGO Network, June 1996), p. 5.

¹²² Documents of the Palestinian Non-governmental Organization Network, (Jerusalem: The PNGO Network, June 1996), p. 8.

¹²³ Interview, Rana Bishara, PNGO, November 1997. PNGO also supported its position with a comparative study on NGO legislation commissioned to a lawyer, Hiba Hussein. See Hussein, 1995.

¹²⁴ Up to 1996, when the Union joined ranks with the PNGO to formulate a common position on the associational law proposed by the PA, the Union's political role had remained insignificant.

*NGO network and the Union of Charitable Societies on the Legal Structures Regulating Palestinian NGOs.*¹²⁵

Several articles in the PA's proposed law were criticized by the PNGO, such as the registration and monitoring of NGO activities. According to the associational law as proposed by the PA, NGOs would require, in addition to their registration with the Ministry of Interior, a license issued by the Ministry of Social Affairs. The latter can thus reject or accept the 'licensing'. Moreover, it is in particular the Minister who decides whether an NGO be granted a license.¹²⁶ PNGO in contrast advocated the registration with the Ministry of Justice.

The PNGO's goal has been to lobby for the inclusion of its own vision of the law into PA legislation. To those end it pursued a two-fold strategy: On the one hand, it established contacts with the ministries of the PA.

In several workshops from August to November 1996, the PNGO attempted to reach a consensus with the PA on the associational law. The workshops were attended by the Ministry of Planning and International Cooperation (MOPIC), the ministries of Interior, Justice, Social Affairs as well as the General Union of Palestinian Women, PNGO, and the Union of Charitable Societies. In these workshops the PNGO did not succeed in imposing its vision. The difference between the PA and the PNGO remained and centered around the issues of registration and dissolution of NGOs, the extent of PA involvement in the operation of NGOs, and the monitoring of NGO activity by PA official bodies. Although the PNGO could not reach an agreement, it still could achieve the postponement of the associational law. The PNGO sought at the same time to influence legislation by establishing linkages with the Palestinian Legislative Council

¹²⁵ Interview, Rana Bishara, PNGO, November 1997.

¹²⁶ Interview, Rana Bishara, PNGO, November 1997.

(PLC). The PNGO's efforts resulted in the PLC's adoption of six of the nine articles proposed by PNGO, in a first reading on 30 May 1998. Of particular importance were the articles dealing with the registration of NGOs and the dissolution. In both cases PNGO's proposed articles were adopted by the PLC.¹²⁷ The articles proposed by the PNGO and adopted by the PLC foresee that NGOs will register with a bureau at the Ministry of Justice. Furthermore, in contrast to the PA's law as originally conceived, the associational law proposed by the PNGO would require NGOs only to register and not to obtain a license from the Ministry of Interior.

However, while the PNGO could achieve the adoption of the majority of its proposed articles, the most contentious issue, namely that of registration of NGOs with the Ministry of Interior was re-introduced in the law signed by the Head of the Executive, Yasser Arafat. Arafat had returned the law to the PLC after receiving it for signature following the PLC's third reading. His amendment included the provision that NGOs be registered with the Ministry of Interior. Although the majority of the PLC voted against the amended article, Arafat's version was declared by presidential decree as law. This not only reflects the violation of PLC regulation, but also indicated the marginalization of the PLC by the PA Executive. In the absence of a Basic Law the PA did not face any legal constraints to ignore the PLC's vote and could thus impose its own version of the associational law.

While PNGO succeeded in inducing the PLC to adopt the majority of the articles of its own proposed law, its success could not be translated into the promulgation of the law. A major factor accounting for the failure of PNGO was its inability to lobby with the PA for change. Given the marginalized role of the PLC in relation to the PA's Executive, the suggested law was ignored by the latter. Realizing that it could not achieve a

¹²⁷ Interview, Rana Bishara, PNGO, October 1998.

comprehensive framework that would regulate the relation between the PA and civil society institutions, PNGO reoriented its focus on issues confined to specific sectors. In particular it shifted its emphasis on lobbying for a Law of the Judiciary Authority, a Civil Status Law, Health Insurance Law and a Law of Public Assemblies. As in the case of the associational law, the PNGO has established linkages with the PLC in order to influence legislation.¹²⁸

D. Conclusion

As the above discussion has demonstrated the development of Palestinian civil society has been shaped by the Israeli occupation as well as by the policies that Palestinian political factions pursued as a means to mobilize the population in the Occupied Territories against the Israeli occupation. Furthermore, civil society institutions served political factions as a means of controlling mass mobilization as well as expanding their influence. As a result, the development of civil society institutions was largely determined by their affiliation with particular political factions. With the weakening of political factions in the late 1980s and 1990s civil society institutions experienced increased space for their development. The weakening of the Palestinian political factions that reached its peak after the establishment of the PA has offered new avenues for the formation of civil society institutions independent of the influence of political parties. While factional control has been decreasing the newly established PA has been attempting to contain civil society development.

The newly established PA has attempted to regulate its relation with civil society as reflected in its dealing with the NGO sector. In order to counter PA control, an

¹²⁸ Interview, Rana Bishara, PNGO, October 1998.

important part of the NGO sector has created the PNGO in order to influence emerging PA legislation. The PNGO constitutes a horizontal network of NGOs that share a common vision on their relation with the PA. While initially the PNGO seemed successful in introducing its proposed associational law into PA legislation, it ultimately failed on the most contentious issue of the law, namely that of registration. Two factors account for this: on the one hand, in the absence of a Basic Law the PA Executive did not face constraints to the imposition of its own version. On the other hand, the PNGO did not succeed in inducing change in the ministries positions on the proposed law. While the PLC's adoption of the majority of the PNGO's propositions constitutes a success for the PNGO, the success could not be translated into substantial gains, as the PLC remains a body that has been largely marginalized by the PA's Executive.

The PNGO remains the most comprehensive NGO network as it includes NGOs from various sectors. In addition to the formation of the PNGO, NGOs from other sector formed networks in an attempt to influence PA policy, such as health and women's organizations. The latter are discussed in the following chapter.

CHAPTER IV: WOMEN'S ORGANIZATIONS: FROM COMMITTEES TO NGOs

A. Introduction

Women's organizations have constituted an important component of Palestinian civil society. Since its first manifestation at the beginning of this century, women's activism has undergone considerable change. While at the beginning of this century women's activism was limited to a small circle of women, it expanded substantially during the 1970s and 1980s through the inclusion of women groups who had been previously excluded from political activism. Increased participation of women reached its peak at the beginning of the intifada, but contracted again at the end of it. Similar to other civil society institutions, the development of women's organizations has been shaped by the context of the Israeli occupation.

Until the creation of the PA, women's organizations formed part of the national struggle against the Israeli occupation. This is reflected especially in their agenda, which was subordinate to that of the national movement. In the late 1980s, however, a process of transformation was initiated that provided women's organizations with the opportunity to focus on women's issues. Moreover, following the creation of the PA, women's organizations have almost exclusively focused on women's issues. The PA in contrast has attempted to marginalize women as reflected in the process of its consolidation. As a result women's organizations have attempted to influence PA policy with the objective of improving the position of women in Palestinian society. This chapter examines the means and strategies women's organizations have adopted to influence PA policy. As current women's organizations are the result of a transformation process that had its roots at the

beginning of the century, this examination is preceded by an outline of their development in this earlier period.

B. Development of Women's Organizations

1. The origins of women's organizations in the Occupied Territories

The first manifestation of women activism dates back to the beginning of this century when upper and middle class women established charitable organizations. The most active one formed at the beginning of the century, the Palestinian Women's Union, provided "both the nucleus and a framework for later women's initiatives in Palestine".¹²⁹ As in the case of all charitable organizations its activities were restricted to urban areas and focused on the organization of demonstrations against the Balfour Declaration and on protesting the influx of Jewish immigrants to Palestine.¹³⁰

In this role, the Union as well as other women's organizations complemented the activities of the male dominated Palestinian national movement and thus formed part of the national struggle (Gluck, 1995).¹³¹ Moreover, women's organizations were often composed of female relatives of the male national leaders (Abdo, 1994; Gluck, 1995; Fleischmann, 1995).

An important step in the consolidation of charitable organizations was the expansion of female organization at a national level. This development culminated in the establishment of the Palestine Arab Women's Congress on 26 October, 1929 (Kawar, 1994; Sayigh, 1992).¹³² The significance of the Congress is that it laid the foundation for

¹²⁹ Sharoni, 1995, p. 58-59.

¹³⁰ Jad, 1995, p. 226.

¹³¹ Hiltermann, 1991, p. 129; Holt, 1996, p. 20; Jad, 1995, p. 226.

¹³² Daraghmah, 1991, p. 41; Fleischman, 1995, p. 22-23; Holt, 1996, p. 14.

a network of charitable organizations which became crucial in delivering services to the Palestinian refugees that were created following the 1948 Palestinian-Israeli war and the creation of Israel (Nakhleh, 1991).¹³³

The creation of Israel in 1948 and the mass exodus of Palestinians led to the weakening of the male-dominated national movement. As a result of the latter, women's organizations abandoned their political involvement and focused almost exclusively on charitable work and social services, such as the provision of health care, care for the elderly and by maintaining nursery schools and orphanages (Fleischman, 1995; Gluck, 1995; Sayigh, 1992). In addition to the existing charitable organizations, a number of organizations were established between 1948 and 1967 to deal with the refugee disaster that was brought about in 1948. The majority of these organizations were created by women who were, like their predecessors, characterized by an urban and middle class leadership, mostly from notable families (Fleischmann, 1995).¹³⁴ Similar to other charitable organizations, these were located in urban areas. The most prominent charitable organizations that were established during this period are: Dar al-Tifl al-Arabi, the Red Crescent Society, the Society of the Wounded Militant, the Orphans' Home, the Family Welfare Society, the Home of the Girls' Orphanage, al-Maqassed Society and Inaash al-Usra. The latter, which was established in 1965, developed into the largest charitable organization under its founder Samiha Khalil (Sayigh, 1992).¹³⁵

Charitable organizations remained the only channel for women's participation in the Occupied Territories. While women had played an instrumental role in the creation of charitable organizations and their operation, their involvement in charitable organizations declined. By the early 1980s, the number of women heading a charitable organization and

¹³³ Lesch, 1983, p. 48; Daraghmah, 1991, p. 51; Jad, 1995, p. 226.

¹³⁴ Holt, 1996, p. 14; Jad, 1995, p. 226.

¹³⁵ Daraghmah, 1991, p. 92.

female membership accounted for less than 50%.¹³⁶ This trend continued throughout the 1990s: “Now (i.e. in the 1990s) they (i.e. women) still do most of the work, but men have tended to take over the leadership”.¹³⁷ The decline in women’s participation is largely due to their transfer to the women’s committees that were created in the late 1970s. Charitable organizations continue to play an important role in the delivery of social services. In contrast to women’s committees, which developed in the 1970s, their political role, however, has remained limited.

A turning point in the development of women’s activism was the creation of the Palestine Liberation Organization (PLO). The establishment of the PLO in 1964 not only provided a new channel for women’s participation, especially outside the Occupied Territories, but more importantly tied women’s activism in the Occupied Territories, to the national struggle. In an effort to integrate women activists into the national struggle, the PLO created the General Union of Palestinian Women (GUPW).

2. The GUPW – the PLO institution for women

The 1967 Arab-Israeli war, through which Israel extended its occupation over all of the West Bank and the Gaza Strip, transformed the PLO into a “mass representative organization” (Sayigh, 1992).¹³⁸ The PLO sought to integrate the dispersed Palestinian communities by creating an extensive institutional structure. The creation of the General Union of Palestinian Women (GUPW) constituted part of this effort.¹³⁹

¹³⁶ Debus, 1986, p. 164.

¹³⁷ This, according to the president of the Federation of Charitable Societies, quoted in Sayigh, 1992, p. 473-474).

¹³⁸ Jad, 1995, p. 229.

¹³⁹ The GUPW was created in 1965 but became active after 1967 and was headed by Islam Abdullah Hadi (Kawar, 1994; Jad, 1995, p. 230; Augustin, 1993, p. 28; Holt, 1996, p. 21).

The GUPW became the main PLO institution through which women's participation was channeled and the only vehicle for women participation in the PLO's Executive Committee (Kawar, 1994). As in the case of other mass organizations, the PLO's move to institutionalize mass mobilization entailed their control and, as a result, the loss of their autonomy (Gluck, 1995; Peteet, 1991).¹⁴⁰ As the PLO was declared illegal by Israel, the GUPW operated mostly underground in the Occupied Territories, where it provided the framework for a majority of charitable organizations (Sayigh, 1992). In the Occupied Territories, Samiha Khalil, who headed the largest charitable organization, the In'ash al-Usra, was the president of the West Bank branch of the clandestine GUPW.

As in the case of other mass organizations of the PLO, the GUPW was characterized by the division along factional lines. More specifically, the women's organizations in the GUPW was represented on the basis of their factional ties. As a result, adherence to the affiliated political faction became the overriding principle of organization within the GUPW (Hiltermann, 1991).¹⁴¹ Factional divisions within the GUPW had direct implications on the relation among various women's organizations represented in the GUPW, limiting cooperation among them, as women leaders "related more to leaders of their own factions than to each other" (Kawar, 1994).¹⁴² Through the incorporation of the GUPW into the PLO as one of its mass organizations, it had to rely on PLO funding, which it received from the Palestine National Fund (PNF). As the disbursement of funds proceeded in line with factional strength, Fatah, the largest

¹⁴⁰ The PLO's mass organizations included labor unions and professional union, as well as teachers' writers' and writers' organization.

¹⁴¹ Peteet, 1991, p. 63-65.

¹⁴² Gluck, 1995, p. 8.

political faction in the PLO, received the bulk of the allocated funds. As a result it has been able to maintain the largest network of programs (Kawar, 1994).¹⁴³

The dependence of women's organizations in the GUPW on PLO funds consolidated the influence of political factions on the women's organizations affiliated with them. The objective of political factions to mobilize as many women as possible was reflected in the programs of women's organizations, which were designed to mobilize women as a social group, rather than to empower them by addressing the social and economic conditions that sustain the disadvantaged status of women.¹⁴⁴ Even the leftist political factions, such as the DFLP and the PLFP, although acknowledging the relevance of 'women's issues' failed to challenge the existing social order.¹⁴⁵

The failure to address such issues influenced the relation of the GUPW with women's organizations. Women were approached by the GUPW as program beneficiaries rather than as decision-makers or directors of projects and programs, such as early childhood development or vocational training (Sayigh, 1992). In its practice the GUPW thus resembled charitable organizations. In contrast to the latter, however, the GUPW maintained strong links to the PLO. The national struggle received preeminence over women's issues. All women's organizations in the GUPW followed the dominant view of the national movement, namely that women's liberation should follow national liberation (Tamari, 1991).

Jad links the lack of a feminist agenda to the absence of women in the decision-making bodies in the PLO. She notes that no woman has ever served on the PLO

¹⁴³ Petect, 1991, p. 63-65.

¹⁴⁴ Holt, 1996, p. 26.

¹⁴⁵ Holt, 1996, p. 25.

Executive Committee and only eight, all representatives of the GUPW, out of the 426 members of the Palestine National Council (PNC) were women.¹⁴⁶

While the GUPW operated officially in the diaspora, it maintained strong ties with the Occupied Territories. This was especially true after the adoption of the strategy of *sumud* by the PLO in 1973.¹⁴⁷ As part of this strategy the GUPW provided material assistance and political guidance to women's organizations there. As a result a number of charitable organizations headed by women could expand their programs. While their incorporation into the national movement suggest the adoption of a political agenda, the activities remained unchanged. Moreover, both their agenda and their view on the role of women in Palestinian society continued to be in line with dominant view expressed by the national movement in general and the GUPW in particular. According to this view the role of women was regarded as subordinate to that of the national struggle. This is most explicitly expressed by Samiha Khalil, head of the largest charitable organization and president of the GUPW West Bank branch. Explaining the objectives of her organization in educating girls and the future role she envisioned for them, she maintains, "when a girl begins to earn money she may begin to impose conditions on her family. We (i.e. the In'ash al-Usra, Khalil heads) don't encourage such a spirit in our girls. To open the door too wide would cause a bad reaction".¹⁴⁸

As in the case of other organizations that received *sumud* funds, women's charitable organizations focused on urban area, thus neglecting the needs of the majority of Palestinian who live in rural areas. When the efforts of organizations following this

¹⁴⁶ Figures for 1987, see Jad, 1995, p.230.

¹⁴⁷ The notion of *sumud* was adopted by the PLO to reduce the impact of the Israeli occupation through material assistance and the delivery of social services. See Chapter III for a discussion.

¹⁴⁸ Quoted in Haj, 1992, p. 776.

concept proved a failure, as the material assistance did not succeed in improving Palestinian living conditions, a new response to the occupation emerged, the *sumud muqawimm* - active resistance. It departed from the assumption of *sumud*, which attributed underdevelopment in the Occupied Territories to the Israeli occupation. Instead it sought to address issues of underdevelopment by transforming Palestinian society itself. The objective was to solve issues of development at the grassroots level. Development, according to this approach, involved those parts of society that were mostly affected by unequal economic, social and political conditions. To this end a network of local committees was created to deal with such issues as health, labor, agriculture and others. The emergence of the women's committees formed part of this development.

3. The emergence of women's committees

Several structural changes provided the context for the emergence of women's committees. Since the onset of the Israeli occupation in 1967 profound changes led to socio-economic and political transformation in the West Bank and the Gaza Strip that had an impact on the role of women in Palestinian society.

A major transformation at the economic level resulted in the substantial reduction of agricultural land. This was caused by the decline of agriculture in importance, but more importantly by the continued confiscation of Palestinian land by the Israeli authorities in order to expand land available for Jewish settlers. This development forced Palestinian farmers to work as cheap wage labor in Israel. As women constituted the vast majority of agricultural labor, they were affected most by the decline of agricultural land. In contrast to Palestinian men who sought employment in Israel, the majority of

Palestinian women stayed in the West Bank and the Gaza Strip working typically in the textile industry, manufacturing products subcontracted to them by Israeli factories.¹⁴⁹

A more important factor that transformed the traditional role of women was caused by deportations and imprisonment of men by the Israeli authorities. In the absence of men, which was also caused by their migration, many women had to assume the responsibilities as heads of household. This development implied a change in the division between the public and private sphere and rendered women more 'visible' in Palestinian society.¹⁵⁰

In addition, new avenues for women's participation contributed to the increased politicization of women. Universities played an important role for the politicization of women, as the number of female students increased considerably as well as their involvement in student activism.¹⁵¹ It was in particular the Voluntary Work Committees created in the early 1970s that constitute a "point of entry for women's political participation". The Voluntary Committees were instrumental in the development of women activism and the creation of women's committees.¹⁵²

As in the case of the creation of other committees the initiator of the first women's committee, the Women's Work Committee (WWC) in March 1978, came from rural areas and had strong ties with a left-leaning faction. Although it was not officially affiliated with the Democratic Front for the Liberation of Palestine, its establishers maintained strong ties with it.¹⁵³

¹⁴⁹ Haj, 1992, p. 769; Dajani, 1993, p. 108.

¹⁵⁰ This development is comparable to the development in Arab states where migration of male labor (especially to the Gulf state) has left women as the head of their families.

¹⁵¹ Augustin, 1993, p. 22.

¹⁵² Jad, 1995, p. 231; see also Hiltermann, 1991, p. 42.

¹⁵³ Hiltermann, 1991, p. 133; Jad, 1995, p. 232.

Similar to other committees and as a result of the political factions' attempt to increase their constituency by creating committees, the WWC split along factional lines in the early 1980s. The original committee became now formally affiliated with the Democratic Front for the Liberation of Palestine and was renamed the Federation of Palestinian Women's Action Committees.¹⁵⁴ It soon developed into the largest committee with 34 local committees and 1485 members. The vast majority, 785 were working women.¹⁵⁵ In March 1980, the Union of Palestinian Working Women's Committees was founded and affiliated with the Palestine Communist Party.¹⁵⁶ A year later the Palestinian Women's Committees (later called the Union of Palestinian Women's Committees) was established. It was affiliated with the Popular Front for the Liberation of Palestine.¹⁵⁷ In June 1982, Fatah established its Women's Committee for Social Work (WCSW) as a response to the creation of the three above-mentioned committees.¹⁵⁸

Thus, the development of women's committees was determined from its beginning by the competition among factions to mobilize the largest number of women possible. Although the committees focused on different target groups, the existence of several committees resulted in a high degree of duplication of their work (Roy, 1996). The Union of Palestinian Women's Committees (affiliated with the PFLP) focused on educated women from urban middle classes and students; the Union of Palestinian Working Women's Committees (affiliated with the Palestine Communist Party) focused on working women, and the Federation of Palestinian Women's Action Committees (affiliated with the DFLP) in addition to housewives, on working women.¹⁵⁹

¹⁵⁴ Jad, 1995, p. 232.

¹⁵⁵ Debus, 1986, p. 175.

¹⁵⁶ Holt, 1996, p. 26; Jad, 1995, p. 232.

¹⁵⁷ Augustin, 1993, p. 22; Holt, 1996, p. 26.

¹⁵⁸ Holt, 1996, p.26; Augustin, 1993, p. 22).

¹⁵⁹ Hiltermann, 1998, p. 43; Sayigh, 1992, p. 22; Kawar, 1996, p. 102.

Although some components of the committees programs were similar to those of charitable organizations in that they offered 'traditional' vocational training, such as knitting and sewing, they differed in several aspects.¹⁶⁰ More specifically their programs concentrated on empowering rural and refugee women through education, leadership training, employment, and the provision of child care.¹⁶¹ This is especially true for the three leftist factions, the Democratic Front for the Liberation of Palestine, the Popular Front for the Liberation of Palestine, and the Palestine Communist Party. In order to empower women these factions involved women in the formulation and implementation of their programs as well as in the decision-making process of the committees.

The Federation of Palestinian Women's Action Committees (affiliated with the DFLP), for example, involved mothers of rural and refugee background in the education of their children in the FPWAC's kindergartens (Najjar, 1992). In addition, through their decentralized structure, the committees remained responsive to the need of rural and refugee women.¹⁶² It was only the Fatah-affiliated WCSW that was ideologically close to the charitable organizations. In contrast to the other three committees, the WCSW was characterized by a more centralized structure. In addition, similar to charitable organizations, it provided services to women rather than involving them in the operations of their programs.¹⁶³

Due to the difference in approach, cooperation between the women's committees and charitable organizations remained weak (Najjar, 1992). In contrast to charitable organizations, in which only a limited number of women participated in the formulation and implementation of programs, the women's committees sought to ensure broad

¹⁶⁰ Jad, 1995, p. 233-234.

¹⁶¹ Najjar, 1992, p. 146.

¹⁶² Augustin, 1993, p.23.

¹⁶³ Holt, 1996, p.26; Jad, 1995, p. 232.

participation by all women.¹⁶⁴ As a result of their efforts, women's committees expanded and within two years after their formation they established branches in all parts of the West Bank and the Gaza Strip, especially in rural areas. These were organized in local and regional committees which were led by an executive committee.¹⁶⁵ Although the number of participating women did not exceed three percent of the total female population in the initial years after their establishment their importance was in their creation of infrastructures that constituted in its mode of organization of departure to the existing one.¹⁶⁶ The low participation was due to the initial reluctance of women to be involved in a political program. Low participation, however, was reversed during the intifada when as a result of the creation of popular committees, the number of women organized in the women's committees increased substantially. Moreover, the committees assumed a crucial role in sustaining the intifada, in that they provided the foundation for the mobilization of women.¹⁶⁷

C. The Development of Women's Committees

1. Women's committees and the intifada

Various authors point to the crucial role women's committees played during the intifada as "the main engines behind the activism of women in popular committees and other frameworks".¹⁶⁸ More specifically, the substantial increase in the number of women involved is intimately linked to the role women's committees played in the creation of

¹⁶⁴ Holt, 1996, p. 25.

¹⁶⁵ Augustin, 1993, p. 22; Holt, 1996, p. 26; Daraghmah, 1991, p. 67; Jad, 1995, p. 234; Kamal, 1998, p. 85.

¹⁶⁶ Daraghmah, 1991, p. 17; Kamal, 1998, p. 85.

¹⁶⁷ Strum, 1998, p. 65.

¹⁶⁸ Hiltermann, 1991, p. 197; see also Augustin, 1993, p. 30; Holt, 1996, p. 27; Jad, 1991, p. 133.

popular committees in the neighborhoods, villages, and refugee camps. In this role women's committees served as a model for the popular committees.¹⁶⁹

The popular committees were created in order to meet the needs of the population affected by the intifada. Five major popular committees existed, each dealing with agriculture, food storage, medical services, and guarding of neighborhoods against the Israeli occupation.¹⁷⁰ For example, when schools were closed by the Israeli army in 1988, the popular committees provided education to children in homes, churches and mosques.¹⁷¹ The popular committees also provided assistance to families in need, organized guarding of neighborhoods against the Israeli army, and processed and distributed food in times of curfews.¹⁷² The number of women in the popular committees reached more than fifty percent of their members, as previously marginalized groups of women from rural areas and refugee camps participated in the intifada.¹⁷³

In addition to popular committees, women were also instrumental in the establishment of production cooperatives, which mainly operated at the household level. In addition to food processing some cooperatives also manufactured clothing. The relation between women's committees was close in that usually women affiliated with women's committees sold their home-produced goods through the women's committees.¹⁷⁴ While cooperatives played a key role in overcoming food shortages resulting from any curfews and the boycott of Israeli products, their success in improving

¹⁶⁹ Augustin, 1993, p. 29; Gluck, 1995; Holt, 1996, p. 29.

¹⁷⁰ Sharoni, 1995, p. 73.

¹⁷¹ Hiltermann, 1994, p. 196; Robinson, 1997a, p. 96-97.

¹⁷² Augustin 1993, p. 30.

¹⁷³ Hiltermann, 1991, p. 194; Strum, 1998, p. 68; Tamari, 1991, p. 21.

¹⁷⁴ Abdo, 1995, p. 37-38.

the situation of women is mixed. This is particularly due to the lack of a clearly defined strategy to achieve the proclaimed goals.¹⁷⁵

While prior to the intifada women's committees succeeded in recruiting only a limited number of women, their numbers have increased considerably since then. In the case of the FPWAC (affiliated with the DFLP), the number of women reached 10,000.¹⁷⁶ In the case of the UPWC (affiliated with the Palestine Communist Party) it was almost 5,000 compared with a few hundred before the intifada.¹⁷⁷ Similarly, the PFLP reached a membership of 5-6,000 and the Fatah-affiliated committee 8,000.¹⁷⁸ This increase is a direct result of the creation of the popular committees and the involvement of a high number of women. Moreover, while factional differences among women's committees had prevailed prior to the intifada, these differences decreased in importance. Rather women's committees aimed at mobilizing as many women as possible, regardless of their political affiliation. This strategy not only contributed to the substantial increase of women activists but also to the cooperative spirit that prevailed during this phase.

It was also in the initial phase of the intifada that women's committees increased cooperation with other committees, in particular those active in the sectors of health and agriculture.

Women's committees also underwent structural changes in this phase. In order to ensure a high level of responsiveness towards the immediate needs resulting from the intifada, the committees, with the exception of the women's committee affiliated with

¹⁷⁵ Hiltermann, 1991, p. 197; Abdo, 1995, p. 37-38; Najjar, 1992. The cooperative, *Our Production is our Pride*, is a case in point. While it proclaimed to enhance the social and political status of women without, it failed to develop a strategy to achieve this aim (Hiltermann, 1998, p. 45).

¹⁷⁶ Abdo, 1994, p. 159.

¹⁷⁷ Augustin, 1993, p. 23.

¹⁷⁸ Kavar, 1996, p. 102.

Fatah, underwent de-centralization allowing a high level of independent decision-making at the local level.¹⁷⁹ Decentralization was further enhanced through the isolation of the West Bank from the Gaza Strip during the intifada. As a consequence, women in the Gaza Strip took decisions independently from the West Bank branch.¹⁸⁰

While women's committees benefited from the increasing participation of women, this process of transformation changed their initial agenda. In particular the close links they established with popular committees affected a shift in their agendas. Whereas prior to the intifada women's committees attempted to empower women by addressing the issues that sustain their subordinate position in Palestinian society, they now focused on cooperation with the popular committees on responding to the needs that arose from the situation brought about by the intifada. More specifically their activities focused on teaching and rendering services to the effected population.¹⁸¹ Women thus retreated in the role they had traditionally occupied. While this shift from a political program to one that focused on service delivery contributed to the increase in membership, as women's participation was viewed in this case as socially acceptable, it also led to their weakening.¹⁸² In addition to their adoption of the Agenda of popular committees, to the extent that the activities of both became indistinguishable, several further developments formed an impediment to their implementation of a feminist agenda. Of particular importance is the creation of the Unified Leadership of the Uprising (UNLU). Through the UNLU, in which representatives from Fatah, the Popular Front for the Liberation of Palestine and the Democratic Front for the Liberation of Palestine and at a later stage

¹⁷⁹ Augustin, 1993, p. 23.

¹⁸⁰ Jad, 1995, p. 233.

¹⁸¹ Jad, 1991; Hiltermann, 1991, p. 195.

¹⁸² Many men had been imprisoned and women were considered less vulnerable and less exposed to detention by the Israeli authorities.

from the Palestine Communist Party, the intifada became institutionalized and lost its spontaneous character (Taraki, 1989).¹⁸³

This development had direct implications for women's committees. While in the early months of the intifada, committees opened their membership to women outside the political factions, the creation of the UNLU represented the re-institution of factional divisions, undermining the non-factional character of the early months of the intifada. Thus, "the cadres became more ornaments for different political groups and political considerations became more important than feminist concerns".¹⁸⁴

Furthermore, as the major function of the UNLU was to give the intifada a direction it gave little attention to women's concerns. This was exacerbated by the composition of the UNLU, which was predominantly male.¹⁸⁵ Communiqués, issued by the UNLU and implemented by the popular committees reflected the altered view of women.¹⁸⁶ When addressing the role of women during the intifada, the UNLU referred to women as 'mothers of the martyr', while the participants of the intifada were usually referred to as 'sons' and 'brothers'.¹⁸⁷ Massad adds that the UNLU communiqués listed women as a separate category, in addition to the occupational groups such as merchants, peasants, students and workers. Treating women as a separate category implied that the occupational categories did not include women.¹⁸⁸ The views expressed in UNLU's communiqués thus failed to acknowledge the contribution of women to the intifada. By its attempts to marginalize women, the UNLU's views stands in stark contrast to the agenda formulated by women's committees prior to the intifada.¹⁸⁹ Thus, the 're-

¹⁸³ Robinson, 1997a, p. 96-97

¹⁸⁴ Kamal, 1998, p. 88.

¹⁸⁵ Hiltermann, 1998, p. 47.

¹⁸⁶ Sharoni, 1995, p. 73.

¹⁸⁷ Communiqué no. 29, quoted in Massad, 1995, p. 474; see also Hiltermann, 1998, p. 47.

¹⁸⁸ Massad, 1995, p. 475.

¹⁸⁹ Holt, 1996, p. 36-37.

traditionalization' of women's committees as reflected in their agenda was reinforced by the leadership of the intifada.

A further development that reflected the weakening of women's committees was the outlawing of the popular committees by the Israeli Ministry of Defense on 18 August 1988.¹⁹⁰ As a consequence of their outlawing, the popular committees had to reconstitute themselves as underground movements (Augustin, 1993; Baumgarten, 1991).¹⁹¹ As the number of women in the popular committees was high, their outlawing led to a substantial decrease in the number of participating women. This decline in turn affected the women's committees, as many women in the popular committees were also members in the women's committees.¹⁹² Moreover, the overall decline in female participation weakened the women's committees substantially as they lost their mass base.¹⁹³

Without a mass base, women's committees experienced increased interference by the political factions in their programs to the extent "that the political organization, through orders coming from above, was dictating to a great extent the women's committees' programs and the details of their work".¹⁹⁴

The weakening of the women's committees as a result of the above-mentioned factors was further exacerbated by the emergence of Hamas.¹⁹⁵ The creation of Hamas in August 1988, as a political counter weight to the PLO coincided with the outlawing of the popular committees in the same month by the Israeli authorities.¹⁹⁶ As part of its political

¹⁹⁰ Membership in the popular committees became punishable by up to 10 years of prison.

¹⁹¹ See also Holt, 1996, p. 31-32; Robinson, 1997a, p. 97.

¹⁹² Jad, 1995, p. 54.

¹⁹³ Salibi, 1993, p. 169.

¹⁹⁴ Jad, 1995, p. 239.

¹⁹⁵ Hamas, the Islamic Resistance Movement, was established by the Muslim Brotherhood in Palestine. On the development and the increase of the political weight of Hamas during the intifada see Abu-Amr, 1994.

¹⁹⁶ The emergence of Hamas was initially tolerated if not even supported by the Israeli authorities in an attempt to endorse the emergence of new political center which would weaken support for the PLO in the Occupied Territories.

consolidation Hamas initiated a campaign to promulgate its values. At the core of this campaign was the family, and in particular women. Its traditional view on women is reflected in particular in the articles 17 and 18 of its *mithaq* (covenant): “in the resistance (i.e. to the Israeli occupation), the role of the Muslim Woman is equal to the man's. She is a factory to produce men, and she has a great role in raising and educating the generations”.¹⁹⁷ The most obvious manifestation of the emergence of Hamas was its campaign to enforce the veiling of women (Hammami, 1997).¹⁹⁸

Although Hamas' campaign posed a threat to women's committees they failed to react for more than a year through the Higher Council for Women (HCW).¹⁹⁹ Moreover, they only reacted after the UNLU condemned the campaign of Hamas in its communiqué no. 43, which states that “women (...) is an effective human being and full citizen with all rights and responsibilities”.²⁰⁰ The reluctance of women's committees to respond to the campaign of Hamas reflects their dependence on the male-dominated UNLU.²⁰¹

While women's activism had increased in the initial phase of the intifada, this period had been too short to lead to substantial changes in the women's political, social, or economic power.²⁰² In addition, the outlawing of the UNLU and the committees, formed an impediment for the development of a feminist agenda.²⁰³

In spite of the above, the single most important impact of the intifada on women is their participation in a public space usually reserved for men and made them more visible outside the domestic sphere.²⁰⁴ Although the substantial participation of women

¹⁹⁷ Jad, 1995, p. 241; Robinson, 1997a, p. 153.

¹⁹⁸ Holt, 1996, p. 74; Jad, 1995, p. 241.

¹⁹⁹ See Chapter IV, C 2.

²⁰⁰ Leaflet no. 43 quoted in Hammami, 1997; see also Augustin, 1993, p. 37.

²⁰¹ Hiltermann, 1998, p. 47.

²⁰² Jad, 1991, p. 138.

²⁰³ Kamal, 1998, p. 88; Kazi, 1987, p. 38.

²⁰⁴ Giacaman and Johnson, 1994, p. 24.

could not be translated into concrete gains, the intifada did contribute to the introduction of a gender agenda for women and induced a change in consciousness.²⁰⁵ This is reflected most importantly in the introduction of issues in public debate that had not been discussed before the intifada, such as the issue of rape, in particular, by Israeli soldiers and Palestinian collaborators. While prior to the intifada rape was regarded as an issue related to honor, especially that of the family, during the intifada it was viewed as a political issue. Other issues included the school drop-out of girls, early marriage, and violence against women in the family (Abdo, 1994).

Based on the observation that increased participation of women did not translate in a substantial improvement of the situation of women, women activists, from the committees and independent women, held a conference in December 1990 to evaluate the overall impact of the intifada on the role in Palestinian society.²⁰⁶ This conference presents the first public assessment of the development of women's organizations and their achievement in this period and as such, it constituted a turning point. One of the most important conclusions of the conference was that the control by the male dominated factions was regarded as a major obstacle to the development of a women's agenda as well as the subordination of women activism to national issues. This is specifically reflected in the creation of the UNLU, which contributed to the re-traditionalization of women's roles. The participants of the conference converged in the importance of creating independent institutions to address women's issues. "From this point on, Palestinian women began to devote increased attention to developing a specific women's agenda and to formulating and implementing a program of social liberation".²⁰⁷

²⁰⁵ Dajani, 1994, p. 49; Holt, 1996, p. 52; Augustin, 1993, p. 39.

²⁰⁶ The conference was entitled "The Intifada and some women's social issues" (*News from Within*, 5 January 1991) (See for conference proceedings, *The Intifada and some women's social issues* (Ramallah: Bisan Center, 1991) (in Arabic).

²⁰⁷ Dajani, 1994, p. 47.

While factional control formed an impediment to the unification of women's committees around a feminist agenda, other formations of women's organizations also constituted an obstacle to these attempts. Both are discussed in the following.

2. Factional control and attempts of unification

The affiliation of women's committees to political factions had implications for their development. Several authors point out that the weakness of the women's committees lies in their division along factional lines.²⁰⁸ Political factions exerted a high leverage over women's committees by shaping the agenda of the latter and also through funding. Funding was used by the political factions as a means of influence. As in the case of other committees, women's committees received their funds through their affiliated factions.²⁰⁹ In addition, factions maintained their leverage by indirectly controlling elections in women's committees.²¹⁰

Despite the high leverage that political factions maintained over the development over the development of women's organizations, the latter attempted in several instances to unify their efforts in one body. The creation of the Higher Council for Women (HCW) in December 1988 represents such an effort.²¹¹ The HCW was created upon the call of UNLU to coordinate activities during the intifada, but also following the demand of

²⁰⁸ Kavar, 1996, p. 119-121; al-Safadi, 1995, p. 27; Tamari, 1991, p. 21.

²⁰⁹ As Fatah represents the largest faction in the PLO it also received the bulk of funds at the expense of the smaller, leftist factions, the Democratic Front for the Liberation of Palestine, the Popular Front for the Liberation of Palestine, and the Palestine Communist Party (al-Safadi, 1995, p. 27).

²¹⁰ Jad, 1995, p. 232.

²¹¹ The formal formation of the HCW was in March 1989.

international donors to create a single body to coordinate funding.²¹² For women's committees, however, the HCW offered an opportunity to increase their independence from political factions. This is reflected in the HCW's membership, which included, in addition to representatives from the women's committees, for the first time, women independent of any political faction.

This attempt to increase independence was undermined by several factors relating to the issue of leadership within the HCW and the women's organizations. Both factors ultimately led to the dissolution of the HCW. Soon after the creation of the HCW, factional divisions emerged after the Fatah-affiliated WCSW's claim to represent the 'female executive of the diaspora national leadership'.²¹³ In this claim it was backed by the General Union of Palestinian Women (GUPW), which operated in Tunis. The GUPW's opposition was based on its objection of including independent women activists in the HCW. Moreover, the GUPW viewed the creation of the HCW as a conspiracy of women activists from the Occupied Territories to undermine its perceived role in representing all women's organizations.²¹⁴ It thus objected the name of the Council, in particular its designation of 'Higher' as it viewed itself as the umbrella organization. As a result, the Higher Council was renamed into Unified Council.²¹⁵

Parallel to the GUPW's resistance, the creation of the HCW also faced opposition from charitable organizations in the Occupied Territories. As a response to the formation of the HCW, the charitable organizations established the Union of Voluntary Women's

²¹² Augustin, 1993, p. 27. UNLU called for greater coordination among women's organizations as well as among the four sectors, women's, health, agricultural committees and trade unions, during the intifada (Augustin, 1993, p. 27; Gluck, 1995). However, the women's committees were the only committee to react immediately (Gluck, 1995).

²¹³ Augustin, 1993, p. 36; see also Abdo, 1994; Holt, 1996, p. 32-33.

²¹⁴ Interview, Siham Barghouthi, Women's Action Union (the former Federation of Palestinian Women's Action Committees), UNDP, October 1998.

²¹⁵ Augustin, 1993, p. 27.

Associations, comprising 56 charitable organizations of six regions in 1989.²¹⁶ One of its first activities was to organize in Bethlehem in December, 1990 a conference entitled "Women and the Uprising", which deliberately coincided with the conference "The Intifada and some women's social issues". The latter constituted primarily a forum for women's committees. In its conference the Union underlined its conviction of the primacy of the national struggle and thus represented the view that prevailed among the political factions.²¹⁷ As a result of the GUPW's opposition and the conflict between charitable organizations and the women's committees, the HCW ultimately failed.²¹⁸

The opposition both within and outside the HCW reflects the lines of division among women's organizations. On the one hand, the division between women's committees and charitable organizations reflected their different views on women's roles in Palestinian society. The GUPW, which regards itself as the legitimate representative of all women's organizations contested the development of an alternative women's organization. On the other hand, the division among the women's committees followed factional lines, whereby the Fatah-affiliated WCSW attempted to dominate the HCW. The dividing issue has been the nature and timing of introducing a feminist agenda. The Fatah dominated GUPW and charitable organizations have supported the primacy of the national struggle against the Israeli occupation. The three left-leaning committees, in contrast, maintained that addressing both simultaneously can be reconciled (Kawar, 1998).

While the political factions had maintained a high leverage on the development of women's committees, the decline of their financial resources contributed to their

²¹⁶ Namely Jerusalem, Nablus, Ramallah, Bethlehem, Hebron, and Gaza. The Union is a member of the General Union of Palestinian Charitable Societies.

²¹⁷ See International coordinating committee for NGK's on the question of Palestine Newsletter no. 40, February 1992.

²¹⁸ Augustin, 1993, p. 27.

increasing inability to do so. As women's committees had been relying to a large extent on funding from the political factions, a decline of such funds compelled women's committees to seek other sources. This initiated a process of transformation of the committees. As a result of this transformation a new movement of women's centers emerged that has, especially after the creation of the PA, assumed a prominent role in promoting a women's agenda. This process of transformation is examined in the following.

D. From Committees to NGOs

As examined above the development of women's committees has been shaped by the politics of factions towards them. While the factions' focus on mobilizing as many women as possible led to an increase in women's participation in the committees, this also prevented the emergence of a feminist agenda. Factions all converged in the necessity of delaying its implementation as the national struggle prevailed (Kawar, 1998). As a result, women's attempts of unification were thwarted by the interference of political factions, but also by the Fatah-dominated GUPW and charitable organizations. The role of women as perceived by them was confined to the delivery of social services.

The decline of funds and the resulting weakening of political factions reduced the influence of the latter on women's committees. This provided activists from the women's committees the opportunity to shift from an imposed predominantly national agenda to one concerned with women's issues. To this end a number of women activists established new institutions, the women's centers that researched and addressed the conditions of women in the Occupied Territories. These new centers were non-factional and constituted

the core of a new movement that flourished in the 1990s and in particular after the establishment of the PA. The availability of international funding aided this development.

Attempts to gain increased independence from factional influence became visible in the 1980s when women's committees created projects outside the framework of the committee. More specifically, although these projects, initially affiliated with the committees, but organizationally separate from them, they became independent following the weakening of the factions. The Women's Studies Center is a case in point. Its predecessor, the Women's Research and Resource Center, was established in the late 1980s by the FPWAS, which is affiliated with the Democratic Front for the Liberation of Palestine. The initial aim of the Center was to study issues related to property rights, labor law and private status law and their implications for women (Jad, 1995).²¹⁹ In 1990 it became independent from its affiliated committee and was renamed the Women's Studies Center. Since then it has operated independently and has been conducting research and training women in research skills (Gluck, 1995). Its aim has been to contribute to the development of a Palestinian feminist agenda, to research women's overall situation, and to develop strategies which address women's concerns at the popular level. The composition of its board of trustees reflects a departure from the previous leadership of committees which was affiliated with various factions.²²⁰ In addition to representatives from women committees, it also includes representatives from other civil society organizations as well as from academia.

On the other hand, the decline of funds provided by the factions to women's committees compelled the latter to seek new sources of funding. This was especially true for women's committees that were affiliated with the leftist factions, as Fatah and its

²¹⁹ Augustin, 1993, p. 27; Holt, 1996, p. 33.

²²⁰ Interview, Suha Hindiyye, Women's Studies Center, November 1997.

affiliated committees were less affected by the decline. Fatah the largest among PLO factions, continued to receive funds, though the allocated funds also diminished (Kawar, 1996).²²¹ Other committees had to terminate many of their projects as a result of declining funds.²²²

The new funds were typically provided by European donors. In contrast to the funds provided by political factions for the purpose of mobilizing women, European donors attached other conditions to potential beneficiaries. The criteria for eligibility included in particular the representation of various factions. This entailed the decline of the importance of factional adherence as a characteristic of the committees. Furthermore, their reliance on European funds compelled the committees to adopt an agenda, which is in line with the funding priorities of the donors. This agenda focused especially on civic education for women and the public awareness campaigns towards the issues of women (Kawar, 1998; al-Safadi, 1995).

A case in point is the Union of Palestinian Women's Work Committees (UPWWC) which was transformed into the Palestinian Working Women Society, registered in East Jerusalem.²²³ In its process of transformation, the UPWWC replaced volunteers with full-time staff and changed its agenda from the mobilization of women to one that focuses on civic education for women, in particular marginalized women, their consciousness raising and the improvement of their skills. Its program consists to a large extent of workshops and training sessions for women. After the establishment of the PA, the UPWWC focused on influencing PA policy towards women.²²⁴

²²¹ See Chapter III. Many Fatah-affiliated organizations were incorporated in the PA or became semi-governmental organizations as they received funds from the PA (al-Safadi, 1995).

²²² Jad, 1995, p. 243.

²²³ Its head is Amal Khreisheh.

²²⁴ Interview, Inas al-Masri, Palestinian Working Women's Society, January 1998.

In addition to the centers that emerged from the women's committees, independent activists, not previously affiliated with any political faction, established women's centers that dealt with issues pertaining to the social, economic and political situation of women. Three noteworthy examples are the Women's Affairs Center, the Women's Center for Legal Aid and Counseling (WCLAC), and the Jerusalem Center from Women.

The Women's Affairs Center (previously called Women's Resource Center) was established a few months after the beginning of the intifada by the Palestinian novelist Sahar Khalifeh. Its goal has been to examine the social, political, economic, and cultural conditions of women under the Israeli occupation. In particular, it sought to document the participation of women during the intifada. Based on its findings it has aimed at developing a new vision for the role of women in Palestinian society (Khalifeh, 1998; Gluck, 1995). The objective of the WCLAC, which was created in 1991, has been to improve the social and in particular the legal situation of women. To this end it has been involved in the research and documentation of information on the violation of women's rights. It disseminates its finding through publications and lectures. More importantly, it provides a free-of-charge legal counseling to women who have been victims of abuse and discrimination. It also maintains a hot-line for women needing assistance and advice in cases of abuse and violence. The Jerusalem Center for Women was established in March 1994 and has committed its agenda to the advancement of the peace process through Palestinian, Arab, and international women's organizations. A particular focus of its program is Jerusalem.²²⁵ At an academic level, the Institute for Women's Studies at

²²⁵ Interview, Fatin Farhat, Jerusalem Center for Women, December 1997.

Birzeit University was established. Its aim has been to research and teach gender-related issues in Arab and Palestinian societies.²²⁶

The new centers reveal similar characteristics. They have all focused on gender related issues that have included researching the impact of the social, economic, and political conditions on women, on political and legal education, and on lobbying. In addition, they provided a forum for topics such as democratic development, women's rights and women leadership. Moreover, the increased space available to women's centers allowed them to research and debate issues that have previously been regarded as taboo, such as domestic violence and issues related to personal status law (Ruggie, 1998; Gluck, 1995).²²⁷ In brief, all of the above mentioned centers were created to examine the factors that have shaped the conditions of women, and to develop strategies that aim at improving the situation of women.²²⁸

While the declining influence of political factions provided women activists with the space to address women's issues, the availability of international funds profoundly shaped the emergence of the new women's centers. First, the transformation of committees to professional NGOs, such as the Palestinian Working Women Society, was the result of the policy of international donors. A major requirement of international funders was that the recipient committees have a cross-factional leadership. As a result, the committees began to include independent women activists on their boards, thus enhancing their autonomy from factional control. The availability of international funds also contributed to the increased inclusion of paid full-time staff rather than volunteers

²²⁶ Interview, Penny Johnson, Birzeit University, Women's Study Center, November 1997.

²²⁷ Jad, 1995, p. 244.

²²⁸ Jad, 1995, p. 244; Holt, 1996, p. 53.

(Hammami, 1995).²²⁹ The increasing dependence of women's committees on foreign money also changed their agenda. Whereas previously their agenda has been grassroots mobilization, the activities of the committees now became confined to development projects with specified objectives and long-term planning, which were implemented without the involvement of the communities in the formulation and implementation of these projects (Hammami, 1995). Second the availability of international funds allowed the creation of the new women's centers whose agenda is confined to lobbying for women's issues (al-Safadi, 1995).²³⁰

As noted above, the marginalization of women had already begun during the intifada, as reflected in the UNLU communiqués. It became more apparent in the peace negotiations, when only four women participated in the technical committees as opposed to three hundred men. The exclusion of women from the political arena remained after the establishment of the PA in 1994, in which appointments are based on clan and tribal affiliation as well as allegiance to the ruling party, Fatah. Leading positions were filled by men while women were largely excluded from this process. Only two out of 22 ministers are women, namely Intisar al-Wazir, the Minister of Social Work, and Hanan al-Ashrawi, the Minister of Higher Education. However, the latter resigned after being assigned the ministry of tourism.²³¹

Since the early 1990s, women activists initiated attempts to counter their marginalization. Rather than acting alone, they created a network through which they aimed at forging a common position towards the PA. The most important network is the Women's Affairs Technical Committee (WATC). In addition to this network a number of

²²⁹ Jad, 1995, p. 239.

²³⁰ Jad, 1995, p. 243.

²³¹ Abdo, 1999, p.42.

women's organizations established ties among themselves as well as with other civil society organizations. The WATC and other initiatives of horizontal networking are discussed in the following section.

E. The Organization of Women

1. Horizontal networking - the creation of a new institution

The first network, the WATC, emerged in August 1992 during the Madrid peace negotiations. Its formation aimed at countering the marginalization of Palestinian women during the negotiations and their exclusion from the Palestinian institutions that were created to manage and distribute international aid to Palestinians. During the negotiations over 30 technical committees were created to serve as an advisory body for the Palestinian delegation. While the committees included over three hundred men, only four women were invited to participate (Connell, 1995; Gluck, 1994).²³² The marginalization of women was similarly evidenced in the creation of Palestinian institutions that were to manage and distribute international aid to Palestinians. A case in point is the Palestinian Economic Council for Development and Reconstruction (PECDAR), whose 14-member board did not include any women (Hijab, 1994).²³³ Fearing that the lack of female representation in the technical committees and the institutions would increase the marginalization of women, which had already begun to take shape during the intifada, sixteen women activists created the WATC. Its initial aim was to increase the number of women in the technical committees and to influence their policies by including a gender-perspective (Gluck, 1995). After the creation of the PA the WATC shifted its focus to

²³² Among them are Amal Khreishe, Nahla Qura and Zahira Kamal (al-Safadi, 1995, p. 47).

²³³ Holt, 1996, p. 55; Jad, 1995, p. 240. PECDAR continued to exist after the creation of the PA, although most of its function have been taken over by Ministry of Planning and International Cooperation (MOPIC).

raising public awareness to women's issues and to lobbying for legal equality for women.

Its formation was initiated by women who were in support of the negotiations with Israel. These included women who had been affiliated with women's committees of Fatah, the Palestine Communist Party (now renamed Palestinian People's Party) and Palestinian Democratic Union (Fida) as well as women independent of political affiliation. In contrast women activists who were affiliated with women's committees of the leftist factions, such as the Democratic Front for the Liberation of Palestine and the Popular Front for the Liberation of Palestine, which both opposed the negotiations, did not join the WATC. In both cases joining the WATC would have indicated their legitimizing of the negotiations.

The creation of the WATC was not only opposed by women activist rejecting the negotiations with Israel, but also, for a different reason, by the General Union of Palestinian Women (GUPW). The GUPW, which had been operating mainly in the diaspora, was revitalized in the West Bank and the Gaza Strip after the creation of the PA.²³⁴ As it regarded itself as the legitimate representative of all women's organizations, it viewed the creation of the WATC as a move to marginalize it in its leadership role.²³⁵ Similarly, women heading charitable organizations remained outside the WATC.²³⁶

²³⁴ Samiha Khalil, president of the In'ash al-Usra also headed the West Bank branch of the GUPW. Following the creation of the PA, the GUPW main branch was transferred as an institution from Tunis. Tunis had been the seat of the PLO after its expulsion from Lebanon in 1982.

²³⁵ I got this impression from an interview with Shadia el-Helou, GUPW, October 1998.

²³⁶ The only existing network of women's organizations, the Union of Voluntary Women's Organizations, which forms part of the General Union of Charitable Society, had not only remained politically marginalized but also had never developed a feminist agenda (Moghadam, 1997, p. 50).

Since its formation, the WATC underwent a process of transformation.²³⁷ At the institutional level it developed from an organizations that had relied solely on volunteers to an institutionalized organization with full-time staff.

Parallel to its institutionalization it expanded its membership. Following Arafat's rejection to elevate the WATC to a ministry as was the case for other committees, the WATC was joined by women activists who being from oppositional factions had initially rejected joining the WATC.

Charitable organizations and the GUPW, however, remained outside the WATC. The creation of the WATC thus reflects the major divide among women's organizations with the WATC representing only those who emerged from the women's committees of the late 1970s and early 1980s and independent women.

Charitable organizations and its representation through the Union of Voluntary Women's Organizations had been weakened substantially due to the decline of the funding sources.²³⁸

The GUPW on the other hand attempted to consolidate its position in the West Bank and the Gaza Strip. As an institution which was transferred to the West Bank and the Gaza Strip it, however, lacks a local network and is largely confined to a leadership group.²³⁹

Following the creation of the PA, the WATC has been the only institutionalized network that has been active in lobbying for change of PA policy. The WATC has

²³⁷ The WATC was headed by Zahira Kamal, a member of the DFLP-affiliated women's committees. At a later stage Zuheir Azzouni took over this role after Kamal transferred to the PA to head the Women's directorate in the Ministry of Planning and International Cooperation (MOPIC), while at the same time remaining a member in the WATC. Interview, Suheir Azzouni, WATC, November 1997.

²³⁸ Moghadam, 1997, p. 50. Interview, Union of Charitable Societies, December 1997.

²³⁹ Kavar, 1998, p. 235. Interview, Shadia el-Helou, GUPW, October 1998.

concentrated its efforts on lobbying for a reform of the existing legislation that discriminates against women.

The WATC's lobbying for favorable changes towards PA legislation includes laws which had required the approval of a male guardian for women's activities. It succeeded to have this requirement removed. Thus, the new proposed legislation removed the requirement for a male guardian's approval for issuing a passport to either married or unmarried women. This is also true for widows who were not able to get passports for their children without the legal consent of a male guardian. Furthermore, women were to have the right to obtain a Palestinian passport in their maiden names. In addition, according to the new legislation, Palestinian women would be allowed to give their nationality to their children and husbands, while according to the previous law the nationality of wives and children were given by the husband or father, respectively.²⁴⁰

All above mentioned changes constitute a major improvement of the legal situation of women. However, in the absence of the promulgation of a Basic Law by Arafat, which would represent the constitution for the interim period of PA rule, the proposed legislation is not legally binding but remains a regulation.²⁴¹

Arafat had commissioned in 1993 the drafting of a Basic Law by a committee headed by Anis al-Qasim.²⁴² This version of the Basic Law left women's rights unmentioned. Based on two alternative drafts of the Basic Law by the GUPW, the WATC cooperated with the GUPW and charitable organizations in the formulation of a

²⁴⁰ Interview, Suheir Azzouni, WATC, November 1997.

²⁴¹ Abdo, 1999, p. 49.

²⁴² Abdo, 1999, p. 44.

third one, which was adopted as the Women's Bill of Rights (also the Palestine Women's Charter) on 8 February, 1994 by the majority of women's organizations.²⁴³

The Women's Charter was based on several UN conventions as well as the 1988 Palestinian Declaration of Independence, which state that the future rules of the Palestinian governments are to be based on "principles of justice, equality and no discrimination in public rights against men or women".²⁴⁴ More specifically, the Women's Charter demands passage of a law for the personal status of women. The same document also demands that the PA comply with the international women's rights.²⁴⁵

Based on its coalition of women's organizations, the WATC achieved the introduction of changes in the Basic Law, to be adopted by the PA.²⁴⁶ While the first draft of the Law left women's rights unmentioned, the Palestinian Legislative Council adopted a third draft of the Law, which guaranteed women equal rights in public life. The UN Convention to End Discrimination against Women was not included. Similarly, women's role in private life, however, remained unchallenged and continued to be regulated by the personal status law of the religious communities. The lack of a secular law reflects the impact of the GUPW's traditional view on gender relations. The Women's Charter has been to date not approved by Arafat. According to Abdo "there has been speculation" that Arafat's repeated refusal to approve the Women's Charter was motivated by calculations concerning PA-Hamas relations".²⁴⁷ While the PA has, under Israeli pressure, attempted to curb Hamas' activism, against the Israeli occupation, its rejection of a secular law is viewed as a move to meet Hamas' demands.

²⁴³ Giacaman and Johnson, 1994, p. 25; Holt, 1996, p. 61.

²⁴⁴ This included in particular the UN Convention to End Discrimination against Women (Holt, 1996, p. 56, 63).

²⁴⁵ Interview, Suheir Azzouni, WATC, November 1997.

²⁴⁶ Abdo, 1999, p. 49.

²⁴⁷ Abdo, 1999, p. 49; see also Usher, 1995, p. 55.

In addition to demands for legal reforms the WATC also lobbied for changes of the PA's structures. The proposed changes include the WATC's demand for a 30% quota for women in the Palestinian Legislative Council (PLC) and its demand for the creation of a women's ministry.²⁴⁸ The proposed 30% quota for women failed because of the lack of consensus in the WATC and more importantly the lack of support by the PA.²⁴⁹ In addition to the women's quota, the WATC called for the creation of a women's ministry. Arafat rejected the idea that the WATC be elevated to a ministry, as in the case of the other technical committees.²⁵⁰

Having faced a rejection of its proposal to create a women's ministry in 1995, the WATC demanded the creation of a Council of Women's Issues that would be affiliated with the Office of the PA's president. The Objective of this Council would be to consolidate a program aiming at realizing women's rights, and to guarantee representation of women in government bodies. The WATC would act as an advisory committee for this council. As in the case of other demands requiring changes of PA structures, this demand was also rejected.²⁵¹

Finally, in addition to lobbying for legal reforms, the WATC also engaged in awareness campaigns. An example is its attempt to increase women participation in the first Palestinian elections of January 1996. Through its campaign it reached 13,000 potential female candidates and voters in the West Bank and the Gaza Strip and contributed to a high turnout among women.²⁵²

²⁴⁸ Holt, 1996, p. 56; Jad, 1995, p. 245.

²⁴⁹ Kwar, 1998, p. 238. Only the People's Party supported the proposed quota.

²⁵⁰ Kwar, 1998, p. 238. While the other technical committees ceased to exist after the establishment of the PA, as they were transformed into ministries, the WATC continued to operate.

²⁵¹ Interview, Suheir Azzouni, WATC, November 1997.

²⁵² Abdo, 1999, p. 47.

While the WATC has been successful in introducing legislation favorable of women, these changes remain in the absence of a legal system in the West Bank and the Gaza Strip not enforceable.

Several features of the WATC have contributed to its weakness. These relate to aspects of its organization, to the nature of its agenda and to its strategy of implementing its objectives. While the WATC succeeded in broadening its coalition of women's organizations, it remained a body limited to the representation of women's organizations, which emerged from the committees of the 1970s and 1980s and a number of independent women. Failing to include an important segment of women's organizations, the charitable organizations, suggests that it did not succeed in evolving into a comprehensive network representing the interests of all women. As a result of this failure, the WATC failed to assume a leadership role among women's organizations. This in turn has been, as is discussed in Chapter V, a critical factor accounting for the success of the Union of Palestinian Medical Relief Committees to rally a substantial number of health organizations and to forge a common vision of health care.

A further aspect relating to its organizational nature, which has weakened its position lies in its composition. More specifically, the inclusion of members of women's organizations as well as officials from the PA undermined its effectiveness to lobby, as a civil society institution, for change. While the WATC registered with the PA's Ministry of Interior as an NGO and regards itself as such, the analysis of its membership reveals that the WATC represents a quasi-governmental organization rather than an NGO. In addition to representatives from the non-governmental sector, such as women's

committees²⁵³, women's centers²⁵⁴, human rights organizations²⁵⁵ and academia,²⁵⁶ it also includes members from the PA: Zahira Kamal, the Director General of the Directorate for Gender Planning and Development at the Ministry of Planning and International Cooperation; Rabiha Diab, the Director General of the Ministry of Youth and member of the Association of Women's Committees for Social Work; and Dalal Salame, member of the Palestinian Legislative Council and member of the Association for Women's Committees for Social Work.²⁵⁷ As a result of its composition, the WATC has "assumed a conflicting role in that it is acting on the one hand, as a lobbying group while on the other hand, it forms part of the PA".²⁵⁸

A further weakness lies in the formulation of its agenda that focuses on legal reform and civic education. While reform of legislation constitutes an important improvement of women's situation, it remains in the absence of a legal system ineffective. More importantly these changes, even if becoming law, are of immediate relevance to only a limited number of women, as the majority suffers from inequitable

²⁵³ Women activists from the committees are for example: Salwa Hdeib, (Union of Women's Committees for Social Work); Fadwa Khader (Federation of Palestinian Working Women's Committee); Maha Nassar (Union of Palestinian Women's Committees) Amal Ju'beh (Federation of Palestinian Women's Action Committees).

²⁵⁴ Women activists from the Women's Centers are Ghada Zughayer (Jerusalem Center for Women); Maha Abu Dayyeh (Women's Center for Legal Aid and Counseling), Suha Hindiyye (Women's Studies Center) and Amal Khreishe (Palestinian Working Women Society).

²⁵⁵ Randa Sinyorah and Amineh Odeh (Al-Haq, Law in the Service of Man. Al-Haq was founded in 1979 is affiliated with the Geneva-based International Commission of Jurists (ICJ). It is concerned with the protection and promotion of the principle of human rights and the rule of law.

²⁵⁶ Islah Jad is from the Women's Study Center at Birzeit University.

²⁵⁷ The WATC further includes representatives from the UNDP and UNRWA. Lamis Alami (Chief Education Officer with UNRWA). Siham Barghouthi is a representative of the Federation of Palestinian Women's Action Committees, but also works for UNDP.

²⁵⁸ Giacaman and Johnson, 1994, p. 24; see also al-Safadi, 1995, p. 47. In contrast to the lack of institutional autonomy from the PA, the WATC could sustain its financial autonomy from the PA by relying almost exclusively on international donor funding. Sources of funding included UNESCO, the Friedrich-Ebert-Foundation, NORAD, CIDA, National Endowment for Democracy, the Ford Foundation and others.

access to health care and education and from increased burden brought about by their growing involvement in the informal sector (Heiberg and Øvensen, 1994).

Similarly, its campaigns of raising women's consciousness for their rights, remains, as long as the structures that sustain their subordination continue to exist, a futile effort.

Limiting its actions to lobbying for legal change, the WATC failed to address issues, which are concern for the majority of women. Moreover, addressing the issues of improving the social, economic and political conditions that shape women's lives requires the transformation of the existing order characterized by the dominance of patriarchal structures. In order to create a counter-hegemonic force to this order, the WATC would have to build a coalition of a variety of civil society institutions whose aim is to transform patriarchal structures towards a more equitable order. Having failed to do so, the WATC has contributed to its own weakening considerably. Although the WATC and other women's organizations are also members of the Palestinian NGO Network, PNGO, the latter is more concerned with the regulation of PA-civil society relations, rather than with developing a strategy to improve the conditions for women.

Without a broad basis of supporting institutions the WATC could not effect any change of PA policy. Following the PA's rejection to comply with its demands, the WATC diverted its efforts to lobby the Palestinian Legislative Council (PLC) for policy change. The PLC, however, has been, as a result of its politically marginalized role, ineffective as a legislative body.²⁵⁹

Thus while the WATC has remained the only institutionalized network of women's organizations, its organizational properties, its agenda and strategy have accounted for its weakness.

²⁵⁹ See Chapter II for a discussion of the PLC.

2. Horizontal ties among women's organizations and other civil society institutions

In addition to the institutionalized network, represented by the WATC, women's organizations also forged ties with other women's group that offered an alternative terrain for cooperation and action. While the WATC represents an institutionalized form of cooperation, the additional ties remain loose and largely ad-hoc. Similar to the activities of the WATC, cooperation among women's organizations as well as with other civil society organizations focus on awareness campaigns and training in legal literacy. Women's Studies Center, the Women's Center for Legal Aid as well as human rights organizations have been prominent.

This effort is illustrated in the 'Palestinian Model Parliament – Women and Legislation'. Initiated in 1995 by the Women's Center for Legal Aid and Counseling, it involved fifteen women's organizations and constituted a mock parliament on the status of women and the personal status law.²⁶⁰ In another instance, cooperation among women's organizations involved the issue of 'honor killings', i.e. killing in which a male family member kills a female relative based on the alleged assault on family honor. 'Honor killings' continue to occur and represent the prevalence of customary laws over existing written ones.

Women's organizations also forged links with other civil society institutions, in particular with human rights groups and those that are working towards attaining a democratic order, such as al-Haq, and the Palestinian NGO Network, PNGO. As in the case of cooperation among women's organizations these ties have been ad-hoc and linked to particular projects. Such cooperation was involved in the initiative of the Palestinian Working Women Society (PWWAS) to examine the labor Law and its implication for

²⁶⁰ Abdo, 1999, p. 45.

women. In this effort, the PWWAS cooperated with representatives of the General Union of Palestinian Syndicates and the human rights organization, al-Haq, as well as with lawyers specialized in this field.²⁶¹ Cooperation between women's organizations and other civil society institutions also included campaigns to raise awareness on issues such as early marriage, the protection of battered women and free education for women younger than 18 years. Another case of cooperation that involved human rights organizations is the effort of the Jerusalem Center for Women to increase coordination on the issue of and lobby for women's rights in Jerusalem. To this end the Center created a steering committee which included, in addition to the WATC, the human rights organizations, the Independent Commission for Residents' Rights, the Alternative Information Center, the Palestine Human Rights Information Center, and the Non-Violence Studies Center.²⁶²

In addition to the ad-hoc forms of cooperation, women's organizations have been members in PNGO. PNGO was constituted in 1993 following attempts of the PA to restrict the role of NGOs after the signing of the Declaration of Principles in September 1993. Its aim has been to forge a unified bloc toward the PA and to act as a lobbying body on behalf of NGOs.²⁶³ Women's organizations that are members of PNGO have been active in lobbying for a change in the PA's proposed "Associational Law concerning Charitable Societies, Social Bodies and Private Institutions."²⁶⁴

In all those cases cooperation among women's organizations and between them and other civil society institutions is ad-hoc. This ad-hoc nature of cooperation among the above groups suggests the lack of a comprehensive strategy and vision to improve the

²⁶¹ Interview, Inas al-Masri, PWWAS, December 1997.

²⁶² Interview, Suheir Azzouni, WATC, November 1997.

²⁶³ Interview, Rana Bishara, PNGO, November 1997.

²⁶⁴ See Chapter II.

situation of women. This is the result of the failure of women's organizations to create a forum that would unite women's organizations and other civil society institutions operating in fields relevant to women around a common vision and strategy to improve the situation of women. A change of the existing political and social order requires a more comprehensive agenda and the creation of a platform of civil society institutions that are in favor of comprehensive change. WATC has been unable to establish a leadership role among women's organizations sufficient to bring about such change.

Moreover, the increasing shift of women's organizations as well as the WATC from addressing national legal reform to providing workshops in which women are trained in their legal rights, confirms the absence of such comprehensive agenda as these workshops lack an overall goal and strategy.²⁶⁵

3. The PA's response

As mentioned above the WATC could effect some changes in legislation. In the absence of a Basic Law, these constitute, however, only regulations.

Given the inability of the WATC to forge a broad coalition of civil society institutions supporting their agenda and the reluctance of the PA to depart from its patriarchal structure, the PA rejected the creation of a PA institution that deals solely with women's issues. More specifically, the PA rejected those demands that involved the integration of women into the system of the PA through the creation of institutions dealing solely with women's issues. Instead, the PA responded by creating several ministerial departments that deal with women's issues, but that are imbedded in the

²⁶⁵ Donors have also contributed to this shift. The shift to the provision of training accounted for the resignation of Suha Hindiyye, the director of the Women's Studies Center.

structure of the respective ministry and thus subject to its scrutiny and control. Women's department, which aim at developing gender-sensitive polices exist in five ministries: Ministry of Planning and International Cooperation (MOPIC), Agriculture, Health, Social Affairs, and Youth and Sports, of which the Directorate of Gender Planning and Development (DGPD) at the Ministry of Planning and International Cooperation (MOPIC) is the most active.²⁶⁶

The DGPD was established in 1996 to ensure that Palestinian policies, legislation, decrees, plans and programs are gender-sensitive. In addition to the ministerial departments, the PA also allowed the establishment of an 'Inter-ministerial Women's Coordinating Committee'. This committee was created in March 1996 following the Fourth Conference on Women in Beijing (1995) by participating women activists. It comprises eleven ministries and is based on a governmental action plan, the "Post Beijing World Strategies and Action Plans for the Palestinian government until the year 2000", formulated by the Palestinian ministries. The Action Plan developed strategies to integrate women into the political structure of the PA and to promote participation in the fields of social and economic development. It serves as a foundation for the formulation of policies of the respective women's departments.²⁶⁷ In September 1996 the committee formulated the 'National Strategy for the Advancement of Palestinian Women'.

The significance of the plan is its assigning of the General Union of Palestinian Women (GUPW) a central role in the development affecting women's organizations. Thus the plan states as one of its 'strategic objectives' to develop the role of the GUPW in its "capacity as representative of Palestinian women in Palestine and abroad, to form a frame for all NGOs and to extend it and establish branches in every district of the country

²⁶⁶ Interview, Zahira Kamal, MOPIC, DGPD, January 1998.

²⁶⁷ Interview, Zahira Kamal, MOPIC, DGPD, January 1998.

to reach to women in towns, villages, refugee and Bedouin camps". The leading role assumed by the GUPW signifies its move to consolidate, with the support of the PA, its position in the West Bank and the Gaza Strip.²⁶⁸ As the GUPW has also showed reluctance to challenge the existing political and social orders, its prominent role expressed in the National Strategy manifests the potential consolidation of a traditional view on gender relations in the Palestinian context. However, "to what extent these strategic plans become part of the general ministerial plans or of the PA strategy remains to be seen".²⁶⁹

F. Conclusion

Several generations of women's organizations have been created and co-existed since then. Charitable organizations that were established at the beginning of the century by women and largely run by them constitute the first formal organizations of women. Subsequently new avenues of women's organizations emerged and the forms of women organizations expanded. In addition to charitable organizations, the creation of the GUPW under the umbrella of the PLO integrated Palestinian women in the diaspora in the national movement and provided the framework for the charitable organizations in the West Bank and the Gaza Strip. As a response to the failure of charitable organizations to address the issues Palestinian society has been facing under the Israeli occupation, a movement of women's committees emerged. These constituted part of a larger grassroots movement that sought to redress the unbalanced development in the Occupied Territories

²⁶⁸ Interview, Zahira Kamal, MOPIC, DGPD, January, 1998. See also *A National Strategy for the Advancement of Palestinian Women by the Inter-ministerial Committee and the General Union of Palestinian Women*, p. 2 - 3.

²⁶⁹ Kavar, 1998, p. 242.

by transforming Palestinian society. By adopting this approach the grassroots movement viewed the Israeli occupation as only one among other factors accounting for the unequal development. An integral part of this approach was the creation of women's committees, which constituted a watershed in the development of women activism. Women's committees contributed to the substantial expansion of women participation and thus changed the nature of women activism. However, after their initial success, especially during the intifada, women's committees experienced increased challenges, most notably in the form of factional competition.

The decline of the political factions opened new opportunities for the organization of women. In the newly created space new women's organizations emerged that focused solely on women's issues. Their most important objective has been to lobby for the legal reforms for the improvement of the situation of women. In this attempt a number of women's activists established a network, the Women's Affairs Technical Committee (WATC) to enhance their position vis-à-vis the PA. While the WATC remains the only body through which cooperation among women's organizations is institutionalized, its effectiveness, as the previous examination showed, is diminished by several factors, namely its organizational nature, its agenda and strategy. This has direct implications on the ability of women's organizations to effect policy change at a national level as they lacked a unified vision supported by a broad range of civil society institutions.

In contrast to women's organizations, the Union of Palestinian Medical Relief Committees (UPMRC) was successful in introducing its vision of health care into national policy. The UPRMC not only presented the PA a unified vision of health, but also more importantly established the necessary institutional linkages to promote this vision. These institutional linkages constitute a forum that brought together health NGOs

as well as PA officials. Through this forum the UPRMC could institutionalize cooperation, and, in contrast to the WATC, maintain its institutional autonomy.

The means the UPMRC chose to promote its vision of health care are examined in the following chapter.

CHAPTER V: A POINT IN CONTRAST: THE UNION OF PALESTINIAN MEDICAL RELIEF COMMITTEES

A. Introduction

When the Palestinian Authority took over a weak, underdeveloped, and fragmented public health sector from the Israeli authorities in 1994, it was faced with the task of health reform. In its effort to reform the health sector, the PA sought to impose its own vision of health care. The PA initially seemed successful in solidifying its vision of health care. However, its attempt to marginalize and control health organizations in this effort has been challenged. Moreover, health organizations under the leadership of the Union of Palestinian Medical Relief Committees (UPMRC) have been able to effect changes in PA health policy. The UPMRC assumed a leading role in developing a horizontal network among health NGOs through which it forged a unified vision and consolidated its position in the health NGO sector. Based on this network, the UPMRC then established vertical ties with the PA to lobby for change in health policy.

The development of the UPMRC since its creation and the factors that enabled it to induce policy change form the content of this chapter. The first part provides an outline of the health situation in the Occupied Territories prior to the creation of the PA. This outline focuses on the effects of the Israeli occupation on the health sector and the emergence of the health committees in the early 1970s to remedy the distortions caused by the occupation. The next part of the chapter examines the development of the health sector under PA rule. The examination includes, in addition to the PA's attempts to reform the health sector, the three major health providers, UNRWA, the private, and the non-governmental sector. The third section discusses the means the UPMRC has chosen to consolidate its position as a health NGO and to effect changes of PA health policy.

This chapter concludes with a summary of the major findings.

B. Health Care under the Israeli Occupation

1. The public health sector

Before the Israeli occupation in 1967, health care in the West Bank and the Gaza Strip was provided by the UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), the private sector, charitable organizations and the government health sector, i.e. the Egyptian government in the Gaza Strip and the Jordanian one in the West Bank.

When Israel took control over the Palestinian public health sector in 1967, Israeli authorities placed health care under the Israel's Civil Administration. Health care was run by a coordinator at the Israeli Ministry of Health and by the Ministry of Defense. This administration has had profound effects on the transformation of the health sector. Prior to the Israeli occupation of the West Bank and the Gaza Strip in 1967, the share in health provision by the public health sector constituted 75 percent. Since the occupation this share declined to 28 percent in 1992. The decline of the public sector is the result of Israel's policy of 'de-institutionalization' (Barghouthi and Giacaman, 1990, p. 75).

The Israeli administration did neither expand the public health sector under its control nor did it encourage the development of a Palestinian health sector. Thus the number of hospitals was not increased in accordance to the natural population growth. While new clinics were established by the Israeli government,²⁷⁰ the number of hospital beds remained unchanged from 1967 until the mid 1990s, although the population more

²⁷⁰ For example, six new clinics were established in the Gaza Strip between 1967 and 1976 and 11 between 1977 and 1986 and three between 1987 and 1992 (Daibes and Barghouthi, 1996).

than doubled since the beginning of the occupation (Barghouthi and Lennox, 1997). At the same time the development of the Palestinian health sector was discouraged. The main mechanism employed by the Israeli authorities was denying licenses for the establishment of health institutions or imposing high taxes on them (Barghouthi and Giacaman, 1990, p. 77-78).

The Israeli authorities also restricted access of Palestinians to public health care by introducing a government health insurance scheme in 1974. As a result only insured Palestinians could benefit free of charge from government health services. Those who were enrolled in the government health insurance, mostly employees with the Israeli government and workers in Israel, benefited. A small percentage of the population, estimated at 5-8 percent, was enrolled voluntarily. The percentage of the population that was insured in the Israeli health insurance scheme decreased continuously and reached the lowest rate of health-insured people in the entire Middle East. Furthermore, voluntary enrollment was restricted due the high insurance premium, although political reasons were certainly a factor as well (Barghouthi and Lennox, 1997, p. 28).²⁷¹

The marginalization of the public sector is also reflected in the per capita expenditure by the Israeli government on health in the Occupied Territories. Whereas in 1991 the Israeli government spent US\$ 350 per capita on health care in Israel, its annual expenditure on health in the Occupied Territories was estimated at only US\$ 30 per capita. As a result of Israel's policy to keep the public sector underdeveloped, half of the US\$ 32 million of Israel's health budget for the Occupied Territories was spent on treatment in Israeli health institutions (Daibes and Barghouthi, 1996).²⁷²

²⁷¹ Prior to the take-over of the health sector by the Palestinian Authorities, only an estimated 25 percent of the Palestinians were enrolled in the government health insurance plan.

²⁷² According to the World Bank, the Israeli government spent 43.8 million in 1991 whereby 61% was spent on secondary health care and only 28% on primary health care (World Bank, 1993, p. 25).

In addition most of the clinics operated only on a part-time basis. This is especially true for the West Bank where, in 90 percent of the clinics, a physician was available for not more than two days per week (World Bank, 1993). The quality of public health services was also kept underdeveloped and specialized doctors were few. There were only 19 specialists in the Gaza Strip, and 26 in the West Bank (Barghouthi and Lennox, 1997, p. 14).

Health policy in the Occupied Territories remained Israel's responsibility. Although the majority of the employees in the public health sector in the Occupied Territories were Palestinians decision-making was confined to a small number of Israeli army officers responsible for public health (USAID, 1993).

Prior to the PA's take-over, the government health care system consisted of 178 clinics in the West Bank and 28 in the Gaza Strip as well as 14 hospitals (9 in the West Bank and 5 in the Gaza Strip).

The ratio of human resources in health (physicians and nurses) per population is comparable to the regional average in the Middle East. According to the World Bank, there are 56 doctors per 100,000 people in the West Bank and 78 doctors per 100,000 in the Gaza Strip compared to an average of 80 doctors per 100,000 people in the Middle East (World Bank, 1993).

While these figures do not indicate a major deficiency, there are great disparities across the regions of the West Bank. The central region of the West Bank, that is, Jerusalem, Bethlehem, Ramallah and Nablus, reveal higher ratios of physicians or nurses per population. In Jerusalem there are 1.22 physicians and 2.97 nurses per 1,000. In Jenin, North West Bank, in contrast, there are only 0.53 physicians and 0.52 nurses per 1,000. These figures suggest that human resources in the health sector are very unevenly

distributed, with high concentration in some regions at the expense of others (PHC, 1995, p. 8).

The result of the Israel's attempt to keep the health sector underdeveloped is reflected in the health indicators. These indicators are especially reflected in the high infant mortality rate. According to official statistics of 1993, 40-45 out of 1,000 newborn infants died.²⁷³ Unofficial estimates, however, indicate a much higher figure - between 50 and 70 deaths out of 1,000 newborn infants - based on the assumption that many infant deaths are not reported. Seventy percent of infant deaths are caused by infectious diseases, predominantly respiratory diseases.²⁷⁴ This high number of infants deaths is related to poor environmental conditions and sanitation as well as overcrowding (Barghouthi and Lennox, 1997, p. 10-12; World Bank, 1993, p. 17).

Although a high proportion of the GNP (7 percent in 1991) has been spent on health care in the Occupied Territories, a corresponding health status has not been achieved. The average expenditure on health in the Middle East is 4.1 percent of the GNP, while in established economies the GNP proportion spent on health is approximately 9 percent (World Development Report, 1993 quoted in Hecht and Musgrove, 1993).

The high levels of expenditure on health compared to the low outcomes point to a distortion or imbalance in the health sector. These are predominantly related to the effects of the Israeli occupation on the social, economic and political development in the Occupied Territories but also to the inefficiency in health care delivery (Lennox, 1998, p. 23-24).

²⁷³ Heiberg and Øvensen estimate infant mortality at 48 (Heiberg and Øvensen, 1994, p. 60).

²⁷⁴ This figures compares to 34 in Jordan and 10.3 in Israel (Interim Action Plan, 1995).

In addition to public health care, which was controlled by the Israeli authorities, UNWRA has been providing health care to registered Palestinian refugees.

2. UNRWA

UNRWA was established in 1949 to provide relief and social services, basic education and health care to Palestinians who were displaced as a result of the 1948 war. In the Occupied Territories it provides primary health care through its 42 clinics. As it has only one hospital, located in Qalqilya, West Bank, UNRWA provides most of its secondary health care through contractual agreements with NGOs, government hospitals under Israeli control, and private clinics. Co-payments for hospital care range from 12 percent to 40 percent of treatment costs (Barghouthi and Lennox, 1997, p. 17). Because the majority of the registered refugees live in the Gaza Strip, UNRWA has its strongest presence there.²⁷⁵

Similar to the Israeli controlled government health sector, UNRWA's share in health care provision dropped considerably. While in 1967, 17 percent of the total primary health care was provided by UNRWA, this share declined to 4 percent in 1992. The decline of UNRWA's health care provision also reflects the lack of adaptation to population growth and the increasing needs that resulted. Sixty percent of UNRWA's clinics were established before 1967. Its only hospital with 43 beds located in Qalqilya was built in 1950 (Barghouthi and Daibes, 1993).

²⁷⁵ In December 1993, 72 percent of the population in the Gaza Strip were registered refugees. The population in the Gaza Strip is 772,555. Of these 556,000 are registered refugees (Daibes and Barghouthi, 1996, p. 20).

As a result, UNRWA has the highest consultation rate per day, reaching as high as 118 patients per physician and per day.²⁷⁶ This development has a negative impact on the quality of health care. The high consultation rate is also reflected in the average time physicians spend with their patients. In contrast to other health care providers, UNRWA has by far the lowest figure.

Furthermore, UNRWA clinics in the West Bank are concentrated in populated urban areas. As a result only 50 percent of the registered refugees in rural areas have access to UNRWA services (Barghouthi and Daibes, 1993, p. 77).

Analysis of UNRWA's expenditure reveals a different focus in the West Bank and the Gaza Strip. Of the budget allocated to the West Bank, 47 percent was spent on primary health care and the remaining on secondary health care. In the Gaza Strip, in contrast, 65 percent were allocated to primary health care and 35 percent to secondary health care. This difference is explained by the larger proportion of registered refugees in the Gaza Strip who have been making use of UNRWA's primary health care services.

3. Private health care provision and charitable organizations

In addition to the public health care sector controlled by Israel, and UNRWA, health care was also provided by Palestinian institutions, i.e. charitable and private health institutions. In contrast to charitable organizations, the private health sector remained, until the creation of the PA, rather small.

In its provision of health care, the private sector followed largely a biomedical approach to health care. This approach required an expensive health infrastructure,

²⁷⁶ Interview, Umayyah Khammash, UNRWA, October 1998. This is more than twice the recommended consultation rate (Barghouthi and Lennox, 1997, p.17).

resulting high consultation fees and rendering private health care provision inaccessible to a large number of Palestinians, especially those living in poor and rural areas. Furthermore, this inaccessibility was exacerbated by the location of most private health care facilities in urban areas.

Similar to the private health care sector, charitable organizations based health care services on a biomedical approach. However, in contrast to the private sector, they often offered their services for low fees, as they have relied in their operation on external, mostly Arab, funding. Under the Israeli occupation charitable organizations underwent a process of transformation. Initially, i.e. from 1967 to the early 1970s, the health care sector attempted to accommodate to the new situation under Israeli occupation and perceived the Israeli control of the health sector as a new status quo. However, as a result of the *sumud* approach, which was adopted by the PLO in 1973, numerous Palestinian health care institutions, mostly charitable organizations, received funds with which they developed and upgraded their facilities.²⁷⁷ The deterioration that had characterized the health sector was viewed as the result of the Israeli occupation. In addition to expanding existing institutions, this phase was characterized by attempts on the part of health care providers to obtain permits from the Israeli authorities for existing and new Palestinian health care facilities. While during this period and until the late 1970s there was an increase in the number of health institutions permits were granted only selectively and based on political considerations. Thus, Israel retained its control over the development of the health sector.

Like their predecessors, the health institutions during this period adopted a biomedical approach to health care. Similarly, the majority of health care facilities remained urban-based. As a result, the rural population, which in the West Bank

²⁷⁷ See Chapter III.

constitutes the majority, received disproportionately less access to health care. It was this marginalization of the rural and remote areas in the West Bank that led to the rise of a new health movement in the late 1970s and early 1980s (Giacaman, 1989; Robinson, 1997a, p. 38).

4. The emergence of health committees

The new health movement that emerged in the 1970s and early 1980s formed part of a larger movement that sought to redress existing inequalities in the health sector. It consisted of health committees that were organized at the local level. In the view of the health movement, existing distortions in the health sector cannot solely be attributed to the affects of the Israeli occupation. Rather they are a reflection of inequalities in Palestinian society, of which inequity in health care provision is only one aspect. Thus, in order to redress these inequities the health movement situated change of the health care system as part of a larger social reform. The reform of the health sector required, according to the health movement, the involvement of previously marginalized segments of society, in particular the rural population, in the formulation and implementation of health care provision. To this end committees at the local level were created, which were organized under a union (Khammash, 1994; Craissati, 1997, p. 32; Barghouthi and Giacaman, 1990). The first committee that was created in 1979 was the Union of Palestinian Medical Relief Committees. Similar to other committees, such as women's, left-leaning factions were instrumental in their formation (Taraki, 1989). Furthermore, as in the case of other committees, the development of committees was shaped by the competition among factions to expand their constituencies. Thus the UPRMC became affiliated with the Palestine Communist Party (PCP). Its creation followed by the Union

of Health Work Committees and the Union of Health Care Committees affiliated with the Popular Front for the Liberation of Palestine and the Democratic Front for the Liberation of Palestine, respectively. Both were created in 1985. The health committee affiliated with Fatah, the Health Services Council, was established only five years later, in 1990. Moreover, the latter differed considerably from the other committees. In contrast to the other health committees the Health Services Council (HSC) followed a biomedical approach.²⁷⁸ It was not only close to charitable organizations in its approach to health care but also regarded itself as such. Like other charitable organizations, it was registered with the Israeli authorities (Robinson, 1993, p. 308-308).

Another distinctive feature of the HSC is its structure. Although it is generally regarded as part of the health committee movement, the HSC, unlike the other committees, does not constitute a union but a council. More specifically, the involvement of the community, which is characteristic of the other health committees, is limited in the case of the HSC. Thus, decision-making is highly centralized and confined to its board of directors. Furthermore, the program of the HSC is implemented by paid personnel instead of volunteers. The other health committees, in contrast, have relied on a high number of volunteers from the communities to operate their programs (Daibes and Barghouthi, 1996, p. 49; Craissati, 1997, p. 137).

The Union of Health Care Committees (UHCC) expanded its network of clinics in the 1980s considerably. Prior to the intifada the UHCC had 12 clinics, but by the early 1990s the number of clinics had grown to 26. It focused in its programs on improving access to health care services.

In contrast to the other committees, which provided their services primarily in the West Bank, the UHWC had a stronger presence in the Gaza Strip (Robinson, 1993, p.

²⁷⁸ It was formally established in 1990.

306). Like the UHCC it created its network of clinics in order to improve access to health care facilities for the marginalized segments of society. During the intifada the UHWC expanded the number of its clinics considerably, from 13 to 40.

The Union of Palestinian Medical Relief Committees (UPMRC) has played since its creation a crucial role in the new health movement. In contrast to the UHWC and the UHCC, which both focused on improving access to health care services, the UPMRC added another component—namely, an effort to change attitudes towards health. To this end it engaged in extensive health education campaigns.²⁷⁹ The UPMRC was also dominant in establishing a system that involved the community through its active participation in decision-making and program implementation. In its attempt to mobilize marginalized groups for the implementation of its programs, the UPMRC has succeeded in involving a high number of women at all levels of the organization, including the leadership. Moreover, women played a key role in the founding of the UPMRC. In contrast to the low percentage of female Palestinian doctors (6 percent of total), one third of the UPMRC's doctors are women (Barghouthi and Giacaman, 1990, p. 79).

The Union of Palestinian Medical Relief Committees, the Union of the Health Work Committees, and the Union of the Health Care Committees were especially instrumental in addressing the structural problems in the Palestinian health system and in developing an alternative approach to health care. In contrast to the biomedical approach applied by charitable organizations and in hospitals, which requires an expensive infrastructure, the committees focused on preventive health care and health education, particularly in marginalized regions. Here the UPMRC assumed a leading role and health

²⁷⁹ The UPMRC's health education material is distributed not only within the West Bank and the Gaza Strip, but also in neighboring Arab countries.

education constituted a cornerstone of its focus on primary health care (Barghouthi and Daibes, 1993). They also focused on the establishment of clinics in rural and underprivileged areas, particularly in the West Bank. Furthermore, the committees view effective primary health care as crucial for minimizing costs at the level of secondary and tertiary health care. Therefore, their focus has been on health education and preventive health care (PHC, 1995; Barghouthi and Daibes, 1993).

In brief, the committees followed the recommendations of the 1978 Alma Ata Conference, the "Health for all by the year 2000," with its emphasis on primary health care (Khammash, 1994; Craissati, 1997, p. 132; and Barghouthi and Giacaman, 1990, p. 80). According to the Alma Ata Declaration of 1978, primary health care is defined as:

...essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination.²⁸⁰

The committees expanded substantially. Whereas prior to the take-over of the health sector by the PA, both the public health sector and UNRWA had experienced a considerable decline in their shares of total health care provision, the reverse was true for the health committees and charitable organizations. From 1967 to 1992 their share increased from 8 percent to 68 percent respectively. According to Daibes and Barghouthi, 84 percent of the clinics after 1967 were established by health committees, charitable organizations or the private sector (Daibes and Barghouthi, 1996). Sixty percent of these clinics were established by health committees while the remaining 40 percent of the

²⁸⁰ World Health Organization, "Primary Health Care: Report of the International Conference on Primary Health Care, Alma-Ata, USSR, 6-12 September 1978. Jointly sponsored by the World Health Organization and the United Nations Children's Fund" (Geneva: World Health Organization, 1978), page 3, Article VI.

clinics by charitable organizations and the private sector. A distinctive feature of clinics created by the committees is their focus on marginalized regions.

A survey conducted on rural clinics in the West Bank at the beginning of the 1990s revealed that the clinics run by the committees are concentrated in the most deprived areas in the north and south of the West Bank, and in the Jordan Valley (Barghouthi and Daibes, 1993). Another survey of 1992 found that 84 percent of committee clinics were in rural areas, compared to 47 percent of the clinics run by charitable organizations (PHC, 1995, p. 26). In contrast, the majority of public and private clinics were in the urban and central regions of the West Bank. The high presence of committees in rural areas is of particular importance in the West Bank where 67% of its population live there. The Gaza Strip in contrast is less rural. There, 43.9% live in four towns, 40.5% in refugee camps and 15.6% of the population live in villages (Barghouthi and Daibes, 1993).

Furthermore, in contrast to the Israeli controlled public sector and UNRWA, both of which restrict their services to either insured persons or registered refugees, committee clinics offer their services to all sectors of the population. Furthermore, their fees are considerably lower than those charged by the public sector. While fees charged by committee clinics range between US\$ 1.5 and 5 for medical examination and US\$ 55 for a hospital stay, the governmental sector charged US\$ 20 and US\$ 200 for the same kind of services (Khammash, 1994; World Bank, 1993).

The network of health care facilities established by the committees became instrumental in the intifada when existing health providers imposed' extreme limitations on treating the substantial number of injured. In the first year of the intifada alone 389 deaths and 20,000 injured were reported (Barghouthi and Giacaman, 1990, p. 81). Treatment in the Israeli controlled government hospitals constituted a risk for injured

Palestinians, who feared arrest by the Israeli authorities. Moreover, the Israeli authorities decreased the availability of government health services by reducing its health budget for government hospitals by half and by raising fees for hospitalization. UNRWA's services, in turn, were free of charge only for registered refugees. In addition, as noted above, the majority of UNRWA's health facilities are located in urban areas, leaving the rural areas under-served. In response to the inability of existing health care facilities to cope with the situation created by the intifada, the health committees systematically extended their services to rural areas in order to provide for the injured there. Mobile clinics were created by the Union of Palestinian Medical Relief Committees, the Union of Health Work Committees, and the Union of Health Care Committees to reach marginalized and rural areas.²⁸¹

The mobile clinics became especially important for Palestinians who were injured during the intifada but had no access to other health care facilities. Moreover, in many isolated communities health services became available for the first time.

As the health committees rejected Israeli control over the health sector and as a result had refused to register with the Israeli authorities, mobile clinics facilitated effective evasion from Israeli control (Robinson, 1997a, p. 40). It was in particular the UPMRC that played a significant role during the intifada. In order to treat large numbers of injured Palestinians it established a national blood bank. While a national blood bank had existed before the Israeli occupation, the Israeli authorities closed it in 1967 (Barghouthi and Giacaman, 1990, p. 75). In addition it was instrumental in establishing First Aid centers. This system expanded rapidly and by October 1989, the UPMRC had catalogued 24,000 Palestinians as potential donors. This number further increased and reached 40,000 in 1994 (Robinson, 1993). The UPMRC has thus created a mechanism

²⁸¹ Only later were permanent clinics established.

through which it could respond efficiently to the increasing numbers of injuries during the intifada.

By addressing the needs of marginalized and rural areas, the health committees gained a high level of popular support and legitimacy in these communities. Their legitimacy was further enhanced by the fact that they offered their services free of charge for patients who faced economic hardship (Craissati, 1997, p. 131-132).

As the largest of the committees it was particularly the UPMRC that gained dominance during the intifada.

C. Health Care under Palestinian Rule

1. Public health care

When the PA took over the public health sector in May 1994, it inherited a health care system that suffered from weaknesses in both structural and infrastructural underdevelopment. Furthermore, the health care system was fragmented and health care was provided by four different health care providers, the UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), the private sector, the non-governmental sector and the government sector, previously controlled by Israel, without, however coordinating their services. Plans to reform the health care system were initiated in the early 1990s.

Following the 1991 Madrid Conference the PLO initiated plans to rehabilitate the health sector. A special body, the Palestine Health Council (PHC), was formed in July 1992 by the PLO as the central health authority in the Occupied Territories. It was charged with administering and coordinating health services in the West Bank and the Gaza Strip and with implementing the health plans (Craissati, 1997, p. 140).

The vision on the health sector reform is reflected in the National Health Plan and the Interim Action Plan.²⁸² Both were developed by the Palestine Red Crescent Society (PRCS).²⁸³

In 1990 a commission was created to formulate a Palestinian National Health Plan for the Occupied Territories. A first draft was concluded in April 1994. In addition to the National Health Plan, an Interim Health Plan was developed, which focuses on the five-year interim period of Palestinian self-rule. The major focus of the Interim Health Plan is a detailed implementation strategy of the National Health Plan.

The two plans, which constitute the first ever Palestinian national health plans, emphasized making optimal use of the existing resources. In order to fulfill this goal, the plans suggest the coordination between the government and private sectors as well as with UNRWA. Nowhere do the plans refer to health NGOs, in particular health committees, nor do they advocate their inclusion in the coordination schemes (see also Khammash, 1994, p. 29).

Criticism of the plans by health committees has centered around several issues. It has been claimed that the plan fails to design an overall strategy for the rehabilitation of the health-care system. The plans have also been criticized for emphasizing the rehabilitation of infrastructure without paying sufficient attention to structural problems such as the absence of protocols and standards and the coordination between different health providers. Furthermore, the plans' rationale that secondary and tertiary health care

²⁸² The National Health Plan for the Palestinian People. Objectives and Strategies (April, 1994); Interim Action Plan: Addressing immediate health needs for Palestinians, 1 January 1994 - 31 December 1995 (PRCS and PHC, March 1994 (Draft) and October 1994 (Final Document)).

²⁸³ The PRCS was created in 1969 as a PLO body and was responsible for health provision for Palestinians and health policy formulation. As it was regarded by Israel as illegal it mainly operated outside the Occupied Territories. Since the PA took over, the PRCS has developed into a semi-governmental organization (Barghouthi and Lennox, 1997, p. 18).

form the foundation for a comprehensive primary health care system has been challenged (PHC, 1995, p. 2; Schnitzer and Roy, 1994; Barghouthi and Lennox, 1997, p. 51-53).

Critics of the plans further pointed out that the emphasis on the rehabilitation of the physical infrastructure at the expense of primary health care was considered financially damaging as it leads to a deficit of the limited budget Ministry of Health (Barghouthi and Lennox, 1997, p. 51-52). Moreover, studies on the rehabilitation of health care systems in post-conflict situations have indicated the risk associated with strategies focusing on infrastructural development without considering long-term development objectives (Macrae et al., 1996).

The critics argued that given the inherited weaknesses of the health care system, a focus on the rehabilitation of infrastructure, while at the same time neglecting the development of primary health care, will likely produce a dual health care system. More specifically, the health care system that is likely to emerge will be one consisting of a costly secondary and tertiary sector for the well-off parts of society and an underdeveloped primary health care sector for the poor strata of society (Barghouthi and Lennox, 1997, p. 53).

Finally, criticism highlighted that the plan fails to take into account the innovative approaches, which were in particular developed by the health committees, and which focus on primary health care as a means to develop a more equitable health care system. In addition a major weakness of the plans was viewed in its projected expenditure on health of an annual 11.2% of the GDP, which, according to the critics, remains high and unsustainable.²⁸⁴

²⁸⁴ This figure is projected until the year 2002 (*The National Health Plan*, April 1994, p. 128; see also Schnitzer and Roy, 1994).

The marginalization of the indigenous NGO sector in health care reforms is also reflected at an institutional level (Craissati, 1997). The PA initially attempted to marginalize the indigenous health sector and health institutions. This was done in two ways. First, it created new institutions that were to assume control over the health sector. In addition to the creation of the central health authority, the PHC, the PA also established local health councils in the West Bank and the Gaza Strip that were to assume responsibility for the health sector. Similar to the Palestine Health Council, the local health councils neither included NGOs, nor took NGO experience into account (Khammash, 1994; Craissati, 1997, p. 142).

Second, the PA also imposed control through replacing the existing leadership of health organizations with its own appointees. The most visible example is that of the al-Maqassed Hospital in Jerusalem. Following the Israeli occupation in 1967, this hospital was changed from a government into a non-governmental hospital in order to evade or minimize Israeli control. When the PA took over responsibility for the health sector it appointed Fathi Arafat, former head of the PRCS in Cairo, as the new leader of the al-Maqassed (Craissati, 1997, p. 138).

Health NGOs criticized the PA's move to marginalize them. Criticism, however, was not evenly shared among them. The different attitudes towards the PA approach are mirrored among the four health committees: the Health Services Council (HSC), the Union of Health Work Committees (UHWC), the Union of Health Care Committees (UHCC) and the Union of Palestinian Medical Relief Committees (UPMRC) (Taraki, 1989).

The approach of the HSC to health care was very similar to that of the PHC. The HSC viewed primary health care delivery as mainly the concern of the PA rather than that of health NGOs.

Criticism by the two other health committees - the UHWC and the UHCC - centered around the composition and structure of the PHC. Both maintained that its structure is undemocratic and centralized. Furthermore, they criticized the composition of the PHC which, according to them, was based on political considerations. Neither NGO, however, presented an alternative vision on the composition and role of the central health authority (Craissati, 1997, p. 142).

The UPMRC went a step further than the above mentioned health committees. It criticized not only the structure of the PHC, but also the health plans for their approach to health care delivery. Moreover, unlike the UHWC and the UHCC, the UPMRC presented its own alternative vision. This vision emphasized the important role of NGOs in providing the necessary expertise for health policy formulation at the national level. Furthermore, health care reform, according to the UPMRC, should be a joint effort by all health care providers, with the primary function of the MOH being the design of health policy. Health policy should further address the issue of equity in health care; in particular it should be responsive to the needs of the underprivileged (Craissati 1997, p. 143).

The neglect of primary health care by the MOH is reflected in the latter's expenditure. Rather than focusing on primary health care, the MOH's is currently engaged in the expansion and building of 13 new clinics and 1 hospital, and otherwise expanding current facilities. According to the Ministry's priorities, the MOH is planning to expand the government sector by 97 additional clinics by the year 2002. More specifically, the MOH plans to increase hospital capacity by 60 percent and primary health care clinics by 20% by the year 2002 (MOH Priorities, June 1997 quoted in World Bank, 1997, p. 5). Through an investment of US \$ 69.4 million, the objective of the MOH

is to increase the number of hospital beds from 1.2 beds (in 1995) to 1.7 per 1,000 persons. This would mean an increase from 1327 hospital beds in the West Bank and the Gaza Strip (both governmental and non-governmental) to 4317 beds (Barghouthi and Lennox, 1997, p. 37).²⁸⁵ The expenditure on hospital expansion and development will add a yearly US \$ 19 million to the MOH's budget. Given the MOH's budget deficit of US\$ 62.892 million (in 1995), that is 59 percent of its budget, this development will further increase its deficit (Barghouthi and Lennox, 1997, p. 28).

Moreover, the analysis of MOH's expenditure reveals that the MOH is concerned above all with secondary and tertiary care. While primary health care represents approximately 90% of health care usage, only 16 percent of the overall budget of the MOH is allocated to primary health care (Daibes and Barghouthi, 1996). In contrast, secondary and tertiary health care, which constitute 10 percent of the usage in the health sector, consume 80 percent of the MOH's expenditure on health. Furthermore, the priorities of the MOH of June 1997 reveal that expenditure on primary health care from 1997 - 2002 will constitute only 15.9 percent of a total expenditure of US \$ 270.60 million during this period.

Furthermore, a high proportion of the MOH's budget, 18 percent, is spent on referrals to non-MOH clinics, that is clinics of the NGO sector, but also to Israel, Jordan and Egypt. Moreover, referrals to the Israeli hospitals consumes approximately 70% of the referral budget.²⁸⁶ In order to reduce dependency on the Israeli health system, the MOH has focused on expanding the number of hospitals as well as encouraging the development of the private health sector. The expansion of secondary and tertiary health

²⁸⁵ This compares to 6.1 hospital beds per 1,000 persons in Israel (Barghouthi and Lennox, 1997, p. 37).

²⁸⁶ Most of the referrals of Palestinian patients insured with the MOH are treated in the Israeli Hadassah Hospital (Barghouthi and Lennox, 1997, p. 35).

care is ultimately damaging to the Palestinian health care system (Barghouthi and Lennox, 1997, p. 45).

Another financial burden for the health budget is the high number of social welfare cases (19 percent of the insured) and police officers (11 percent). Both are exempt from paying insurance premium (Daibes and Barghouthi, 1996, p. 61).

The MOH's focus on the rehabilitation and expansion of secondary and tertiary care has been also supported by the policy priorities of international donor agencies. Moreover, in the absence of a coherent national health plan, the influence of international donors has increased. In July 1996, the Secretariat of the Local Aid Coordinating Committee (LACC) indicated that the priorities for 1997 are infrastructural - including particularly clinics, hospitals and equipment - rather than structural development (Barghouthi and Lennox, 1997, p. 42).²⁸⁷

A prominent example of the imposition of donor preferences is the recently built hospital in Jericho. Although the MOH had planned to upgrade the existing government hospital in Jericho, the Japanese government, the single largest donor, insisted on building a new 50-bed hospital at a cost of US\$. 19 million. Given the government hospital's low occupancy rate of 28 percent, the new hospital will add to a waste of resources (Daibes and Barghouthi, 1996, p. 30).

With expenditures especially on secondary and tertiary health care rising, an inefficient revenue collection system is likely to exacerbate the budget deficit of the MOH. The deficit is covered through the PA's central budget, a fact that will deplete the PA's limited resources.

²⁸⁷ The Local Aid Coordination Committee was established in November 1994 to coordinate aid provided by the major aid agencies (Brynen, 1995, p. 3).

As the PA's tax collection system remains weak and ineffective and revenue from insurance premiums and patients' co-payments insufficient, the MOH relies mainly on external funding for its budget.²⁸⁸ In 1995, only 41 percent of the MOH's recurrent costs could be covered by internal sources such as insurance and patients' co-payments (Barghouthi and Lennox, 1997, p. 30).

Despite the MOH's improvements of the government health insurance system, which resulted in a rising participation in the insurance scheme increased, total revenue from insurance premium has fallen. The MOH lowered the premium levels for government health insurance and expanded insurance coverage. While insurance enrollment prior to the take-over by the PA was only 25 percent it has been increasing since then. Insured households increased from 134,000 in 1993 to 161,454 in 1996, or 33% of the population. By 1998, 42 percent of the households or 38 percent of the population were insured (Barghouthi and Lennox, 1997, p. 26). It, however, could only cover 25 percent of its budget from insurance premiums, while co-payments accounted for 10-15 percent and the remaining 60 percent were covered from general taxation. According to Lennox, given the existing arrangement between the MOH and the Ministry of Finance (MOF), there is little incentive for the MOH to increase the level of its revenue in order to improve its system of revenue collection. More specifically, while the MOH collects revenue from health insurance, the amount is transferred to the MOF. The latter then approves the yearly budget of the MOH regardless of the level of revenue collected by the MOH (Lennox, 1998, p. 35-37; 154).

While the PA succeeded in introducing improvements to the health care system, in particular the expansion of the public health insurance scheme to a growing number of

²⁸⁸ The MOH was able to collect only US \$ 22.933 million from insurance and US \$ 8.245 million from patients' co-payments in 1995. The total revenue of the MOH amounted to US \$ 31.178 million.

people and the rehabilitation of some of the health infrastructure, grave distortions remain unaddressed, in particular, the disparity in health care provision between rural and urban areas.

In the absence of a comprehensive health plan that focuses on addressing marginalized groups and regions and the regulation of health care provision, the health sector has tended to concentrate in urban areas. This development has led to shortages of services in some rural areas. In addition, the MOH's focus on secondary health care, as well as the expansion of the private health sector have increasingly restricted access to health care for the poorer segments of society.

Current developments reveal that the persistence of distortions in the health sector has contributed to an evolving dual health care system with expensive secondary health care developing at the expense of primary health care. Given the limited resources available, health reform should therefore address the improvement of primary health care as a means first to minimize expenditure for secondary and tertiary health care, and second to promote an equitable health care system that is accessible to all of society. While UNRWA and the private sector have played an important role in supplementing public health care, they both fell short of addressing existing distortions in the health sector.

2. UNRWA and the private sector

Following the creation of the PA, UNRWA continued to provide health services, but will eventually merge its services with those of the MOH and thus will become part of the public health sector.²⁸⁹ Although UNRWA is currently not actively involved in any policy making in the Palestinian areas, it has extensive coordination with the MOH.²⁹⁰ UNRWA has already increased cooperation with the MOH by referring many of its patients to government hospitals (Lennox, 1998, p. 27). This development comes at the expense of the NGO sector. As UNRWA has focused on the delivery of primary health care, an eventual merger with the MOH might involve a shift from the MOH's current emphasis on secondary and tertiary health care to an increased focus on primary health care. The recently appointed head of UNRWA's health department, Dr. Ummayah Khammash, one of the founders of the UPMRC and therefore an advocate of primary health care, will certainly contribute to this development.²⁹¹

Currently, however, UNRWA's provision of services has remained constrained due to funding shortages (World Bank, 1993). Despite an increase of its budget of 46 percent between 1992/1993 and 1994/1995, UNRWA has been unable to adequately address the needs of the refugee population.

In contrast to UNRWA which has been facing financial constraints, the private health care underwent the most profound change. This is especially reflected in the establishment of new clinics. Between 1992 and the end of 1994, 51 new private clinics

²⁸⁹ The PA, however, is unlikely to take over UNRWA's responsibilities without a political settlement to the refugee problem.

²⁹⁰ In addition, UNRWA is a member of several technical committees headed by the MOH. These committees deal with women's health, TB, and epidemics and others (Interview, Ummayah Khammash, UNRWA, October 1998)

²⁹¹ Interview, Ummayah Khammash, UNRWA, October 1998.

opened. The total number of private clinics at the end of 1994 reached 164, approximating the number in the NGO sector, i.e. health charitable organizations and health committees (Lennock, 1998, p. 29).²⁹² However, in contrast to the latter, the majority of private clinics are located in urban areas.

In addition to private clinics, private health insurance companies were created. The two largest companies are Al-Mashriq and the Arab Insurance Company. While the development of the private sector was encouraged by the MOH as a means to reduce dependence on the Israeli health sector, the MOH failed to regulate its development. Private clinics are characterized by their emphasis on costly advanced diagnostic and secondary health care. The growing private sector with high fees for services has not only encouraged oversupply in the health sector, but has also restricted access to these services to the well-to-do parts of society (Barghouthi and Lennock, 1997, p. 22-24).

The growth of the private sector also affected other health care providers in that it attracted highly skilled medical staff from health organizations and the public health sector but from UNRWA as well.²⁹³ This trend is promoted by the considerable difference in salaries in the various sectors.²⁹⁴ Although a law exists that prohibits general practitioners and specialists in the public health sector in the West Bank from maintaining a private practice, the MOH does not enforce this law.²⁹⁵ While the majority of health personnel were employed in the NGO sector in the early 1990s, the increasing employment of physicians in the private sector is likely to change this trend. The growth of the private sector has compounded the problem stemming from the MOH's emphasis

²⁹² The two largest private health care providers are Arabcare Medical Services and MedLab Palestine.

²⁹³ According to UNRWA regulations, UNRWA doctors are allowed to run a private practice.

²⁹⁴ Basic monthly salary for physicians at the MOH are US\$ 629, at UNRWA US\$ 921, the NGO sector US\$ 900-1000, and US\$% 1000-1200 for the private sector (PHC, 1995, p. 86).

²⁹⁵ In contrast, specialists in the Gaza Strip are allowed to run a private practice, according to MOH regulations.

on secondary and tertiary health care by contributing to the development of a dual health system, with a private sector monopolizing advanced diagnostic health care at the expense of expanding primary health care. Under the leadership of the UPMRC, health committees attempted to reverse this development through their continuous focus on primary health care for neglected segments in society. Despite their relative weakening as a result of declining funds they remain important health care providers. Currently they provide a significant share of health care: 62% of primary health care, 50% of secondary health care, and all rehabilitation services.

3. Non-governmental organizations

Since the 1990s and in particular since the establishment of the PA, health NGOs have experienced a substantial decline. As they have relied on external funding for their operations, the shift of funding by international donors from the NGO sector to the PA has deprived them of their main source of revenue. It is estimated that the expenditure of all NGOs (including health NGOs) declined from an estimated US \$ 170-240 million in the early 1990s to US \$ 90 million in 1993. By 1995, the estimated NGO expenditure declined by an additional 30% (World Bank, 1993, p. 15; Barghouthi and Lennox, 1997, p. 39). The decline in expenditure has also been true for the health NGO sector. As a result, numerous NGO clinics have had to close. A survey on rural clinics in the West Bank shows that their number decreased from 210 in 1992 to 128 in 1996. The largest decline, of approximately one third of the rural clinics, occurred between December 1992 and December 1994, from 210 to 145 clinics (Barghouthi and Lennox, 1997, p. 39).

However, not all health NGOs were equally affected by the decline in international funding. Charitable organizations that typically had relied on Arab funding were affected most by the declining funds. Among the health committees, the Union of Health Work Committees closed 30 percent of its clinics between 1992 and 1994 and the Union of Health Care Committees 50 percent. Moreover the UHCC suffered a major blow when the DFLP split as a result of disagreement over the peace negotiations within it.²⁹⁶ The division of the DFLP was mirrored at the level of the UHCC and led to the closure of 14 clinics in 1992. As a result, the UHCC is marginalized and weakened.

The Health Services Council (HSC) – affiliated with Fatah, in contrast, ceased to exist as it merged with the Ministry of Health. Most of its clinics were closed and its employees incorporated into the Ministry of Health (Craissati, 1997, p. 140; Daibes and Barghouthi, 1996, p. 49).

The decline in the number of NGO clinics has profound implications on the health sector. While the shift in international funding to the governmental sector has increased the budget of the MOH, the latter has been unable to substitute for the services previously provided by the NGO sector. Furthermore, especially the clinics of the committees are located in rural areas, the rural population has been disproportionately affected by the closure of clinics. Moreover, their closure reverses some of the achievements of the toward establishing a more equitable health system. This trend has been exacerbated by the general tendency of the MOH to focus on the rehabilitation of the health infrastructure while neglecting structural distortions in health care provision in the West Bank and the Gaza Strip.

Although the UPMRC, had to, due to a decrease of funds, reduce the number of its clinics in 1992 from 34 to 25, a reduction of 28 percent, it was compared with other

²⁹⁶ Robinson, 1997a, p. 49.

NGOs less affected by declining international funds. According to its director, Mustafa Barghouthi, the relatively small decline in the number of UPMRC clinics resulted from its earlier decision not to expand its facilities, despite the availability of external funding at the time. In addition, the UPMRC responded to the decline of funds later on by establishing an income-generating project, the Optometry Center in Ramallah, West Bank, in September 1995. This project currently provides around 15 percent of the UPMRC's budget with the potential to be raised to 30 percent, according to the UPMRC's director.²⁹⁷

Despite the reduction of the number of its clinics, the UPMRC was able to maintain its leading position in the health sector and the numbers of its clinics constitute 52% of all committee clinics.²⁹⁸

The UPMRC continues to reach a considerable part of the population. It is active in 220 communities, of approximately 390,000 people. Furthermore, a major component of its activities are 11 rehabilitation programs for 80 communities as well as seven mobile dental clinics serving 50 communities. It operates a women's health program and community-based rehabilitation projects for the disabled in 95 communities, reaching 310,000 people.

In addition, the UPMRC has been able to maintain a network of mobile clinics that serves 180 communities. They have constituted a crucial means of reaching remote rural areas that have no other access to health care facilities. The mobile clinics, which are staffed with doctors and village health workers, provide screening and preventive health care as well as specialized services, such as dermatology and dental care. The

²⁹⁷ Interview, Mustafa Barghouthi, UPMRC, October 1998.

²⁹⁸ Interview, Mustafa Barghouthi, UPMRC, October 1998.

UPMRC has also used mobile clinics to provide services to displaced persons, such as the 42 Jahalin Bedouin families, who were displaced in March 1997.²⁹⁹

In addition to its outreach program to rural and marginalized communities, the UPMRC holds health fairs in the communities. Through these, the UPMRC provides free check-ups and distributes material on health education. The health fairs are regularly attended by 1,000-3,000 people. The UPMRC has also addressed the need for psychological counseling by developing a counseling program in 1992.³⁰⁰

Furthermore, the UPMRC revived its First Aid program in September 1996, after clashes occurred between Palestinians and Israeli soldiers. These clashes erupted after the opening of the Hasmonean Tunnel,³⁰¹ and led to 63 casualties and 1400 injured Palestinians. Since the end of 1996 the UPMRC has trained more than 1900 Palestinians in first aid. The ultimate objective of this program is to establish a nation-wide network of first aid units that can be mobilized in emergency cases such as those caused by clashes between Israeli soldiers and Palestinians.³⁰² The clashes between Israeli soldiers and Palestinians necessitated the re-establishment of the blood donor system.

All above programs are characterized by the high involvement of the community in their implementation. Currently, the UPRMC involves approximately 1,000 volunteers. Thus in contrast to the women's committees which were transformed from grass roots organizations to centralized organizations, which design and implement their programs without the involvement of the community, the UPRMC has maintained the

²⁹⁹ The Bedouin families had been living on land owned by Palestinians. Following the confiscation of this land by Israeli authorities to expand the settlement of Ma'ale Adumim, the displaced Jahalin Bedouins were moved by the Israeli authorities to a site near the Jerusalem Municipal Garbage Dump an area that is regarded as hazardous to human health.

³⁰⁰ This program was based on the UPMRC's conclusion that only one third of those needing psychological counseling received any such care.

³⁰¹ The tunnel, which was excavated by Israel, is located below the Muslim holy site of the Dome of the Rock and runs along the Western wall of the Dome to a cistern beneath Islamic Waqf property.

³⁰² Interview, Mustafa Barghouthi, UPMRC, October, 1998.

approach to health care it has been following since its creation. As shown in the following, its grassroots support as well as its dominant position among the health committees have both contributed to its consolidation among health NGOs.

D. Consolidation of the UPMRC

1. Community based organization

Through its emphasis on community involvement and participation in health care delivery, the UPMRC has succeeded in developing strong grassroots ties. These are reflected in its organizational structure. By including community representatives in health care delivery, the UPMRC has remained responsive to the needs of the community.

Community members, who are mainly volunteers, are represented in nine regional committees. Furthermore, representation of the communities in the UPMRC in turn is ensured through the election of community representatives to the board of the UPMRC. In order to address issues of community concern and thus remain responsive to the needs of the community, these representatives meet on a weekly or bi-weekly basis.

The UPMRC includes community representatives not only in its organization but also in the implementation of its programs. In the operation of its health centers, the UPMRC involves a high number volunteers, in particular village health workers, who are selected by the UPMRC staff together with the community leaders and then trained at the UPMRC's Community Health School.³⁰³

Furthermore, village workers have also played a central role in the UPMRC's special programs, such as health education, women's health programs, and the emergency

³⁰³ The UPMRC established its Community Health School in 1987 and received accreditation by the PA's MOH in 1996.

program. In addition, they have assumed a crucial role during closures by providing primary health care services to the population under curfew.³⁰⁴

In addition, in order for the UPMRC to remain responsive to local needs, it has been organizing workshops in the communities, which involve community members. In this framework and in response to the problems identified by the UPMRC together with community representatives, the UPMRC has been focusing on marginalized groups, such as the elderly, women, youth, the disabled.³⁰⁵ These workshops have provided an opportunity for community representatives to address problems of health care delivery in the communities and to identify priorities. In its effort to address disabled people, for instance, the UPMRC initiated its Community Based Rehabilitation program (CBR) in 1986, through which it aimed at integrating mental health into its primary health care structures. The program has expanded and currently offers CBR in ninety-five rural communities and in two cities, serving half a million people. In addition, the UPMRC initiated a women's health program, which has developed into its fastest growing program, with the number of women served increasing from 16,514 in 1993 to 22,117 in 1996.

As shown above, since its creation in 1979 the UPMRC has succeeded in maintaining its grassroots links. Through its policy of promoting a health care system that involves the participation of the community and that is responsive to its needs, the UPMRC has increased its legitimacy at the popular level. In addition to its popular legitimacy, the UPMRC has succeeded in securing a leading role in the health NGO

³⁰⁴ For Israel's policy of closure see Chapter II.

³⁰⁵ Workshops conducted include: "Women's Issues and Health Policy" (27 January 1997 in Nablus); "Youth Issues and Health Policy" (27 February 1997 in Ramallah); "Disability Issues and Health Policy" (7 March 1997 in Ramallah); "Health Policy for the Elderly" (3 April 1997 in Ramallah), and "Health Insurance and the Social Security System," (27 May 1998 in Jenin). Health, Development, and Information Project, *Policy Watch Bulletin*, no. 1 (January 1998) and Health, Development, and Information Project, *Policy Watch Bulletin*, no. 2 (July 1998).

sector. Given the weakening of the other health committees, the lack of vision as shown in their evaluation of the National Health Plan, and the absence of a coherent alternative strategy, the UPMRC has emerged as the only committee with a clear vision of health care provision.

Thus, through the advantages it enjoys, the UPMRC considers itself in a strategic position to further the promotion of primary health care, a policy it has pursued since its establishment. In order to do this, the UPMRC has established a network with other health organizations. Based on this network it established vertical linkages with the PA through which it aimed at lobbying for change of health policy. Both network and vertical linkages are discussed in the following sections.

2. Horizontal linkages

In an interview in early 1996 UPMRC director Dr. Mustafa Barghouthi outlined his vision of health care provision. He highlighted the danger of an emerging dual health system characterized by one system serving the poor population while the other caters to the needs of the wealthy segments of society. According to Barghouthi, in order to stem this development, the expansion of primary health care is required. A focus on primary health care would not only minimize costs at the secondary and tertiary level, but would also ensure a more equitable health system that would take into account the needs of all segments of society. More specifically, by attributing to NGOs a more prominent role in coordination and cooperation with other health providers, Barghouthi argues, health policy at the national level could be influenced towards more emphasis on primary health care. According to him, a precondition for the involvement of NGOs, however, is the

creation of a unified vision of health care among them. Only then can they be successful in exerting influence on national health policy.

In the above-mentioned interview Barghouthi outlined the consecutive steps that coordination among health care providers should follow. As a first step a unified vision among health NGOs should be established. Coordination with the MOH, in turn, should proceed in two stages: coordination at the policy level followed by coordination of services.³⁰⁶

In order to further its agenda and to translate its vision into concrete mechanisms of cooperation, the UPMRC and in particular its director assumed a central role in a policy dialogue project that was initiated by the Health, Development, Information and Policy Institute (HDIP) in 1996. The HDIP had been created in 1989 by a group of researchers and health professionals, and like the UPMRC is headed by Mustafa Barghouthi. The HDIP's aim has been to advocate better health policies—in particular for marginalized groups, such as women, youth, and the disabled. The HDIP and the policy dialogue project served as an ideal forum to translate Barghouthi's vision of health into concrete steps. More importantly, the policy dialogue project has been aided by the substantial data compiled by the HDIP. HDIP's data include information on the vast majority of the health care facilities, including types of services provided, health personnel, and consultation fees. At a general level, HDIP has conducted demographic surveys as well as surveys on the physical infrastructure in the West Bank and the Gaza Strip. The significance of the policy dialogue is underscored by the fact that there had been no similar forum prior to its creation.

In the framework of the policy dialogue the HDIP conducted a series of workshops. The establishment of coordination between the different health care providers

³⁰⁶ Interview, Mustafa Barghouthi, UPMRC, October 1998.

proceeded in line with Barghouthi's vision of cooperation. In order to consolidate its position within the sector of health NGOs, the UPMRC, in a strategic move, forged links with other health NGOs before initiating a policy dialogue with the MOH and other PA ministries.

At the HDIP's first workshop on "Coordination Within the Sector of Health NGOs," held on 13 May 1996, the UPMRC assumed a leading role in formulating a common vision among the participating NGOs. This was viewed as necessary in order to identify the role of each health care provider. In addition, the workshop dealt with the nature of cooperation between NGOs and the government sector. In this context three levels of coordination were identified as modes of cooperation that seek to minimize duplication and maximize the effective use of available resources.

The first level of coordination relates to general issues of health policy, such as the financial aspects of resource allocation.³⁰⁷ The second level of coordination addresses cooperation in the different sectors of health care provision, such as health care, hospital care, and first aid. The third level of coordination focuses on health care for marginalized groups, namely women, children, the disabled, and the elderly. In addition to identifying the three levels that constitute coordination between health NGOs and the MOH, the major achievement of the workshop was the formulation of a unified vision on the role of health NGOs in the delivery of health care, which is based on their role complementary to that of the government. This workshop brought more than 25 NGOs together. These included charitable organizations and two health committees, the UPRMC and the UHWC. Most importantly this workshop constituted the foundation for an institutionalized mechanism of cooperation. In this process the role of the UPMRC has been critical. In line with Barghouthi's vision on cooperation between the MOH and

³⁰⁷ Interview, Mustafa Barghouthi, UPMRC, October 1998.

health NGOs, the HDIP conducted a second workshop that included not only health NGOs but also the MOH.

3. Vertical linkages with the PA

a. Policy dialogue project

After having established a common vision on health care delivery and the role of NGOs in health care, the UPMRC proceeded to enlarge the forum of the policy dialogue project. The second HDIP workshop on 16 July 1996, "Sharing Responsibilities: Coordination Workshop between the Health NGO Sector and the Palestinian Ministry of Health," included, in addition to more than 40 participating health NGOs, representatives from the government health sector and from UNRWA.³⁰⁸ The significance of the forum lies in the fact that for the first time health NGOs and the MOH were brought together. Its significance is further enhanced by the participation of the Minister of Health, Riad Za'noun.

In this workshop the NGOs' perspective on health care was presented by Barghouthi. The Minister of Health, Za'noun, in turn, outlined the MOH's position. In his opening note to the workshop Za'noun acknowledged the importance of the NGO sector in complementing the government in health services. He further emphasized the

³⁰⁸ The major NGOs involved in the Policy Dialogue Project of the Health, development, Information and Policy Institute (HDIP) are: Abu Rayya Rehabilitation Center, Al-Ahli Hospital, Al-Atta Society, Bethlehem Arab Society, Center for Primary Health Care Development, Central National Committee for Rehabilitation, Community and Public Health Department-Birzeit University, General Union of Palestinian Disabled, Happy Child Center, Itihad Hospital, al-Maqassed Hospital, Palestinian Coalition for Women's Health, Patients' Friends Society-Hebron, Patients' Friends Society- Nablus, Physicians Union, Pontifical Mission to Palestine, Princess Basma Rehabilitation Center, Public Health Society, Red Crescent Society-Nablus, Roman Catholic Health Center, St. Luke's Hospital, Union of Health Work Committees (UHWC), Union of Palestinian Medical Relief Committees (UPMRC), YMCA-Bayt Sahur, Zakat Fund-Jenin, Zakat Fund-Nablus, Zakat Fund-Tulkarm, Zoonotic Research and Education Center.

government inability to provide comprehensive health care to the entire Palestinian population because of its limited capacity, and that therefore the public health sector should include health NGOs as well.

The workshop concluded with an agreement to establish mechanisms of cooperation between the MOH and health NGOs. A separate executive committee composed of representatives from the participating NGOs was elected on 30 July 1996. This committee is composed of 9 NGOs, while the HDIP was elected as the committee coordinator.³⁰⁹

Whereas this workshop focused on the necessity and the nature of cooperation, a third workshop, "Coordinating Primary Health Care" on 19 December 1996, dealt with the establishment of concrete mechanisms of cooperation between the MOH and the NGO sector. More specifically, these mechanisms involved the delivery of primary health care, in particular the subcontracting of MOH services to the NGO sector. As a result of the mechanisms of cooperation created, three subcontracting agreements were signed on 24 September 1997.

In a fourth HDIP workshop, "Better and Cost Effective Hospital Care: The Coordination Workshop Between MOH, NGOs, UNRWA and Private Hospitals," on 11 March 1998, the UPMRC succeeded in increasing the number of participants and included for the first time representatives from the private sector. The workshop addressed the issue of coordinating hospital care provided by all sectors in order to contain the high expenditure on secondary health care. In addition to the workshops, a

³⁰⁹ The Members of the NGOs Coordinating Committee of the Policy Dialogue Project are: al-Maqassed Hospital – Jerusalem, Al-Ahli Hospital – Hebron, Ittihad Hospital, Union of Health Work Committees (UHCW), Central National Committee for Rehabilitation, Health, Development, Information and Policy Institute (HDIP), Pharmacists Union (on behalf on the Professional Union), St. Luke's Hospital, Patients' Friends Society, Jenin. Furthermore, a secretariat was elected that consists of al-Maqassed Hospital – Jerusalem, Union of Health Work Committees (UHCW), Central National Committee for Rehabilitation, Health, Development, Information and Policy Institute (HDIP).

series of roundtable meetings between the MOH and NGOs were held.³¹⁰ Their objective has been to translate the agreed upon cooperation into concrete steps of implementation.

In summary, the policy dialogue project has created an institutionalized mechanism of coordination and cooperation among the health NGOs and the MOH. The HDIP has chosen to expand cooperation gradually. It moved from an initially pure NGO forum to include other health care providers. Similarly, the issues dealt with in this forum have been expanded from general issues of health to more specific issues dealing with the various sectors of health. Through the forum and the creation of a mechanism of cooperation, the UPMRC has succeeded not only in including the MOH but also in institutionalizing cooperation. In this it stands in stark contrast to women's organizations whose cooperation has remained ad-hoc. Furthermore, the UPMRC succeeded in forming a broad coalition of health NGOs which not only includes committees, but also charitable organizations. Most importantly, in contrast to women's organizations, the UPMRC approached the relevant PA ministries, rather than the PLC, in its effort to induce policy change.

b. Sub-contracting arrangements

Based on its broad community support and its clear vision of health care the UPMRC was in a favorable position to induce the PA to adopt its vision of health care. The PA on the other hand, given its budget deficit and the broad support the UPMRC enjoys, could enhance its own legitimacy in the health sector by cooperating with health NGOs.

³¹⁰ The first of these meetings took place on 24 September 1997.

The foundation for the subcontracting of MOH services to the NGO sector was established at the third HDIP workshop. Three subcontracting agreements between health NGOs and the MOH were signed on 24 September 1997. In these arrangements existing health care facilities were merged. In all cases the MOH closed its facilities and subcontracted services for their insured patients to NGO clinics. Furthermore, the administration and the technical responsibilities were assumed by the health NGOs. In addition, the health NGOs continued to provide their own services to patients who were not insured with the government.

The first sub-contract agreement between an NGO (the UPMRC) and the MOH was signed for the village of Mghayer in the West Bank on 1 November 1997.³¹¹ The second agreement was concluded between the MOH and the Palestine Red Crescent Society (PRCS) for the village of Biddo in the West Bank. The third contract, in turn, was signed by the MOH and a charitable health organization, the Birzeit Charity Association.

Further agreements were signed on 1 September 1998 between the UPRMC and the MOH for the health centers in Sinjil and Turmus 'Ayya, both villages in the West Bank.³¹² As in the case of the other agreements, the MOH closed down its own clinics in these villages and patients with government insurance have been treated by the UPMRC.

³¹¹ The primary health care center in Mghayer was opened by the UPMRC in 1991 Interview, Mustafa Barghouthi, UPMRC, October 1998.

³¹² In Sinjil the municipality provided the building, the Japanese government the equipment, and the UPMRC took over staff and medicine. Patients who are enrolled in the government insurance plan are treated as well as those without insurance. The fee ranges from 3 to 10 NIS (New Israeli Shekels). Interview, staff from the Sinjil clinic, October, 1998.

c. Partnerships in joint projects

In addition to the policy dialogue project and the subcontracting arrangements, the UPMRC has established partnerships with the MOH as well as with other ministries. In contrast to subcontracting arrangements, partnerships between ministries of the PA and health NGOs have not involved the closure of MOH facilities and services. Rather, the aim of a partnership is to institutionalize cooperation in the implementation of the various programs of the MOH and other ministries. The objective is to avoid duplication of services and to make optimal use of available resources. These partnerships have typically involved issues related to national health programs.

For example, an agreement to cooperate was reached in the implementation of the national school health program and the women's health program. Specifically, in order to address these issues a joint government-NGO committee was established in which the UPMRC is a member. The task of this committee has been to review existing plans as well as to prepare short-term plans.

Similar kinds of cooperation also exist with other ministries. In order to address the high incidence of deaths resulting from road traffic accidents in the West Bank and the Gaza Strip,³¹³ the UPMRC initiated the establishment of a committee on road traffic accidents, which has required the involvement of several ministries and governmental bodies, including the MOH, the Ministries of Education, Transport, and Labor, as well as the Traffic Police.³¹⁴

³¹³ Accidents constitute 14 percent of all deaths and account for 28 percent of deaths of children below the age of five (Barghouthi and Lennox, 1997, p. 12).

³¹⁴ Interview, Mustafa Barghouthi, UPMRC, October 1998.

The UPMRC has also been instrumental in fighting zoonosis.³¹⁵ The zoonosis program was started in 1993 as a research program and has expanded since then to include awareness-raising. In order to address the issue at a national level, a committee was created in which the Ministries of Agriculture and Health, the Palestinian Agriculture Relief Committees (PARC), the Union of Health Works Committees, the Union of Agricultural Work Committees, and the Maqassed Hospital are represented.

E. Conclusion

The UPMRC has been able to further its agenda by pursuing a strategy of gradually extending cooperation with health care providers and the PA. As an initial step it established a network to harmonize NGO activities and to create a unified position towards the PA. In this process the UPMRC consolidated its position as a leader in the sector of health NGOs.

As a second step, the UPMRC chose to expand cooperation to include additional health care providers. Through the consecutive workshops organized by the HDIP, the UPMRC involved the MOH, UNRWA, and the private sector. It has thus succeeded in establishing a forum that for the first time brought all health care providers together. Moreover, the UPMRC succeeded in situating itself at the intersection of horizontal links with the health NGO sector and the vertical ties with the PA. Being at the center of these horizontal and vertical linkages, the UPMRC has been able to further its own vision of health care. In this achievement the UPMRC has been aided by its historic role in the

³¹⁵ Zoonosis is the transmission of diseases from animals to humans. A major component of the zoonosis program addresses brucellosis (Maltese fever). Official reports indicate that there are 278 cases of Maltese fever per 100,000 population. The actual figure, however, is estimated to be much higher.

community, its continuous grassroots support and by its clear vision and strategy to achieve an equitable health care system.

Cooperation between the PA and the health NGOs has been exceptional when compared to the cooperation between the PA and other NGOs. Moreover, the PA has benefited from health care provided by the NGOs, as their involvement in the joint projects has also enhanced the PA's own legitimacy. Given the dominant role of the UPMRC with both other NGOs and the PA, its suppression by the PA would reduce the latter's credibility and would constitute a destabilizing factor for the PA. Furthermore, many services provided by NGOs cannot be provided by the PA, as it does not possess the financial capacity to do so. These services include especially care for the disabled, health promotion, and preschool education.

CONCLUSION

Based on the conclusion of the DOP on 13 September 1993 the Palestinian Authority (PA) was created in 1994 as a self-governing body that is to assume responsibilities for the five spheres of education, health, culture, social welfare, and direct taxation. Its creation as the first-ever Palestinian self-ruling body entailed the definition of its relation with civil society. Since its inception the PA has developed authoritarian traits which have defined its relation with civil society institutions.

More specifically the PA has attempted to marginalize or repress civil society institutions in the process of its power consolidation as it viewed their vision of political, economic and societal order as a challenge to its own vision and a threat to its rule. As a response, civil society institutions formed networks in an effort to alter PA policy in a democratic direction. This dissertation has examined the effectiveness of these networks, based on the hypothesis that civil society institutions are most effective when they establish horizontal networks. Such networks constitute a coalition of like-minded civil society institutions that in an authoritarian setting represent a counter-hegemonic force to the existing order.

The two selected cases, the Women's Affairs Technical Committee (WATC) and the network established by the Union of Palestinian Medical Relief Committees (UPMRC), constitute examples of such coalitions. Both have attempted to influence PA policy whereby the health organizations network proved more successful than the WATC in achieving its objectivess. The results of this dissertation reveal that the factors accounting for these variations relate to the properties of the particular network as well as to the political context shaped by the PA in which they operated. Hence, it is the interaction of civil society institutions and the state that are reaffirmed in this work.

In its demands for policy change the WATC focused on the reform of discriminatory legislation against women as well as on the goal of increasing consciousness of women's issues in national policy by demanding the creation of a women's ministry. While the WATC succeeded in introducing favorable changes in legislation these remain, in the absence of a legal system, regulations and not legally binding. Further the demands of the WATC for the creation of a women's ministry was rejected by the PA, which instead chose to contain the potential threat posed by women's organizations to its patriarchal rule by allowing the creation of separate women's departments in five ministries. Through its move of fragmenting women's political presence in national decision-making bodies, the PA ensured that women's demands remained under the scrutiny and control of the respective ministries.

In addition to the patriarchal structures which have formed the basis of PA rule and define the political context in which women's organizations have operated, several factors relating to the properties of the WATC itself accounted for its failure to attain its objectives. A prerequisite for the success of civil society institutions in altering state policy hinges upon their ability to forge a broad coalition of like-minded institutions unified around a common agenda. The analysis of the WATC revealed that it did not fulfill this prerequisite. Its members have been confined to women's committees, their successor organizations and to the newly established women's centers. As a result, the WATC has coexisted with other formations of women's organizations without being able to forge a common agenda. Combined with the lack of a leadership role, the WATC further weakened its position by including PA officials in its network thus undermining its institutional autonomy from the PA. In order to effect change in the patriarchal structures women's organizations would have had to create a comprehensive coalition that would not only have included a broad range of women's organizations as well as

other civil society institutions supporting such an endeavor. This is of critical importance as its objective of improving the situation of women is based on a more comprehensive transformation of the existing order, involving all civil society active to this end.

The inability of the WATC to form a strong counter-hegemonic force is further enforced by its loss of previous grass roots support. The lack of grassroots support is most significantly reflected in the agenda of the WATC, which neglects the needs of the majority of women. In the face of the continuous occupation of the major part of the West Bank and economic deterioration, of which the majority of women carry an unequal burden, the agenda proposed by the WATC is of relevance to only a limited number of women. The failure of the WATC to induce favorable change is also a result of its strategy to lobby for such changes. In its lobbying efforts the WATC targeted the Palestinian Legislative Council (PLC), a body that has been marginalized by the PA and rendered ineffective in its political role. Furthermore, the WATC Failed to establish an institutionalized mode of cooperation which would have ensured continuity based on strategic planning.

In contrast to the WATC, the health network created by he UPMRC was able to achieve some of its objectives in terms of bringing about important changes in various sectors of health policy. The objective of the health network to create a system of health care provision that would take into account the needs of marginalized parts of society was incorporated in various sectors of national health policy through the creation of institutionalized schemes of cooperation.

While the ability of the health network to introduce changes in national health policy was aided by the PA's fiscal incapacity to take over health services provided by health organizations, the latter's success was also influenced by the characteristics of the

network they established. Their success was shaped by the clear vision on health care provision as articulated by the UPMRC, which has assumed a leadership role in the network. Its leadership role in turn was supported by its ability to forge a broad coalition of health organizations which were unified around a common agenda. By establishing an institutionalized forum of like-minded health organizations, the health network could effectively create a counterhegemonic force to the existing national health policy. The network's position was further enhanced by the continuous grassroots involvement of its leading member organization, the UPMRC. Moreover, as a counterhegemonic force the health network remained, unlike the WATC, institutionally autonomous from the PA in that it excluded PA officials from its membership.

Based on the institutionalized network, health organizations then targeted the respective ministries to affect PA policy. A comparison of women's and health organizations revealed that both have adopted different strategies in their effort to effect policy change. Based on its vision of health care the UPMRC proceeded in a gradual expansion of its lobbying efforts. In this it did not only enlarge the number of health providers in cooperating with its network but also increased the number of health sector issues it sought to deal with, relying on a spill-over effect in this mode of cooperation. In this respect women's organizations have chosen the reverse by focusing first on broad legal reform and only as a second step shifting to addressing issues of a smaller-scale in efforts to induce change.

The analysis of both networks, their properties and their strategy to effect change, as well as the context in which they have operated reveal that the forces at work in the process of policy transformation is complex and a successful change towards a more democratic order cannot be attributed to a single factor. It is rather the combination of

variables that equally account for the success of such transformation. Furthermore, the present examination reveals that the development of civil society and its role in promoting a more democratic order cannot be adequately addressed without breaking civil society down in its various components. Similarly, the state, in the present case the PA, cannot be regarded as a unified entity. Rather, the dissertation showed that its various components differ in their relation with civil society institutions.

In addition to the internal dynamic, which is shaped by factors relating to the national level, the findings of this dissertation showed that the international dimension also influences the process of political transformation. My analysis showed how the imperatives of the agreements between Israel and the PLO provided the context for the PA to consolidate its authoritarian traits. Both the PA and civil society are influenced by the international context. In the case of civil society it is in particular international donor agencies, on which a great number of civil society institutions rely for funding. As a result, such international donors assume a high leverage in determining and dominating the agenda of civil society institutions. An examination of this leverage, however, requires the analysis of funding policy priorities of donor agencies as well as the fiscal capabilities of civil society institutions. This kind of information, which is difficult to obtain, is essential. Only then would it be possible to determine the degree to which these institutions succumb to the funding agenda of international donors as well as the categories of institutions that are most likely to be affected.

Thus, the project of political transformation is shaped by the interplay of both domestic and international factors, whereby political change is located at the intersection of both. An examination of funding priorities of international donors and their impact on the development of civil society institutions in the West Bank is one of the directions I propose to pursue in the futures research.

APPENDIX A: Networks of women's and health organizations

Properties of networks of women's and health organizations		
	Women's organizations	Health organizations
Representativeness and nature of membership	Limited to committees and their successor organizations, new women's centers; Includes government officials	Comprehensive; includes a wide range of health organizations; Institutional autonomy
Position among other organizations	Failed to establish a monopoly position among women's organizations	Monopoly position among health organizations
Focus of activities	Research, training of women	Delivery of health services
Relation with community	No grassroots	Continuous involvement at the grassroots level
Objectives of change and strategies in lobbying		
Objective	Improvement of women's situation through legal reform; Creation of a women's ministry	Change in national health policy; focus on equitable access to health care
Strategy of lobbying and target national body	Lobbying for comprehensive legal reform Palestinian Legislative Council	Gradual expansion of cooperation; Ministries
Nature of linkages with national bodies	Ad-hoc cooperation	Institutionalization of cooperation
PA strategy in dealing with women's and health organizations	Containment and fragmentation	cooperation

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