COVID-19 in Israel’s Arab Society: 
Current Status and Emergency Response Priorities

April 2020

OVERVIEW

On March 23, the Task Force issued an update on the health and economic risks specific to Arab society due to its low socio-economic status, poor public health infrastructure, population density and weak municipalities. Among them, misalignment of national policies with Arab society’s realities and needs contributed to delays in crisis response measures such as information in Arabic and testing sites in Arab communities, among others.

In the weeks since, significant steps have been taken to address the immediate gaps, promote compliance with prevention guidelines, and to implement more effective emergency response measures in Arab society. As a result, despite recent local outbreaks in several communities, there has thus far been relatively limited spread in Arab society. The curve is rising in Arab society and the risk of additional spread is now high—especially with the month of Ramadan (begun April 24th) raising concerns about maintaining social distance. This risk is further intensified now that Israeli society in general is already looking at easing restrictions while in Arab society the peak has not yet been reached.

Along with the health risks, the economic shutdown intensifies existing social and economic vulnerabilities. Arab citizens are already Israel’s poorest demographic, with three times the poverty rates of non-Haredi Jews. New job losses, lower municipal revenue streams, and limited local services are at the heart of immediate welfare needs and recovery concerns. Arab municipalities and the Arab civil sector are central implementers of emergency and welfare provisions, yet are deeply constrained by current uncertainties, reduced revenues and staffing.

This update aims to briefly report on the current impact of the crisis on Arab citizens and provide an overview of efforts to structure and implement the national and local emergency response for Arab communities. It is beyond the scope of this report to detail all the unique risks, gaps and challenges in Arab society created by this crisis, nor all actors, projects and emergency initiatives underway. Rather, it focuses on issues of alignment with national state authorities, identifies priority areas on the ground, and provides examples of activities for each.

Acknowledgements: We would like to thank and acknowledge the staff and leadership of the Emergency Situation Room for Arab Society, the Joint Emergency Situation Room for the Negev, and the many civil society organizations involved in emergency response that shared their insights and gave of their time in this period.
## CURRENT STATUS
- Coronavirus Spread .................................................................................................................. 3
- Unemployment .......................................................................................................................... 4

## EMERGENCY RESPONSE
### NATIONAL LEVEL ..................................................................................................................... 5
- Emergency Situation Rooms ....................................................................................................... 6
- Decision-Making Circles ............................................................................................................. 7
- Government Policies and Responses ......................................................................................... 7

### ON THE GROUND .................................................................................................................. 9
- Ramadan ....................................................................................................................................... 10
- Health and medical services ...................................................................................................... 11
- Local authorities ....................................................................................................................... 12
- Local emergency forums .......................................................................................................... 14
- Information and awareness ........................................................................................................ 14
- Food security and welfare ........................................................................................................ 15
- Education .................................................................................................................................... 17
- Businesses and economy ......................................................................................................... 17
- Employment and labor ............................................................................................................. 18
- Women ....................................................................................................................................... 19
- Mixed cities .............................................................................................................................. 20
- Digital gaps ............................................................................................................................... 20

### NEGEV BEDOUIN - EMERGENCY SITUATION ROOM IN THE SOUTH ........................................ 21
### LOCAL EMERGENCY RESPONSE MODEL IN TAMRA .............................................................. 24
CURRENT STATUS

Coronavirus Spread

As of April 26, 35,927 Arab citizens were tested for the virus (roughly 12% of the more than 250,000 tests in Israel). Of these, there are 809 citizens infected comprising a little more than 5% of Israel’s total infections.\(^1\) This includes infections in the recent locally concentrated outbreaks.

An April 9\(^{th}\) report showed that of those infected, 47% are between the ages 15-29 (compared to 29% in the general population), and only 7% among the elderly.\(^2\) This is attributed to the overall youth of the Arab population as well as to concerns that young people are less likely to comply with social distancing guidelines.

The relatively low rate of infection was initially attributed to fewer testing sites in Arab communities.\(^3\) As testing increased, and overall rates remained low, insight into epidemiological spread shows suggests the virus “reached the Arab population much later than the general population in Israel, when awareness was high and the economy was already at the beginning of the closure.”\(^4\) This is raising concerns that as easing of conditions rolls out in mainstream society, it will cause a premature easing in Arab society and increase spread.

Currently the risk of continued infection remains high with concentrated outbreaks in several Arab communities. As of April 27:

- **Deir al-Asad**, a village of around 12,000 residents near Karmiel had more than 150 confirmed Corona cases—now the highest per capita concentration in Israel, surpassing even Bnei Brak. Together with its neighboring community, Be’ineh (with 22 cases among its 8,000 residents), it has been designated a “locked-down community” with limited access for a week (Hebrew).
- **Hura**, a Negev Bedouin city of 22,000, now has 34 cases
- **Peki’in**, a small Druze village of 5,800 residents has an outbreak of 15 cases.
- **Daburiya and Jatt** each have between 10-15 confirmed patients per 10,000 residents.

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2. April 9\(^{th}\) report of the National Information and Knowledge Center for the Fight against Corona is a new governmental body established as cooperation between the IDF’s Intelligence Unit, the Ministry of Health and the National Security Council, Report no. 24, April 9 (Hebrew).
3. We are Nothing like the Orthodox [Jews] – We closed Schools two Days Earlier than you, The Mosque is Closed and there are no Weddings”, Haaretz, Tali Heruti Sover, April 5, (Hebrew).
4. The virus was introduced to Israel mostly from abroad, and Arab citizens travel less; and spread through Purim celebrations which did not affect Arab communities. With fewer Arab citizens commuting to other cities for work, by the time it reached Arab communities, “there was full cooperation from clerics and heads of authorities to maintain procedures and obey instructions.” The Aharon Institute.
Jisr A-Zarka, one of Israel’s poorest and most crowded communities, has around 20 confirmed patients per 10,000 residents. A NIS 2 million emergency fund was allocated by the Rothchild Caesarea Foundation to assist Jisr Council and residents with local capacities.

Consistent with epidemiological patterns showing Arab communities were initially buffered from spread, Ministry of Health investigations found that many of these outbreaks originated with workers who came in contact with the virus outside their locality. In Deir al-Asad, the high level of infections is attributed to a Kosher food supervisor visiting a local meat processing plant. In Jisr A-Zarka and Daburiya in the Jezriel Valley, it is attributed to numerous residents working in hospitals and nearby old age homes (as doctors, nurses and cleaners).

Unemployment

Unemployment in Israel reached 26% in recent weeks with more than one-million jobless, up from a low of 3.4% in February 2020 (Hebrew). According to Israel’s Employment Service, approximately 90% are newly unemployed, dismissed or forced to take unpaid leave during the Coronavirus crisis.

March 2020 unemployed compared with pre-crisis employment rates

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Arabs</td>
<td>Jews and others</td>
</tr>
<tr>
<td>Percent of unemployed in March 2020</td>
<td>9.5%</td>
<td>32.9%</td>
</tr>
<tr>
<td>Percent of employed in March 2018</td>
<td>9.4%</td>
<td>42.8%</td>
</tr>
</tbody>
</table>

Source: Aharon Institute with data from the Central Bureau of Statistics and Ministry of Finance

As of March 2020, Arab citizens comprise 17.3% of total unemployed. This is higher than the percentage of Arabs in the pre-crisis workforce (which was 13.9% in March 2018) “meaning there is an over-representation of Arabs among the newly unemployed,” women especially.

Arabs are overrepresented in professions more affected by the crisis (see graph below). Fewer Arabs work in the high-tech sector and civil service, for example, while more work in education, construction, restaurants and cleaning, as well as non-professional jobs - among the most affected fields. Also, the crisis had a greater effect on young and low-income employees, where Arab representation is also high.

Pre-crisis, the average income of Arab households was about half that of non-Haredi Jewish households, while family poverty rates were already three times as high. Economic disparities between Arabs and Jews are now expected to grow due to a greater increase in the unemployment rate among Arabs. Some analysts are discussing implementing a “smart exclusion” rather than a “sweeping exclusion policy” given the epidemiological infection patterns in Arab society and the economic impact of total shutdown.

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5 Daburiya Council Head blames: infection in the village started from an old age home in Yavne’el”, Maariv staff, April 12 (Hebrew).
6 Arab citizens make up 21% of the population and about 14% of the pre-crisis workforce. Arab employment rates were most recently 38.2%for women and 76.3% for men.
EMERGENCY RESPONSE

Nationally, crisis management operations are under the Home Front Command (Pikud Ha’oref) within the IDF and Ministry of Defense, while policies and guidelines are coordinated by a National Control Center (MASHLAT) set up in Tel Hashomer which convenes all governmental ministries and operational bodies. This is in addition to emergency responses per government ministries such as health, welfare, education, economy and interior, and to enforcement by police. Locally, crisis response is implemented by municipalities and their emergency forums, in cooperation with state agencies.

Early on, gaps and challenges implementing emergency response efforts in Arab society emerged on the national and local levels. Nationally, these gaps manifested in inadequate government information in Arabic, delays establishing testing sites in Arab communities, and government supports not suited or accessible to Arab municipalities and small-businesses. Locally, Arab municipalities are among Israel’s weakest in both economic resources and professional capacities, with the current crisis enhancing these existing vulnerabilities. On top of limited local services and medical infrastructure, most were not prepared or equipped to meet the emergency enforcement requirements or spike in welfare needs.

National and local gaps contributed to delays communicating clear guidelines for Arab communities, generated mistrust of government measures, and delays gathering and disseminating accurate information about the spread of infection in Arab society.

NATIONAL LEVEL

Recognizing the risks, Arab political, municipal and civil society leaders were quick to identify these gaps and worked to improve alignment with Arab society needs. Of these, several initiatives have shaped the national response:
(i) Establishment of a dedicated situation room for Arab society;
(ii) Advocacy by Arab political and civil society leadership for effective government policies and for representation on national emergency platforms, while simultaneously also publicly promoting compliance with guidelines within Arab society; and
(iii) Growing government recognition and acknowledgment of the need to provide culturally adapted services to Arab society.

Emergency Situation Room for Arab Society

Many civil society organizations were quick to identify, advocate for, and respond to needs in Arab society. On March 31, to enhance and coordinate these efforts and align with government policies, the National Council of Arab Mayors (NCAM) and the Arab Higher Follow-Up Committee opened an Emergency Situation Room for Arab Society (AESR) with the Galilee Society, which houses the AESR, and a coalition of civil society organizations. The AESR is designed to gather and identify local needs, relay and connect to relevant state authorities, support Arab municipalities in implementing and accessing resources, and coordinate among civil society organizations.

As the AESR was established, its senior consultant, Aiman Saif, was appointed by the Ministry of Interior as Head of the Arab Desk within the National Control Center on the Corona Crisis (MASHLAT). Through this position, the AESR has direct access to the main policy-making platform on the crisis.

Negev Bedouin

An emergency situation room for Bedouin society was also established in the South coordinated by AJEEC-NISPED in partnership with civil society organizations operating in the region and local authorities. Likewise, it serves as a coordination platform to address the

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7 E.g. MK Ahamed Tibi publishing dates and times of mobile screening units on his Facebook page (Arabic) and MK Ayman Odeh on an interview with Channel 13 News, on Saturday, April 11 (Hebrew).
8 For example: By mid-March the National Council of Arab Mayors (NCAM) issued a list of recommendations to relevant Government ministries; The Abraham Initiatives presented prevention challenges and measures for Arab society to the Home Front Command; Sikkuy and the Galilee Society advocated for opening testing stations in Arab localities, Maoz operated an ad-hoc situation room for Arab society through its vast multisectoral network; Amanina, Tshreen, the Southern Islamic Movement and others began redirecting their volunteer networks to translate government information, raise awareness, deliver meals and hygiene products to families and coordinate with local authorities to map needs; among many others.
9 The Galilee Society, Mosawa Center, the Southern Islamic Movement’s Charitable Organization (for Orphans and Widows), INJAZ Center, Adalah Center, Sikkuy, Amanina, Women Against Violence, the Follow Up Committee on Education, AJEEC, I’lam Center, the National Arab Council on Health.
10 Including the National Control Center on the Corona Crisis (MASHLAT), Home Front Command, the Knesset’s Special Committee on the Coronavirus Pandemic, the Ministries of Interior, Health, Welfare and others, and the “Corona Welfare Headquarters” established by the Home Front Command to coordinate between around two dozen major civil society organizations providing assistance and aid (Hebrew).
11 Aiman Saif is a senior economist and served as the Founding Director of the Authority for the Economic Development of the Arab Sector between 2007-2018, first under the Prime Minister’s Office and later under the Ministry for Social equality.
unique challenges such as lack of basic infrastructure and even wider socio-economic disparities complicating the emergency response in Bedouin communities. The southern emergency room works in close cooperation with the national AESR.

**Decision-Making Circles**

Along with advocating for Arab community needs, political leaders and civil society organizations have been advocating for inclusion of Arab experts and representatives in decision making circles. First, the specific needs and characteristics of Arab society would be better and more efficiently addressed. Second, these better policies and representation would go a long way in improving trust and thus compliance with health regulations.

**Sikkuy** and the National Council of Arab Mayors (NCAM) appealed to the Knesset’s Special Committee on the Coronavirus Pandemic citing its lack of Arab representation and making the case that every national emergency team needs representation and direct cooperation with Arab society for effective policies. Likewise, the [Israel Democracy Institute](https://www.idi.org.il) issued a formal letter to the Director General of the Ministry of Health ([Hebrew](https://www.idi.org.il/he/)) warning of “The Severe Repercussions of the Underrepresentation of Arab Staff at the Ministry of Health.”

More recently, numerous civil society leaders reproached the National Security Council (MALAL), for convening a new Specialists Committee on the Coronavirus of 23 experts and 8 research assistants with no Arab or women experts. A coalition of 13 women organizations, Jewish, Arab and joint— as well as the Association of Civil Rights in Israel (ACRI) — petitioned the Supreme Court to “include women from a variety of sectors, specifically Arab and Haredi women, to this team” ([Hebrew](https://www.idi.org.il/he/)).

In parallel, Arab MKs (Joint List Chair Ayman Odeh, MK Ahmed Tibi, MK Aida Touma Sliman, MK Yousef Jabareen, others) have been very active advocating for testing sites, information and resources for Arab communities while publicly encouraging (in Hebrew and Arabic) adherence to health guidelines—with emphasis in recent weeks on Ramadan. The Joint List votes were also necessary for passing the national Coronavirus aid package.

**Government Policies and Responses**

Policy gaps remain an ongoing challenge, but following advocacy and coordination, steps have been made to close urgent information and testing gaps, and several government bodies have acknowledged the overall need for greater alignment:

- **Arabic-language information and awareness campaigns**: After significant pressure due to poor and inadequate government information early in the crisis, government measures to close awareness gaps include:
  - The Ministry of Health contracted a major Arab PR company called [Mazzawi Advertising](https://www.mazzawi.com) to lead the Arabic language campaign.
  - Initially not included, information about Corona cases in Arab localities (of people tested, sick, in isolation) now appear in the Ministry of Health’s daily

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13 The MALAL Experts Team: No Arabs and No Women, The Marker, Tali Heruti-Sover, April 11 ([Hebrew](https://www.idi.org.il/he/)).

14 E.g. MK Ahmed Tibi publishing dates and times of mobile screening units on his Facebook page ([Arabic](https://www.facebook.com/)) and MK Ayman Odeh on an interview with Channel 13 News, on Saturday, April 11 ([Hebrew](https://www.idi.org.il/he/)).
reports and are shared directly with the Arab Emergency Situation Room and the National Council of Arab Mayors.

- Digital Israel at the Ministry of Social Equality also launched a page that publishes a variety of governmental services in Arabic.
- The Home Front Command, Ministry of Health and Ministry of Education published Arabic language information pages (here, here and here respectively) with the former two conducting public Arabic language campaigns.

- **Testing Sites in Arab Society:** After significant advocacy by political and civil society leaders, the first mobile Corona tests centers opened in Arab localities (including Ar’ara, Tamra, Kfar Kassim and Rahat) at the end of March and early April. Since then, testing has increased in Arab society, today representing around 12% of all tests in Israel.

- **Diversity and Inclusion:**

  **Knesset Committee on Coronavirus:** A special discussion on Arab society by the Knesset Committee acknowledged in a report (Hebrew) the early demands of the National Council of Arab Mayors, Arab MKs and civil society organizations, including the need for drive-through tests centers in Arab localities, Arabic-language information and awareness campaigns, support for Arab local authorities, including the need for greater inclusion and coordination, in particular with the newly established Arab Emergency Situation Room. A portion of these recommendations have since been partially implemented by government authorities.

  **Civil Service Commission:** Following the National Security Council’s publication of the members of its new expert team, who were all male and Jewish, the Government’s Civil Service Commission issued a letter to the Director reiterating that Israel’s diversity representation laws stating “diverse points of view around decision making tables are not a luxury” (Hebrew) and provided the council with a list of experts from diverse backgrounds. The Commission likewise reinforced the government’s diversity policy requiring all government offices to ensure the policies, communications and services they provide have been formulated with consultation with employees from diverse backgrounds.

- **Ramadan:** As detailed in the next section, various government bodies acknowledged the imminent needs related to Ramadan. Special services and budgets were allocated for additional support for Arab localities, for food aid, and to address sensitive enforcement challenges (e.g. by creating special ranger units instead of using the police to enforce guidelines and sensitivity of the period. Still this month continues to raise great concerns among Arab leaders and national bodies alike.

- **Trust in Government Guidelines:** The Home Front Command conducted surveys on March 23 and April 6-7 to measure Arab citizens’ attitudes and trust in government guidelines. Findings indicate high levels of compliance with guidelines and rising trust
in government bodies as communication, information, service and transparency improved.  

<table>
<thead>
<tr>
<th>Trust in local authorities</th>
<th>Trust in state authorities</th>
</tr>
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<tbody>
<tr>
<td>I trust that my local authority has the ability to confront the virus in Israel</td>
<td>I trust that the state authorities have the ability to confront the virus in Israel</td>
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</table>

ON THE GROUND

National emergency response policies and resources are determined by central government bodies, but on the ground implementation according to community needs and characteristics is the responsibility of local authorities. While individual communities experience the crisis differently, Arab localities share many characteristics and needs—not least of which is the weakness of Arab municipal bodies and their lack of emergency preparedness.

The national Emergency Situation Room for Arab Society (AESR) established a committee structure according to major priority areas shared across localities. These committees are led by civil society organizations and supported by a roundtable of experts to collect information, support localities, and relay needs to central government authorities.

Survey of Arab Society, Home Front Command, April 6-7, 2020 (Hebrew).
Priority Areas

The following section describes the challenges and activities per priority area, including the work of the AESR and a sample of additional civil society activities on the ground. The full range of civil society activities is beyond the scope of this mapping. A growing online database in Hebrew and Arabic recently launched by Amanina and Civic Leadership currently lists over 150 civil society organizations involved in emergency efforts in Arab society.

RAMADAN

Ramadan began in Israel on Friday, April 24. This most important and widely observed Muslim holy month is raising significant concern among government officials, Arab leadership and professionals over maintaining social distancing measures over this period and the possibility of new outbreaks as a result. Ramadan includes numerous rituals and traditions based on social gatherings (for shopping, prayers, daily breaking of fasts (“iftar”) dinners, Ramadan markets, and more.) Numerous Arab leaders, including MKs, municipal officials and religious leaders have called on the community to “pray at home this year so we can celebrate together next year” (Hebrew).

Arab Emergency Situation Room Activities

While the AESR does not have a committee dedicated to this issue, it has been working to relay the intensified risk to the central government leaders and to support local leaders in promoting and enforcing continued social distancing.

Arab leadership has been calling the public to maintain health restrictions, and calling on state authorities to even enhance restrictions (Hebrew), with the Mayor of Rahat, for example, calling on “putting the city under lockdown” (Hebrew) and religious leaders objecting to state-approved limited communal prayers after they have already called on the public to pray only at home (Hebrew). Meanwhile others in the Arab public have been critical of the long closing hours imposed on local businesses and the consequent economic hit they are taking (Hebrew).

Government

- **Ministry of Interior.** Following a call held between Minister of Interior Aryeh Der’i (Shas) and Arab mayors and MKs (Hebrew), the MOI
  - Issued a detailed brochure “This Year Ramadan is Different” with recommendations for promoting compliance, enhancing community involvement, engaging local leaders and resources (religious leaders, opinion shapers, local networks), creating effective public messages, online resource and a directory of relevant national organizations.
  - On April 23, the Ministry announced a NIS 55 million budget for Arab municipalities, allocated for food-stamps for needy families, and for municipal services during Ramadan - including for local “ranger units” that would enhance compliance via street-presence and public education, and for establishing local hotlines where those are missing (Hebrew).

- The Director General of the Ministry of Health issued a special holiday greeting in Hebrew and Arabic to health workers around the country, with messages like “this
week we pray at home” and “we pray only with our immediate family” which can be spread around the community.

NGO activities:

- **MAOZ** Published Ramadan concerns and issued recommendations for local municipal leadership, religious figures and local institutions (community centers, youth organizations) that can then be supported “from the outside” by central state institutions. The paper presents actions that combine clearer health guidelines, targeted campaigns, religious rulings, garnering public participation in the effort and strict enforcement efforts.\(^\text{16}\)

- **Sikkuy** co-directors wrote an op-ed in Haaretz on April 16, titled “Take Passover and Double it by Thirty,” calling on government ministries to coordinate closely with the Arab leadership to ensure Ramadan would pass safely (Hebrew).

- **The Abraham Initiatives** published a detailed paper for decisionmakers, listing the dangers and challenges of Ramadan under Corona and suggesting specific ideas for action from enforcement, through finances and commerce to welfare and culture.

### HEALTH AND MEDICAL SERVICES

**Challenges**

Arab communities have fewer medical services (clinics, hospitals, specialty treatments, ambulance service) and faced delays opening Coronavirus testing stations. At the same time, the community is considered high risk due to high prevalence of underlying health conditions,\(^\text{17}\) population density and multigenerational residential patterns. In some communities, reluctance to be identified as infected as well as mistrust of state agencies (particularly the police and the Home Front Command) make tracking the disease a challenge. In addition, some cultural aspects make isolation of infected individuals (e.g. stigmas associated with disease, crowded living quarters) a sensitive challenge.

**Arab Emergency Situation Room Committee**

The Health and Medical Services committee, headed by the Galilee Society, is coordinating with the Ministry of Health to support, promote and advocate for modifications required to provide more relevant and culturally sensitive health services in Arab localities (better testing, better information, better isolation options, better coordination between the Ministry of Health and local/private health service providers etc.) For example, according to the Committee report, the National Health Funds’ Arabic language psychological services have all but “disappeared” in the time of this crisis:

- Transparency regarding the spread of Coronavirus in Arab localities as information was initially published only about Jewish communities.
- Opening medical service points (clinics, urgent care) through the local chapters of the various health funds to reduce medical infrastructure gaps and requirements to travel outside the village.

\(^{16}\) A Model for Managing Ramadan, Maoz, April 17, Hebrew.

\(^{17}\) E.g. the prevalence of diabetes among Arab citizens is more than 1.5 times than among Jewish citizens (12.9% and 7.8% respectively), obesity is almost 1.5 times as prevalent (23.3% and 16.5% respectively), smoking among Arab men is more than 1.3 times more prevalent than among Jewish men (48.9% and 36.1% respectively). Dr. Zahi Said, Assistant to the Director General on Arab Society, General Health Fund, (Hebrew).
• Enhanced Arabic-language emergency and ambulance service in Arab society through Magen David Adom.
• Establish testing stations and enhance testing in Arab communities.
• Inclusion of Arab professionals in health-related decision-making circles.
• Support for Nazareth hospitals (the only hospitals in an Arab city).
• “Corona hotels” for Arab society as a solution for isolation challenges (so far two such hotels opened in Haifa and Nahariya specifically for Arab citizens).

Additional NGOs
Mental health and psychological counseling services are currently being provided by a number of bodies on the ground, including:

• The only Department for Mental Health in Arab Society at the English Hospital (Nazareth);
• Union of Arab Psychologists which has publicized emergency services it is providing in Arabic;
• the Eghaetha Association (Charitable Association of the Southern Islamic Movement) hotline addressing individual psychological needs; and
• ERAN, Emotional First Aid is running an Arabic language hotline that provides 40 hours per week of designated Arabic emotional support services provided by social workers and psychologists.

LOCAL AUTHORITIES

Challenges
After imminent health priorities related to Ramadan, the AESR identifies the limited revenue stream of Arab local authorities as one of the highest immediate priorities affecting all other issues. Most Arab local authorities (municipalities) have very limited resources, lack professional capacities and are highly dependent on governmental funds even at the best of times. Prior to the crisis, many were already operating on reduced budgets due to delays receiving government grants and development funds resulting from the more than year-long elections cycle. Since the crisis, 30-50% of most municipalities’ staff have been placed on leave, further straining capacities. Revenue streams are also lower than usual due to a hiatus in collection of local taxes. The economic weakness of these localities is now seen as one of the major concerns of the AESR both for immediate emergency response, and to prevent bankruptcy in the long run.

Arab Emergency Situation Room Committee
Headed by the INJAZ Center for Local Government, the local authorities committee is mapping municipal capacities and needs, budget constraints and staffing. Top priorities are to ensure emergency government budgets are designed with Arab society in mind and solutions are found for emergency response gaps. A few examples:

• Lost Tax Revenue: The Ministry of Interior and Finance plan to compensate local authorities for lost commercial taxes with a NIS 2.8 Billion compensation package. Because Arab localities have few commercial or industrial zones (a central cause of their weak revenues), they will recoup only 1.7% of this budget. Meanwhile Arab localities also report a 50-80% decline in individual tax revenues, accounting for over half the revenue for some communities. The AESR is asking the government to
recognize these losses, suggesting that either the compensation for commercial taxes will be distributed differentially, and weak municipalities will receive a portion of stronger municipalities’ compensation; or for additional compensation for lost individual tax payments for Arab localities.

- **Emergency Hotlines and Local Information Capacities:** Many municipalities lack means of tracking emergency needs and communicating with the public. For example, 55 Arab localities still lack emergency hotlines, and many do not have capacities to regularly update websites or operate a real-time online CRM. These platforms not only communicate with residents, but enable the Ministry of Interior to track and respond to needs. The AESR is working with the Homefront Command and the Ministry of Interior to make sure needs are communicated and to establish hotlines or other means of communication.

- **Essential Departments:** In addition, as many local Arab councils do not have a Public Health, Sanitation or Environmental Health departments, or have very weak and undeveloped ones, the committee is helping convey these needs to the ministries of interior and the environment, to find ways to strengthen these bodies.

- **Crisis Staffing:** The Committee is also advocating allowing the welfare departments in Arab localities to continue working at full capacity despite Ministry of Interior directive to release between 30-50% of municipal staff.

**Additional NGOs:**

- **The Israel Democracy Institute** (IDI) is likewise preparing a detailed letter on the government’s tax compensation budget to the relevant ministries, explaining the imbalance of these numbers, since the lack of commercial areas in Arab localities is to a large degree the result of decades of government investment priorities and since Arab localities are at any event weaker and require more rather than less assistance.

- **Lawyers for Good Governance** (LGG) is continuing to monitor and advocate for transparency and professional work plans in Arab local councils and municipalities at the time of this health crisis. In a recent op-ed LGG warned that spontaneity and lack of clear strategy is particularly dangerous in light of the heightened needs in the month of Ramadan, both in terms of enforcing ongoing guidelines, and maintaining trust and order around welfare priorities. LGG has been receiving complaints from Arab citizens about lack of transparency about how emergency local relief resources are being distributed (i.e. which families, neighborhoods or subgroups have received assistance and food packages; which neighborhoods are being closed down).

- **JDC-ELKA** is supporting the “Integrators”, a group of 34 professionals recently incorporated in 34 Arab municipalities to assist them in accessing and implementing governmental resources, budgets and tenders. In many localities the new Integrators have become central to the local emergency response, many are assisting the municipality in accessing emergency government budgets, and others are initiating data gathering and coordination initiatives. The Integrators Program was created jointly by JDC and the Ministry of Social Equality, and both have been supporting the work of the Integrators during the Corona crisis.

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18 Ramadan is approaching – the unpreparedness of Arab localities will lead to a disaster, Haaretz, Nidal Hayek and Mohammed Kada, April 12 (Hebrew).

19 Ibid.
JDC – Digitization: together with Digital Israel Headquarters at the Ministry for Social Equality, ELKA initiated a survey of digital capacities in Arab localities, with the aim of mapping the “digital maturity” of each locality and using the weakness of these capacities in the Corona crisis as an incentive to promote better digitalization in the nearby future.

LOCAL EMERGENCY FORUMS

Challenges: Emergency forums within local authorities are common in Israel and serve as an important local coordinating body during crises—but are not nearly as common in Arab society. Since most of Israel’s national crises to date have been security-related, perceived differently within Arab society, Arab localities have generally never participated in nationwide emergencies and lack structures, personnel and experience to manage the response. Government Resolution 922 included the first-ever budgets to build emergency capacities in Arab localities, but most were not yet realized.

Arab Emergency Situation Room Committee

Headed by the Eghaetha Association (Charitable Association of the Southern Islamic Movement), this committee developed a model for establishing and operating local emergency forums and volunteer networks in Arab localities based on knowledge gathered from several Jewish communities and from successes in Tamra and Kfar Kassem. The model includes an organizational structure connecting local and central government authorities, law enforcement, health professionals, emergency services, religious leaders, civil society organizations and more. It provides detailed instructions for establishing a daily routine, collecting materials and mapping local realities, producing daily reports, and operating local voluntarism networks.

The committee is currently promoting an adoption of this model in more Arab localities and has recently managed to create a similar model in Deir al-Asad, following the outbreak there. However, dissemination and adoption of the model is proving to be challenging to many Arab localities.

INFORMATION AND AWARENESS

Challenges

Initial difficulties in disseminating accurate government guidelines in Arabic contributed to mistrust and confusion among Arab citizens. The Ministry of Health responded quickly, hiring an Arab PR firm and significantly narrowed information gaps. Still, according to AESR personnel and Arab activists, professional Arabic
language materials on the crisis are still underbudgeted\(^\text{20}\) and missing, particularly content that is more culturally relevant.

For example, current messaging does not address fears and stigmas about infection in Arab society that limit prevention.\(^\text{21}\) Another example comes from a recent Ministry of Health campaign focused on Ramadan whose conservative and unrepresentative images (see above) were widely rebuked for misrepresenting Israel’s Arab citizens. The Ministry quickly replaced the images.

Beyond the Ministry of Health and despite improvements, inadequate government forms and information in Arabic is also barrier to registering for unemployment and other benefits.

**Arab Emergency Situation Room Committee**

Also headed by the [Galilee Society](#), the Information and Awareness Committee collected a team of PR experts to prepare online campaigns encouraging the Arab public to comply with Ministry of Health instructions. The Committee opened a targeted Facebook page to share data, information, guidelines and campaigns. It also issued a detailed document with practical suggestions for Arab mayors on how to use local leaders and local information platforms (municipal website, community Facebook, WhatsApp groups) to refute rumors and stigmas and enhance compliance.\(^\text{22}\)

**Additional Activities**

Numerous civil society organizations took on translation and public awareness-raising, as well as continued advocacy for better governmental services.

- The [Abraham Initiatives](#) presented and issued numerous recommendations to government authorities such as the Home Front Command, the Knesset Corona Committee and the Ministry of Education on enhancing Arabic language services and communications;
- [Sikkuy](#) advocated widely for better Arabic language service on, for example, requesting unemployment payments ([Hebrew](#)), on Ramadan ([Hebrew](#)) and criticized the cancellation of Arabic language TV news programs at this time ([Hebrew](#));
- [Maoz](#) prepared and disseminated numerous materials on needs in Arab society, preparations towards Ramadan, materials for distance learning, and more.
- [Amanina](#) volunteers translated Welfare and Health Ministry announcements and worked on several online awareness-raising campaigns, including #stayathome in Arabic (بالبيت-خليك); and recruiting Arab medical staff for informative videos on "how to stop the spread of COVID-19".

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**FOOD SECURITY AND WELFARE**

**Challenges**

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\(^{20}\) A report by the I’lam Center shows that Ministry of Health campaigns between March 15 and April 6 spent NIS 4.1 million in campaigns targeting Arab society compared with around NIS 41 million in Jewish society – a 1:10 ratio. “The Arab Public is Afraid to Say: ‘Grandpa Died of Corona’” [YNET](#), Khaled Dagash, April 19 ([Hebrew](#)).

\(^{21}\) A wide campaign reaching will air today towards Ramadan, Ministry of Health Announcement, April 20 ([Hebrew](#)).

\(^{22}\) Practices to Address Corona in Arab Society, Arab Desk, Corona Central Command (MASHLAT).
Arab society is facing much higher food and welfare aid due to existing high poverty rates (three times higher than Jewish society) and high unemployment during the crisis in the lowest-end and informal labor markets where Arab society is overrepresented. According to a recent Israel Democracy Institute poll, Arab citizens reported smaller financial “cushions” than Jewish respondents, with only 51% of Arab respondents reporting any kind of available savings (compared with 69% of Jewish respondents), and 72% of Arab respondents estimating no more than two months’ worth of savings, (compared with 44% of Jewish respondents). According to a recent report in KAN 11 on welfare needs in Arab society, “people who are now entering the circle of those in need used to be the donors until just now” (Hebrew).

While food security and welfare organizations exist in Arab society, the immediate increase in demand requires more resources and more coordination between them, local authorities, and national-tracking platforms. In addition, some of the largest food security organizations (e.g. Leket or Latet) do not have as many inroads or partners in Arab society.

**Arab Emergency Situation Room Committee**

Coordinated by Amanina together with the Egheatha Association, the Food Security and Welfare Committee is working on a database of families, elderly, and others in need of immediate food packages, medicine and other equipment per community, and a parallel database and coordination structure for civil society organizations providing such relief. These are shared with Arab voluntarism organizations on the ground as well as the Ministry of Welfare.

**Additional NGO activities (not including the Negev):**

Numerous Arab-led charitable organizations have been working on the local level to identify needy families and individuals, with some coordinating with national-level organizations such as Leket Israel. This work is expected to significantly intensify during Ramadan, when the act of Zadaka (“Charity”) is one of the cornerstones of Muslim tradition. A few examples are:

- The **Southern Islamic Movement Charity Association** (Egheatha) has distributed over 10,000 food packages, initially to needy Arab families, but also to asylum seekers and foreign workers in southern Tel Aviv and to Haredi families in Bnei Brak. **

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- **Amanina’s** emergency crew is distributing food staples and baskets as well as hygienic kits to more than 30 different Arab communities, mainly reaching families with no income and the elderly.

- **Tishrin Association**, an organization promoting community activism and social empowerment has moved some of its efforts to supporting needy families and assisting people who lose their jobs to fill the necessary forms for the National Security Institute.

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23 Life without a minimal safety net – some of those being laid off do not deserve unemployment payments, Globes, Dafna Barmeli Golan, March 24 (Hebrew).

24 Economic Gaps in Times of Crisis, Israel Democracy Institute, April 23..

25 Eran Singer’s Kan 11 TV report from April 10 (Hebrew).
EDUCATION

Challenges
Digital gaps (e.g. lack of computers, internet access, remote teaching capabilities and experience, online Arabic curricula) limit distance learning opportunities for Arab students. In 2017 the Central Bureau of Statistics found that 51% of Arab households are not connected to internet service (compared with around 21.7% of Jewish households) and similar gaps were found in terms of ownership of a computer. Civil society organizations note that distance learning gaps are not only an issue during the crisis, but that the experience may change the education system going forward and thus further enhance existing achievement and access gaps for Arab society.

Arab Emergency Situation Room Committee
The Education Committee is headed by the Arab Follow-Up Committee on Education in cooperation with additional organizations such as Mahapach-Taghir, school principals and education experts. The committee is mapping Arab students’ needs and seeking technological solutions to poor internet infrastructure, materials and training for Arab teachers, and donations or loans of computers and laptops for Arab students. The committee is also reviewing problems that may arise for Arab high school graduates who are due to complete matriculation exams and immediately begin academic studies in September.

Additional NGO activities

- The Abraham Initiatives issued a detailed paper on digital gaps between Arab and Jewish communities with recommendations for the Ministry of Education as well as a call to delay reopening schools in Arab society due to upcoming Ramadan.

- Alrowad For Science and Technology, an organization promoting STEM education in Arab community, continued many of its higher education programs spanning five major Israeli universities via distance learning. In addition, while its flagship program of providing STEM education in numerous Arab schools via scientific kits had to cease, the organization launched a special YouTube channel (Arabic – here on preparing DIY face masks) where kids can continue to study with special kits and booklets they were provided right before schools were closed and with materials they can find at home. Recently, the organization became a member of the 8400 Health Network’s Coronavirus Task Force, creating a Corona information page on its website with materials on research, global practices, possible vaccination, protective gear etc.

- Al Tufula Center, an early childhood and women’s organization in Nazareth, has had to close its day care-centers, but along with other activities, has quickly prepared 2000 kits with activity books for kids at home and pedagogic materials for parents, similar to those it prepared in 2006 during her Second Lebanon War. The kits are being distributed in collaboration with Amanina’s volunteers.

BUSINESSES AND ECONOMY

Challenges
Most Arab-owned businesses are small and local, yet these businesses make up a significant portion of local Arab economies and employment. With 57% of Arab-owned businesses belonging to construction and commerce—activities which have all nearly ceased during the crisis—the Arab business sector has been hit hard. Arab-owned businesses usually have mostly local exposure, less credit history, less knowledge of government opportunities like loan guarantees or access to government tenders. Thus, they are less resilient and lack awareness of and access to emergency government resources during this time, posing a serious threat to local Arab economies and communities.

**Arab Emergency Situation Room Committee**

This committee is coordinated by Aiman Saif together with INJAZ Center and key Arab business leaders. It is working with the government to ensure government supports provided to small businesses are compatible with the needs of Arab-owned businesses. For example, the State Guarantee Loan Fund announced by the government on March 23 includes preconditions such as credit history, which are harder for small Arab businesses to meet. The Committee is requesting easier conditions and speedier approval processes for Arab business owners. The Committee is also working with the Riyan Employment Centers and the National Insurance Fund to assist Arab employees who lost their jobs to access benefits.

**Additional organizations**

- **Jasmine**: an organization supporting the economic participation of Arab and Jewish women business owners, replaced its regular activities with counseling relevant to this period. This includes a series of online 3-minute videos titled “Women Reporting from the Field” in which businesswomen, consultants and experts provide free advice on issues such as accessing bank credit, enhancing online services, accessing emergency government assistance, managing a realistic budget etc. In addition, the organization is working with larger businesses to encourage support of women-owned suppliers at this time, and helping businesswomen begin planning the recovery period through long distance consulting.

- **The Arab Economic Forum (Arabic)**, together with the Israel Accounting Association, recently launched an “economic committee for the Corona crisis” that will provide pro bono business and financial consultation for Arab business owners as well as maps their needs at this time.

**EMPLOYMENT AND LABOR**

**Challenges**: Arab citizens are overrepresented in the weaker and informal labor force, and in the professions most affected by this crisis, and are thus overrepresented among the newly unemployed. They also face greater difficulty accessing unemployment benefits and other government supports (due to language and other access barriers, and especially if not

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26 According to a Ministry of Labor report from 2017, over 54% of Arab-owned businesses reported annual revenue of less that NIS 500,000 (USD 140,000) and only 10% took in more than NIS 5 million (USD 1.4 million). Only 18% of Arab owned business had over 50 employees, compared with 61% of Jewish-owned businesses.

formally registered as employed). According to a recent Israel Democracy Institute poll, Arab respondents reported significantly higher levels of insecurity regarding their jobs after the crisis (57% were “very unsure” or “pretty unsure” they would be able to return to their jobs, compared with 25% of Jewish respondents).  

**Arab Emergency Situation Room Committee:** This committee includes representatives of the **Portland Trust**, **JDC-TEVET**, **Sikkuy**, the National Insurance Fund, **Al Fanar-Riyan Employment Centers** and **Co-Impact**. It is working to assess the extent and severity of Arab unemployment and to ensure governmental policies and supports are relevant and accessible. For example:

Government unemployment support is defined to cover people from the age of 20 except for “special circumstances,” which assumes army service until that age, while many Arab youngsters begin working at 18. Following a letter sent by the National Headquarters to Minister of Labor and Welfare MK Ofir Akunis (Likud), the Coronavirus crisis was acknowledged as “special circumstances” and the definitions were altered.

**Other NGO Activities:**

- **JDC-TEVET** is working with the Ministry of Labor to map crisis-related needs in all its employment programs and enhance access to the necessary services (e.g. long-distance working capacities that are proving to be a substantial challenge). TEVET has also developed a database of experts from among Arab society to provide free assistance to NGOs working on employment, education and higher education in Arab society, with the understanding that the pressure on these organizations at this time has spiked while their capacities to serve clients has been curtailed.

- **aChord: Social Psychology for Social Change:** Issued a [practical guide for employers](#) on maintaining a diversity and inclusion perspective in the time of the Corona crisis as issues of remote working, lay-offs, and unpaid leave challenge management decisions and principles.

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**WOMEN**

**Challenges**

Requirements to stay home have increased risks for women subject to domestic violence, raising significant concerns for continuing sensitive social, psychological and preventative work under current conditions. Other challenges include the high rate of informal labor among Arab women who are then not eligible for unemployment benefits; and specific challenges for women-owned businesses referenced above.

**Arab Emergency Situation Room Activities**

Although there is no specific committee, **Women Against Violence** and **Al Tufula Center**, two veteran feminist Arab NGOs, are leading AESR work on this area, relaying needs and challenges to the appropriate state authorities and securing additional budgets from the Ministry of Welfare. They are also seeking enable victims of domestic violence to leave their homes, even while they are unable to move to Ministry of Welfare shelters (for lack of space or illegibility criteria) or unwilling to do so for various reasons, and for solutions to support informal women laborers out of work.

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28 Economic Gaps in Times of Crisis, Israel Democracy Institute, April 23 (Hebrew).
Additional Activities

- **Home Front Command:** Following recommendations by Al Tufula Center, Women Against Violence and the Israel Women Network, the Home Front Command integrated three Arabic language hotlines related to the specific needs of Arab women to its formal webpage: (i) one on employment issues run by the Israel Women Network, (ii) one on the issue of violence run by Women Against Violence, and (iii) one on women with disabilities run by Al Tufula Center.

- **Feminist Headquarters:** Several leading women’s and feminist organizations and activists established a “Feminist Headquarters” to promote the involvement and wellbeing of Arab and Jewish women during the crisis. These organizations include: Mahapach-Taghir, Itach-Maaki, I am a Woman, Ruach Nashit and Women Against Violence, as well as activists Samah Salaime, Hamutal Guri, Anat Nir and others (Arabic). These and other organizations came together to petition the Supreme Court against the entirely male and Jewish composition of the National Security Council’s new Coronavirus team of experts.

### MIXED CITIES

**Challenges – Mixed Cities:** Approximately 11% of all Arab citizens reside in mixed cities—defined as cities with more than 10% Arab residents—where they are often the weakest population and usually live in separate neighborhoods. In some cases, like Lod, mixed cities include ‘unrecognized’ Arab neighborhoods where construction is unauthorized and basic infrastructure like water and sewage is lacking. Generally, Arab citizens in mixed cities have been uncovered by government development budgets focused on Arab municipalities and thus have less access to various government services and supports (e.g. dedicated employment centers). In cases where basic infrastructure is lacking, there are increased health and sanitary concerns, as well as economic concerns related to a high rate of informal labor and business. Finally, despite being mixed cities, services, announcements and institutions are not necessarily oriented to ensuring access for Arab residents, creating information and service gaps.

**Arab Emergency Situation Room Activities**

This committee is headed by Mosawa and works to identify the specific needs of Arab citizens in mixed cities. Arab representatives on the local municipal councils are working to relay local needs to the Committee, which the AESR then relays to national institutions and municipal leaders in each city, including issues relevant to all, such as services in Arabic and culturally-relevant welfare solutions.

### DIGITAL GAPS

**Challenges:** Digital gaps affect nearly every aspect of Arab communities’ ability to cope with the various needs and challenges of this crisis, ranging from a lack of digital infrastructure (internet connections and coverage) and equipment (computers), technological solutions (i.e. municipal CRMs to track emergency needs, online curricula in Arabic), to lack of digital literacy, familiarity and capacities for remote working, teaching and accessing services or for parental support on these issues.
Recent activities:

Beyond the focus referenced above on education specifically:

- The Israel Democracy Institute and Portland Trust organized a virtual round table on April 20 with government and civil society organizations on the Arab labor force. Digital gaps emerged as one of the major barriers affecting Arab employment with only 16% of Arabs reporting they continued to work remotely compared with 28% of Jews, suggesting digital gaps affect both integration into fields more suitable for remote work and the ability of workers in those fields to work remotely due to lack of infrastructure. These concerns were relayed in a letter to the Ministry of Labor.

- Hasoub, which works to enhance technological and social entrepreneurship in Arab society, has been assisting the AESR with online needs. In addition, the organization:
  - Launched a weekly online lecture series on technology-related issues such as how to conduct better distance learning and how to approach the Chief Scientist Office for support.
  - Organized a special “CoronaHack” for civil activists from April 17-20, which drew 160 participants seeking technological solutions to current challenges. The event included 8 online lectures by Hasoub mentors, and a team of judges who selected the top 5 solutions dealing with such issues as distance learning, health etc.
  - Connected with Mithabrim (“Connecting”), an initiative operated by Appleseeds Academy, the Ministry for Social Equality and other partners, in which volunteers provide technological assistance to enhance access to those in need of support (how to activate zoom, how to operate distance learning, how to order food and services online), to make this support available for Arabic speaking populations.

- Almanara – Association for the Advancement of the Blind Arabs in Israel: Advancing people with disabilities, especially with visual impairment, is providing digital support for people with disabilities through their Almanara digital library, along with other activities to support families and parents with children with disabilities.

NEGEV BEDOuin - EMERGENCY SITUATION ROOM IN THE SOUTH

The Negev is home to approximately 271,000 Arab-Bedouin citizens. Of these, 110,000 citizens live in 7 cities established by the state, 41,000 live in the jurisdiction of two regional councils (Neve Midbar and Al-Qassoum), and 120,000 live in unrecognized villages.

As testing has become more available in Bedouin towns the number of confirmed Covid-19 cases has increased. As of 28 April, there are more than 105 Coronavirus cases with 52 in Rahat, the largest Arab Bedouin town, and 34 in Hura just over the last week. Civil society organizations report that there is still a reluctance to get tested and the number of tests, while rising, is still low.
Due to large socio-economic gaps,29 distinct social and cultural characteristics, and the unique circumstances related to unrecognized villages, emergency response needs are intensified and face unique challenges in the region. Cooperation and coordination between civil society organizations, local authorities and the central government was formalized in a Joint Emergency Situation Room for the Negev, led by AJEEC-NISPED in cooperation with NGOs operating in the region.30

The Situation Room works to coordinate efforts in response to the following unique challenges:

- **High Rates of Poverty:** Bedouin have by far the highest poverty rates and are overrepresented in low-wage and informal labor. At the same time, many families are large and supported by a single income and have little to no savings. With high rates of job losses, families can face significant food insecurity and risk in a short time.

- **Infrastructure:** A lack of or inadequate physical infrastructures such as water connections, electricity, sanitation, transportation, sewage treatment system, internet and cellular connections, makes it difficult for Bedouin families especially in the unrecognized villages to take hygienic precautions as well as access relevant resources for safety, benefits, distance learning etc.

- **Adherence to Guidelines:** Challenges complying with social distancing, testing and isolation guidelines result from information and resource gaps and aspects of traditional culture:
  - Despite effective awareness raising campaigns, information gaps remain due to lack of adequate information in Arabic, access to internet and cellular connections, among others.
  - Testing requires several bureaucratic steps (initial phone report, epidemiological investigation to identify source of infection, assignment to a specific clinic/testing station, etc.) that are significant barriers to Negev Bedouin.
  - Stigmas and fear of social rejection if identified as having the virus.
  - Difficulties maintaining social distance or isolating infected individuals, for women especially as they may not be able to go to Coronahotels outside the village.
  - Rumors that getting tested for Corona would break the Ramadan fast.
  - Reluctance to comply with quarantine instructions during the Ramadan month, which is typically a period of increased socializing.

29 Both the recognized villages and the regional councils in the Negev are ranked on the lowest socio-economic scale, while the unrecognized villages are not included in Israel’s socio-economic scale since they are not officially a part of any local authority and face a severe lack of infrastructures and resources.

Joint Situation Room Activities:

The Situation Room conducts ongoing needs mapping and serves as a close coordination platform for civil society organizations working in the region, local authorities and relevant government ministries, Magen David Adom, and the Home Front Command. Additionally, the Negev Situation Room is working in full cooperation and coordination with the National Arab Emergency Situation Room.

Like the AESR, the work of the Negev Situation Room is divided into committees led by several NGOs. Additionally, a base of 200 active volunteers, coordinated by AJEEC-NISPED and Desert Stars, provides ongoing support to the committees as needed.

To date, the coalition has helped provide and distribute over **20,000 food packages, 1,400 sanitation products, 50,000 masks, and 6,000 educational kits for kids**. Additionally, the volunteers are promoting awareness and encouraging adherence with social distancing guidelines, helping to prevent gatherings around supermarkets and banks, especially in the time of collecting the unemployment benefits during which large number of people gather in the same place to claim their unemployment benefits.

Additional activities towards Ramadan include intensive social media campaign, increased coordination with the Home Front Command to ensure delivery of sufficient food supplies, increased volunteers field activity to distribute food and sanitary packages, and coordinating with the Imams (Islamic religious leaders) to convey a joint message to the local communities to stay at home.

Priority Area Committees:

- **Health**: Online medical consultation, connecting to medical services, solving isolation issues. **Partners**: AHD - The Association of Academics for the Development of Arab Society in The Negev, Arab Physicians Association in the Negev

- **Food security and hygiene supplies**: – providing food aid and sanitation equipment, identifying needy families. **Partners**: Islamic Movement, Regional Council for Unrecognized Villages, AJEED-NISPED.

- **Unemployment and rights utilization**: Supporting unemployed in accessing national benefits and welfare support. **Partners**: Community Center at Neve-Midbar Regional Council, Rayan Center, Adalah Legal Center.

- **Education**: Addressing digital infrastructure gaps, supporting distance learning capacities, providing formal and informal educational materials, and supporting people with disabilities. **Partners**: Neve-Midbar Regional Council, Lana, The Association for the Improvement of Women’s Status in Lakia, AJEEC-NISPED, Tamar, Community Center Rahat, Tel-Sheva local authority, Kuseife Local Authority.

- **Psychological and emotional support**: Personal and emotional support for individuals and families. **NGOs**: A New Dawn in the Negev, Tamar.

- **Awareness raising**: Promoting compliance with health guidelines. **Partners**: AJEEC-NISPED, Shatil, Islamic Movement, Arab Physicians Association in the Negev
CASE STUDY: LOCAL EMERGENCY RESPONSE MODEL IN TAMRA

Tamra is one of the largest Arab cities, with around 34,000 residents, located in northern Israel. The city was able to quickly organize and create a wide-reaching emergency response model that includes all municipal departments, numerous local organizations and hundreds of local volunteers. Early in March, the first two corona cases in Arab society were identified in Tamra, brought by two students returning from abroad. Tamra Mayor, Dr. Suheil Diab, and Deputy Mayor Nidal Othman, a long-time civil society activist and organizational consultant, were quick to recognize the need for a city-wide response and, in the following few weeks, created the structure detailed below. It was used to inform the model developed by the AESR to instruct all local authorities.

Tamra emergency response structure:

- **Clusters of activity:** In the first days, major “clusters of activity” were defined, the first of which was enhancing awareness by city residents to the danger of the new plague. Immediately after, each of the municipal departments widened its activities to include more issues and target audiences (e.g. the Welfare Department was redefined as the “people and community cluster” – addressing the welfare needs of the entire community rather than only those of the regular welfare recipients).

- **Needs assessment team:** a needs assessment team was convened, which identified 11 areas of existing and future needs, meaning not only issues that required immediate attention (e.g. information) but also those that were to arrive (e.g. providing medical supplies for the elderly, which at the time was not yet a necessity). As part of the assessment of the available communal resources, local groups, NGOs and political parties were invited to participate in the effort.

- **Recruiting volunteers:** the municipality and assessment team then recruited 250 local volunteers over the age of 18 to supplement youth movements. Volunteers were divided into 11 working groups for immediate and future needs, so that many of the volunteers were asked to be “put on hold” until their help would be needed.

- **Medical team:** a group of medical professionals from among the volunteers was made into a medical consulting team with several roles: (i) assisting the municipal staff with medical advice, (ii) leading an internal campaign on awareness and compliance, using YouTube videos, WhatsApp messages etc., (iii) opening a volunteer medical hotline to which local residents can call with any medical question or concern, whether related to Corona or not.

- **Economic committee:** accountants, local bank employees and economy and law students from among the volunteers were made into an economic consulting committee. This committee likewise opened a hotline for local small businesses, people who lost their employment and others to assist in filling forms to welfare services, planning business or household finances at this time etc.

- **First patients:** the families of the first two patients identified were quarantined and agreed to cooperate fully with the local headquarters, publicly conveying that there is
no shame in being sick or quarantined and advocating for testing and reporting any medical signs.

- **Local Market**: the local headquarters opened a dedicated Facebook page called “Souk Elballad” (“Village Market”) in which local businesses can advertise their discounted products to enhance the local economy.

- **Coordination with the Home Front Command**: The local headquarters is coordinating with the local representative of the Home Front Command to show that it was organized and answering its own needs so that Home Front Command soldiers are not necessary and do not need to enter the community. Satisfied with the local emergency response, soldiers have not intervened thus far.