



HOLY FAMILY HOSPITAL of Bethlehem Foundation

A Culture of Hospitality January 2024 Update By: Amb. Michele B. Bowe, GCM

The Latin, Orthodox and Armenian Christmases and then Epiphany were welcome diversions these past few weeks. I was in Bethlehem for the Epiphany and participated in the processions and festivities. The Custos of the Holy Land, over fifty priests, and the Three Kings processed to the Manger bringing Frankincense and Myrrh to share with the faithful. The procession concluded after bringing the Christ Child back into the upper-level Church of the Nativity for veneration before placing him in his usual spot at the altar of the Blessed Virgin Mary. Afterwards, we had a special opportunity to venerate relics of the wood of the Manger at the high altar. It was beautiful and festive to be in the Church with the bountiful garlands, lights and Christmas trees. The organ was particularly sweet accompanying the local choirs.



The Three Kings

It was good to celebrate the full twelve days of Christmas. The carols were even more beautiful, strange though it may seem, set against the backdrop of roaring fighter jets, conflict, and fear. No one knows when the war will end and when normalcy will return to Bethlehem. But the carols sing of hope and goodwill toward all, making them particularly compelling this year.



Premature baby
in the NICU

More babies than usual are in guarded condition in the Neonatal Intensive Care Unit (NICU). It seems the whole population of Bethlehem is in guarded condition because of the current political and economic situation. The checkpoints remain closed, workers cannot go to Jerusalem and pilgrimages are a dream of the distant future. Food shortages and raging inflation, coupled with the almost complete lack of salaries (other than for employees of our Hospital) are causing great anxiety.

The NICU has been running full. Full to over full, that is. The 18 beds we are licensed to operate are simply not enough to handle current demand. We often have 21 or 22 newborns in need of our specialized care. If we turn them away when we are full, they likely won't survive. Holy Family Hospital is the only medical center in the region that can deliver and care for sick and premature babies often weighing as little as one pound and at as few as 25 weeks gestation. **The staff at Holy Family Hospital always make room for another baby**

as this not only makes possible lifesaving medical care, but also serves as a form of hospitality. Palestinians are known for the welcomes they freely offer; they delight in making their tables longer, stretching the stew or finding a bed for a stranger. The staff of our Hospital pride themselves on extending care for a baby in need even though they are stretched, overworked and tired from having to deal with the current situation every day.

Each tiny life saved is a big win at Holy Family Hospital. Each child born is cause for celebration.

An empty incubator or two remain at the ready in the NICU. They wait, all set up to receive a baby in distress at any moment, 24 hours a day, all year long. Sometimes the staff knows a mother is laboring with a baby who will need NICU care. They check her condition every 15 minutes and a neonatologist attends the delivery to swoop in and begin the lifesaving care. These babies have the best outcomes. The mothers who show up at the door in an ambulance already delivered or a baby transferred from the nearby government hospital don't fare as well. It is always preferable to have the mother labor and deliver in our hospital so we can be fully prepared to care for the vulnerable mother and her baby.



A Primary Work of the Order of Malta

Last week when I was at the Hospital, the NICU was full, as usual. The difference I noted was that almost all the babies were premature and mostly born before 30 weeks. I also noted that two-thirds of them were born with infections. The neonatologists cannot be sure why so many babies are born with infections, but it is likely because of the poor nutritional status of the mothers and the elevated anxiety they must manage. These babies will have extended NICU stays, perhaps as long as several months. Their care will be highly specialized and extremely costly.

It is hard to comprehend that Bethlehem is now a town with few salaries, growing inflation and a disproportionate number of brand-new babies needing intensive care. Families are once again worrying about forgoing medical care to buy groceries. In the case of sick and premature babies, this care is not a luxury but a lifesaving necessity. We are blessed to have the Neediest Baby Fund, inaugurated in 2015, to cover the medical needs of the tiniest and most vulnerable babies. Mothers and fathers benefiting from this fund can maintain their dignity knowing they will not incur debt or need to borrow from family to order to bring their babies home at the end of a long hospitalization. Unlike the other hospitals, we do not require full payment to release a mother and her baby.

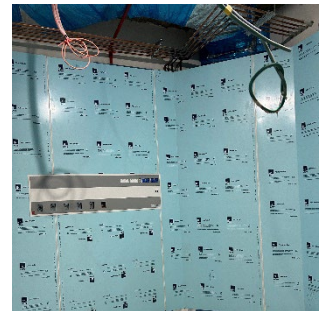


The Hospital silhouette

Despite the fear and anxiety prevalent outside the Hospital, the atmosphere within the Hospital remains cheerful. After all, what could be more hopeful than a fresh newborn baby? The Hospital staff manage to leave their worries at the door to focus on providing the best possible care for the women and children of Bethlehem. **The Hospital has operated for a century and a half, serving the people of Bethlehem. It has weathered multiple wars and *intifadas* and is still standing strong.**

It saddens me to share that our Mobile Medical Clinic has not been able to serve the Bedouin communities or the isolated villages around Bethlehem since the war began. The area south of Bethlehem, where many of our patients live, is not safe because of settler-instigated violence and the introduction of additional checkpoints. Ambulances and mobile clinics have not been exempt from the impacts of hostilities and we cannot subject our staff to possible harm. Luckily, most of the patients we once saw through the Mobile Clinic have been finding ways to come to the Hospital for deliveries, often through back roads and goat paths.

A bright spot on the Bethlehem skyline is the new and more impressive silhouette of our Hospital. Despite the challenges resulting from the current hostilities, our construction project is moving forward nicely. Workers are more plentiful with the closure of checkpoints, and they are grateful for the opportunity to work on such an important touchstone of the community. Most of them were born at the Hospital, as were their children. Work is mostly focused on the interior now, concentrating on the finishes. We are now preparing to begin Phase II, in which we will repurpose the old operating theaters. I was happy to witness the installation of the anti-microbial wall coverings in the new operating theaters. That is a welcome sign of progress.



A new operating room

The strength of Holy Family Hospital is not derived from the solid stone on stone construction of the building. It instead flows from the generations of dedicated and caring Palestinian staff members determined to care for the people of Bethlehem and to build a more solid future for the children to come. **Our Hospital draws its strength from the stories of care, hope and opportunity in which it plays a part every day, and will continue to play in the days and weeks and years yet to come.** As donors, friends, and stewards of the Hospital, we all contribute in vital ways to these stories, offering hope and investing in the futures of the generations to come in Bethlehem.



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