

NEUROLOGICAL LETTER FROM ...

Palestine



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Many a scheme is hatched at Association of British Neurologists' meetings. A short conversation in the autumn of 2001 and our teaching trip was arranged. The increasingly difficult situation on the ground had meant a dwindling faculty at the fledgling Palestinian medical school. Yet the first graduates had been, by all accounts including those of external examiners, of high calibre. Hope was turning into the promise that the hand-picked students would become established home grown doctors, with knowledge of local needs and challenges, motivated and able to deliver and develop quality health care. Yet those early hard earned successes were already threatened. Full-time external faculty members, needed to supplement local expertise, were increasingly more difficult to recruit and retain. A temporary solution was to seek external short-term teachers.

Thus, we set off in June 2002, with the intention of teaching neurology to the first year clinical students on their general internal medicine attachment, optimistically condensing four weeks didactic teaching into one. The university campus, in Abu Dies, a village on the outskirts of East Jerusalem was not accessible and so the teaching was held at the nursing college affiliated to the Al-Makassed Islamic Charitable Hospital, on the Mount of Olives overlooking Jerusalem's Old City. A few hundred yards up the road is the imposing east Jerusalem Lutheran charitable hospital, the 'Augusta Victoria', and beyond it in Sheikh Jarrah, St John's Ophthalmic Hospital. The view on either side of the Mount of Olives or Jabal A'Zaitoun is spectacular; to the west, the familiar but still inspiring golden Dome of the rock; to the east the serene, often heat-hazy, hills

descending rapidly into the desert towards the Dead Sea.

The day began for us at 7.30 am with a walk out of the old city through the Damascus gate and then a ride up the hill in a shared and usually unlicensed taxi. Our journey was short and uneventful, which is more than could be said for that of the students who would have had to set off much earlier. Their number varied each day and was influenced by restrictions on travel between towns in the West Bank, however, close, and Jerusalem. Students from Gaza, a mere 1.5 hour drive away, stayed for months and sometimes years in university accommodation rarely risking a visit home. At the time, restrictions on movement were changing on a daily basis, creating a great deal of uncertainty, and adding to travel costs students could ill-afford, even for those living in villages and towns on the outskirts of Jerusalem. An unpredictable amount of time was spent at fixed and variable checkpoints or crossing rough terrain to bypass them. The start of the first lecture one morning was disrupted by the enthusiasm with which one of the female students was greeted; it was the first day for more than a month that she had been able to leave the nearby area where she lived and make her way to the hospital.

Despite these difficulties, and with admirable determination on the part of the students, we taught an enthusiastic and well-prepared group of 30–40 on most days. We gave lectures in the morning and in the afternoon small group bed-side teaching, focusing on examination technique. By mid afternoon, although little was said, we could detect the students' anxiety to begin their journey home, another unpredictable process at the end of a long day. Medical teaching is in English and the students had a good grasp of the language. The students are selected from school-leavers in the West Bank and Gaza on the basis of their outstanding performance in the Palestinian General Secondary Certificate Exam and they were keen and responsive. Their enthusiasm was infectious, and the teaching sessions were, as a result, lively and interactive. Smaller topics not covered in detail were assigned mid-week to groups of two to three students, and on the last day each group gave short presentations followed by general discussion. For us, unencumbered by clinical pressures and waiting list targets, the teaching was a rewarding experience.

Our week was spent teaching, or otherwise walking within the confines of east Jerusalem including the old city. At the beginning of the week, despite a heat wave and temperatures above 35 °C, we walked back down the steep hill from the Mount of Olives past the ancient olive trees at the garden of Gethsemane. The morning bustle just outside the Damascus gate in the morning was deceptive. The streets of the now sadly unkempt old city had largely emptied by late afternoon and traders bemoaned much better days. The poor are now destitute and the previously comfortable struggle.

Travel to the West Bank for us was not possible without seriously running the risk of not making it back in time for the next day's teaching, although we managed to visit a colleague working in Bethlehem and living in one of the Palestinian towns nearby. A member of staff from the Al-Makassed Hospital drove us to the checkpoint on the road to Bethlehem. Our escort queued until we were close to the checkpoint, dropped us and turned back anxious to get home. We made our way by foot across the checkpoint and on the other side picked up a taxi to our destination. The siege in Manger Square had ended only a few weeks earlier and we sat on the balcony of our hosts' home, a luxury not permitted during the recent prolonged periods of curfew, discussing the practicalities of sending their children to school and getting to work at the hospital under such difficult circumstances. Of late, there had been few visitors to the house and we were much appreciated for having made the effort to get there for what was a brief visit, cut short by the arrival of a taxi to get us back to the checkpoint before dark. At dusk on the other side, we waited on a deserted street with a young language student enrolled at the University of Bethlehem. Heading home she was preoccupied with whether she would be able to negotiate the checkpoints successfully the next day in time for an examination. Having crossed, she waited for more than half an hour for her parents to pick her up – and we waited with her, both for the offered lift and because we did not wish to leave her alone.

Strangers, students and hospital staff were all open and kind, allowing us a glimpse into their lives, lives where politics is not abstract but has an impact on the daily realities of learning and earning or even getting to hospital. In the evenings we met up with local doctors and had numerous discussions with the Dean, whose close relationship with the students and his dedication and flexibility so impressed us.

On our last day, the students generously made a presentation to us. Afterwards they surrounded us, the women and men naturally forming two separate groups, showering us with questions mixed with warmth and appreciation. A few were already contemplating a career in neurology. Hopefully, as doctors, we will have taught them some neurology during our brief stay. More certainly, as individuals, we gave and were equally rewarded.

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