

Voices From the Field

Processing the Initial Takeaways of
MAOZ Network Members' Challenges

COVID-19

March 29, 2020

Attached are the preliminary takeaways of **challenges** MAOZ Network members have faced during the coronavirus crisis thus far (March 13-25, 2020). The intake is carried out by monitoring Whatsapp groups, dealing with Network member requests and conducting quick interviews. We continue these actions in order to keep learning quickly.

In the face of the many challenges, we are witnessing a great deal of actions and leaders' and systems' high level of ability in the field from all population groups and regions in the country.

General Population

Local Governance

- **Cash flow problems in the local authorities.** Many local authorities are concerned about the financial situation and seek financial assistance (on the one hand, advanced government transfers and on the other hand, clear guidelines regarding future discounts on the municipal property tax rebates that local authorities are required to provide residents & businesses). Big & strong local authorities have seen a drastic drop in business property revenue. Weak local authorities have difficulty charging property taxes because of their lack of technological collection means.
- **Need to address small and medium businesses.** The impact of local businesses closing down greatly sways the local authority's economic prosperity. Providing solutions for and supporting these businesses during the crisis helps ensure their sustainability after the crisis, in turn affecting the local authority's financial strength.
- **Preparing for "the day after."** Most local authorities do not have time to think about "the day after." Dealing with their very survival can cause them future damage, something that sound handling of the current situation can prevent. Because strong local authorities can plan ahead successfully,, there is concern about a dramatic worsening of gaps between local authorities on "the day after."

Local Governance

- **Welfare: lack of tailored welfare solutions.** The need for welfare departments' responses has increased significantly, both because of the deepening distress of the population that depends on welfare and the addition of a new at-risk population. We have already witnessed an increase in family neglect and violence. In the current situation, the ability to respond with preventive solutions is limited and the difficulty even intensifies due to the need for physical encounters which are not currently possible with this population. This challenge is also reflected in the elderly population, which is in need of assistance. In light of this, there is a need for a renewed welfare needs mapping in local authorities in which the number is low (for example: elderly people with no family support). Needless to say, the increased welfare will lead to additional economic burdens on the local authorities.
- **Welfare: barriers to sharing information and data.** Many regulations that prevent data-sharing regarding welfare populations between various divisions in the local authorities – as well as between the local authority and national institutions, such as social security – make it difficult for the welfare sector to function.

Local Governance

- **Personnel in emergency.** Local authorities have dealt with personnel-related issues extensively over the past two weeks. Increased preoccupation with personnel-related issues makes it difficult for the local authorities to provide optimal solutions and services to residents. For the first time, they need to respond in a limited format and to explore alternative ways of responding to residents and providing them with services.
- **Certifying municipal inspectors for enforcement.** A number of local authorities have made requests to certify additional municipal inspectors to enforce the Ministry of Health's regulations alongside police enforcement.
- **Planning and construction.** There is concern among local authorities regarding construction delays, with an emphasis on the construction of educational institutions, which will hurt local authorities even after the COVID-19 crisis. Despite defining construction as essential, there are many bureaucratic regulations that the local authorities struggle to implement due to the situation (irregular activity of municipal engineering divisions, the necessity to conduct tenders, the need for genuine public collaboration and objections that cannot be adequately expressed).

Education

- **Special education children.** In the absence of frameworks, the day-to-day routine and therapeutic sequence of children with special needs are interrupted – shifting from very personalized care to staying at home with parents who are not necessarily able to provide the required care or solutions and who also care for additional children.
 - **Children with complex disabilities.** Need hands-on treatment, sometimes for risk prevention (respiratory physiotherapy, fits of anger that endanger themselves and those around them).
 - **Children on the autism spectrum.** Their critical daily routine is disturbed and their functional development processes are significantly impaired.
 - **Remote treatments' low quality.** Most remote treatments are irrelevant to needs (children need physical contact, caregivers are unprepared, frequency of treatments is low).
 - **Parents' lack of knowledge and skill.** Many parents lack the ability to take good care of their children's needs and experience great emotional challenges and have a difficult time coping with the situation.
 - **Reducing visits to outpatient frameworks.** In child psychiatric and home settings, parental visits are avoided, which makes it very difficult for children.

Education

- **Children and at-risk youth.** The responses this population, which mainly needs a getaway from home, typically receives have ceased. Among those who stay at home in accordance with the guidelines, there is concern about the increase of dangerous activity, as well as the very risk of staying home. Among those who choose to roam the streets, there is an increased chance of getting infected or being arrested. There is a difficulty in identifying and mapping the known population, identifying additional at-risk populations and providing relevant responses, especially in light of the discontinuation of work of 70% of the people who typically deal with these populations (including Ministry of Education visiting officers, psychologists, social workers, etc.).
 - **Potential Solutions:**
 - **Exceptional approval for home care services** for children with complex special needs and **home visits** for at-risk children and youth.
 - **Approval for holding small gatherings for these populations**, in accordance with guidelines and with a professional's accompaniment.
 - **Defining spaces** (gardens, parks, classrooms) **to which special education children can go** with a parent.
 - **Authorizing professionals (visiting officers)** to provide solutions for youths roaming the streets.
 - **Improving the quality of remote solutions** (e.g. emotional therapy) and training parents and caregivers.

Education

- **Change in parents' roles.** The situation positions parents as their children's education and welfare managers. Adapting to the new reality when public systems' dominance diminishes creates quite a few difficulties for parents and the nuclear family unit (lack of adequacy between remote learning patterns and daily living at home, lack of motivation for children, difficulty in assisting the learning process, managing educational agenda, lack of end devices in relation to the amount of kids at home, etc.). Parents are overwhelmed by an overflow of information and their roles and they try to "survive" every day.
- **Remote learning in an emergency.** The entire education system is dealing with the distance learning challenge in two key respects: (1) technical challenge – seamlessly operating high-quality, synchronous and asynchronous student learning platforms; (2) adaptive challenge – leveraging the crisis to make learning relevant to the 21st Century and as opposed to reproducing standard classroom learning in the digital space (in the technical aspect – quite a few platforms and sites have failed over the past two weeks; in the adaptive aspect – many reports indicate that learning is the same in the classroom and that no significant change in learning processes has taken place. However, the Ministry of Education and various initiatives in the field seek to make learning more relevant. Teachers have continued to teach and have maintained contact with students even with the uncertainty regarding their employment).

Employment

- Laid-off employees & employees put on unpaid leave
 1. The burden currently being placed on systems and the complex bureaucracy make it difficult for employees to exercise their rights.
 2. Employers who have put employees on unpaid leave have found it difficult to maintain contact with them – their connection has suffered significantly as a result of the employees being put on unpaid leave (the negative impact could have been mitigated if payments had been made to employers as an incentive to retain employees).
 3. Training: employees who want to prepare for the day after and take advantage of their time at home to learn and acquire skills relevant to the employment market in a way that will make it easier for them to find work when the crisis ends are struggling to available, accessible and relevant training avenues for existing and expected job market demands.

Employment

- Independents & small / medium businesses

1. Cash flow is the most central problem.
2. Lack of accessible, clear information coming from one address that takes care of all inquiries. Multiple unclear and contradictory guidelines.
3. Lack of knowledge, capabilities and infrastructure to enable businesses to transform their work to digital.
4. Implications of risk-avoidance.
5. Difficult feelings of unfairness, lack of support and lack of a safety net.

Employment

- **Regulatory challenges.** Many regulations become irrelevant and impair the economy's ability to adapt, realize the decision-makers' intent and function (for example, retirement age regulations, realization of loans, credit rating).
- **Management capabilities during a crisis.** Organizations require a variety of management capabilities during a crisis and many need guidance and advice. Challenges include rapid adaptation of organizational operations to the changing reality, managing employees remotely, maintaining employee health and preventing infections in the workplace, significant business slowdowns leading to difficult personnel changes and renewed financial assessments.
- **Service providers dealing with at-risk populations.** Adults who are considered part of at-risk populations tend to physically receive their services at HMOs, banks, supermarkets and other service providers, who provide the same remote services through technological means. This behavior endangers beneficiaries and frustrates service providers, who find it difficult to produce remote solutions for populations with low digital literacy skills.

Higher Education

- Challenges of adults' remote learning.
 - Many educational institutions have not previously dealt with remote learning and therefore do not have the appropriate technological tools and infrastructure and lack the needed procedures and support system.
 - The lecturers have not been trained for the task at hand and some are not very digitally savvy. In addition, lecturers feel overwhelmed with guidelines that change daily and vary for different educational institutions.
 - Not all students have access to sufficient technological resources or relevant infrastructure (especially ultra-Orthodox and Bedouin students, who, in addition to difficulties in Internet connection and computer access, also often face an overcrowded home environment and a lack of a space that meets their learning needs).
 - Despite the existence of many online tutorials, there is a lack of “shelf products” – high-quality and ready-made courses which allow for an easy transition to remote learning.
 - If institutions fail to make significant adjustments, the possibility of beginning next year's school year will be in question.

Healthcare

- **Risk of infection.** Medical staffs are concerned about being infected. Some places lack basic protective equipment for medical personnel. Hospitals are finding it difficult to find equipment suppliers. Some hospitals will soon run out of masks and no solution seems to currently be on the horizon.
- **Feeling that independent community doctors lack health and economic protection networks.** Many healthcare system personnel have been quarantined. Today, self-employed doctors do not have social security compensation or general compensation in the event of job loss. In their view, a state of emergency must be declared.
- **Difficulty facing mental health patients.** These patients struggle to obey the quarantine guidelines. They find it difficult to communicate their situation and an effort needs to be made to reach out to them from within the community.
- **System-wide solution for medical personnel's children.** The current response is partial and largely relies on local volunteering. There are no frameworks for medical personnel's children between the ages of 0-3. The Ministry of Health's guidelines only apply to children aged 3-12. Most of the relevant responses are run and financed by local authorities, who have a difficult time recruiting suitable staff.

Healthcare

- **Difficulties in quick transitioning to remote medical services.** Treating hospitalized patients remotely is difficult for both the patients and the caregivers; there is a feeling that the entire treatment method has changed. The patients feel lonely and distant and the staff feels as if they are participating in the “Big Brother” television series. In addition, there is a challenge in giving patients enough to do (lack of TV channels and older patients who do not find interest). Some community HMOs are unable to provide the infrastructure for remote consultation. Some do not know how to properly compensate physicians for offering such care.
- **Offering remote care for populations with low digital literacy.** The elderly population and parts of the ultra-Orthodox society find it difficult to utilize digital services, making it hard to provide remote mental health care. Remote medical treatment has not been fully embedded and it is difficult for therapists and patients to adapt to. Providing remote care to young children is not possible and/or is difficult.
- **Ceasing public transportation** is expected to affect nursing care for the elderly.

The Arab Society

Healthcare – The Arab Society

- **Partial compliance with the Ministry of Health's guidelines.** There seem to be a number of reasons for this: the real-time guidelines are inaccessible – they're not translated and are not culturally adjusted. In addition, the social structure and the nature of people's residences make it difficult to adhere to the guidelines without cultural adjustment ("Instead of instructing people to stay two meters away from their parents, we should say 'you are endangering them'"). In addition, because less than 1% of confirmed infected patients are Arabs, the threat feels less real, especially among young people. Another major reason for violating the guidelines is the economic situation, which makes it impossible to give up one's livelihood. Any intervention, relying on the relevant authority (local authority, clerics, civil society) to transmit the respective message is recommended.
- **Partial and inaccurate solution for the children of Arab medical personnel.** Some places offer frameworks for Arab and Jewish medical personnel's children aged 6-10 regardless of Arab children's language and cultural needs. As a result, parents are not fully available for their work.

Local Governance – The Arab Society

- **Gatherings & open businesses.** In the past two weeks, there has been increasing compliance with business guidelines within Arab communities following local authorities' and enforcement agencies' informational campaigns. At the same time, there is still an enforcement challenge within Arab local authorities. Business licensing departments are not functioning properly due to employing fewer workers, making information and instructions less accessible and decreasing awareness levels among business owners. In addition, religious events, such as prayers and funerals, result in gatherings that are inconsistent with the Ministry of Health's guidelines. Clergy have been engaged in the field, leading to the cancellation of Friday prayers and the closing of mosques.
- **Challenges of working remotely.** In general, the Arab local authorities are not prepared for remote work. Many local authorities have reported a lack of laptops or software which is only installed on desktop computers. Internet infrastructure also do not allow efficient use of digital solutions. The local authorities need technological resources and time to adapt and have been unable to quickly shift to working remotely.

Local Governance – The Arab Society

- **Communication with healthcare officials is lacking.** Some local authorities have claimed that they have not received information regarding the amount of quarantined people and number of patients living in their territory. Most prominent is a lack of information on infection sites within the local authority. This phenomenon is in parallel to a lack of self-reported quarantining.
- **Lack of utilizing civil society.** The Arab local authorities are struggling to effectively operate the civil society operating within their territory. Significant social capital cannot be adequately expressed during the crisis. Another challenge in the operation of civil society stems from an uncertainty regarding regulations as they pertain to the operation of volunteers during this period, in addition to a failure to prepare for working during an emergency.
- **Difficulty in emergency work.** In most of the Arab local authorities, there is no awareness or infrastructure for emergency preparedness (for example, no operations room or permanent professional emergency crews).

Local Governance – The Arab Society

- **Need to provide a differential response to the local authorities.** The current situation in which local authorities are responsible for addressing many problems can deepen the service gaps for existing residents in routine times. Government ministries should take the different ways in which local authorities function into account and consider how to hand down tasks and guidelines to local authorities during times of emergency without harming residents in the weaker local authorities.
- **Lack of trust in security and emergency authorities.** It is important to think ahead about the next steps in which the State will begin operating the local authorities, with a particular emphasis on the issue of friction between the IDF and the Arab society. It is advisable to think of operating mechanisms which will be based on bodies which are trusted within the Arab society.
- **Rapid financial crisis in families of hourly and laid-off workers.** Many Bedouin residents find themselves in a significant economic crisis. Many families whose livelihoods are based on hourly work and daily wages now have no money to buy necessities.

Local Governance – The Arab Society

- **At-risk youth.** There is a concern within the Arab local authorities that the isolation and lack of frameworks will increase youths' wandering in the streets and incidents of violence.
- **Lack of emergency call centers.** In some 50 local authorities – most of which are Arab local authorities – there is no city call center that provides a constant solution for residents. The Ministry of Interior is currently working to provide a temporary solution to these local authorities, but as of this moment, residents of these local authorities do not have a formal address for requests and calls for assistance.
- **Domestic violence.** As Arab local authorities' welfare departments struggle to operate, women's organizations in the Arab society are receiving increased reports of domestic violence.
- **Inability to exercise rights.** Some Arab workers are struggling to access the employment and social security bureaus, both because of a lack of access to technological systems and because of a language and knowledge barrier.

Education – The Arab Society

- **Remote learning.** In some parts of Arab society, there is a shortage of two types of infrastructure: electricity connection, which would allow users to operate critical end devices for continued learning, and technological infrastructure, which exhibits itself as the lack of end devices themselves. Schools have been forced to come up with ad-hoc solutions without receiving a broad infrastructural solution. In addition, parents' inability to help their children with technology further complicates the situation.
- **Remote learning in the Bedouin society.** The state of technological infrastructure in the Bedouin society is difficult, and it is almost impossible to talk about remote learning when no Internet infrastructure exists, when no end devices are accessible and much of the area does not have cellular reception. There is an attempt to produce tailored solutions – some of them even low-tech: a set of scholarships that will transfer textbooks from schools to students and between students and teachers. Efforts are being made to connect scholarship recipients to advocacy efforts which promote the notion of adhering to guidelines. Unlike the ultra-Orthodox society, there may also be a problem of educational content in the Bedouin society.

The Ultra-Orthodox Society

Healthcare – The Ultra-Orthodox Society

- **The coronavirus deeply troubles the ultra-Orthodox society.** Contrary to the impression often made by the media, a survey and in-depth interviews that we conducted indicate that most of the ultra-Orthodox society is disturbed – even deeply so – by the spread of COVID-19.
- **Increasing compliance with the Ministry of Health’s guidelines.** This past week has seen the ultra-Orthodox public gradually internalize the Ministry of Health’s guidelines, even if this has happened a bit late compared to the general society. Due to their disconnection from digital means, in some ultra-Orthodox communities, the guidelines reach the public late.
- **Critical importance of the religious and political leadership.** Following a change in the rabbis’ instructions roughly a week ago, less people congregated in the streets and stricter adherence to the guidelines was noted. At the same time, many in ultra-Orthodox society have argued that religious and political ultra-Orthodox leadership have yet to make their statements clear enough. Meetings between rabbis and doctors may be beneficial (“An infectious disease expert from Sha’arei Tzedek met with members of the ultra-Orthodox society, after which they issued a statement prohibiting the gathering of more than ten students in Talmudei Torah”).

Healthcare – The Ultra-Orthodox Society

- **Specific vulnerabilities.** Major infection blind spots are supermarkets, weddings, circumcisions, synagogues and mikvahs (especially within the Hasidic community). The period leading up to Passover has been raised as a possible blind spot because it requires a great deal of organization that include social contact (cleaning dishes, shopping, the Seder itself and helping those in need).
- **Difficulty in more conservative societies.** The greater people are exposed to the general media, the more serious they tend to take the crisis and guidelines. There is more difficulty in Yiddish-speaking populations and anti-Zionist communities (in the Mea She'arim neighborhood, for example, many gatherings continue as normal).
- **The need for tailored information.** In the ultra-Orthodox community, there is insufficient understanding of the causes of infection and the disease's dangers. It is recommended to disseminate information on ultra-Orthodox platforms (leaflets, ultra-Orthodox media, public relations), use Halakhic discourse in explaining ("How will you tell your son about leaving Egypt if you are in quarantine?") and employ methods which are popular within the ultra-Orthodox society ("Animations and comics on the principle of flattening the curve").

Healthcare – The Ultra-Orthodox Society

- **The challenge facing families with multiple children.** Many ultra-Orthodox families have multiple children and live in homes without many rooms. This reality is challenging in both the ability to keep such a large number of children indoors over time, and the ability to isolate one family member if he or she is forced into quarantine.
- **A challenge with young people returning home.** Subsequently, there is a unique challenge with ultra-Orthodox between the ages of 18 and 21 who have returned home after their respective yeshivot closed. There are reports of families who had already been struggling to live their routine lives in their busy homes. Potential solutions include engaging the youth to distribute food and taking part in other volunteer activities (for example, via the Yeshiva Association).

Local Governance – The Ultra-Orthodox Society



- **Difficulty maintaining quarantine due to religious needs.** The mikvahs in the ultra-Orthodox cities, and in many cases in ultra-Orthodox neighborhoods in mixed cities, remain open and can be a significant source of infection. Frequent prayers result in gatherings of over ten people in contrast to the guidelines, with Saturdays posing a challenge even more acute.
- **Multiple populations in need.** Another significant challenge among the ultra-Orthodox society is the large amount of needy populations supported by civil society organizations. This problem is particularly significant in light of the Passover preparations, which involve packing mass food packages. There is a need for national welfare as a substitute for community welfare, as it cannot be conducted in adherence to the guidelines.
- **Engaging young people and civil society organizations.** Engaging ultra-Orthodox youth to help take responsibility through involvement with civil society organizations is expected to increase a general commitment to adhere to the guidelines ("If ultra-Orthodox young people start volunteering and taking responsibility through organizations like 'United Hatzalah,' the guidelines will be self-enforced").

Education – The Ultra-Orthodox Society

- **Remote learning on the phone.** In the absence of frameworks, the main platform for maintaining learning in the ultra-Orthodox society is via telephones. There are six to seven relevant phone platforms – about half of which are free – and there is a question about their quality and ability to be utilized by tens of thousands of students in a short time.
- **A need for more platforms.** Due to the diverse nature within ultra-Orthodox society itself, additional learning platforms are needed for members of the public who are interested in partaking (e.g. filmed lessons for distribution purposes on legitimate channels). In more conservative communities, radio and print journalism can be used for the same mission.
- **Effectiveness of learning.** Voices from the field update that learning is taking place, even if at a lower intensity than usual. On each platform, beyond the existence and expansion of the infrastructure, there is difficulty in ascertaining the learning (whether the student took part, how long he or she listened for, whether learning actually took place, etc.). In addition, given the large number of children in the home, the central question regarding how to engage the children within their homes continues to come up.