Masira (Journey) – The Program for Advancing the Status of People with Disabilities in Arab Society in Israel

Research Report

PEOPLE WITH DISABILITIES IN ARAB SOCIETY IN ISRAEL: AN OPPORTUNITY FOR SOCIAL CHANGE

Avital Sandler-Loeff and Yiffat Shahak

Jerusalem        July 2006
Acknowledgements

This report summarizes a year-long process involving meetings of a forum which included professionals and policy makers, as well as representatives of people with disabilities and their families. The forum examined the situation of people with disabilities in Arab society in Israel, and commissioned surveys and studies on that population which provide the basis for this report. The studies contributed to formulating a comprehensive four-year proposal which aims to advance the status of people with disabilities in Arab society in Israel.

In light of the importance of the information collected and the possibility that other organizations can benefit from this information, JDC Israel has decided to publish the findings in Hebrew, Arabic, and English for policy makers, professionals, service providers, and organizations for people with disabilities.

We would like to thank the members of the forum for their assistance and advice, as well as their willingness to contribute to the planning. The names of the forum members are listed in Appendix 2.

Special thanks are due to the authors of the comprehensive papers. They are listed on pages 11 and 12 in the Introduction section for their intensive and professional efforts. This report integrates the content of those papers.

We would like to thank the agencies that funded the efforts which led to the publication of this report, and which have provided support for the four-year plan based on the findings of the report and the work of the forum.

Thanks are due to Tamara Barnea, Director of the JDC-Israel, Unit for Disabilities and Rehabilitation, for supervising the project and for her constructive and enlightening comments. Thanks to Ya’akov Hason for linguistic editing in Hebrew; to Jalal Hassan for translation of the report to Arabic; to Miriam Schneiderman for the English translation; to Jen Sundick for editing the report; and to Meytal Dahan for preparing the report for press.
# Table of Contents

## Abstract
6

## Introduction
12

## Chapter 1: Data on People with Disabilities in the Arab Society in Israel
14

## Chapter 2: Barriers and Challenges Faced by People with Disabilities in Arab Society in Israel
18

## Chapter 3: Services Available in the Arab Society for Treatment of People with Disabilities
26

1. Services Provided to People with Disabilities in Arab Society
27

2. Programs, Organized Efforts, and Projects for People with Disabilities
31

## Summary
48

## References
52

## List of Appendices

Appendix 1: Projects Mapped
54

Appendix 2: Participants in the Forum to Advance the Status of People with Disabilities in Arab Society in Israel
68

## List of Tables

Table 1: Percentages of Children with Special Needs in the Arab and Jewish Sectors in Israel
15

Table 2: Services Provided to Arab and Jewish Children with Special Needs
29
People with disabilities in Arab society in Israel cope with numerous barriers. Some of the barriers are similar to those faced by all disabled persons, whereas others are specific to or exacerbated by the Arab sociocultural context. The barriers that prevent integration of people with disabilities in Arab society include lack of accessible knowledge and services; lack of access for disabled individuals and a societal attitude that does not accept them as having equal rights; and lack of coordination between the various agencies that deal with the affairs of people with disabilities. However, the past decade in Israel at large has witnessed important developments in the lives of people with disabilities, which are also evident in Arab society. These developments can be largely attributed to changes in legislation and to the development of services which enable people with disabilities to effect changes in their own lives.

This report aims to identify the main issues and needs that are unique to people with disabilities in the Arab sector in Israel, and to suggest opportunities and mechanisms for change. The report summarizes the work of a forum which was convened by the JDC Israel - Unit for Disabilities and Rehabilitation. The forum consisted of professionals and policymakers, as well as representatives and family members of people with disabilities. The forum aimed to raise the status of people with disabilities in Arab society and acknowledge their right to be included in all spheres of life. Following the planning activities of the forum, an anonymous foundation approved a four-year program to promote the status of people with disabilities in Arab society in Israel.

This document is based on seven previous reports commissioned by JDC Israel, which were conducted by various research organizations closely acquainted with Arab society in Israel. The first part of this report presents quantitative data on people with disabilities in the Arab sector. The second part deals with barriers and challenges faced by people with disabilities. The third part deals with various services provided to people with disabilities. In addition, we present examples of national projects for people with disabilities which are currently being conducted in Arab localities, as well as examples of organizations established by disabled persons on behalf of people with disabilities at the regional and local levels.

Data - Examination of the existing data on people with disabilities in Arab society reveals that the information is incomplete (as are the data on Jews with disabilities in Israel). The lack of data is problematic for several reasons. Among other problems, the lack of data makes it difficult to provide treatment and assistance for people with
disabilities, plan an adequate system of services, and identify those issues that require special attention. It should be noted that in some Arab local authorities the data on people with disabilities are incomplete, largely due to lack of coverage and because people with disabilities are hidden.

Notwithstanding the difficulty obtaining accurate quantitative data on people with disabilities in the Arab sector, it appears that the percentage of people with disabilities in that society – including children, adults, and elderly persons – is higher than in the Jewish sector. This can be attributed to several causes, including the high rate of consanguineal marriage, hereditary diseases, women giving birth at a relatively late age (among Bedouins, for example), and lack of awareness of various genetic disorders.

**Barriers and Challenges** - People with disabilities cope with various difficulties and barriers that impede their daily functioning and prevent their integration into the community and surrounding society. Some people with disabilities have low self-esteem, experience shame and other difficult feelings, and often have difficulty believing in themselves and their abilities. People with disabilities also have to cope with a society not conducive to their full integration, as well as with prejudices and stereotypes that prevail in the community. Furthermore, people with disabilities and their families have to cope with limitations in the area of marriage, as well as with social isolation, degradation, humiliation, fear, suspicion, and alienation. Oftentimes, the organizations and institutions that are supposed to provide assistance and care for the needs of people with disabilities (e.g., local authorities, welfare departments, the National Insurance Institute, local community centers, and local clubs) do not show sufficient sensitivity to them. Often, people with disabilities feel that because they are not a power group, their needs are not addressed by local authorities.

The families of people with disabilities are their primary caretakers. According to the reports of disabled people and families, people with disabilities and their families do not receive sufficient and appropriate support. On the one hand, reports indicate that the family is the only framework that provides care, support, and assistance to the disabled person. These reports describe relations based on mutual respect, as well a desire to help the family members with disabilities and integrate them into society. On the other hand, there are people with disabilities who complain of inadequate care, and claim that they are treated with pity and shame and are hidden from society. One of the main difficulties for people with disabilities and their families is limited access to information. People with disabilities and their families report lack of information about their rights, possibilities for treatment and rehabilitation, and
sources of assistance. In addition, guidance and counseling in the Arabic language are lacking.

A major obstacle that prevents people with disabilities from integrating into their society is the inaccessibility of their places of residence. This is reflected, among other things, in a lack of appropriate transport arrangements for people with disabilities, as well as lack of accessible public buildings and institutions, blocked sidewalks, etc. Lack of accessibility exacerbates the disabled person’s dependence on family and the conditions of the environment, and makes their integration into the daily life of the community more difficult.

Further difficulties are found in the areas of education and employment. On the one hand, Arab students with disabilities are eligible for universal assistance from organizations such as the National Insurance Institute, the ALEH organization, and other organizations that support students with disabilities. On the other hand, in Arab society, people with disabilities who wish to attain a higher education are not given sufficient encouragement. Beyond that, there is a lack of appropriate educational settings for youth, and particularly for the hearing impaired (for whom there are no appropriate educational settings after the age of 14). Today, employment possibilities for people with disabilities are limited. There are not enough appropriate places of work for them, nor are there appropriate arrangements for transporting them to work. Prejudices prevent employers from hiring people with disabilities, and they are afraid that hiring a disabled person will harm the work process. There is a shortage of rehabilitation centers for people with disabilities in the Negev region and in Qalansawa. The centers that do exist do not offer a wide enough variety of jobs, and in most cases the work at rehabilitation centers is inappropriate.

**Services** - In Arab localities, there are 100 service organizations providing for people with disabilities, besides the services provided by the social services departments of local authorities. However, they do not provide adequate services to respond to all the needs of their clients. The most common services are leisure services, and their distribution in Arab localities corresponds with the geographic distribution of the Arab population of Israel: most of the services (72%) are in the Haifa and Northern regions, while there is an acute shortage of services in the southern region (The Negev). Most of the services are provided to populations covered under universal legislation, i.e. to people with mental retardation, visual impairments, or blindness. At the same time, there is a clear lack of the services covered by law for people with physical disabilities. In addition, people with psychological disabilities (behavioral
disorders, functional disorders, and autism) do not receive services because those populations are under identified.

A number of national projects for people with disabilities operate in Arab localities. The main one is the “Accessible Community” project, which is run in 40 localities throughout the country, including eight Arab localities: Umm Al-Fahm, Qalansawa, Kafar Kanna, Tamra, Shefar'am, Sakhnin, Nazareth, and Daliyat Al-Karmel. Umm Al-Fahm was chosen by the national steering committee of the “Accessible Community” project as one of the four most successful localities in the project.

Findings of the project’s external evaluation indicate that the “Accessible Community” project succeeded in placing the issue of equal rights for people with disabilities on the public agenda in Arab localities. In addition, the project has enhanced leisure activity for people with disabilities, and mobilized the community of people with disabilities as well as the community at large to participate in activities for those with disabilities. Additional achievements include increasing and enhancing information on rights and services for people with disabilities, strengthening relations between people with disabilities, decision-makers, and religious figures in their localities, and creating informal channels of communication.

Notwithstanding these successes, the findings of the evaluation reveal barriers to and problems with implementing the program: a shortage of local professionals who can train activists, provide supervision, and integrate the program in the society. The findings revealed that there is a very low level of physical accessibility, lack of access to information, to resources, and to forums for decision-making. There is a basic shortage of services for people with disabilities. With regard to the image of people with disabilities, the people with disabilities and their families were reluctant to expose themselves because of the shame and stigma involved. In the public discourse, such assistance is still viewed as charity and not as a right. Another difficulty was revealed with regard to integrating people with mental disorders and people with mental retardation into the program.

The local level - Other efforts initiated for people with disabilities by those with disabilities are on the local level. The past decade has witnessed a positive trend in Arab society, where people with disabilities assume responsibility for their own situation and take the initiative to establish nonprofit associations and other organizations for those with disabilities. However, people with disabilities who are interested in organizing themselves confront many challenges. One barrier is the difficulty involved in organizing a self-help group or a nonprofit organization. This
difficulty is due to the lack of knowledge about how to organize these kinds of
groups, lack of guidance and counseling, shortage of funding, and, sometimes,
absence of moral support. Appendix 1, which maps selected projects for the people
with disabilities in Arab localities in the northern region and in the Triangle (the Umm
al-Fahm-Baqqa al-Gharbiyye-Tira area) reveals that there are about 40 active projects
which aim to help those with disabilities in Arab society in a variety of ways. These
projects include services for people with disabilities and their families which are
provided by local welfare offices and other organizations, as well as projects
sponsored by nonprofit organizations.

The mapping reveals other significant findings. Most of the agencies that plan and
implement the projects reported success in two dimensions: a) the number of
organizations which participated in providing services, or have provided support for
provision of services; b) the continuing of participation of target populations in the
program. Nonprofit organizations have been established in localities where services
are not provided by government institutions (e.g. welfare agencies), mainly by the
community at large and particularly by people with disabilities themselves. The
nonprofit organizations are operated by local entrepreneurs and fundraising is based
on donations from within the community; many projects are based on services
provided by members of the target population (projects initiated by people with
disabilities for those with disabilities). Most of the existing frameworks (particularly
nonprofit organizations) do not limit themselves to providing specific services to
people with disabilities, but also focus on advocacy for people with disabilities and
their families, as well as on providing information about the legal rights of people
with disabilities. The review also shows that in locations with successful projects, the
organizations usually collaborate with each other as well as with the local authorities.

A review of the projects reveals positive outcomes with regard to nonprofit
organizations established by people with disabilities for people with disabilities and
their families. Specifically, those organizations have succeeded in improving the
situation of people with disabilities in terms of the community’s attitude toward them
as well as in terms of enriching their lives and improving their ability to integrate into
the community. However, there is no doubt that the most significant contribution, as
indicated by people with disabilities, is the change in their own self-image and in the
image that others have of them. Instead of being viewed as experiencing a crisis
situation due to congenital disability or disability following an accident, they have
begun to find interest and seek meaning in their lives.
The main obstacle to this process of change is the financial difficulty faced by the nonprofit organizations. Programs are not implemented due to shortage of budgets and persistent fears about the prospects of functioning in the future without a steady and secure flow of funding.

An issue that surfaces throughout the entire report is the relationship between disabilities and gender. Arab women with disabilities suffer more than men in terms of their image and the way they are treated by society. The situation is worse for females than males in families ashamed of having family members with a disability. Frequently women with disabilities are socially isolated, and most of them do not marry or have families of their own. In many cases, they are confined to the house because of personal shame, family pressure, and the family’s reluctance to be seen with them in public. In addition, some women with disabilities are illiterate, which limits their access to information and increases their dependence on relatives, the community, and therapeutic services. Among Bedouin women in the Negev who have disabilities the situation is even bleaker because Bedouin culture hardly allows women with disabilities to leave the house or the village, as well as because of the lack of services in the region.

**Summary** - Notwithstanding the difficult economic situation of Arab local authorities in Israel, over the past decade there has been a change in the approach to people with disabilities in formal services and in Arab society at large. Some local authorities have mobilized various types of assistance for people with disabilities: they have attempted to increase access for people with disabilities and have promoted activities for integrating people with disabilities into society. In addition, people with disabilities have implemented initiatives aimed at improving the situation for those with disabilities in various areas of life.

The Masira (Journey) multi-year program developed by the JDC-Israel - Unit for Disabilities and Rehabilitation in cooperation with governmental and municipal organizations, as well as organizations for people with disabilities and professionals in the field, aims to improve the status of those with disabilities among the Arab population of Israel. The Masira program also aims to strengthen nonprofit organizations serving those with disabilities that were established by people with disabilities. The initiative will strengthen the ability of disabled people to function as service developers and change agents and will improve access to information about eligibility and availability of services. In addition, it will enhance intersectoral coordination to make service provisions more effective and promote considerable changes in attitude about people with disabilities.
**Introduction**

People with disabilities in Israel comprise a particular population group which, in many respects, requires special attention. However, it is important to note that this group is not homogeneous. There are different types of disabilities, as well as sub-categories within these disabilities. The present report deals with a population that has not yet received adequate attention and study, namely people with disabilities in the Arab sector in Israel.

The report comprehensively examines the main dilemmas and special needs arising from the issue of disabilities in Arab society in Israel, with the aim of improving the status of people with disabilities in that society and acknowledging their rights to be integrated in all spheres of life.

To date, people with disabilities in Arab society in Israel have not been given special attention by the policy maker, nor have they been distinguished from the overall population of people with disabilities in Israel. People with disabilities in Arab society have been included in frameworks and programs offered by various organizations. To determine whether there is a need to develop a special model for people with disabilities in Arab society, JDC Israel commissioned the following reports to explore various issues related to this population:

1. literature review on disabilities in Arab society in Israel,¹
2. overview of services for people with disabilities in Arab society in Israel,²
3. study of needs, attitudes, and concepts of people aged 21+ with disabilities and their families in Arab society,³
4. study of attitudes towards people with disabilities in the Arab society from the viewpoint of service providers,⁴
5. mapping and analysis of projects in the sphere of rehabilitation for the disabled in the Israeli Arab population,⁵

---

¹ Nurit Strosberg, *Literature Review on Disabilities in Israeli Arab Society* [Heb.], Myers-Brookdale JDC Institute, April 2005. The data in this report are taken from studies cited in the literature review. Complete details on the studies are provided in the literature review.
² Ravit Efrati, *Survey of Services for People with Disabilities in the Arab Sector* [Heb.], Henrietta Szold Institute, April 2005 (internal report).
⁴ Amin Faras, *People with Disabilities in Arab Society – From the Viewpoint of Service Providers* [Heb.]. Economic Analysis Consultation, Guidance, and Research, April 2005 (internal report).
6. description of the current situation and possibilities for the future of the “Accessible Community” project in Arab society in Israel, and
7. overview of the activities of the Unit for Disabilities and Rehabilitation at JDC Israel in Arab society in Israel.

Chapter 1 of this report presents quantitative data on people with disabilities in the Arab sector. Chapter 2 deals with barriers and challenges faced by people with disabilities. Chapter 3 deals with various services provided to people with disabilities, as well as examples of projects, organized activities, and programs for people with disabilities currently offered in various Arab locales, run at both the national and local level. The Summary section outlines important aspects of the present situation for people with disabilities in the Arab sector in Israel.

---

7 Avital Sandler-Loeff and Rawia Loucia, *Description of the Activities of the Unit for Disabilities and Rehabilitation at JDC Israel in Israeli Arab Society* [Heb.], Unit for Disabilities and Rehabilitation at JDC Israel, May 2005.
Chapter 1: Data on People with Disabilities in Arab Society in Israel

Examination of the literature on people with disabilities in the Arab sector reveals very little data on the topic. There is no organized base of quantitative data on people with disabilities in Israel, in general, or on people with disabilities in Arab Israeli society, in particular.

General Data

The Arab population in Israel today numbers about 1.4 million residents, who comprise about 20% of the country’s total population. Among the Arab population of Israel, Moslems comprise about 82.5%, Christians about 9%, and Druze about 8.5% (as of 2004). Of the Arab residents, 71% live in 116 Arab localities and 24% live in eight mixed localities which have a substantial Arab minority, even though the majority of residents are Jewish. One percent of the Arab population lives in other Jewish localities, and 4% live outside of established localities, i.e. in places not recognized by the Ministry of the Interior as localities (mainly Bedouins in the southern region of Israel).

Prevalence of People with Disabilities in the Arab Sector in Israel

Notwithstanding the difficulty involved in obtaining accurate quantitative data on people with disabilities in the Arab sector there are indications that the percentage of people with disabilities is higher in the Arab than in the Jewish sector. This can be attributed to several causes, including the high rate of consanguineal marriage, hereditary diseases, and women giving birth at a relatively late age (among Bedouins, for example) and a general lack of awareness of various genetic problems. Data indicate that the rate of congenital defects among the Arab population in Israel is higher than among the Jewish population.

The high percentage of people with disabilities in the Arab sector in Israel can also be attributed to the high rate of car accidents that result in injuries among that population and the relative severity of those injuries. Studies have revealed a higher rate of hospitalization among the Arab than the Jewish population following injuries from car accidents.

---

10 Strosberg, Literature Review on Disabilities in Israeli Arab Society (see Footnote 1 above).
11 Ibid.
12 The website of the Commission for Equal Rights of People with Disabilities www.justice.gov.il
accidents and other causes. In addition, studies show that children’s injuries are more severe in the Arab than in the Jewish sector.\textsuperscript{13}

The following sections report existing data on children, adults, and elderly people with disabilities in the Arab sector.

\textbf{Children with Special Needs}

Table 1 compares different disabilities among children (up to age 17) in the Arab and Jewish populations of Israel.\textsuperscript{14}

\begin{table}[h]
\centering
\begin{tabular}{|l|c|c|}
\hline
Type of Disability/ Special Need & Arab Children with Special Needs & Jewish Children with Special Needs \\
\hline
Sensory & 1.4 & 0.7 \\
Physical & 2.0 & 0.9 \\
Retardation & 0.8 & 0.4 \\
Learning, Emotional/Behavioral & 2.9 & 4.3 \\
Illness & 1.2 & 1.3 \\
\hline
Total & \textbf{8.3} & \textbf{7.6} \\
\hline
\end{tabular}
\caption{Percentages of Children with Special Needs in the Arab and Jewish Sectors in Israel}
\end{table}

Table 1 reveals that the percentage of children with disabilities is higher among Arab than Jewish children in all categories except learning and emotional/behavioral disabilities and disabilities related to illness. It is assumed that the percentage of children with learning and emotional/behavioral disabilities in the Arab sector is underestimated due to the lack of appropriate diagnostic tools for identifying those disabilities in the Arab sector. Assuming that the percentage of children with learning and behavioral disabilities is similar in Arab and Jewish societies, the total number of children with special needs in the Arab sector could be more realistically estimated at 9.7\%, compared with 7.6\% in the Jewish sector.\textsuperscript{15}

\textsuperscript{13} Despite the disparity in the severity of injuries, studies have shown no difference in the rate of injuries among Arab and Jewish children.
\textsuperscript{15} Ibid.
Adults with Disabilities (Aged 18-64)\textsuperscript{16}

There is limited information on the number of people with disabilities in the Arab sector because no comprehensive surveys have been conducted on the topic. Existing data relate to recipients of allowances from the National Insurance Institute, as well as to the incidence of people with chronic illnesses. Existing data reveal that the percentage of recipients of general disability allowances is higher among residents of Arab localities than among residents of Jewish and mixed localities: 4.8% versus 3.8%, respectively. The percentage of recipients of special services benefits, which are provided in cases of severe disability, is higher among residents of Arab localities than among residents of Jewish and mixed localities.

Data on rates of chronic illness indicate that the incidence of various types of cancer is lower in the Arab sector than in the Jewish sector, with the exception of lung cancer, which is much more prevalent among Arab than among Jewish men. Self-report data indicate that a higher percentage of Arabs aged 45-64 have diabetes than do Jews in the same age group (14% versus 8%, respectively).

The percentage of Arab residents who reported having chronic illness, disabilities, or handicaps and who felt limited or very limited in carrying out Activities of Daily Living was twice as high as the percentage among Jewish residents (44% versus 22%, respectively).

Elderly People with Disabilities (Aged 65+)\textsuperscript{17}

The percentage of elderly people with disabilities is lower in the Arab than in the Jewish sector, (3.2% of the population at the end of 2003 as compared to 11.5%). Of the Arab population in this age category, 33% are aged 75 and over (compared to 44% of the Jewish population). According to demographic projections, by 2020 the number of elderly people in the Arab sector will be 2.5 times higher than today. Concomitantly, the number of elderly people with chronic illness and disabilities within that population is expected to rise.

Existing data indicate that non-Jewish elderly people in Israel have more disabilities than their Jewish counterparts. The gap is particularly significant with regard to the percentage of people with disabilities who need help with at least one of the following Activities of Daily Living (ADL): washing, dressing, eating, mobility in the home, getting up and sitting down, and getting in and out of bed. Among the Arab elderly

\textsuperscript{16} Strosberg, Literature Review on Disabilities in Israeli Arab Society (see Footnote 1 above).
\textsuperscript{17} Ibid.
population, an average of 30% need assistance with at least one of the above-mentioned activities (39% of the women and 20% of the men), compared to an average of 14% among the Jewish population (17% of the women versus 11% of the men). In addition, the findings indicate that one-fourth of all Arab elderly people living in the community are homebound, compared to 12% of Jewish elderly people. This discrepancy between the Arab and Jewish populations can be attributed to the following factors: income, education, health-promoting behavior, accessibility to health services, service consumption patterns, and genetics.

Examination of the existing data on people with disabilities in the Arab sector reveals that the information is incomplete. The lack of sufficient data is problematic for several reasons. With insufficient data makes it difficult to provide treatment and assistance for people with disabilities, plan an adequate system of services, and identify problematic issues that require special attention.
Chapter 2: Barriers and Challenges Faced by People with Disabilities in Arab Society in Israel

This chapter will address the difficulties, barriers, and challenges encountered by people with disabilities and their families in Arab society. Disabilities negatively affect the following: the disabled person’s self-image and society’s perception of them, relations with family members, and relations with the surrounding society, including how the society treats disabled individuals and obstacles to integrating into society. This chapter emphasizes problems encountered by Arab women with disabilities, which are particularly severe in light of the traditional orientation, culture, and social structure of Arab society. It highlights issues encountered in the Negev region, where the barriers faced by people with disabilities are most severe.

The information presented in this chapter is based on interviews with participants in focus groups: people with disabilities and their families and various providers of services to people with disabilities, including directors of social service departments in local authorities, directors of community centers, and nonprofit organizations established by people with disabilities for those with disabilities.

Barriers
Self Image
In interviews conducted with people with disabilities in focus groups, participants expressed harsh personal feelings about their situation. Some of them felt lonely, abandoned, and ineffective. Some felt a sense of emptiness, and many felt shame. The interviews also revealed that women with disabilities have an especially problematic self image.

The interviews conducted with service providers for people with disabilities in the Arab sector similarly suggested that disabled people have low self-esteem. The service providers believed that the people with disabilities, particularly those with

18 In the framework of the projects, there were six focus group sessions attended by 72 Arab people with disabilities and their families. Naief Abu Sharkeia and Majid Abgeria, Needs, Attitudes, and Concepts of People aged 21+ with Disabilities and their Families in Arab society: Findings from Focus Groups (see Footnote 3).
19 Amin Faras, People with Disabilities in Arab Society – From the Viewpoint of Service Providers (see Footnote 4).
20 The interviews were conducted as part of an investigation of the impact of various nonprofit organizations that was conducted in order to better provide assistance to people with disabilities. The feelings expressed in the interviews reflect the situation of people with disabilities before they received assistance from nonprofit organizations. In Khaled Abu-Asba and Amira Krakera, Mapping and
hearing impairments, adopt behavior patterns of victims. They view themselves as deprived, and complain that they do not receive equal opportunities. The service providers indicated that because people with disabilities are oppressed in Arab society, they make do with the minimum.

**Relations between People with Disabilities and their Families**

It is difficult to generalize about the nature of relationships between people with disabilities and their families. In interviews held at focus groups for people with disabilities and their families, some participants mentioned that the family is the only setting that provides them with care, support, and assistance. On the one hand, they described a relationship based on mutual respect, as well as on a desire to help disabled family members and integrate them into the family and society. On the other hand, there were people with disabilities who claimed that they receive inadequate care and remain confined to the home, and that their family takes advantage of the disability allowance for its own benefit. In the same vein, some of them (mainly those from the Negev) claimed that they are treated with pity and shame: “There are families that are embarrassed to receive assistance because they are afraid of exposing their situation to the public.” In many cases, women with disabilities have an especially problematic relationship with their families: “Society looks down on women with disabilities, their families are ashamed of them, no one wants to accompany them, and no one is willing to push a wheelchair in the street.” In the Negev, women with disabilities are sometimes virtually imprisoned at home: “the situation of women with disabilities is particularly difficult because their parents do not let them go out.” The service providers mentioned a similar phenomenon, i.e. families “hide” the disabled person because they are afraid of prejudice and of possible harm to the family’s status in the local community.

Notwithstanding the diverse and complex relationships between people with disabilities and their families, participants in the focus groups shared the view that the family bears the main burden of care for the disabled. They indicated that the support and assistance provided to families of people with disabilities are inadequate and inappropriate. Since people with disabilities are dependent on assistance from their families, employment opportunities for those family members are limited. The focus group participants also claimed that the status of people with disabilities and the extent of their independence are largely related to the support they receive from their families. Studies have found that Arab parents show a greater tendency than Jewish
parents to be overprotective of their disabled children, and give those children less encouragement to be independent, make decisions, and find employment. Arab parents of children with disabilities reported more feelings of shame and hypersensitivity to the reactions of others than did Jewish parents.21

People with Disabilities and their Families: Relations with the Community
The participants in the focus groups complained about the way Arab society treats people with disabilities, including the status of people with disabilities and that of their families. They claimed that Arab society does not integrate people with disabilities, and maintain prejudices and stereotypes about them. People with disabilities and their families encounter limitations in marriage prospects, as well as isolation, degradation, humiliation, fear, suspicion, and alienation. Moreover, there is insufficient sensitivity to the needs of people with disabilities. The participants further indicated that the situation of people with disabilities in Bedouin localities in the Negev is the worst, and that society’s disregard for them is the most difficult within the Arab sector as a whole.

Among the population of disabled persons in the Arab sector women, especially in the Negev, suffer the most severely. “A women with disabilities is an abandoned woman, and no one will look at her.” Women with disabilities have more difficulty marrying and establishing families than do their male counterparts: “the chances that a woman with disabilities will get married and have a family are very slim.”

Another problem relates to the situation of deaf people. Various service providers indicated that deaf people have the lowest status out of people with physical handicaps and the visually and hearing impaired. Due to their language and communication difficulties, deaf people are considered to have mental retardation.

The Relationship between Providers of Treatment and People with Disabilities
There is a shortage of various services for people with disabilities.22 In addition, the existing services and providers of treatment are unsatisfactory. Participants in the focus groups complained that people with disabilities and their families are belittled, treated with suspicion, and even oppressed by providers of treatment, including local authorities, welfare departments, the National Insurance Institute, community centers, and social clubs. People with disabilities and their families complained of

---

21 Strosberg, Literature Review on Disabilities in Israeli Arab Society (see Footnote 1).
22 This topic will be discussed more extensively in Chapter 3.
discrimination in treatment and services as compared to other needy or dependent groups in the community (e.g. elderly people, children, and women). People with disabilities complained that “we spend most of our time at home, there are no centers or activities that are appropriate for us. We want to get out of the house, but there are no accessible or appropriate places to go or things to do.” Other complaints related to the absence of an umbrella organization for people with disabilities and to the lack of cooperation among organizations that deal with disabled people.

Another problem mentioned was that most institutions that provide care to people with disabilities only serve individuals up to age 21. According to the disabled participants in the focus group, after that age “people with disabilities are confined to the home” and no institutions will deal with them. Participants also complained that decision-makers at all levels and in most institutions are inaccessible. They claimed the local authority neglects them, and does not enable them to be part of decision-making processes or participate in forums that allocate resources. The interviews with service providers also bore out the contentions that public figures do not give priority to people with disabilities and, in certain locations, completely ignore that population.

**Lack of Access to Information**

People with disabilities and their families feel that they have limited or no access to information about their rights. The focus group sessions indicated that this population lacks knowledge and information. There is an absence of brochures and informative literature in Arabic, and that literature that does exist is written in incomprehensible language. In addition, there is a shortage of Arabic-speaking counselors and service providers; most of the service providers serving this community do not speak Arabic. Another recurring complaint was that the institutions responsible for identifying recipients eligible for services “do not notify us of our rights.” The participants felt that an information center would be very helpful to them. The service providers also mentioned the lack of institutions to deal with dissemination of information, guidance, and counseling for people with disabilities. Lack of access to information is most severe in the Negev, particularly for Arab women with disabilities there, whose options for obtaining information are particularly limited because of the high rate of illiteracy.

**Lack of Accessibility in their Surroundings**

Lack of accessibility in their surroundings is reflected on several levels: in the physical setting of the locality, within access routes of the locality, and in the homes of the persons with disabilities. Certain localities have problematic topography which
limits accessibility, particularly in mountainous regions. Beyond the issue of location, there is also a problem with transportation arrangements and mobility within the locality, where facilities and services are unconducive to people with disabilities: streets and sidewalks are blocked, there is no public transportation, and there are no special transport stations or vehicles suitable for people with disabilities.

In addition, people with disabilities do not have physical access to institutions that provide assistance (the municipality, the welfare department, the National Insurance Institute, local community centers, and public institutions), nor do local businesses accommodate their needs. The participants in the focus groups indicated that there are no appropriate signs, parking, or accessible public rest rooms for people with disabilities, or wheel-chair accessible entrances to buildings. Another problem mentioned by the participants in the focus groups is that access to their own homes and to the buildings in which they live is inconvenient and not adapted for people with disabilities. This is especially problematic when a person becomes disabled in mid-life, e.g. following an accident.

**Education**

Interviews with the service providers indicate that the education system in the Arab sector does not integrate people with disabilities appropriately. There are numerous difficulties involved in integrating people with disabilities into regular education – particularly people with hearing impairments. This has a significant impact on these individuals at later stages of their lives as well. Notably, there is no appropriate educational infrastructure for deaf people after the age of 14.

Another barrier mentioned by service providers is the lack of continuing education programs for people with disabilities, such as a program leading to a completion certificate or matriculation certificate for those who were unable to study when they were younger. Higher education for people with disabilities is also problematic. Participants in the focus groups complained that it is very difficult for them to integrate into mainstream academic study programs: continuing education for people with disabilities beyond the age of 21 is not sufficiently available, and those who seek to continue studying are not encouraged to do so in mainstream settings, nor are they aware of the opportunities for support available to them from the National Insurance Institute and various nonprofit associations. At the same time, people with disabilities view education and employment as the keys to success: “the disabled person’s success depends on whether he or she is able to leave home, study, work, and contribute to society. To go out and develop ourselves, we need help, guidance, and support.”
Employment
People with disabilities and their families in the focus groups complained that employment opportunities for those with disabilities are limited. There are insufficient appropriate places of employment, and a lack of appropriate transportation arrangements to take them to work. Employers are prejudiced and refrain from hiring people with disabilities because they are afraid that it would negatively affect the work process. According to the focus group participants, in light of high unemployment rates and stiff competition for every vacant job, employers prefer to hire people who do not have disabilities, even if candidates with disabilities are better qualified for the job.

In addition, participants indicated a lack of rehabilitation centers for people with disabilities in the Negev region and in Qalansawa. The existing rehabilitation centers do not offer job opportunities in a wide variety of fields, and in most cases the work made available to them at rehabilitation centers is inappropriate. In interviews with service providers, it was found that no organized efforts have been made for professional training and placement of people with disabilities, mainly in the private sector. In addition, people with disabilities and their families have not initiated economic entrepreneurship for that purpose. Another problem mentioned by service providers is the lack of affirmative action aimed at giving people with disabilities, particularly those with sufficient academic education, priority for employment in public institutions.

Lack of Organizations for People with Disabilities
The service providers indicated that the initiatives organized by people with disabilities to help others with disabilities are insufficient: not enough organizations and institutions deal with the needs of people with disabilities across the spectrum. The interviewees in particular emphasized the problematic situation for deaf people, for whom the lack of organizations is evident in several areas, including dissemination of information, guidance, counseling, empowerment of people with disabilities, economic assistance, and entrepreneurship. In addition, there is a shortage of organizations available to assist people with disabilities who have not yet been approved by the National Insurance Institute and therefore have not begun to receive institutional support.

Another problem relates to the conflicts within certain localities in certain areas, which delay or prevent people with disabilities from organizing. Additional obstacles faced by people with disabilities seeking to organize themselves are a lack of facilities
to house their organizations, resources, and professional guidance and counseling. Additionally, the service providers mentioned the absence of a coordinating body to help identify the various target populations in a way that would facilitate adequate provision of services to every group. From the perspective of the service providers, the lack of funding and human resources to formulate programs and implement activities for people with disabilities in Arab localities are the main obstacles to providing adequate services to people with disabilities.

Based on responses of the different focus group participants, we identified a whole set of barriers which relate to various aspects of the lives of disabled people. Whether the barriers are emotional, social, cultural, or physical, they all prevent people with disabilities from integrating into communities like others do.

**Recommendations**

In conclusion, based on the responses of the focus group participants we have compiled the following series of recommendations:

1. **Enhance awareness in order to change the status of people with disabilities in society.** Hold lectures at schools, disseminate information, organize meetings with opinion makers, arrange study days, etc.

2. **Empower people with disabilities.** Train groups of local leaders from within the population of people with disabilities who can enhance awareness and advance the status of people with disabilities in their own society. Provide professional guidance and supervision for groups of people with disabilities, aiming to work in the Arab sector. Encourage people with disabilities to continue their education after age 21 by enhancing awareness and providing support, guidance, counseling, and assistance with academic work.

3. **Strengthen families.** Establish support groups for parents and families of people with disabilities.

4. **Make information accessible.** Publish a guide in clear, simple Arabic which defines the rights of people with disabilities. In addition, there is a need to promote the establishment of volunteer-run centers to provide information, counseling, and guidance for the Arab population with disabilities in various regions of Israel (southern, northern, and the Triangle).

5. **Improve physical accessibility.** Improve physical accessibility to localities, institutions, and organizations that provide care to people with disabilities.
disabilities, as well as accessibility to public places and businesses in general. This can begin by involving people with disabilities in the planning public buildings through local committees. People with disabilities can also serve in an advisory capacity during the actual building phase of public projects.

6. **Develop services and opportunities for increased communal involvement.** Establish social clubs for people with disabilities and integrate people with disabilities in regular activities held in the community. Support entertainment and leisure activities that are appropriate for people with disabilities and establish regional rehabilitation centers with workable transportation options. Offer financial incentives and encourage business owners to hire people with disabilities.

7. **Create forums and coalitions.** Establish a local lobby and coalitions to promote the interests of people with disabilities in local authorities. In addition, establish a coalition to implement a law to provide increased accessibility for people with disabilities.

8. **Coordinate the services for people with disabilities.** Establish a regional forum of service providers to provide support to the Arab population with disabilities. The forum should consist of representatives of local authorities, the National Insurance Institute, the local health bureau, community centers, and voluntary organizations.
Chapter 3: Services Available in the Arab Society for Treatment of People with Disabilities

People with disabilities in the Arab society suffer from a lack of services directly aimed at helping them. In many locales the services provided by both governmental agencies and voluntary organizations are inadequate, and in some locales no services exist to deal with certain disabilities.

There is a tendency to prefer informal sources of assistance within Arab society, especially assistance from the extended family, as opposed to formal services offered by government or local authorities. Thus the situation of services for people with disabilities in the Arab community needs to be assessed accordingly. Research has shown that formal services are perceived as inadequate or inappropriate. For example, a high percentage of Arab parents whose children have disabilities (53%) indicated that there is no address for them to contact when problems arise in relation to their child or to seek advice. In addition, a high percentage (73.3%) of Arab parents whose children have disabilities reported that they have no address to contact for basic information about services.23

The first part of this chapter reviews existing services for people with disabilities in the Arab sector, with emphasis on the scope of services, type of disabilities they deal with, nature of the provider organizations, and their geographic distribution. The chapter also presents data on the scope of services for three specific subgroups: children, adults, and elderly people. The second part of the chapter describes programs, efforts to organize, and projects for people with disabilities in the Arab sector. This section presents national projects for individuals with disabilities in Arab localities. The chapter concludes with a description of efforts to organize at the local level, including a discussion of four local initiatives which have succeeded in improving the situation of people with disabilities.

23 Strosberg, Literature Review on Disabilities in Israeli Arab Society (see Footnote 1).
1. Services Provided to People with Disabilities in Arab Society

Scope and Type of Services

In Arab localities there are about 100 service providers for people with disabilities, besides the services provided by the branches of social services departments in the local authorities. The proportion of services available for children and adults is similar.

The services include employment-guidance and occupational rehabilitation; housing; paramedical services and other therapeutic treatment; diagnostic services; general and special education; information services; leisure services; programs to promote integration into the community and independent living; parent and family guidance; equipment and accessories; financial aid; and legal counseling and advocacy. The most prevalent type of service are leisure services, which includes social activities, clubs, classes, transportation, meals, vacations, etc. The next most common services, in order, are programs to promote integration into the community, assistance with independent living, paramedical treatment, rehabilitation and occupational guidance, and special education.

Types of Disability Treated

The most widely treated disability in Arab localities is mental retardation, which is given considerable attention, followed by sensory impairments (blindness and deafness), and physical impairments (handicaps and illnesses). Impairments and disabilities in the area of mental health, various behavioral, communication, and functional disorders and autism, are given relatively little attention and very few agencies deal with those areas.

Provider Organizations

The main agency that provides services in Arab localities is the local (municipal) authority. About 47% of the services in Arab localities are provided by the local authorities, followed by government ministries (24%), voluntary organizations such as nonprofit associations and international organizations (29%), private organizations (6%), and hospitals and health care services (4%). The situation is different in mixed localities, which have a Jewish majority and a substantial Arab minority. There the main service providers are voluntary organizations (32%), followed by government

---

24 The data are updated to the end of 2003. The database does not have more updated information. Efrati, Survey of Services for People with Disabilities in the Arab Sector (see Footnote 2).
25 Ibid.
26 Ibid.
ministries (22%), local authorities (19%), hospitals and health care services (16%), and private organizations (11%).

**Geographic Distribution of Services**

In accordance with the distribution of Arab locales, most of the services are in the Haifa and northern region (72%), followed by the Tel-Aviv-Yafo and Triangle region (16%). The Jerusalem and southern regions have very few services (7% and 5% in each region, respectively) relative to the geographic distribution of the population. In mixed locales, the situation is consistent with the geographic distribution of the Arab population: 38% in the Haifa and northern region; 27% in Tel-Aviv-Yafo, 22% in the Jerusalem region, and 13% in the southern region. Thus more services proportionately have been developed in mixed locales within Jerusalem and the southern regions than in the homogenous locales in those same regions.

**Services for Children with Disabilities**

There are substantial gaps in the scope of services provided to children with disabilities in Israel. The percentage of children with disabilities who receive services among the Jewish population is much higher than among the Arab population, as shown in Table 2. However a disabled child benefit, which is provided by the National Insurance Institute for children with disabilities, is given to 10% of the children with special needs in the Arab sector, versus 8% of children with similar needs in the Jewish sector.

---

27 Ibid.
28 Ibid.
Table 2: Services Provided to Arab and Jewish Children with Special Needs\textsuperscript{29}

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Percentage of Arab Children with Special Needs who are Beneficiaries of the Service</th>
<th>Percentage of Jewish Children with Special Needs who are Beneficiaries of the Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least one service</td>
<td>49</td>
<td>90</td>
</tr>
<tr>
<td>Medical services</td>
<td>21</td>
<td>43</td>
</tr>
<tr>
<td>Paramedical services</td>
<td>9</td>
<td>39</td>
</tr>
<tr>
<td>Psychosocial services</td>
<td>8</td>
<td>21</td>
</tr>
<tr>
<td>Educational services</td>
<td>21</td>
<td>57</td>
</tr>
<tr>
<td>Support services</td>
<td>16</td>
<td>29</td>
</tr>
<tr>
<td>Family counseling services</td>
<td>3</td>
<td>14</td>
</tr>
</tbody>
</table>

Table 2 indicates that children with special needs in the Arab sector receive fewer services than children with similar needs in the Jewish sector. Further, the scope of services available for children in the Jewish sector is two to three times greater than the scope of services for children in the Arab sector. Similarly, a higher percentage of Arab than Jewish children’s needs are not met for all types of services. This extreme discrepancy is also evident in the area of education, as children in the Arab sector receive fewer regular teaching and “integration hours” than children in the Jewish sector. By the same token, the number and variety of institutions that provide services to children with special needs in the Arab sector are more limited than in the Jewish sector.

Another problem which detracts from the level of services provided to children with disabilities in the Arab sector is the difficulty coordinating between the available services. In addition, resources for active diagnosis of children with special needs are lacking. The lack of diagnostic capabilities together with insufficient knowledge and awareness about developmental problems in Arab society create a situation in which disabilities are insufficiently diagnosed, or diagnosis occurs too late when early diagnosis could have prevented further disability or deterioration. Notably, these findings have led to the development of a model to enable coordination between organizations that provide services to children with special needs in Arab localities.

\textsuperscript{29} See D. Naon et al., “Children with Special Needs: Evaluation of Needs and Coverage by Services.” The National Insurance Institute and JDC-Brookdale, 2000 [Heb]. Cited in Strosberg, Literature Review on Disabilities in Israeli Arab Society (see Footnote 1). The model was not implemented in other locations.
The model was first implemented in the villages Deir Hana and Yirka, and will be implemented in other localities in the future.30

**Services for Adults with Disabilities**31

In this chapter, we will review three types of services for adults with disabilities in Israel, which are provided on a minimal level among the Arab population.

**Housing services:** There is a significant gap between housing services for people with disabilities in the Arab and Jewish sectors. The gap is particularly wide with regard to community housing solutions. Only 9% of all community housing projects in Israel are located in Arab localities. The rest are located in Jewish and mixed localities.

**Employment services:** The Arab sector in Israel receives a relatively small percentage of employment services equipped to accommodate people with disabilities, and these are operated by a smaller number of organizations than in the Jewish sector. For most types of disabilities (blindness, deafness, physical disabilities, and mental illness), the majority of people in Israel placed in employment settings are Jewish, whereas a small minority (5%) are Arab. Notably, the situation is better for people with mental retardation, where 18% of those employed in special settings are Arab.

**Mental health services:** Data on referrals to mental health clinics indicate that 3% of clients are Arab. Data on intake and hospitalization in psychiatric wards and psychiatric hospitals indicate that 88% of hospitalized individuals aged 15 and over are Jewish, 9% are Moslem, and 3% belong to other religions. One explanation for this discrepancy is the inaccessibility and unavailability of mental health clinics in the Arab sector, coupled with language and cultural barriers within mental health clinics since most service providers are Jewish. Another explanation is that in Arab society there is insufficient acknowledgment or awareness of the benefits of psychological care and mental health services, as well as a preference for relying upon informal local resources within the community.

**Services for Elderly Individuals with Disabilities**32

In light of the changes witnessed in the Arab society over the past three decades, there is a growing need for formal services for the elderly. Concomitantly, willingness to request assistance from those services that are available has increased. In recent decades, clubs have been developed to meet the needs of elderly individuals who live independently. There has also been increased interest in the population of elderly

---

30 As of October 2005 the model had not been implemented in other localities.

31 Strosberg, *Literature Review on Disabilities in Israeli Arab Society* (see Footnote 1).

32 Ibid.
individuals with disabilities. There are 15 day centers, which mainly serve the Arab population with disabilities, and serve close to 950 elderly individuals (about 2.5% of the elderly population in the Arab sector).

There are fewer institutions that specifically serve the needs of elderly individuals with disabilities in the Arab than in the Jewish sector: 0.7% of all elderly individuals with disabilities in the Arab sector live in institutions, compared with 4.3% of the elderly in the Jewish sector. This is true even though the percentage of elderly people with disabilities is higher in the Arab than in the Jewish sector. The relatively small number of elderly individuals with disabilities who live in institutions in the Arab sector can be attributed to the shortage of institutional services for that population, as well as to the traditional emphasis on family and the active role family members play in caring for elderly relatives in that society.

2. Programs, Organized Efforts, and Projects Implemented for People with Disabilities

Countrywide Projects for People with Disabilities in Arab Localities

This section presents several projects that have been implemented in Israel to help people with disabilities integrate into society. This section reviews the “Accessible Community” project, the “Center for Independent Living,” and the “Information Center” for blind and visually impaired individuals.

The “Accessible Community” Project

In 1999, the Israel Association of Community Centers, JDC Israel, the Ministry of Labor and Social Affairs, the National Insurance Institute, the Ministry of Health, and local authorities in Israel developed a collaborative effort to integrate people with disabilities into the community. The project aims to serve people with disabilities and their families, based on the idea that elimination of barriers and obstacles in the environment, social relations, and communication is the key to real integration of children and adults with disabilities into the community. On another level, this project attempts to engage both citizens and professionals in a model of community planning that draws upon professional knowledge while accommodating the needs of the local community.

33 Loucia and Sandler-Loeff, Accessible Community in the Israeli Arab Population: Status Quo and Possibilities for the Future (see Footnote 6).
The initial goals formulated for the project were to encourage involvement and participation of people with disabilities in public services and in cultural, social, and leisure activities at the local community level. The project emphasizes the empowerment of clients and focuses on involving them in designing, developing, managing, and implementing the projects. The “Accessible Community” project facilitates collaboration between organizations in the governmental, voluntary, and business sectors on the local and national levels. The project prioritizes the principle of integration, including integrating people with disabilities into the wider community and integrating among themselves groups of people with disabilities. As an overall goal the “Accessible Community” aims to change attitudes about people with disabilities in the community at large.

At the local level34 the project is implemented in several stages, some of which are carried out simultaneously. Initially a steering committee is established in the locality, which brings together representatives from institutions that serve people with disabilities, local organizations for people with disabilities, and area residents with disabilities and their families. At that stage, the committee compiles a list of local individuals with disabilities on the basis of records held by the community institutions. Next a charter is drawn up between the municipality and the residents with disabilities, and the committee prepares a program for those with disabilities to be implemented at the local level. This program is submitted to the national steering committee of the “Accessible Community” project for approval to participate in the project as well as funding approval. The municipality also participates in funding. Following this approval stage project implementation begins, including forming a team of activists among local residents with disabilities to initiate efforts to promote their interests.

Most local programs submitted to the national steering committee focus on development of leadership and training activities, publicity and changing attitudes, information and rights, physical accessibility, and integrated and special leisure activities. The “Accessible Community” project operates in 40 localities throughout the country, of which eight are Arab: Umm Al-Fahm, Qalansawa, Kafar Kanna, Tamra, Shefar'am, Sakhnin, Nazareth, and Dalyat Al-Karmel. The largest and oldest locality in which the program operates was Umm Al-Fahm, which was chosen by the national steering committee as one of the four most successful localities in the country. The following outlines the activities of the project in Umm Al-Fahm:

---

34 It should be noted that in the framework of the project, activities are carried out at the national level, but they not within the scope of this report.
In Umm Al-Fahm, the partners in the project at the municipal level are the municipal social services bureau, engineering department, and health department and the National Insurance Institute. (The Israel Association of Community Centers does not operate in Umm Al-Fahm.) An evaluation of the project in Umm Al-Fahm has found a drastic change in public attitudes towards people with disabilities in Umm Al-Fahm as well as in the self-perceptions of people with disabilities, who have begun to view themselves as an influential group able to affect the course of their own lives. One of the clearest signs of change is the presence of people with disabilities in public. Individuals with disabilities now attend public events, whereas in the past they were usually confined to their homes. The feeling of project participants is that, as a result of the project, today “a person with disability has respect. Such an individual can do anything; people don’t say things to them out of pity, and society has begun to consider that person as equal to others.” The public feels the project has helped close gaps between people with special needs and “regular people.” The change in attitude among the public at large and community leaders has even led to the integration of children with special needs, into regular schools.

The evaluation of the “Accessible Community” project in the Arab sector indicates that it has succeeded in placing the issue of equal rights for people with disabilities on the public agenda in Arab localities. Moreover, in the process of implementing the project, people with disabilities who had not been known to municipal authorities were identified. Communities of activists were formed which consisted of people with a variety of disabilities including women and mothers were given due representation. In addition, individuals with disabilities have established organizations to serve the disabled population. As a result, leisure activities for people with disabilities have increased, and community members, both with and without disabilities, have become involved in activities on behalf of the disabled. Additional achievements have included increased information about the rights of and services available to people with disabilities. Furthermore, formal and informal channels of communication have been established or strengthened between people with disabilities and local decision-makers, as well as religious figures.

Notwithstanding these successes, the evaluation has revealed several difficulties and problem areas in implementing the program. There is a shortage of local professionals who can train activists, provide supervision, and implement the program. The findings reveal little access of the disabled to information about services and entitlements, resources, public facilities, and forums for decision-making. The evaluation also

---

35 This is the way one of the people active in the project describes the change in Umm Al-Fahm.
uncovered a basic shortage of services for people with disabilities. As a result of the image of people with disabilities, people with disabilities and their families continue to be reluctant to expose themselves, due to shame and fear of stigma. In the public discourse, assistance for the disabled is still viewed as charity and not as a right. In addition, there has been difficulty integrating people with mental disorders and mental retardation into the program.

**The Center for Independent Living in Beersheva**

The Center for Independent Living was established in 2000 in Beersheva. It is a community center, run and managed by individuals with disabilities, which provides services to others with disabilities. The NGO “Equality and Justice Association in Beersheva” that operates the center has 1,500 members, of whom 300 are Bedouin, and three out of seven board members are Bedouin. The center has a Bedouin coordinator of activities for the Bedouin population, as well as a Bedouin social work student (one of two students currently doing a field work practicum at the center). The center has publicized its activities in Arabic at the Segev Shalom welfare bureau, and at the local branches of the National Insurance Institute. This publicity has brought many Bedouin clients to the center.

The center was established by the “Equality and Justice Association in Beersheva” in collaboration with JDC Israel, the municipality of Beersheva, the National Insurance Institute with the support of the Rich Foundation, the Jewish Federation of Chicago, and the Pell family. It is the second Center for Independent Living established in Israel (the first is in Jerusalem).

The center offers a variety of services, including the following:

- “peer to peer” counseling provided by Bedouin counselors with disabilities, who offer information about rights, services and “life experience,”
- training in life skills (maintaining a household budget, living with disability, etc.),
- support groups,
- advocacy for issues related to people with disabilities (e.g., campaigns to reserve parking places for people with disabilities),
- and social activities.

In addition, the center runs an art workshop, in which 15 Bedouin individuals with disabilities work on art projects in their own tents or homes. Every few days center
staff visit to collect their work, guide them professionally, and supply materials. Another activity for the Bedouin population focuses on facilitating employment for people with disabilities. These activities include operating a Bedouin tent for tourists, a project still under development. The tent will be operated by people with disabilities, and participants in the workshop will sell their art work there.

The center’s activities lead to daily dialogue between its Bedouin and Jewish members and to a shared respect for their commonalities rather than their differences. However, some issues are specific to Bedouin society: individuals with disabilities greatly desire and are in need of activities. Currently there are almost no employment settings or social frameworks for Bedouins with disabilities. This causes personal and social distress, among other problems. In addition, individuals with disabilities have difficulty getting to the center in Beersheva due to mobility problems and lack of arrangements for transportation. Since Bedouins with disabilities feel isolated, they welcome any information they receive. However, there is a lack of material in Arabic, and considerable demand for personal counseling among the population with disabilities. It is extremely important that Bedouin counselors who provide information on services, programs, and entitlements will be in order to establish trust relationships with those who have disabilities. Another issue specific to the Bedouin population is a sensitivity to gender issues; families of Bedouin women with disabilities prefer contact with the female manager of the center (even though she is Jewish), whereas Bedouin men with disabilities prefer assistance from the Bedouin coordinator, who is a man.

Information Center for People with Vision Impairment

These information centers are operated in the framework of a broader model, “Peer to Peer,” where professionals with disabilities provide services to other individuals with disabilities in the community. The model includes 12 programs, operating in 25 locations throughout Israel. The programs involve about 350 professionals and serve approximately 4,500 beneficiaries. The information centers aim to provide information about rehabilitation services available to people with new visual impairments such as rehabilitation counseling, centers for visual impairment, libraries for the blind and visually impaired, self help groups, clubs for blind individuals,

36  Avital Sandler-Loeff and Rawia Loucia, Description of the Activities of the Unit for Disabilities and Rehabilitation at JDC Israel in Israeli Arab Society (see Footnote 7).
37  Ibid.
Advice about eligibility to receive a certificate for the blind, personal rehabilitation, and “life experience” advice.

Most referrals of blind and visually-impaired individuals to the information centers are made by the ophthalmology clinic. The project is a joint initiative of the Ministry of Social Affairs, the National Insurance Institute, the social services department of the Ministry of Health, JDC Israel, the ELAH association, and the Migdal Or Association.

Of the approximately 2,100 people who received services from the centers in 2004, about 400 (19% of the service recipients) were Arabs who received the information in Arabic. The centers that serve the Arab population almost exclusively are at the French Hospital in Nazareth, and at the Haemek Hospital in Afula. Each of those two centers are staffed by a visually-impaired Arab social worker. The clients were highly satisfied that the service provider personally has the same disability, speaks Arabic, and is a professional.

The experience of operating the centers raised several critical issues related to services for the blind in the Arab sector. It has proven very difficult to market the project among the Arab population. This can be attributed to embarrassment, indifference, or lack of awareness about the potential for changing opportunities for blind and visually-impaired individuals. Most clients of the service were interested in receiving information about their rights, primarily about eligibility for discounts, however, were not as open to such services as “rehabilitative guidance,” which teaches people with visual impairments to walk around and function independently in their natural environment. According to center staff, this hesitancy can be attributed to the considerable support provided by families, which sometimes discourages blind individuals from exposing themselves to rehabilitative services or seeking to function independently at home. This attitude is particularly prevalent among men.

Another problem is the lack of services available in the community, in particular the lack of facilities which lend advanced equipment to visually-impaired people, e.g. computers with enlarged screens, in Braille technology, and closed circuit televisions. In addition, there is a lack of nonprofit organizations to provide such services as support groups.

39 There may have been more Arabs who received services in Hebrew.
Activities in the field reveal a need for computerization of services and publication of material in Arabic. Efforts should be made to broaden the mandate of the information center staff to provide additional crisis support services in Arabic, which are sorely lacking. It would also be worthwhile to consider encouraging a group of blind Arab professionals to develop services for their community. Currently, 22% of all blind and visually-impaired university graduates in Israel are Arab. Consequently, a cadre of blind leaders could be encouraged to develop services for their community.

Efforts to Organize Assistance for the Population with Disabilities on the Local Level

In recent years there has been increasing awareness of the need to integrate people with disabilities into the community in the Arab sector. Over the past decade, nonprofit associations and various organizations for people with disabilities have been established by people with disabilities. A review prepared at the request of the JDC to map existing projects for the population with disabilities found approximately 40 active projects in major population centers which aim to provide various types of assistance to people with disabilities in the Arab sector. The projects included services provided by local welfare bureaus for people with disabilities and their families, as well as projects sponsored by nonprofit associations.

The projects operate in various areas of Israel: in the Galilee – Nazareth, Reine, Yafia, Sakhnin, Tamra, Kafar Kanna, ‘Ir Carmel (the merged council Daliyat Ael-Karmel and Isfiyeh); in the Triangle area – Kafar Kassem, Umm Al-Fahm, Kafar Qara; in the Negev (for the Bedouin population) – Beersheva; and in a mixed municipality – Haifa. Several interesting findings arose:

- The project organizers and the staff reported success in two main dimensions: participation of several organizations in providing services and supporting them, and that the target population continues to participate in the activities.
- In places where services were not provided by state institutions (e.g. by welfare bureaus), nonprofit associations were established, mainly by the community at large and particularly by the community of people with disabilities.
- Local entrepreneurs operate the nonprofit associations and funds are raised from sources within the community.

---

41 There are other successful projects in localities which were not mapped in the present analysis.
42 The review refrained, to the extent possible, from including projects that are part of the "Accessible Community" framework.
• Many projects are based on services provided by members of the target population (people with disabilities who assist others with disabilities).
• Most existing frameworks (especially nonprofit associations) do not limit themselves to providing a specific service to people with disabilities and their families. Instead they emphasize their role in more generalized areas, such as advocacy for people with disabilities and their families or providing information about legal rights.

The review also found that successful projects usually were characterized by cooperation between the participating organizations as well as with the local authorities. This finding should be taken into account in light of the claim voiced by the participants in the focus groups and the service providers that organizations do not cooperate with each other. It suggests that cooperation is a necessary condition for successful projects.

Four selected examples of successful projects are presented below. These projects were chosen to be highlighted because they meet the following criteria:
   a. the project has system-wide potential at the local and regional levels,
   b. people with disabilities and their families are partners in establishing, planning, and implementing the project,
   c. the project offers continuity and consistency,
   d. the project is unique and has creative elements,
   e. the service offered is not provided by state institutions.

The NDA Association for People with Disabilities in Daliyat Al-Karmel (Daliyat Al-Karmel and Isfiyah)
The association has the following goals:
• improve the quality of life and well-being for people with disabilities,
• secure rights for people with disabilities from a variety of agencies,
• provide leisure activities for people with disabilities,
• inform members about issues concerning rights and obligations of people with disabilities, as part of an effort to empower them, and
• encourage collaborative efforts through joint meetings with other clubs for people with disabilities.

The target population of the association is people aged 18-65 with a variety of disabilities who live in Daliyat Al-Karmel and Isfiyah (children and elderly people are
accommodated by other frameworks). The association currently has over 250 members who, along with its lay leaders, have varied levels of disability.

The office of the association is on the ground floor, and is accessible to people with disabilities. The offices of the association are open for activity four days a week (every other day).

**Areas of Activity**

**Social club** – the social club serves as a meeting place for people with disabilities.

**Enrichment activities** – the association offers lectures on current events, as well as educational workshops, courses such as computers, painting, music, poetry writing, gardening, and crafts, outdoor activities, tours, and other enrichment activities.

**Information center** – this service for people with disabilities and their families provides responses to a variety of questions, particularly in relation to the rights of people with disabilities in a variety of agencies.

**Bulletin** – a yearly bulletin in Arabic for the regional population provides an annual summary of the association’s activities as well as articles and poems written by people with disabilities, including articles aimed at raising awareness of issues related to people with disabilities.

**Establishment and Funding of the Association**

The association has been operating since 1999, and in 2001 was officially registered with the Nonprofit Organizations Registrar. The association was established following a special project implemented by the welfare department of Daliyat Al-Karmel for people with disabilities and their partners. The project highlighted the serious lack of awareness regarding the rights of people with disabilities, as well as the prejudices of people with disabilities and the surrounding society regarding disabilities. Three of the project participants proposed the idea of establishing an association to deal with problems and needs of people with disabilities and their families. Nachei Daliyat Al-Karmel (NDA) cooperated with the local welfare department, which has provided considerable instrumental and moral support to staff members.

The association’s funding currently derives mainly from membership dues (a low fee, affordable by members). In addition, the association receives private donations and funding from the Israel Association of Community Centers. The municipality supports the association by financing maintenance of the facility (rent payments and telephone, electricity, and water bills). In the past, the municipality provided funding for the
activities of the association. However, because of economic difficulties in the municipality, this support has been discontinued.

**Achievements of the Association**
The association has reached 70% of the target population in both of the localities. The association staff has succeeded in gaining the confidence of the population with disabilities, and today the association provides an address to approach for assistance on any issue related to disabilities. The association’s activities bring together people with disabilities and facilitate friendships and relationships characterized by mutual support. Through the association, people with disabilities have succeeded in improving their image and have enhanced awareness of their situation in the community. For example, in the “Accepting the Other” project, which targets area high school students, people with disabilities lecture in high schools on topics related to disabilities. In addition, people with disabilities have recruited volunteers among the high school students for such activities as distributing brochures and cleaning the club. As an outcome, participating high school students have formed good friendships with those who are disabled. Another impressive achievement was the “Accessible Community” project, through which association members made two health clinics and two banks accessible to people with disabilities.

**Difficulties Encountered by the Association**
The main difficulty encountered by the association is economic. The association operates mainly on membership dues and donations. However, this is insufficient. In addition, the association has had difficulty persuading the other 30% of local people with disabilities who are not involved in the association to perceive of themselves as able people and participate in the association’s activities.

**The Al-Amal Association for the Disabled in Sakhnin**
The Al-Amal Association has the following goals:

- serve as a home for all people with disabilities in the city of Sakhnin and the vicinity,
- encourage and empower people with disabilities in the community,
- enhance the community’s awareness of the needs of people with disabilities and how to behave towards them,
- offer emotional and social support for people with disabilities,
- provide assistive devices (beds, crutches, walkers, etc.) to aid people with disabilities,
- supply information about the rights of people with disabilities,
and promote advocacy, legal counseling, and lobbying vis-à-vis government ministries and institutions.

The association currently has over 100 members, including people both with and without disabilities.

The association currently operates in a building of its own. The building has a lecture hall, rooms for administration, rooms to hold leisure activities for people with disabilities, and rooms rented to the AKIM Israel (National Association for the Habilitation of the Mentally Handicapped in Israel) association and the Israel Cancer Association. The association operates every day except Fridays and Sundays from 10:00 to 15:00 and from 16:00 to 19:00.

**Areas of Activity**

**Information center** – this center provides information, counseling, and guidance for people with disabilities and organizes lobbying efforts on their behalf.

**Enrichment activities** – the association sponsors lectures and courses on such topics as use of the Internet, computers, reading and writing, English, and math.

**Enhancing awareness among the population at large** – activities enhance the community’s awareness regarding disabilities in general, the needs of people with disabilities, and how to behave towards people with disabilities.

**Website** – the organization’s website includes information about the association and its activities and provides related links.

**A center to provide equipment for people with disabilities** – in the near future, the association plans to open a center which will loan equipment such as walkers, crutches, and wheel-chairs for people with temporary and chronic disabilities. The association has obtained an initial supply of equipment, including 20 wheel-chairs.

**“Accessible Community” project** – the project, described in detail earlier in this report, is run through the association.

**Background on the Establishment and Funding of the Association**

The association has only been operating for two years. It was officially registered with the Non Profit Associations Registrar since 2003. The association was established as a private initiative of a group of people with disabilities in Sakhnin who felt that their needs were not being met satisfactorily by existing services and that they could better promote their own interests. Initially, 15 people with disabilities formed a group that met occasionally and planned various activities. Afterwards, the group approached the social services department in Sakhnin, and received advice and guidance from a social worker to establish the association. The group members participated in a course for
activists funded by JDC Israel, and established the organization as a registered nonprofit association. During the first year, the association held meetings at a local club for the elderly or at homes of members. However, the members of the association pressed for a place of their own. Using local donations they succeeded in renovating an old building and set up an impressive home for their activities. The association’s main sources of income are donations by local residents, membership dues, rent payments from the Israel Cancer Association and AKIM, and fees for participation in courses offered by the association.

Achievements of the Association
The association, the first organization other than the municipal welfare services to provide services for people with disabilities in Sakhnin, has become a regional center. The association has reduced educational gaps among people with disabilities and provided leisure activities for them, in addition to improving the self image of people with disabilities and their image in the community. Over a period of two years the association has increased its membership from 15 members to over 100 members. The association has also cooperated with other nonprofit organizations (AKIM and the Israel Cancer Association), as well as with the municipal social services department, which has sponsored programs for people with disabilities through Al-Amal.

Difficulties Encountered by the Association
The main difficulty that Al-Amal has encountered is logistical. Specifically, the administration’s lack of management training has inhibited progress. The responsibility of planning and initiating activities falls primarily on a small number of administrators. Another serious difficulty is the association’s lack of adequate funding to expand its activities. The association’s members are frustrated that they have not yet succeeded in raising funds from foundations or public institutions. The members attribute these funding difficulties with the lack of professionals knowledgeable in fundraising.

The “Yasmin” Project – Reine
The “Yasmin” project aims to assist women with disabilities in Reine. The women are single, and view their disability as the reason that they have failed to establish a family. They feel lonely, and are deprived of a social life, leisure activities, and entertainment. Their relations with their families are adversely affected by the women’s unemployment and personal sense of emptiness. These women rarely leave home, due to feelings of shame.
Areas of Activity
The project provides two series of weekly group sessions. One series is therapeutic, and is attended by a selected group from among the local women with disabilities. These group meetings provide the women with support, understanding, warmth, acceptance, and assistance with personal and social problems. The sessions aim to improve the women’s self-image and body image. The other series of weekly sessions is attended by all women in the group, and is primarily social and task-oriented. In these sessions, the women raise personal and social problems that are in some way, either directly or indirectly, related to their personal life experiences. The group offers the women a source of strength and support, and a place to share experiences, emotions, and difficulties related to their disabilities. The group also holds regular activities which include supplementary education (reading, writing, and other subjects), and special interest courses on a variety of topics (crafts, first aid, pottery, Hebrew lessons, etc.). The project also sponsors special events, such as outings and fun days, which are also attended by other women with disabilities who do not participate in the regular group activities. The women with disabilities are responsible for the organizational arrangements, with close assistance from the social worker who has been supervising the group since its inception (see below). The group currently comprises approximately 40 girls with disabilities, of whom 20 are particularly active in the project and form the core of the project. The group offers a social framework, and its members also get together outside of the regular meetings, for example to visit each other’s homes, celebrate birthdays, etc.

Establishment and Funding of the Project
The project was established in 2000, at the initiative of a female social worker in the locality of Reine. A 42-year-old woman named Yasmin, who was primarily housebound, spoke to the social worker about various difficulties she encountered and what it feels like to be a woman with a disability in Arab society. The social worker understood that Yasmin’s predicament was shared by others, and encouraged her colleagues to compile a list of women with disabilities in the region. The social worker then used the list for the difficult task of making numerous home visits to the women and their families to impress upon them the importance of establishing a group. The group was named in memory of Yasmin, who passed away during that period. After the participants were recruited, the social worker assessed the women’s needs, difficulties, fears, objectives, and hopes. Finally, the group worked together with the social worker to formulate goals for their activities and construct a working plan. The local authority provides the main source of funding for the project, and has enabled the social worker to use the women’s club in the village for the ongoing
activities of the group. In addition, the local authority has financed the wages of the counselors who give courses within the framework of the project. The group is facilitated by the social worker as part of her job at the social services department, but she also works with the group in her free time. The group has also succeeded in receiving a donation from the community center in the neighboring village of ‘Ein Mahel, which funded one of the activities.

Achievements of the Project
Women with disabilities who had previously been primarily housebound leave their homes to participate in social activities organized by the project. The activities have enriched the women’s lives, which previously revolved exclusively around household tasks, and have contributed to improving their emotional state. The project has also led to an improvement in their self-image, and has helped them develop a sense of vitality which, in turn, has given them a sense of personal empowerment.

Difficulties Encountered by the Project
The main problem is budgetary, an ongoing issue since the project’s inception. Another difficulty is reflected in the ongoing effort to motivate women with disabilities to participate in the weekly activities.

Alshefaa and Alrahama Association – Kafar Qara
The association defines its goals as follows:

- improve the status of people with disabilities in the Kafar Qara locality and in the region,
- enhance awareness of the needs of people with disabilities among the population at large,
- integrate people with disabilities into the community at large,
- improve the self-image of people with disabilities and empower them,
- provide people with disabilities opportunities to enjoy leisure activities and entertainment,
- and develop enrichment and educational programs for people with disabilities – particularly those with limited financial resources.

The association mainly targets adults, who have physical disabilities or individuals who are deaf, blind, or mute. The association is officially registered with the registrar of nonprofit organizations and has 120 regular members, although it also provides services to other individuals with disabilities. All staff members are volunteers (except for the caretaker, who maintains the facilities).
Alshefaa and Alrahama operate out of a building that belongs to the association and is accessible to people with disabilities. It is open every day except Fridays from morning to evening, but the main activities are in the afternoons.

**Areas of Activity**

**Social club** – the club serves as a meeting place for individuals with disabilities, where they can receive support and counseling. In addition, it provides support for families of people with disabilities. Notably, all of the activities of the association are translated into sign language for the convenience of those who are deaf.

**Enrichment activity** – the association sponsors a variety of enrichment activities, including chess, table tennis, and computers, an Israel geography group, various courses, such as crafts, Islamic art, and making wall clocks, and sign language courses.

**Making religious services accessible** – translation of the sermons from Friday prayers at the village mosque into sign language has brought deaf people from the entire region to participate in prayer services. In addition, the association enables a pilgrimage to Mecca in *Umra* (a mini-Haj) after individuals with disabilities have received checkups by volunteer doctors subsidized by the association. The association also maintains contact with hospitals in Mecca.

**Gym for people with disabilities and handicaps** – access to a gym partially equipped with machines for people with disabilities provides exercise opportunities.

**Mini-soccer group for deaf people** – the soccer group consists of deaf people aged 16-35. It plays in the national league of Jewish and Arab mini-soccer groups for the deaf.

**Publications** – newsletters and annual reports about the association’s activities provide information to people with disabilities and the community at large.

**Plans in the making** – plans for the future include swimming courses for people with disabilities, a home economics course, an alternative medicine workshop, and an introductory computer course.

**Establishment and Funding of the Association**

Initially, the association’s goals were completely different. The association focused on caring for and maintaining village cemeteries, and did not serve people with disabilities at all. However, following an event experienced by the wife of the association’s founder, the need arose to provide solutions for obstacles encountered by individuals with disabilities. In 1997, the association expanded to pursue the additional role of providing equipment to people with disabilities. Eventually the association opened a mini-soccer group for deaf people, coached by the founder of the
association. As the association started addressing additional needs of people with disabilities, it was necessary to rent another building to house the supply of paramedical equipment, which has continued to increase.

During the first year and a half that the association had begun pursuing these activities for individuals with disabilities, they did not establish any contact with the local department of social services. However, because they sought to expand their activities for people with disabilities, they contacted the director of the department of social services in an attempt to form a social club for people with disabilities. Eventually, the association developed a constructive and positive relationship with the director, based on mutual cooperation between the two organizations.

A resident of the village contributed a dunam of land to Alshefaa and Alrahama, and the association began raising donations to construct its own building. The residents of the village contributed money and labor to the effort. The completion of the association’s building served as a turning point and springboard for its activities.

Today Alshefaa and Alrahama is financed from donations by local residents, as well as through budgets provided by the local authority and the department of social services. In addition, the association receives income from membership dues and nominal payments for participation in the association’s courses. The association has also received donations of equipment from the KEREN – Vocational Rehabilitation Centers in Israel at the National Insurance Institute.

**Achievements of the Association**

The association offers an address for the entire population with disabilities, whether to address immediate needs of people with temporary and chronic disabilities, or provide long-term social and occupational rehabilitation. The activities of the association in general, and the sports activities in particular, have contributed to improving the self-image and self-confidence of people with disabilities. The association has also made it easier for families to cope with the disabilities. The association’s successful collaboration with the department of social services in the region led to an increase in the number of people with disabilities who can benefit from the services the association provides.
Difficulties Encountered by the Association

The main difficulty encountered by Alshefaa and Alrahama is financial. The association is concerned that donations from the population might diminish or cease altogether.

The above review of existing projects suggests the positive potential for associations established by people with disabilities to serve the population of people with disabilities and their families. The organizations have enriched the lives of these individuals and allowed them to integrate into the community. Improvements in the situation of people with disabilities can also be seen in the changed attitude of the community towards the role of the disabled in community life. Undoubtedly, however, the most significant change for individuals with disabilities has been in their self-image and in the image others have of them: they have been transformed from people experiencing crises due to congenital disabilities or disabilities resulting from accidents, to people who have been empowered to seek interest and meaning in their lives.

This rosy picture is spoiled, however, by the financial difficulties which delay implementation of programs and, once implemented, mean continuous uncertainty about whether adequate funding will be available to continue the programs.
Summary

This report aims to portray various aspects of the situation confronting people with disabilities in the Arab sector in Israel and identify opportunities and mechanisms for change.

One theme that stands out is the low image that people with disabilities have of themselves, and their low status within Arab society. Prejudices and stereotypes about people with disabilities, who perceive themselves and are perceived by society as weak. Disabilities are often viewed as embarrassing, and this attitude influences not only the people with disabilities, but also their families, who refrain from assisting the disabled family member lest others associate the disability with the family member. Providing support to families of people with disabilities also helps improve their relationship and facilitates joint efforts to cope with the complex challenges they face. Whereas ideally people with disabilities should be treated as equals, in some cases they are treated with pity, rejected, or humiliated. People with disabilities report that therapeutic agencies, institutions, and local authorities sometimes share these negative attitudes. This is reflected in a failure to provide information, as well as in the belief that because people with disabilities do not have a power base, there is no need to address and deal with their distress.

People with disabilities and their families have a clear need for information in order to cope with daily life. However, there is a lack of printed material, information centers, counseling, and guidance in Arabic. This report addresses the serious problem of the difficulty accessing information about rights, therapeutic options, therapeutic agents, etc. Programs discussed in this report have shown that making information accessible to people with disabilities and their families is an essential step to their empowerment.

Another serious problem raised in this report is inadequate physical access within Arab locales. The topographic structure of some locales seriously impedes access for the physically challenged. Transportation arrangements suitable for those with disabilities are inadequate and, most critically, institutions such as banks and health care services are not handicapped accessible. Moreover, sidewalks and passageways are not adapted to people with disabilities and, in some cases, even the homes of individuals with disabilities are not suited to their needs. All of this causes difficulty for people with disabilities and often makes physical mobility within the locality impossible for them. Frequently even existing services for people with disabilities are not accessible, so that these individuals cannot benefit from the assistance. One of the
main ways to enable people with disabilities to improve their situation and integrate into community life is to enhance accessibility throughout the locale. A model that has been designed for this purpose is the “Accessible Community” project, which has been implemented in eight Arab locales.

The map presented in this report indicates that the services currently available for care of people with disabilities are insufficient. Certain areas of Israel are not provided with services, most seriously in the Negev region. This is reflected by the shortage of agencies that provide information, counselors, and services available, both in quantity and variety. Coverage for certain types of disabilities is also problematic. The disability cared for most in Arab localities is mental retardation, evidently because those services are provided by law. By contrast, people with physical disabilities, other mental disorders, behavior, communication, and functional disabilities, and autism do not receive sufficient care and are served by only a few institutions. The findings presented in the report also indicate a lack of services for the deaf, who need more extensive assistance.

Even when the good will and resources to provide assistance to people with disabilities exist, the lack of information about disabilities and rights continues to be problematic. Some Arab local authorities do not have complete information about the people with disabilities in their region, largely because these individuals are under identified and hidden. Another impediment to identifying people with disabilities is the lack of diagnostic services in Arabic – especially diagnosis of learning disabilities and behavior disorders. Assuming that the percentage of children with learning and behavioral disabilities is similar in Arab and Jewish societies, there is a population of children and adults who have not been identified or diagnosed with learning disabilities and behavioral disorders.

The findings also reveal that Arab women with disabilities suffer more than men in terms of their image and the way they are treated by society. The situation is worse for females than men in families ashamed of having a relative with a disability. Women with disabilities are socially isolated, in many cases confined to the house because of personal shame, family pressure, and the family’s reluctance to be seen with them in public. A woman’s disability is also an obstacle to establishing her own family unit in a culture which attributes considerable importance to family. The disability itself further intensifies the women’s harsh feelings and low self-esteem. Moreover, some women with disabilities are illiterate, which limits their access to information and makes them more dependent on relatives, the community, and formal services.
Bedouin women with disabilities in the Negev face an even bleaker situation than Arab women elsewhere in Israel because Bedouin culture severely restricts women with disabilities from going out of the home, coupled with the objective lack of services in the region.

From the perspective of people with disabilities, the key elements to improving their situation are enhancing awareness and changing the status of people with disabilities within society, empowering people with disabilities, strengthening their families, making information available and improving physical accessibility, developing services, creating forums and coalitions, and coordinating among existing services.

In recent years, a positive trend has developed in Arab society in which people with disabilities have begun to take their situation into their own hands, and have established several nonprofit organizations to help themselves. However, people with disabilities who wish to organize still face many challenges. One barrier is the difficulty involved in organizing as a group or nonprofit organization. This is caused by the lack of procedural knowledge, guidance and counseling, finances, and, in some cases, moral support. In the localities most successful in providing assistance to people with disabilities the local authorities or welfare departments were involved at the formative stage. Such assistance has included professional guidance in the process of establishing the association and financial assistance, either in the form of direct budgets or indirect funding. Cooperation between various organizations and institutions that assist people with disabilities has also contributed to the success of these efforts.

The past decade has witnessed the first signs of change among formal and voluntary organizations, despite the obstacles that have been documented in this report. Some local authorities have embraced efforts to help people with disabilities by making the locality accessible, encouraging efforts to integrate people with disabilities into society, and other concrete measures. People with disabilities are also actively developing initiatives and organizations. These initiatives are mainly local and focus on directly improving the situation of people with disabilities through a variety of approaches.

Since individuals in Arab culture tend to approach their nuclear and extended families for assistance, requests for assistance from formal agencies or organized efforts on the local level are a new development over the past decade and are not yet firmly rooted in the society. The process of transition from a culture reliant on the nuclear and
extended family as a pillar of society to a culture which promotes civil society, including initiatives on behalf of the disabled, has been gradual and difficult.

Between 2006 and 2009 JDC Israel will collaborate with government ministries, local authorities, associations established by people with disabilities for others with disabilities, and other funding sources to promote improvements in the situation of individuals with disabilities. These efforts will include strengthening people with disabilities to themselves function as catalysts of change, integrating people with disabilities into the community, and helping Arab society become inclusive and enabling for those with disabilities.
References


Sandler-Loeff, Avital and Loucia, Rawia. *Description of the Activities of the Unit for Disabilities and Rehabilitation at JDC Israel in Israeli Arab Society* [Heb.], Unit for Disabilities and Rehabilitation, JDC Israel, May 2005.

Strosberg, Nurit. *Literature Review on Disabilities in Israeli Arab Society* [Heb.], Myers-Brookdale JDC Institute, April 2005.
## Appendix 1: Projects Mapped

<table>
<thead>
<tr>
<th>Locality</th>
<th>Project Name</th>
<th>Target Population</th>
<th>Nature of the Project</th>
<th>Sponsoring Organization</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>New youth rehabilitation.</td>
<td>Youths aged 14-21 enrolled in a recognized school.</td>
<td>The project includes completion of education, vocational training, and integration into the labor force.</td>
<td>The Center for Assessment and Vocational Rehabilitation in Nazareth, under the auspices of the Foundation for Rehabilitation Projects.</td>
<td></td>
</tr>
<tr>
<td>2 Nazareth</td>
<td>Vocational training: caregivers for elderly people.</td>
<td>Women with disabilities aged 18 and over.</td>
<td>The project trains women with disabilities to enter the labor force and learn an occupation that is in demand. The training program meets the requirements of the Ministry of Industry, Trade and Labor. Women are required to pass tests in accordance with the accepted requirements for the occupation. Candidates for the program are referred by the National Insurance Institute, the Social Services Bureau, employment services, and the Ministry of Defense or arrive independently.</td>
<td>Rehabilitation Center; funded by the Fund for Development of Services at the National Insurance Institute, Haifa University, and the Rehabilitation Center.</td>
<td>The project has been operating since 1996. The women receive a fair wage, which is relatively high in comparison to other occupations.</td>
</tr>
<tr>
<td>3</td>
<td>Vocational training: combined secretarial and administrative - accounting and administration.</td>
<td>Women with disabilities aged 18 and over.</td>
<td>The project enables women to integrate into the labor market. Women are referred by the National Insurance Institute, the Social Services Bureau, employment services, and the Ministry of Defense or arrive independently.</td>
<td>See above.</td>
<td></td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Locality</th>
<th>Project Name</th>
<th>Target Population</th>
<th>Nature of the Project</th>
<th>Sponsoring Organization</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Karten Institute.</td>
<td>People with disabilities who need to find employment and improve their quality of life.</td>
<td>The institute provides rehabilitation services in computer-related job fields. It enables people with disabilities to enter the labor market and work in technological occupations that are in high demand. People with disabilities are referred by various institutions or arrive independently.</td>
<td>Rehabilitation Center, Nazareth.</td>
<td>The project has been operating since 2000.</td>
</tr>
<tr>
<td>5</td>
<td>Cooking and gastronomy workshop.</td>
<td>For women with disabilities who have a low level of education and cannot work in areas that require cognitive skills or high technology.</td>
<td>This offers women a cooking course designed to make them employable in food industries.</td>
<td>Rehabilitation Center, Nazareth.</td>
<td>The women trained at the center prepare the food served in settings sponsored by the Rehabilitation Center.</td>
</tr>
<tr>
<td>Nazareth</td>
<td>A-Rabi’a Association.</td>
<td>People with physical disabilities, mainly adults.</td>
<td>The association provides a social club for people with disabilities. The club is considered a “home setting” where people with disabilities can stay during the day. Today, the association mainly organizes social activities.</td>
<td>The A-Rabi’a Association.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Accessible Community Project.</td>
<td>The population with disabilities in Nazareth.</td>
<td>This local endeavor is part of a national project to improve accessibility (physical accessibility as well as accessibility of funds, services, etc.). The project was established by representatives of associations that deal with disabilities and people with disabilities and their parents who participated in a training course on enhancing awareness of disabilities, etc. The group organizes leisure activities for people with disabilities. A steering committee consists of representatives of organizations that provide services to people with disabilities.</td>
<td>National project run by the network of the Israel Association of Community Centers; financed by the Ministry of Social Affairs, the JDC Israel, and local authorities and managed by the community division of the Social Services Bureau.</td>
<td>The project has succeeded in pooling the work of the nonprofit associations. It has recruited people with disabilities and their parents as well as professionals from various disciplines to serve on the steering committee.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>----------</td>
<td>--------------</td>
<td>-------------------</td>
<td>-----------------------</td>
<td>-------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>8</td>
<td>Regional club for the blind.</td>
<td>Blind individuals in Reine.</td>
<td>The project provides social and emotional rehabilitation. There are over 18 participants in a crafts workshop, which meets twice a week.</td>
<td>The Social Services Bureau.</td>
<td>The project has made a unique contribution to promoting a culture of regional cooperation.</td>
</tr>
<tr>
<td>Reine</td>
<td>Yasmin project for women with physical disabilities.</td>
<td>Single women with disabilities over age 24, whose have remained single due to their disability.</td>
<td>This project attempts to improve women’s self-image and establishes “pressure groups” and support groups to help improve and enhance awareness in the community at large. About 20 women meet weekly to participate in various workshops, such as flower arranging and crafts.</td>
<td>The Social Services Bureau, in collaboration with the local council and under the supervision of the Rehabilitation Division of the Haifa and Northern District.</td>
<td></td>
</tr>
<tr>
<td>Kafar Kassam</td>
<td>The Kafar Kassam Association for Deaf People: Young Leadership Project.</td>
<td>Deaf women aged 16-20, who are members of the educational-cultural center of the association.</td>
<td>Today there are six young women with leadership potential who serve as the core of the association and engage in counseling, training, and leadership. Among other activities the women help enhance awareness in several areas related to the lives of deaf people.</td>
<td>The Kafar Kassam Association for Deaf People, primarily funded through donations and supported by the volunteer work of staff members.</td>
<td>The project began in September 2005. The women are an essential core for the continued activity of the association. They cooperate with the association management, participate in a variety of association activities, and recruit participants for activities.</td>
</tr>
<tr>
<td>11</td>
<td>The Educational-Cultural Center for Deaf People.</td>
<td>All deaf children in Kafar Kassam.</td>
<td>This organization provides individual assessment and professional counseling for deaf children. The center sponsors informal enrichment activities, academic assistance, and a course to enhance awareness among parents of deaf children, provides information, and presents new technologies for deaf people.</td>
<td>The Kafar Kassam Association for Deaf People, primarily funded through donations and supported by the volunteer work of staff members.</td>
<td>This is the primary and most successful program of the association.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>---------------</td>
<td>------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>12 Kafar Kassam</td>
<td>Deaf People for Deaf People, and Students for Deaf People.</td>
<td>Veteran and young club members.</td>
<td>In this innovative project older deaf members of the club mentor younger deaf members.</td>
<td>The Kafar Kassam Association for Deaf People, primarily funded through fundraising and supported through the volunteer work of staff members.</td>
<td>This Center for Educational Technology project is new and innovative. The extent of its success has not been evaluated, but it has shown initiative and openness to new ideas.</td>
</tr>
<tr>
<td>13 Haifa</td>
<td>The Association for the Blind and Prevention of Blindness in Haifa; “Employment Project” for blind people.</td>
<td>Jewish and Arab adults who are blind.</td>
<td>A group of 24 people, including five Arabs Members, engage in crafts and art work which they later sell. Contact with the project is through the Social Services Bureau, clinics, health services, the Service for the Blind, independent initiative, and “one member brings another”.</td>
<td>Association for the Blind and Prevention of Blindness, financed by the Ministry of Social Affairs and the Service for the Blind.</td>
<td>The club has been in existence for 25 years. Five percent of the population that receives services from the association is Arab.</td>
</tr>
<tr>
<td>14 Haifa</td>
<td>The Association for the Blind and Prevention of Blindness in Haifa, support groups.</td>
<td>Adult blind individuals, both Jewish and Arab, who are Haifa residents.</td>
<td>This organization provides support, counseling, guidance, and placement.</td>
<td>The Association for the Blind.</td>
<td></td>
</tr>
<tr>
<td>15 'Ir Hacarmel (Daliyat Al-Karmel and Isfiyeh)</td>
<td>The Nachei Daliyat Al-Karmel association, social club.</td>
<td>People with disabilities from 'Ir Hacarmel (Dalia and Isfiyeh).</td>
<td>The club provides a meeting place for people with disabilities. The club also offers classes and additional social activities. Currently 250 people with disabilities receive services.</td>
<td>The NDA Association, with support from the welfare department and the municipality.</td>
<td></td>
</tr>
<tr>
<td>16 Haifa</td>
<td>Various courses including introduction to computers, reading, writing.</td>
<td>People with disabilities over age 18.</td>
<td>Some of the courses offered are for people with disabilities who have not completed their education – particularly women who are illiterate. Other courses are for both men and women with disabilities who are interested in using computers.</td>
<td>The NDA Association.</td>
<td></td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>----------</td>
<td>--------------</td>
<td>------------------</td>
<td>-----------------------</td>
<td>-------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>17 ‘Ir Hacarmel (Daliyat Al-Karmel and Isfiyeh)</td>
<td>Accepting those who are different.</td>
<td>Students enrolled in regular schools.</td>
<td>Adults with disabilities who belong to the association participate in a publicity campaign for students, which deals with issues related to disabilities. They meet with students to talk about the importance of accepting differences and “otherness.”</td>
<td>‘Ir Hacarmel in collaboration with JDC Israel and “Aman” (City Project for Youth Volunteers), with the primary funding from JDC Israel and donations.</td>
<td>The campaign has succeeded in recruiting students to volunteer for various activities of ‘Ir Hacarmel.</td>
</tr>
<tr>
<td>18 Tamra</td>
<td>Accessible Community project in Daliyat Al-Karmel.</td>
<td>People with all of types of disabilities, of all ages.</td>
<td>This is a national project which operates in the locality. Today, most of the work focuses on physical accessibility. The project is currently at the stage of recruiting activists.</td>
<td>Israel Association of Community Centers, in collaboration with the welfare bureaus and JDC Israel.</td>
<td>To date, the project has succeeded in making two health care clinics and two banks handicapped accessible.</td>
</tr>
<tr>
<td>19 Tamra</td>
<td>Accessible Community project in Tamra: group of activists.</td>
<td>People with disabilities and parents of children with disabilities who are active and have leadership potential.</td>
<td>This is part of a national project which offers various activities for local residents with disabilities. The core of this project was established a year ago. A rehabilitation social worker from the social services department and the director of the local community center provided guidance and supervision. The group meets weekly, and receives guidance and supervision in a workshop conducted by an organizational consultant. The sessions aim to pool human resources and formally establish the group. The group is considering the possibility of registering as an official nonprofit.</td>
<td>Social Services Bureau, in collaboration with the local community center and with funding from the Israel Association of Community Centers and JDC Israel.</td>
<td>The group is very cohesive, and there is a strong sense of commitment among its members.</td>
</tr>
<tr>
<td>20</td>
<td>Social club.</td>
<td>People with disabilities aged 18 and over.</td>
<td>The club invites local individuals with disabilities to activities, provides diagnostic services, etc. The club holds leisure activities and classes, such as ceramics, crafts. The club is open three days a week in the afternoons.</td>
<td>Social Services Bureau, and financed by the Ministry of Social Affairs in collaboration with the National Insurance Institute.</td>
<td>The club was established four years ago. The people with disabilities are satisfied with the service.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>----------</td>
<td>--------------------------------------------------</td>
<td>-------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>21</td>
<td>Peer to Peer project.</td>
<td>Adults with mental disorders.</td>
<td>The project integrates people with mental disorders into the community through social and community rehabilitation. The project trains non-disabled volunteers to meet with mental patients. Volunteers participate in a workshop which familiarizes them with the mental disorder, teaches them to accept those who are different, and provides them with listening tools to build patients’ confidence in them.</td>
<td>Social Services Bureau, financed by the Ministry of Social Affairs in collaboration with the National Insurance Institute.</td>
<td>This is a national project run in several localities in Israel. The only Arab locality participating in the project is Tamra.</td>
</tr>
<tr>
<td>Tamra</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Classes for people with mental disorders, run by the Tamra community center as part of the Peer-to-Peer project.</td>
<td>Adults with mental disorders.</td>
<td>Classes are provided free of charge to adults with mental disorders, including gym classes, computers, reading, writing, and flower arranging.</td>
<td>Social Services Bureau, and financed by the Ministry of Social Affairs in collaboration with the National Insurance Institute.</td>
<td></td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>-----------</td>
<td>--------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Umm Al-</td>
<td>“Accessible Community” in the Umm Al-Fahm region.</td>
<td>10-12 individuals with disabilities and parents of children with disabilities.</td>
<td>This is part of a national project which aims to enhance awareness of issues related to disabilities, including physical and social accessibility (leisure and culture, as well as employment). In the initial stage a group of people with disabilities and parents of children with disabilities was formed. The group worked on self identity, and acquired tools for empowerment and leadership. In the second stage the group participated in a course to gain tools to managing a nonprofit association. Today, the group functions as an association and has been a branch of the national ALYN association for about three years. The group is considering the possibility of breaking off from ALYN in the future to function as an independent association. The association is an information center for people with disabilities in the region. It also assists with provision of equipment, tutoring, summer camps, workshops for parents, lectures, fun days, etc. The association is an address for all people with disabilities in the region. It serves about 150 members with disabilities.</td>
<td>Israel Association of Community Centers, in collaboration with the social services department and with funding from the Ministry of Social Affairs, the Israel Association of Community Centers, and JDC Israel.</td>
<td>This is part of a national project that provides a sports solution to people with special needs. There is one more team like it in Tel Aviv, which plays against this team.</td>
</tr>
</tbody>
</table>
| Al-Fahm   | Soccer team for people with CP.                        | Children aged 9-16 with CP, who can play soccer well and have self confidence.      | The children participate in a training course to prepare them for the team. They practice twice a week at the local soccer field. Team members gain self confidence and self assurance. They play matches against other teams.                                                                 | Israel Association of Community Centers as part of the “Olympic Greenhouses” project.                  |                                                                ategori}
<table>
<thead>
<tr>
<th>Locality</th>
<th>Project Name</th>
<th>Target Population</th>
<th>Nature of the Project</th>
<th>Sponsoring Organization</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td>Gateball team for the blind.</td>
<td>Blind people who are physically fit and can play gateball.</td>
<td>The team practices twice a week. The plan is to attend the Olympics for People with Disabilities in China in 2008.</td>
<td>Israel Association of Community Centers as part of the “Olympic Greenhouses” project.</td>
<td>The team practices together with a group of people with disabilities. Members of each team have an opportunity to help each other.</td>
</tr>
<tr>
<td>26</td>
<td>Beauticians’ course for women with mental disorders.</td>
<td>Women aged 18-25 with mental disorders.</td>
<td>This 15-session course for body and skin care is taught by a cosmetologist who specializes in beauty and cosmetics. Participants in the course are young women who have neglected their external appearance and hygiene due to their illness.</td>
<td>Umm Al-Fahm community center.</td>
<td>The course was discontinued two years ago.</td>
</tr>
<tr>
<td>Umm Al-Fahm</td>
<td>Taha Hussein Association for the Blind.</td>
<td>Blind individuals in the Triangle region.</td>
<td>The association engages in several activities including running an information center, providing services, and counseling. In addition, the association runs specific projects, such as a course for blind women aged 35-50, taught by a rehabilitation instructor, that teaches them to use the kitchen, work with cooking utensils, prepare food, use fire, etc. Some of the participants in the course are married. The association provides services to about 150 women from the entire region.</td>
<td>Taha Hussein Association for the Blind.</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Binat Baladna (Daughters of Our City) Club.</td>
<td>Women aged 18 and over with mental illness.</td>
<td>Social workers and psychologists provide 25 young women with support and guidance. The women also participate in various courses.</td>
<td>The Enosh organization, and financed by Enosh (Ministry of Health).</td>
<td>The project has been operating for approximately a year.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>----------</td>
<td>--------------</td>
<td>--------------------</td>
<td>-----------------------</td>
<td>-------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>29</td>
<td>Early childhood caregivers.</td>
<td>Young Arab Bedouin women.</td>
<td>This program trains women to care for infants.</td>
<td>The Center for Vocational Training and Rehabilitation, Beersheva.</td>
<td></td>
</tr>
<tr>
<td>Beersheva</td>
<td>Sheltered workshops for multiple disabilities (physical and mental).</td>
<td>Arab Bedouin women from several Bedouin localities.</td>
<td>15-25 women participate in the program, producing a range of simple crafts items.</td>
<td>The Center for Vocational Training and Rehabilitation, Beersheva.</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>The Yanabiya (Springs) Association for the Advancement of People with Disabilities in Yafia.</td>
<td></td>
<td>The association runs a social club attended by approximately 65 men and women with disabilities. The club runs daily activities, including lectures, fun days, leisure activities and entertainment, both within and outside club premises. The members have succeeded in organizing trips abroad as well as health and fun days in Israel. The activities of the association are supervised by a community worker from the welfare department, who provides organizational consultation.</td>
<td>The Yanabiya Association for Advancement of People with Disabilities in Yafia, financed by the Yanabiya (Springs) Association and supported by the local council and the welfare department.</td>
<td></td>
</tr>
<tr>
<td>Yafi</td>
<td>The Yanabiya Association project, in cooperation with the Ramat Yishai welfare department.</td>
<td>People with disabilities from Yafia and Ramat Yishai.</td>
<td>This is a joint project for people with disabilities from Yanabiya and people with disabilities from Ramat Yishai. The project is organized by the welfare department (the “Accessible Community” project in the locality). Joint activities are held for the two groups of people with disabilities, including social visits, lectures, and fun days.</td>
<td>“Osim Shalom” (social workers for peace) Association, which also funds it.</td>
<td>The project has been operating for a year, and is scheduled to continue.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>----------</td>
<td>--------------</td>
<td>--------------------</td>
<td>-----------------------</td>
<td>------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>33</td>
<td>The Al-Amal Association for People with Disabilities in Sakhnin.</td>
<td>Residents with disabilities in the locality – particularly adults.</td>
<td>The association is an address for people with disabilities in the city. It serves as an information center and provides assistance to that population. The association seeks to expand to provide vocational training for people with disabilities to enter the labor market. The association’s main areas of activity are serving as an information center and providing guidance, support, and classes. The association currently has about 120 members.</td>
<td>Supported and assisted by the social services department and from donations.</td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>Sakhnin “Enosh” club in Sakhnin.</td>
<td>People with balanced mental disorders who live in the community; currently there are only men, but efforts are being made to include women.</td>
<td>Members of the club meet for social activities and classes: sports, music, crafts, etc. The club is also planning to provide vocational training. The club operates three days a week, four hours each day. There are 18 members.</td>
<td>Sakhnin welfare department, in collaboration with the local “Enosh” association, and funded by the welfare department, the “Enosh” association, the Ministry of Health, and independent donations.</td>
<td>The club has been operating for four years.</td>
</tr>
<tr>
<td>35</td>
<td>Community clinic for treatment of people with mental disorders.</td>
<td>Individuals aged 18 and over with mental disorders.</td>
<td>The clinic was established for diagnosis, treatment, and referral to relevant community agencies. The clinic has provided solutions to patients in the community, and has facilitated the process of their treatment and rehabilitation. It has also facilitated the work of professionals in various settings. The Ministry of Health has allocated a specialist; the social services department provides a social worker, and the Clalit Health Services provided the facility.</td>
<td>Jointly by the Ministry of Health and the Sakhnin welfare department, funded by the Ministry of Health (basket for rehabilitation of people with mental illness), the welfare department, and Clalit Health Services.</td>
<td>The project pools and concentrates the work of professionals in the field. Patients with mental illness are treated under one roof. The clinic has existed for approximately six years.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>----------</td>
<td>--------------</td>
<td>-------------------</td>
<td>-----------------------</td>
<td>-------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Sakhnin</td>
<td>Theater group for people with mental retardation.</td>
<td>Men and women over age 18 with mild retardation.</td>
<td>Twelve men and women over age 18 with mild retardation organized a theater group last year, with support from the local branch of the AKIM organization and the Al-Joel theater in the city of Sakhnin. The group has received training in the field, and has been practicing with a professional instructor from the Al-Joel theater. The group has performed a play in all of the localities participating in the national project.</td>
<td>Al-Joel theater, with support and funding provided by AKIM and the social services department.</td>
<td>The idea has been implemented in several localities, which follow the same general approach.</td>
</tr>
<tr>
<td>Sakhnin</td>
<td>The Association for Cancer Patients in Sakhnin.</td>
<td>Cancer patients in Sakhnin.</td>
<td>The association operates as a branch of the Israel Cancer Association. It provides individual assistance to cancer patients and their families. The association is the main organization in the city that serves as an address for cancer patients in all aspects related to their rights, referrals, counseling, guidance, etc.</td>
<td>The Association for Cancer Patients in Sakhnin, with assistance and funding from the Israel Cancer Society and the Sakhnin welfare department; it is run by a social worker from the welfare department and by volunteers.</td>
<td>The association has been operating for about three years.</td>
</tr>
</tbody>
</table>
| Kafar Kanna | Enrichment club for the blind. | Blind individuals over age 18, from the entire region. | The club is a place for social encounters for blind people. It aims to rehabilitate blind members of the community. The club is regional. It provides individual and group services, as well as classes. In addition, the club provides music classes, classes in Braille, crafts, etc. Activities are held every day until 13:00, except Fridays and Sundays. Over 150 blind members use the services of the club. | The Kafar Kanna Association for Advancement of Blind People, financed by the association, the welfare department, the Vocational Rehabilitation Foundation of blind people in the community, and membership dues. | }
<table>
<thead>
<tr>
<th>Locality</th>
<th>Project Name</th>
<th>Target Population</th>
<th>Nature of the Project</th>
<th>Sponsoring Organization</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sh.</td>
<td>Sheltered rehabilitation factory.</td>
<td>People with disabilities (except those with retardation) and mental patients aged 18 and over from the Wadi ‘Ara region.</td>
<td>Participants in the factory have succeeded in doing complex assembly work, including assembling neon lights and water meters, as well as simpler tasks such as packaging jobs. A large proportion of the people with disabilities have reached the ceiling for wages they can receive from outside jobs.</td>
<td>welfare department, with funding by the Ministry of Social Affairs, the Rehabilitation Vocational Foundation, and the Ministry of Health.</td>
<td>Since its establishment in 1987 the number of beneficiaries has been rising steadily, and there is a long waiting list of people who want to participate.</td>
</tr>
<tr>
<td>Kafar Qara</td>
<td>Alshefaa and Alrahama Association.</td>
<td>Residents with disabilities in Kafar Qara and region.</td>
<td>The main services provided by the association are provision of equipment for people with disabilities, social activities, a social club, classes, fun days in Israel and abroad, courses, and projects. The association is supervised by a steering committee comprised of the following professionals: the regional rehabilitation supervisor, a social worker from the social services bureau, a representative of the local authority, a public representative, and a representative of the association. Currently approximately 100 members with disabilities receive services.</td>
<td>Alshefaa and Alrahama Association, with funding mainly from donations and membership dues; the local authority (budget for a local association) provides assistance, as does the social services bureau (by quotas), the Vocational Rehabilitation Foundation Centers in Israel, and other sources depending on the projects and target population.</td>
<td>The association was established in 1998. The social club was established in 2000. Jewish and Arab people with disabilities from the entire region receive assistance.</td>
</tr>
<tr>
<td>41</td>
<td>Sign language course for deaf individuals and their families.</td>
<td>Two groups are provided: one for deaf people and one for their families.</td>
<td>The project aims to strengthen the relationship and improve communication between deaf people and their families. About 20 deaf people participate in the projects, and the number of family members who participate is larger. Each of the groups meets separately twice a week, and participants receive guidance and training from a professional trainer.</td>
<td>Alshefaa and Alrahama Association, which also finances it.</td>
<td>The project is relatively new. After it ends, it will be evaluated and possibilities for developing the idea will be examined.</td>
</tr>
<tr>
<td>Locality</td>
<td>Project Name</td>
<td>Target Population</td>
<td>Nature of the Project</td>
<td>Sponsoring Organization</td>
<td>Comments</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>42</td>
<td>Translation into sign language for social club activities and for the Friday sermon at the mosques.</td>
<td>Male deaf residents of Kafr Qara and the villages in the region who attend Friday prayers.</td>
<td>The project provides a solution for the deaf residents of Kafr Qara and the region who go to the prayers.</td>
<td>Alshefaa and Alrahama Association.</td>
<td></td>
</tr>
<tr>
<td><strong>Kafar Qara</strong></td>
<td>Braille course.</td>
<td>Blind residents.</td>
<td>About 10 blind residents (including youth) participate in the Braille course. The blind residents receive individual instruction from a professional instructor, who is blind. In addition, the blind participants receive updates, guidance, and counseling in Braille.</td>
<td>Alshefaa and Alrahama Association, as part of the activities of the social club.</td>
<td>The activities have been available for approximately three years.</td>
</tr>
<tr>
<td>44</td>
<td>Soccer team for deaf players.</td>
<td>Deaf individuals with soccer-playing abilities from Kafr Qara and the region.</td>
<td>Twelve deaf residents over the age of 18 play on the soccer team. The team practices at least once a week.</td>
<td>Alshefaa and Alrahama Association.</td>
<td>The team has been playing for about five years. It is part of the national soccer league for deaf people.</td>
</tr>
</tbody>
</table>
Appendix 2: Participants in the Forum to Raise the Status of People with Disabilities in Arab Society in Israel

<table>
<thead>
<tr>
<th>Name</th>
<th>Role/Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abo Arar, Moneer</td>
<td>Coordinator, Arab Special Education Forum in the South</td>
</tr>
<tr>
<td>Abo-Uanois, Fathi</td>
<td>Director, Social Services department, Sakhnin Municipality</td>
</tr>
<tr>
<td>Abu Sharkeia, Naief</td>
<td>Al-Reyada Office</td>
</tr>
<tr>
<td>Abu-Asbah, Khaled Ph.D</td>
<td>Director, Massar Institute for Research, Planning and Consultation</td>
</tr>
<tr>
<td>Albaz, Kher</td>
<td>Director, Social Services For Bedouins, Segev Shalom Council</td>
</tr>
<tr>
<td>Baich-Moray, Sarit</td>
<td>Director, Fund for Demonstration Projects, National Insurance Institute</td>
</tr>
<tr>
<td>Barnea, Tamara</td>
<td>Director, Unit for Disabilities and Rehabilitation, JDC Israel</td>
</tr>
<tr>
<td>Ben-Shalom, Yarona</td>
<td>Senior program manager, Unit for Disabilities and Rehabilitation, JDC Israel</td>
</tr>
<tr>
<td>Chamdan, Atamneh Rula</td>
<td>Coordinator, Coalition for Promoting Special Education in Arab Society, Shatil</td>
</tr>
<tr>
<td>Cna’ana, Hatem MD.</td>
<td>Director, Alrazi Center for Rehabilitation of Children</td>
</tr>
<tr>
<td>Daniel, Nili</td>
<td>National Supervisor, Rehabilitation Services Administration, Ministry of Social Affairs</td>
</tr>
<tr>
<td>Faras, Amin</td>
<td>Manager, &quot;Economic Analysis&quot; Consultation and Economic Research, and Economist at the &quot;Mossawa Center&quot;</td>
</tr>
<tr>
<td>Haimovitz, Shmuel</td>
<td>Architect and Town Planner, Chief Access Officer, Commission of Equal Rights for People with Disabilities, Ministry of Justice</td>
</tr>
<tr>
<td>Haj Yahia, Raafat</td>
<td>Director, the Center for Rehabilitation Services, Tira</td>
</tr>
<tr>
<td>Haviv, Arie</td>
<td>Senior program manager, TEVET Employment Initiative, JDC Israel</td>
</tr>
<tr>
<td>Igbaria, Majed</td>
<td>Regional Facilitator for the Accessible Community Project, Rehabilitation Social Worker, and Group Facilitator</td>
</tr>
<tr>
<td>Judges, Jean</td>
<td>Executive Director, Beit Izie Shapiro</td>
</tr>
<tr>
<td>Kalderon, Claire</td>
<td>Director, Department for the Advancement of Persons with Special Needs, Israel Association of Community Centers</td>
</tr>
<tr>
<td>Kaminsky, Shosh</td>
<td>Director, Family and Community Development, Beit Izie Shapiro</td>
</tr>
<tr>
<td>Khatib, Adel</td>
<td>Director, Community Center, Tamra</td>
</tr>
<tr>
<td>Khoury, Ibrahim</td>
<td>Director, Vocational Rehabilitation &amp; Diagnostic Training Center, Nazareth</td>
</tr>
<tr>
<td>Loucia, Rawia</td>
<td>Project Coordinator, Empowerment of Women at the &quot;Al-Tufula&quot; Center</td>
</tr>
<tr>
<td>Masarua, Isam</td>
<td>Director, Social Services department, Kfar Qara</td>
</tr>
<tr>
<td>Naon, Denise</td>
<td>Director, Center for Research on Disability and Special Populations, Myers-JDC-Brookdale Institute</td>
</tr>
<tr>
<td>Neeman, Yael</td>
<td>Program Manager, Children and Youth with Special Needs, Ashalim</td>
</tr>
<tr>
<td>Ostrin, Ruth Ph.D</td>
<td>Yad Hanadiv</td>
</tr>
<tr>
<td>Safia, Ameen MD.</td>
<td>General Manager, SARAB Group and Initiator and Director of the Rehabilitation Services for People with Mental Disorders</td>
</tr>
<tr>
<td>Sandler-Loeff, Avital</td>
<td>Head of Independent Living Area, The Unit for Disabilities and Rehabilitation, JDC Israel</td>
</tr>
<tr>
<td>Sarsur, Wehdi</td>
<td>Chairwoman, Kafr Kassem Association for Deaf and Hard of Hearing</td>
</tr>
<tr>
<td>Shuruk, Ismail</td>
<td>Researcher, Manager of Health in the Arab Society project, Myers-JDC-Brookdale Institute</td>
</tr>
<tr>
<td>Strosberg, Nurit</td>
<td>Senior Researcher, Myers-JDC-Brookdale Institute</td>
</tr>
<tr>
<td>Weiss, Ariel</td>
<td>Yad Hanadiv</td>
</tr>
</tbody>
</table>