



**State of Israel
Ministry of Justice**

The Legal Counseling and Legislation Department (International Law)

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"HEIAP"— The Ministry of Health Approach for Equality in All Policies -

“Health Equity in All Policies” is an approach that encourages the systematic surveying of every policy in regard to its effects on health. HEIAP stresses weighing the possible implications of a policy on the creation of inequality in health and healthcare services, points to the need for action to narrow disparities in new and old policy programs, and encourages testing of the social determinants of health in the planning and implementation of all policy programs.

Over the past year, the Reduction of Health Inequities Unit produced a set of guidelines for policymakers and executives in the Health Care system as well as for those who engage in drafting and implementing work plans and/or interventions. To assimilate the concept, it is necessary, *inter alia*, to become familiar with basic health equity concepts and the social determinants of inequality in health and healthcare services. To tackle the issue, two models are proposed in regard to the determinants of inequality in the healthcare system, along with suggestions on how to bear these components in mind when policies or intervention programs are devised and implemented.

Also, the director of this unit of activity has been taking part, for the second year, in the process of approving work plans in order to ensure that the new programs are aligned with this outlook.

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Health Care for Syrian People

Prompted by deep humanitarian concern and the respect for human life—values that underlies the ethics of the Israeli healthcare system - Israel disregards Syria's status as an enemy state and offers much assistance to injured and ill persons, including women, in that country. Follows are the recent statistics regarding this issue:

Hospital	2013	2014	2015	2016	2017	Total
Nahariya	154	280	359	494	161	1448
Ziv	182	167	163	139	63	714
Rambam	40	75	25	29	8	177
Poriya	24	122	35	0	0	181
	400	644	582	662	232	2520

Up to May 2017.

Some 15 percent of patients, mostly children, arrive with family escort.

The cost is specified below:

Year	No. of hospitalization days				Cost (NIS millions)
	Nahariya	Ziv	Rambam	Total	
2014	5347	6600	—	11947	123
2015	7541	4100	450	12091	125
2016	13955	2526	600	17081	176
4/2017	3662	1407	220	5289	55

Each day of inpatient care is priced at 10,332 NIS (2,861 USD).

Total cost: 500 Million NIS (138 Million USD).

The cost is covered by the Ministries of Health and Defense.

Strategic Plan to Promote Health equality

In recent years, the Ministry of Health has taken numerous measures, in a wide variety of fields, to improve the state of health of the population in the periphery. Apart from its activities in recent years, the Ministry resolved in 2017 to carry out a new strategic plan towards narrowing of health disparities countrywide. Below are examples of steps taken in the past two years:

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The Ministry created budgets for the HMOs' use in comprehensive treatment of health and welfare of the elderly people who suffer from poverty.

The Ministry allocated 35 Million NIS (10 Million USD) for grants to resident physicians and specialists, particularly in family medicine and psychiatry, who chose to practice medicine at the periphery.

The Ministry is encouraging and funding the establishment of emergency-medicine centers in the periphery. This year, several such centers were opened and existing ones were expanded. In addition, standards for essential services at nighttime emergency medicine centers were set (Medical Administration Circular 26/2017, Metrics for Operation of emergency-Medicine Services in the Periphery).

Expanding the supply of inpatient beds—In the next few years, a large number of inpatient beds will be made available on the periphery, exceeding the periphery's share in the population. This allocation will narrow the gap between center and periphery in inpatient beds. The Ministry is also establishing previously unavailable services in the north—a rehabilitation center and a radiotherapy institute—and is stationing advanced medical instrumentation in the hospitals.

New hospitals—The Ministry has decided to open two new general hospitals, one in Be'er-Sheva and the other in the northern Haifa suburb area. Land for the hospital in Be'er-Sheva has been allocated; for the other hospital, the allocation is in the planning stage.

Shortening queues for surgery—In late 2017 and onward, the Ministry will begin to introduce budgets in order to reduce waiting periods for surgery. The periphery will have a larger share in this allocation than the center of the country. In addition, the Ministry will allocate budgets for the construction and upgrading of operating rooms in the periphery.

Arabic-speaking caregivers in mental health system—The Ministry, together with the Council for Higher Education, has been taking several steps to assure a larger supply of Arabic-speaking caregivers in the mental-health system. Programs of study in

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multicultural and Arabic language training are being approved. The Ministry is also giving priority to Arab psychologists in resident slots.

Termination of Pregnancy in Israel – General Information

In all Western countries, termination of pregnancy is subject to specific and systematic restrictions. Even in the absence of a formal committee, even the most liberal countries have a well-defined corresponding procedure under law, and require state licensing to perform abortions. The process requires consultation with a family doctor or hospital physician who is licensed to carry out the procedure. **The doctor must apprise the woman** of her medical condition and alternative treatments, the risks of pregnancy termination, and alternatives such as giving the newborn up for adoption. Also, a waiting period of several days from the date of the application to implementation is accepted in most countries in order to provide the woman with an opportunity to mull their decision and seek advice. Most of the countries prohibit pregnancy termination after week 22–23; all require the consent of two physicians in at the second trimester.

Importantly, Israel is one of the few countries that, in appropriate cases, permit pregnancy termination even at the post viability stage (after week 24). Also, it allows minors to approach the pregnancy termination committee without their parents' consent and knowledge.

The statutory framework for pregnancy termination in Israel is set forth in the Penal Law and not in the Patient's Rights Law, which specifies clear indicators for pregnancy termination, the conditions for it to take place, and the procedures of the committee.

Pregnancy terminations that are performed for *medical* reasons and meet the criteria set in the *Penal Law* are covered by National Health Insurance for women of all ages.

In many countries, there is *no public coverage under national health insurance* for pregnancy termination when the reason for it is a woman's personal choice. In the past year, Israel broadened the age range for women who may terminate pregnancy with funding from the healthcare budget from nineteen to thirty-three—a far-reaching measure in view of the need to prioritize. Since performing an abortion for a woman over forty is considered a medical reason for pregnancy termination, the only population

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group that is still not covered by public sources for legal abortion by personal choice is comprised of women aged 34–39 who wish to terminate their pregnancy for a non-medical reason.

Pregnancy termination is a social, cultural, moral, political, and religious issue. Israel determines its values in regard to it from a broad public perspective that assigns only a small portion of the decision to medical considerations. Pregnancy termination in Israel is regulated under the *Penal Law* and not the *National Health Insurance Law* or the *Patient's Rights Law*. Therefore, the Ministry of Health is tasked with implementing these statutes as written.

The Use of Restraints in Psychiatric Hospitals

From June 2016 to April 2017, a steering committee on reducing the use of mechanical restraints in psychiatric hospitals, appointed by the Director General of the Ministry of Health, convened in the aftermath of a meaningful year-long public discourse on the topic of restraining and isolating psychiatric inpatients. The committee was instructed to present the Director General with recommendations on measures that would result in much less use, if any, of these practices. The basic outlook that guided the committee was that patients should be treated according to patient centered medicine approach to health care whose rights, autonomy, and liberty should be honored; that values of convalescence, welfare, and compassion should be promoted; and that a secure and safe ambience in the inpatient department should be sought for the betterment of patients and staff alike.

Restraining patients and placing them in isolation were once accepted practices in institutional psychiatric care worldwide. They reflected professional outlooks that prevailed around the globe until the past twenty years, according to which restraints must inevitably be used to protect the safety of patients and staff. These viewpoints permeated Israel's inpatient system and found their way into legislation, making the use of restraints quite common in inpatient departments and in a variety of situations.

It is clear today that a major change in this state of affairs must take place. Widespread use of restraints clashes with recognition of patients' rights, the credo of staff members

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who carry out the mission of working in the mental-health system, and even professional principles and outlooks in this system.

On the basis of experience amassed in various countries that acting to make much less use of restraints, knowledge accrued in research on the effects of restraint measures on patients, and the positions of various professional stakeholders in Israel and abroad, the committee determines that, as a rule, patients in Israel's inpatient system should not be placed in isolation. The only exceptions should be highly unusual cases, in which the interest of protecting life prevails and no alternative exists, at any given moment, which would respond to substantive concern of immediate risk to bodily integrity or life posed by a patient in a specific situation. The committee states with emphasis that restraints per se have no therapeutic value and have the potential of doing more harm than good.

The committee recommends a series of measures that will significantly cut back on the use of restraints in Israel, with the aim of abolishing the practice altogether:

- Make a conceptual change and impart it to professionals in the field by issuing a clear leadership message. Reducing the use of restraints starts foremost with a conceptual change among staff members in regard to patients' rights, attitudes toward patients, and the balance of power between staff and patients. Other countries' experience shows that this is a prime precipitant of success in restraint-mitigating programs.
- Assimilate methods and tools that will create an alternative to the use of restraints and allow immediate, professional, accommodating, non-aggressive, and safe responses to challenging patient behaviors. Research abroad shows that effective imparting of alternative methods to staff members by means of training, instruction, and stewarding is a crucial condition for making less use of restraints.
- Translate the change at the value level into binding rules and procedures for staff in the field. The committee establishes very narrow grounds for the use of restraints. As a rule, patients should be restrained only in exceptional cases of substantive and immediate danger to their life and limb or to that of another patient or a staff member. Even then, the committee rules that restraint should

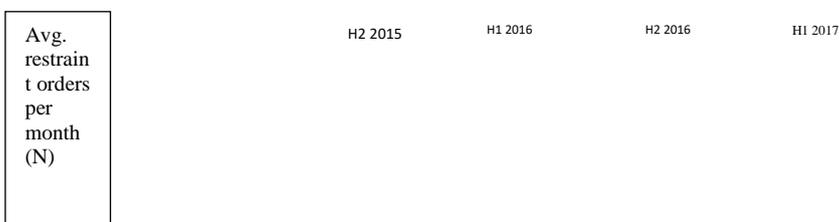
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be applied only as a last resort and only if all caregiving alternatives have been attempted and have failed.

- The committee recommends that the Ministry of Health audit individual cases of restraint in order to improve caregiving for specific patients and help the system to improve by learning from individual case studies. The committee also states that hospitals should conduct an internal review shortly after any event of restraint in order to determine how to prevent recurrence. Further, the committee affirms the patient’s right to present the Ministry of Health with a grievance about having been restrained and notes that patients must be apprised of this entitlement.
- A three-year phased system-level action plan. The committee recommends the creation of a government program for the mitigation of use of restraints, with implementation to begin at once, and specifies its recommended outline. The plan sets annual mitigation objectives that shall be binding on all hospitals: a **70 percent reduction** in restraint use at each hospital in Year 1, **another 60 percent** in Year 2, and **another 60 percent** in Year 3. Alongside these quantitative targets, the plan specifies the inputs that the system should be assured on a gradual basis.
- The committee recommends the establishment of a public commission for review of latitudinal system-wide aspects in addition to analysis of immediate requisites for the assurance of less use of restraints.

Average monthly number of mechanical restraint orders in all acute-care departments—second half of 2015, first and second halves of 2016, and first half of 2017—parsed by hospitals

The number of mechanical-restraint orders per month fell considerably at all hospitals from the second half of 2015 to the first half of 2017—by 56 percent on system-wide average and by 40–90 percent among different hospitals.



Countering Trafficking in Persons and Prostitution**Complementary Elements****Government Authorities**

GOI- The Government of Israel

AAW- the Authority for the Advancement of the Status of Women

CDG- Committee of Directors General

DIPO- Department for Investigation of Police Officers (under the auspice of the Ministry of Justice)

IPS- Israel Prisons Service

LAA- Legal Aid Administration

MOE- Ministry of Economy

MOH- Ministry of Health

MOJ- Ministry of Justice

MFA- Ministry of Foreign Affairs _

MSS- Ministry of Social Affairs and Social Services

MOI- Ministry of Interior

MPS- Ministry of Public Security

NATU- the National Anti-Trafficking Unit

PIBA- the Population and Immigration Authority (under the auspice of the Ministry of Interior)

Training for Labor Inspectors

The MOE Enforcement Division conducts routine professional training for labor inspectors on the subject of trafficking in persons. Lectures are given by representatives from relevant bodies, such as the PIBA Enforcement Division, NATU, the LAA and the

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shelters for victims of trafficking, as well as CIMI. The cooperation between the different bodies working in this field is also discussed. A training day took place on 24.12.2016, with the participation of approximately sixty (60) MOE staff. The NATU provides guiding principles to identify victims of trafficking, and distributes a pocket-book to every labor inspector, containing a list of criteria and procedures to identify trafficking in persons.

Treatment provided by the Ministry of Labor, Social Affairs and Social Services to women in the cycle of prostitution

Today, around 500 women in the cycle of prostitution are provided with assistance and treatment as part of national efforts in Tel Aviv-Jaffa, Haifa and Be'er-Sheva. Treatment designated for children and young adults in the cycle of prostitution is provided in "Lev" centers which currently operate in seven (7) local authorities. Some of these centers include the possibility of staying overnight in cases of emergency and all of them provide a variety of services including treatment in cases of harm, rehabilitation and therapeutic treatments. Treatment for men is provided by clinics of the Ministry of Health in Tel Aviv-Jaffa.

Women in Prostitution

As of 2009, the Ministry of Labor, Social Affairs and Social Services (MOLSASS) runs a variety of frameworks for the treatment of women in the cycle of prostitution, such as "Sal'it" in Tel Aviv-Jaffa, "Ofek Nashi" in Haifa and "Bishvilech" in Be'er-Sheva. The treatment consists of two main tracks which focus on mitigating the harm caused by prostitution and on rehabilitation and assistance to leave the cycle of prostitution, as outlined below:

a. Mitigating the harm caused by prostitution

This is designed for women who are exploited through prostitution, particularly on the streets, and suffer from physical and mental abuse and neglect. It includes the following:

1) Emergency apartments in Haifa, Tel Aviv-Jaffa and Be'er-Sheva which receive women and young women working in prostitution, providing them with temporary shelter, immediately and unconditionally. For the most part, the women who reside in

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these apartments struggle with drug addiction, are subject to severe physical and mental neglect and sexual abuse, and are exposed to violence in the street. In these apartments, women receive basic necessities such as lodging, food, clothing, protection, medical examination and treatment and they are looked after by a social worker. These apartments provide the women with time to prepare, practically and emotionally, for change and include, among other things, drug and alcohol rehabilitation.

2) A national hotline (1800-200-690), open 24 hours a day, for those exploited in prostitution. The hotline extends assistance in accessing treatment options and rights.

b. Rehabilitation and assistance in leaving the cycle of prostitution

This includes the following:

1). Residential hostels in Tel Aviv-Jaffa and Haifa which offer intensive and comprehensive therapy for up to one year and assistance in all aspects of rehabilitation, including employment, family relations, finding a place of permanent residence etc.

2). Day and Evening Centers in Tel Aviv-Jaffa, Haifa and Be'er-Sheva and are open to women who are in the process of leaving the cycle of prostitution. These centers offer private and group therapy, assistance in acquiring basic professional skills, completing education, finding employment etc. These centers place emphasis on the acquisition of basic employment skills, training and work placements, with the assistance of a specially trained social worker and support throughout the process.

All of the aforementioned frameworks attempt to locate women who are in the cycle of prostitution, including in brothels and apartments, in order to offer them assistance. They are given contact details and attempt is made to establish a primary, empathetic connection.

Minor in Prostitution

Over the past years, the MOLSASS developed frameworks which offer specialized treatment to youth in prostitution. This includes:

- A national hotline which operates 24 hours a day and takes anonymous calls from youth who are involved anywhere in the spectrum of prostitution and are in

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need of aid and assistance. The hotlines also take calls from professionals who come into contact with youth in prostitution.

- The "Lev" program which operates in Tel Aviv-Jaffa, offering telephone and internet hotlines which aid in the location of youth involved in prostitution and a range of services including meals, showers, laundry, physical and emotional support and assistance and places to sleep in an emergency. It also provides educational and employment assistance. Further "Lev" programs are run in six (6) municipalities. They are open between three (3) and five (5) days a week.
- The "City without Violence" Program is an outreach program for youth regarding prostitution. It includes work circles with relevant parties to find solutions in cases where there is a prostitution problem. Protection manuals, parent patrols and location guides contribute in locating girls in distress and risky situations (risky sexual behavior, sexual behavior incompatible to age, etc.). In the experience of the program, finding prostitution is relatively rare; Directing "watching centers" and municipal policing for handling the distribution of business cards to the public.

Treatment provided by the Ministry of Health

The Ministry of Health provides treatment centers and ambulatory treatment:

Ambulatory treatment

The ambulatory treatment is aimed, *inter alia*, at women who are working in prostitution in the streets, in brothels and in apartments. The aims of this treatment is to identify men and women working in prostitution and offer them a variety of emotional and physical treatment, to encourage routine medical examinations for sexually transmitted diseases and to offer other relevant assistance.

There are currently two (2) ambulatory centers operating in Tel Aviv-Jaffa and in Haifa. They are staffed by a doctor, social workers, a mentor who has a history of prostitution and volunteers.

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These centers also promote safe sex from a physical and an emotional perspective, in order to mitigate as much as possible the harm caused by the cycle of prostitution. They also offer psycho-social therapy with the aim of building the self-value of those involved. Every evening, these centers visit areas which are centers of prostitution.

Treatment Centers

There are also treatment centers in Tel Aviv-Jaffa and in Haifa. They also conduct weekly tours in order to locate women who are in need of their services. They focus on the identification and treatment of sexually-transmitted diseases, carriers of HIV and offer anonymous medical and psych-social treatment which is unconditional on the age, gender or civil status.

In addition, the following activities are performed at the Lewinsky Clinic:

- Accesses to public testing services for the LGBT community through the operation of two (2) testing centers in relevant areas and subscriptions to dating websites with the aim of locating men in prostitution. The presence of the medical staff in relevant areas enables the identification of people from the LGBT community who are involved in prostitution. The staff offers assistance from social workers and counselors, medical examinations, psychological treatment and assistance in exhausting rights from the various Government Ministries.
- Escorting transgender women involved in prostitution to medical service providers and to meetings and medical procedures related to the process of their gender transformation. Many transgendered women turn to prostitution in order to survive, due to the need to fund their gender transformation treatments, some of which cannot be performed in Israel. In addition, many of these women live in poverty and under mental distress, are exposed to violence, harassment and experience discrimination in many areas of life due to stereotypes and prejudices.
- Accompanying these women within the healthcare system helps strengthen their relationship with the doctors and other caregivers as well as increase the number of women who turn to treatment. In addition, the accompaniment creates a bridge

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between the transgender women and the Committee for Gender transformation and reduces the dependence of these women on prostitution by taking part in the finance of operations abroad.

Available solutions for victims of trafficking following the end of the year of rehabilitation in the shelter

The Day Center

The Day Center for victims of trafficking in persons was established in 2013 as a temporary solution for men and women that were residing in the community and were waiting to be placed in the shelters and, starting from January 2014, the Day Center also provides services to victims who have completed their rehabilitation year in a shelter.

The Day Center is an innovative and dynamic solution for the transition period – either between leaving the shelter and becoming a part of the community, or while waiting to be placed in one of the shelters for victims. It also aims to protect women who leave the shelter from re-victimization, in particular from being a victim of forced prostitution; the Day Center provides counseling and general assistance in every-day life, including the strengthening of various life-skills. In addition, the Center is on watch for indications that a woman or a man who are forced to pay ransom for the release of their relatives from the Sinai Camps and threatened to comply with forced prostitution or other atrocities, and will then raise the option of moving them back to the shelter for protection.

The Day Center operates five (5) days a week, four (4) hours daily. It is financed by the MOLSASS and is operated in cooperation with the Director of Social Services in the Tel Aviv-Jaffa Municipality ("Mesila").

The goals of the Day-Center are as follows: (a) to provide counseling services in the community to victims of trafficking; (b) to identify victims who are in situations of risk and danger and to refer them to the shelters in case of emergency; (c) to support and mediate additional services and provide material aid and concrete solutions as needed.

In addition to working with external parties in connection with those treated at the Day Center, there is a close connection between shelters and the Day Center and the transitional apartments. The relationship is particularly focused on the referral of people

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from one framework to another. Recognized victims of trafficking, who are waiting for rehabilitation at the shelter, are referred to the relevant shelter by the Day Center, once a place becomes available. Before entering the shelter, a treatment summary is written by the center's social workers, and on the day of entry, the staff has someone physically accompany the victim to the shelter.

In the course of 2016, the Day Center provided services for one-hundred and eighty-two (182) male and female victims of trafficking, slavery and forced labor.

Health Services

Victims of trafficking who do not reside in a shelter, are entitled to free emergency medical treatment in emergency rooms, general hospitalization units, psychiatric treatment and nursing, even if they do not hold medical insurance, all funded by the GOI.

The "Terem" clinic, located in Tel Aviv-Jaffa, is funded by the MOH and provides primary medical care, including a doctor's examination, laboratory services and imaging services (x-ray and ultrasound). A volunteer clinic also operates within "Terem", with specialists in various areas.

In 2016, the MOH expanded its agreement with the Terem clinic to include treatment of patients suffering from chronic diabetes and hypertension.

The "Gesher" mental health clinic at the Community Center for Mental Health in Jaffa, funded by the MOH, provides mental health services, including psycho-social support and medication. Due to the large number of attendees at the clinic, **it was decided to expand the services of the clinic.**

Children of victims of trafficking receive free and full medical care through the health insurance provided to them by the "Meuhedet" health fund. Furthermore, family health centers provide child development screening tests; follow-up examinations during pregnancy, and all the required vaccinations.

As reported in previous years, the MOH Clinics for Sexually Transmitted Diseases and the MOH Clinic for Foreign Residents, provide free medical services, including gynecology services to all foreign populations in need, including victims of trafficking.

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The Clinics offer physicians and nursing services, as well as a social worker and free medicines, in addition to X-ray and an Ultrasound machines. It also operates a mobile clinic that provides services to all in need, including victims of trafficking.

The MOH operates a community program for HIV monitoring and antiretroviral (ART) treatment for HIV carrier foreign residents who lack medical insurance. This is a joint enterprise of government agencies, AIDS clinics, NGOs, pharmaceutical companies and other commercial companies, funded from government budgets as well as through contributions of ART drugs by pharmaceutical companies and the provision of voluntary pharmacist services. Treatment under this program is also provided to pregnant women without medical insurance, including monitoring during pregnancy and for six months after childbirth, according to the regular MOH track.

Tuberculosis (TB) patients are given full medical treatment including diagnosis, prophylaxis for six (6) months, and, if needed, hospitalization - all state funded.

Childbirth services are free of charge in every hospital in Israel, including full treatment for babies and for preemies.

In addition to all of the above, aid organizations provide certain medical services, such, for example, as PHRI who operate an open clinic offering primary medical care.

Medical services are available at the "Holot" facility and are provided, *inter alia*, to those Sinai Victims who are not recognized as victims of trafficking. These services, which are given free of charge, include primary care treatment given by paramedics at a clinic open from Sunday to Thursday from 08:00-16:00 and on Fridays from 08:00-13:00; emergency medical care provided out of clinic hours by paramedics; an On-call medical specialist available 24/7 to advise the medical staff; medication and laboratory tests. Also available at the "Holot" facility are eye-glasses, elastic bandages, dentistry and more. Laboratory tests that cannot be conducted at the "Holot" facility, imaging, consultations with specialist physicians and treatment for HIV patients are provided by the Soroka Medical Center in Be'er-Sheva. Hospitalization, when needed, is carried out at the Soroka Medical Center, treatment of tuberculosis is given at the Center for the Diagnosis and Treatment of TB in Be'er-Sheva and Mental Health Care is provided at the mental health center in Be'er-Sheva.

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Free Legal Aid, by the Legal Aid Administration

As elaborated in the Report, the Legal Aid Administration is a unit under the MOJ. It provides free legal aid to victims of trafficking in civil trials and in certain administrative appeals. While it is part of the GOI, it enjoys some independence and may also file suits or petition against the GOI on behalf of the victims when necessary, and has in the past. Legal aid is not limited to the year of rehabilitation, but is provided for claims under the *Entry into Israel Law* and civil claims arising from the trafficking.

Punishment in TIP cases

The State of Israel v. Leonid Shtrimer and Assaf Ben-Ari S.Cr.C. 24041-12-15

(District Court Tel Aviv-Jaffa): On December 13, 2015, two (2) Defendants were charged with causing a person to leave his/her country to engage in prostitution, inducement to engage in prostitution and other related offenses. On September 7th, 2016, the Defendants were sentenced to four (4) years imprisonment; a suspended sentence; a fine of 5,000 NIS (1,335 USD), and compensation as follows: Defendant 1: 29,000 NIS (7,740 USD) to the 4 complainants, each according to her share; Defendant 2: 40,000 NIS (10,675 USD) to the 4 complainants, each according to her share.

The State of Israel v. Nissim Buadana and Igor Lambritzki S.Cr.C. 22427-06-14

(Haifa District Court): On June 11th, 2014, the Defendant was charged with causing a person to leave his/her country to engage in prostitution, attempted causing a person to leave his/her country to engage in prostitution, pandering for prostitution, conspiracy to commit a crime, publication of prostitution services of an adult, offenses with weapons, driving without a license and money laundering. According to the indictment, the Defendants conspired, among other things, to cause women, who are living outside of Israel to leave their place of residence and come to Israel and employ them in prostitution. On September 15th 2014, Defendant 1 was sentenced to two and a half (2.5) years imprisonment (including the exercise of a suspended sentence), suspended sentence, a 20,000 NIS (5,330 USD) fine and forfeiture of property. On July 18th 2016, the court sentenced Defendant 2 to twelve (12) months' imprisonment, suspended sentence and a fine of 10,000 NIS (2,670 USD).

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The State of Israel v. Vladimir Chernyshev S.Cr.C. 1956-10-15 (District Court Tel Aviv-Jaffa): On October 4th, 2015 The Defendant was charged with two (2) counts of human trafficking and inducement to engage in prostitution under aggravating circumstances; pandering under aggravating circumstances false imprisonment, assault, threats; and sex offenses. The case involved serious and violent crimes of trafficking in persons for the purpose of prostitution, perpetrated a decade ago, in 2005, with three (3) others. Against the three, an indictment was filed in June 2008. The Defendant, who was on the run for a long time, was arrested in September 2015. The plea bargain included an agreement for conviction of trafficking in persons, payment of 80,000 NIS (21,300 USD) compensation, and imprisonment of eighty six (86) months. The plea agreement was conditioned on a deposit of 60,000 NIS (16,000 USD) before sentencing.

The State of Israel v. Teddy Ness S.Cr.C. 10836-05-13 (Tel Aviv-Jaffa District Court): On May 2013, the Defendant was charged with multiple charges of TIP, rape, multiple charges of indecent act, publishing an obscene publication that includes the likeness of a minor (multiple charges), utilizing the body of a minor in order to advertise an obscenity (multiple charges) and possession of an obscene publication that includes the likeness of a minor (multiple charges). The Defendant, an Israeli citizen, met the mother of the complainant's, a 10-year-old minor, through a Russian website. The Defendant forged a relationship with the complainant's mother, and transferred monthly payments to her in exchange for using the minor's body for the purpose of creating obscene materials and performing sexual acts. On two occasions, the Defendant came to a hotel in Tbilisi (the mother's and the minor's place of residence) - where he took numerous obscene photographs of the minor and committed severe sexual act on the minor while documenting everything with cameras used by him and by the minor's mother. On February 25th 2015 the District Court sentenced the Defendant to Sixteen (16) years imprisonment, one (1) year suspended imprisonment and compensation for the victim of 100,000 NIS (26,700 USD).

The State of Israel v. Anonymous (S.Cr.C 6749-08-11 Jerusalem District Court, 01.08.2011) and appeals Anonymous v. The State of Israel, The State of Israel v. Anonymous (Cr. A. 8027/13, 8104/13): The Defendant was charged with holding a person under conditions of slavery, abuse against minors, false imprisonment and grievous sexual and violent assault. The Defendant committed all the offenses against

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six (6) women that lived with him and bore his children, and against his children and the stepchildren (children of the women) 17 children in total. On October 17, 2013, the Defendant was sentenced to 26 years imprisonment, suspended imprisonment, ordered to pay 100,000 NIS (25,641 USD) in compensation to the four (4) complainants.

The State of Israel v. Nadal Tubasi Cr.C. 16329-01-13 (Jerusalem District Court):

In 2013 the Defendant was charged with several counts of abduction for the purpose of murder or blackmail. The Defendant was accused of involvement in the kidnappings of Sudanese and Eritrean civilians, in order to extort money from family members and friends living in Israel. According to the indictment, the Defendant was sent by "Abu Ibrahim," who lives in Gaza, to collect ransom from relatives of the hostages and deliver it to him. In November 2012, he received a total of 20,000 USD, which he sent to Abu Ibrahim. The parties reached a plea bargain, due to evidentiary difficulties based in part on the inability to bring the hostages as witnesses for the prosecution. The Appellant also met with a relative of an abducted person on two occasions, and collected, in the first meeting a total of 17,000 USD which he sent to Abu Ibrahim; And in the second meeting a total of 23,000 USD that was seized when he was arrested. On April 15th, 2015, the Defendant was sentenced to forty-two (42) months imprisonment, suspended imprisonment and forfeiture of the taxi owned by him.

Israeli Citizen of Ethiopian Decent – Positive Developments**Governmental Resolutions**

1. On February 9, 2014, the Government approved Resolution No. 1300 in which it mandated the Ministry of Aliya and immigration Absorption, together with other relevant Ministries, to recommend a new policy for the advancement and promotion, to the greatest extent, of the integration of Israeli citizens of Ethiopian origin into Israeli society.
2. Following this multi-sectorial consultation process, on July 31, 2015, the Government approved an additional Resolution, No. 324, in which it adopted milestones for the advancement and promotion, to the highest extent possible, of the integration of Israeli citizens of Ethiopian origin in Israel society. According to this Resolution, relevant Ministries were directed to prepare detailed plans for the integration of Israeli citizens of Ethiopian origin into Israel society that will be combined to form a unified Governmental plan during 2016. **In addition, the Government decided that only citizens of Ethiopian origin that have been in Israel less than 15 years will remain under the purview of the Ministry of Aliyah and Immigrant Absorption and the rest of Israeli citizens of Ethiopian origin will be handled by every other relevant Ministry, as with other Israeli citizens.**
3. On October 29, 2015, in Resolution No. 609, the Government approved the detailed plans of the Ministries of Education, Health and Social Affairs and Social Services. These plans include the required measures for success at the end of a four year plan, and the relevant budget. On February 4, 2016, the Government approved its Resolution No. 1107, in which it approved the detailed plans of the Ministry of Defense, the Israeli Defense Force (IDF), the Ministry of Economy and the Civil Service Commission. These plans also include the required measures for success at the end of a four-year plan, and the relevant budget. The detailed plans of the Ministry of Construction and Housing are scheduled to be reviewed and approved in the near future.
4. The total budget for this project is about 500 Million NIS (130.2 Million USD).

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5. The project's administration is currently in the process of drafting personnel for the monitoring and implementation of this plan.

The Inter-Ministerial Team Charged with Forming an Action Plan to Deal with Racism against Persons of Ethiopian Origin

6. This team is comprised of senior officials (Deputy Director General or branch managers) of the relevant ministries, in addition to representatives of the Civil Service Commission, the Police, the Equal Employment Opportunities Commissioner, representatives of the industrial sector, and representatives of citizen of Ethiopian decent.
7. The team's main tasks were: monitoring – locating and developing tools for securing information on cases and events against persons of Ethiopian origin for their color or origin, including the internet and social media; treatment – forming operation procedures for cases of racism and/or discrimination, including means to decrease and eradicate such cases and increase deterrence; and change of public mind – forming means to increase the presence of citizens of Ethiopian origin in places of influence in the public arena.
8. On July 31, 2016, the team presented the Prime Minister with the outcome of this work – a report concerning the elimination of racism against Israeli citizen of Ethiopian origin. This report includes 53 recommendations to be implemented by various Government Ministries. Among the main recommendation were the establishment of a new governmental unit within the Ministry of Justice for the coordination of the fight against racism and the appointment of a person that will serve as a focal point and will be in charge of the fight against discrimination and racism in every Government Ministry. On August 1, 2016, the Ministerial Committee for the Advancement of the Integration into the Israeli Society of Israeli Citizens of Ethiopian Origin adopted the team's recommendations and decided to implement several steps, including: noting the Attorney General's statement, according to which, he sees great importance in the fight against racism in general and specifically with dealing racism against persons of Ethiopian decent; noting the Minister of Public Security's statement, announcing that he took the necessary measures to eliminate racism and guided his Ministry to operate in accordance with the plan formed by the

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Police on this matter; the establishment of a new governmental unit within the MOJ for the coordination of the fight against racism; the appointment by the Minister of Justice of an independent public commission that will assist and consult the coordination unit; the appointment of a person that will serve as a focal point and will be in charge of the fight against discrimination and racism in every Government Ministry, free legal representation in claims of discrimination in regard to entry into public places, positive representation of persons of Ethiopian decent in the public sphere – including public places and the media and creation of a faster mechanism for placement of persons of Ethiopian decent with academic degrees in the public service.

9. According to this decision, the new Unit to be established in the MOJ will be in charge of supervising the implementation of the inter-ministerial team's recommendations, receiving complaints concerning discrimination and racism and forwarding them to the relevant authorities, including safeguarding the handling of this complaints, composing an annual report regarding the unit's responsibilities, examinations of required legal amendments etc. In addition, the MOJ' Director General is required by this decision to report to the Ministerial Committee on the implementation of the abovementioned recommendations.

Recent developments of the Unit for the Coordination of the Fight Against Racism in the Ministry of Justice

10. Since its establishment, the Unit has been operating for the implementation of Government Resolutions No. 2254 and 1958, including by:
 - Constructing a logistical infrastructure that will enable the Unit to receive and document complaints regarding racism and discrimination. The Unit is currently monitoring and handling about 40 complaints it received from its establishment. These complaints concern a variety of issues, including: claims on discrimination against a prisoner of Ethiopian decent by not allowing a television channel in the Amharic language, separate training program of teachers of Ethiopian decent, abuse against a policeman of Ethiopian decent by his coworkers and commanders, racial expression by a customs official towards a civil servant when he returned via the Ben-Gurion airport, complaints regarding employment and provisions of services etc. Note that all of these complaints are transferred to the relevant authorities for

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examination and handling. The Unit follows every such complaint until its conclusion with a response to the person who filed the complaint.

- Additional personnel was hired and tenders for relevant experts of Ethiopian decent, in order to implement positive representation of citizen of Ethiopian origin, were published.
- The establishment of a Public Commission that will operate alongside and assist the Unit is in operations is in advanced stages of establishment. In addition, Retired Supreme Court Judge Elyakim Rubinstein was chosen to serve as the Council's Chairperson.
- Community Court – the pilot program for these courts was expanded to cities and municipalities with large communities of citizens of Ethiopian decent.
- The State Attorney authorized to issue a guideline on the information transfer from the Police Prosecution and State Attorneys' Offices to the Department of Investigation of Police Officers and to the Police' the Disciplinary Department in cases of complaints against Police personnel.
- Supervisors for the prevention of racism were appointed in all Government Ministries according to Civil Service Commissioner guideline on diversity of human resources. All of these positions are to be filled on November 30, 2017.
- Additional Activities in this field are conducted by the relevant Government Ministries in cooperation with the Unit.

Education – Reduction of Dropout Rates

On October 23, 2015, the Government approved Resolution No. 666 in which it decided to strengthen the informal education of children of Ethiopian origin. According to the Resolution, a budget of six Million NIS (1.6 Million USD) will be allocated for extra-curricular activities for children of Israeli citizens of Ethiopian decent for the years 2017-2019. This Resolution entered into force on November 8, 2015.

The Ministry of Education operates several programs in order to strengthen the education and improve matriculation entitlement for pupils of citizens of Ethiopian

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decent, including: Integration and closing learning gaps (as of June 2017 operated in four local authorities, participated by 471 pupils children and a budget of 2.7 Million NIS (730,000 USD)), a program to promote learning skills and reduce learning difficulties (as of June 2017 operated in 27 local authorities and in 94 schools with a total budget of 2.9 Million NIS (784,000 USD)), a program aimed to improvement of matriculation entitlement (as of June 2017 operated in 17 local authorities, to 94 groups with a total of 314 pupils children and a budget of 794,000 NIS (215,000 USD)), nurturing excellent pupils within schools (as of June 2017 – a total of 1,187 pupils participated in this program with a budget of 2.6 Million NIS (703,000 USD)).

Financial assistance – The Ministry of Education allocates financial assistance to children of Ethiopian origin in the sum of 400 or 800 NIS (105 or 210 USD) based on their date of immigration. In 2015, a total of 10,322 pupils of Ethiopian decent received this assistance.

The Ministry of Education dedicates many efforts to reducing dropout rates in all populations. The Ministry has a special department aimed at maintaining school attendance that works to prevent pupils from dropping out. In addition, the Ministry operates an internal unit of attendance officers who regularly visit schools. As of 2016, there were six attendance officers who are designated to citizens of Ethiopian decent, in addition to many other attendance officers who work for the reduction of drop-out rates in the general population that also work with children of citizens of Ethiopian origin.

Higher Education

In 2016, the responsibility for Students-citizens of Ethiopian decent was transferred from the Student Administration in the Ministry of Aliya and Immigrant Absorption to the Council for Higher Education (CHE). In 2017, the CHE established a Steering Committee that includes representatives of the Academia, public representatives and students, the majority of which are of Ethiopian decent. The Steering Committee examined this issue including barriers, and required changes, and in 2017 presented it preliminary recommendations to the Planning and Budgeting Committee. The Steering Committee recommended inter alia, on the following:

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- The expansion of the "achievements" program that operates in 32 cities and municipalities, in which young persons of Ethiopian decent who are most suitable for higher education are located and receive assistance in accessing higher education institutions. In addition, in order to assist persons of Ethiopian decent to better prepare for the psychometric exam (higher education entry exam), vouchers are allocated for preparation courses and a budget was allocated for pre-academic colleges for the provision of academic or financial assistance for students of Ethiopian decent.
- The Steering Committee noticed that while the rate of citizens of Ethiopian decent in Israel is about 1.7% the rate of students of Ethiopian decent is only 1.1%. Therefore the Planning and Budgeting Committee set a target of reaching at least a rate of 1.7% of students of Ethiopian decent at the end of the current five-year plan.
- The Council also set a goal of decreasing the dropout rate of first degree rate students of Ethiopian decent, which is 20% higher than that of the general population, by allocating personal academic tutoring classes and financial assistance if needed.
- Excellence program for students of Ethiopian decent – in the frame of this program students of Ethiopian decent will receive enrichment and empowerment classes and academic and financial assistance if needed.
- The CHE sees great importance of transferring from programs that were intended specifically to students of Ethiopian decent, to full integration of these students among the general student population.

Citizens of Ethiopian decent in the Civil Service

- In March 28, 2011 the Knesset enacted the *Expansion of Adequate Representation for Persons of the Ethiopian Community in the Civil Service (Legislative Amendments) Law 5771-2011*. This law drastically expands the already existing affirmative action scheme applicable to individuals who were born in Ethiopia or who have at least one parent born in Ethiopia, by requiring not only Government Ministries and agencies, but also government corporations with more than 50 employees, as well as municipalities, to apply the Law's affirmative action requirements with respect to persons of Ethiopian descent, for all the positions and ranks within these corporations.

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- Israeli citizens of Ethiopian decent constitute approximately 1.5% of the Israeli population; this number parallels the percentage of Ethiopians who are represented in the Civil Service (approximately 1.4% as of 2015). However in recent years the Government operated several programs in order to increase the employment of persons of Ethiopian decent in the Civil service, which resulted in an increase of their rate of employment. **In December 2016, 1.8% of all the Civil Service employees were of Ethiopian decent and in July 2017, this rate increased further to 2.0%.**
- **The Judiciary**
- In 2017, two (2) women of Ethiopian decent were appointed by the Minister of Justice as Magistrate Court judges for the first time in the judicial system.
- **Ministry of Justice**
- The Ministry of Justice is constantly working to increase the number of its employees of Ethiopian decent so it will reach at least 1.5%. Persons of Ethiopian decent are employed in the Ministry in a variety of positions, including lawyers, interns, Unit directors (such as the director of the Unit for the Coordination of the Fight Against Racism) etc. Currently there are 30 employees of Ethiopian origin in the Ministry (0.75%) 44% of whom are employed in the various State Attorney's Offices. Although there is a clear need for improvement, this figure represents an increase compared to 2014.
- In addition, the Ministry's Legal Aid Administration and the Public Defender's Office currently have contracts with an additional 29 lawyers of Ethiopian origin for the provision of outsourced legal services.
- **A National Conference for the Integration of Minority Populations in the Ministry of Justice and in the Civil Service** – In October 2017, the Ministry of Justice held its third national conference in Tel Aviv-Jaffa, aimed at encouraging the integration of students, legal practitioners, lawyers and university graduates from minority populations, including persons of Ethiopian decent, the Arab, Druze and Circassian populations and persons with disabilities in the Ministry of Justice. The conference was attended by the Ministry's Director General, the Attorney General, the State Attorney and other senior officials. An additional such national conferences

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were also held in December 2015 in Tel Aviv-Jaffa and in September 2014, in Haifa. The Ministry of Justice attaches great importance to integration of persons of Ethiopian decent within the Ministry, in order to reflect the cultural diversity of Israeli society.

- During the conference, the Ministry's representatives presented the pool of vacant positions within the Ministry (both designated and non-designated for these populations) and explained how to apply for these positions.
- The Ministry of Justice makes sure to integrate its employees of Ethiopian origin in public campaigns and promotional clips. The Ministry's aim is to be a role model in this regard for other Government Ministries and even for employers in the private sector.

National Insurance

Generally, the *National Insurance Law 5755-1955* (hereinafter: "*National Insurance Law*") includes gender differentiation in order to adapt for the unique needs of a woman and a man, for example: in regard to a pension of which the person is entitled to, and in this regard to the payment by such person of the national insurance fee. As such, for example, the specific pension or payments are transferred to women in the context of labor and parenthood (maternity allowance, labor fee, pregnancy observance fee etc.). In addition, the National Insurance Institute had special eligibility conditions for payment of disability pension for housewives, the unique possibility for a payment of labor fee to a man, and hospitalization fee to same-sex couples and more. Two relevant amendments were made in recent years in this regard:

Parental leave for a father whose wife is self-employed – Amendment No. 193 of the *National Insurance Law* of April 20, 2016, provides that an employee whose wife is self-employed is entitled to parental leave in lieu of his wife; this Amendment compares the conditions of a spouse whose wife is an employee.

Stillbirth – Amendment No. 172 (2016) of the *National Insurance Law*, expanded the definition of stillbirth so that it will be deemed a birth which took place from the 22nd week of pregnancy. This means that a woman giving birth after the 22nd week of pregnancy to a dead fetus or the child dies after the birth, will be entitled to a hospitalization allowance, a birth allowance and maternity allowance according to the provisions of the Law.

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Preventing the Exclusion of Women in the Public Sphere

General

The exclusion of women from the public sphere is a severe and offensive phenomenon and the State of Israel is making concrete efforts to eliminate any indication of such.

As mentioned in the Report, in 2013, the Attorney General adopted the conclusions of the inter-ministerial team which was designated to examine ways to tackle incidents involving exclusion of women from the public sphere, and subsequently, a team headed by the Deputy Attorney General (Public and Administrative Law) was appointed to implement the recommendations of the inter-ministerial team.

In addition, in 2014, the Government of Israel acknowledged, within the frame of Government Resolution No. 1526, that exclusion of women from the public sphere is a severe phenomenon which is characterized by discrimination against women, and is contrary to Israel constitutive principle of equality and Israel's international obligations.

As a result of the inter-ministerial team's efforts and the implementation process led by the Deputy Attorney General (Public and Administrative Law), several positive steps were made in different areas of public sphere in order to counter women exclusion, and many efforts are taken in order to prevent incidents of this phenomenon.

In the Health System, the Ministry of Health has issued (2013) a guideline for the HMOs which prohibit exclusion of women and gender separation at HMO branches as well as two Director Circulars, prohibiting the existence of modesty signs and demanding that they be removed in HMO branches and in hospitals. Since 2014, no applications regarding separation in health clinics (HMOs) were received in the Designated Public Email Box to which governmental agencies and other public entities can approach and submit a complain about incidents of exclusion of women. In addition, the Deputy Attorney General (Public and Administrative Law) applied to the Director of Ministry of Health to make sure that feminine figures are shown in posters and commercials in Health Clinics in Ultra-orthodox neighborhoods.

Furthermore, **the Israeli Medical Association (IMA)** has clarified in a public notification, that exclusion of women is univocally an unacceptable phenomenon which

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infringes the basic right for human dignity. According to the IMA, a doctor shall not participate or contribute in any way to the phenomenon of women exclusion in the health system, including in any act or an incident that might cause humiliation, discrimination or disgrace to a woman – whether she is a patient or a doctor. It was further clarified by the IMA that a doctor shall not participate in any medical or scientific event that includes any incident of women exclusion, whether they are patients or doctors. A doctor, including a Health Director, shall take the utmost steps in order to lead to positive initiatives and processes that contribute for gender equality. A doctor or Health Director shall abstain to agree or accept, whether in action or in omission to any steps or actions that are contrary to the principle of equality.

With regard to **segregation in Cemeteries**, since 2013, the Ministry of Religious Services, together with the Ministry of Justice continue to take concrete steps towards canceling gender separation in cemeteries. For example, recently, a screen wall separating between men and women was demolished in a eulogy pavilion in the town of Atlit.

In addition, in the past year additional care is placed on the issue of **exclusion of women in the Arab population**.

With regard to **Education**, the Deputy Attorney General (Public and Administrative Law) and the Israel Association of Community Centers had agreed that in certain situations, wherever there is a gender-separated class, a diversified class must be offered as well. Since data indicated that with regard to certain populations, separated classes are the only way to expose girls from the ultra-Orthodox society to extra-curricular education, the aim is to create the optimal balance between safeguarding the principle of equality and between the goal of empowering young girls from the ultra-Orthodox society.

Specific Issues

Transportation – Buses : In 2011, the High Court of Justice in the *Ragen Case* (H.C.J. 746/07) determined that separate seating arrangements for men and women so that women would sit in the rear of the buses and men would sit in the front is illegal since it is discriminatory and humiliating to women. Following this decision, the Ministry of

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Transportation conducted 1,369 reviews in buses lines during 2011-2012 to supervise this issue. Since then, bus companies had also put a sticker-sign in buses which clarifies that every person can sit wherever she or he would like. If a person approaches the driver and says that someone harasses her or him, the driver would intervene to assist.

Conferences and events: the Deputy Attorney General (Public and Administrative Law) regularly approaches municipalities and asks that they cancel or change the frame of public events where there was gender segregation or women's singing was prohibited.

Women banned from a radio station's broadcast: In a 2015 ruling (Rq.C.A), the court rejected an appeal of the radio station "*Kol Barama*", and ruled that the policy of banning women from being heard in their broadcasts between 2009-2011 constitute unlawful discrimination under the Prohibition of Discrimination in Products, Services and in *Entry into Places of Entertainment and Public Places Law 5761-2000*. This ruling was rendered after the Inter-Ministerial team concluded that every radio station must remove any limitation on broadcasting women. To date, the Deputy Attorney General (Public and Administrative Law) continue to scrutinize this issue and stands in constant discourse on this issue with the Second Authority for Television and Radio.

Separation in Side walks: there were no applications on this regard to the Public Email Box.

Beit-Shemesh – Modesty Signs: in the frame of the High Court Petition on this issue, the Attorney General has expressed his firm stand, according to which these signs must be removed. Currently, further legal proceedings regarding the enforcement aspect are still pending.

As for the Attorney General alleged comment on the issue of enforcement: The Attorney General recently clarified that there is no intention to reduce the enforcement with regard to incidents of exclusion of women in the public sphere, and that his opinion remains that exclusion of women from the public sphere constitute discrimination against women.

Efforts taken by the Authority for the Advancement of Women in Preventing the Exclusion of Women in the Public Sphere

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Recently, under Government Decision No. 2913 from August 2017, the Government reaffirmed its commitment to eradicate this phenomenon, and decided to authorize the Authority for the Advancement of Women, which operates under the Ministry for Social Equality, to coordinate the supervision of the steps taken by Government Ministries to prevent women exclusion, including through receiving periodic reports on this issue. Note that the Deputy Attorney General (Public and Administrative Law) will continue to address the legal aspects that arise in this regard as well as follow the implementation of the Inter-Ministerial Report under the capacity of the Attorney General.

The Authority continues in its efforts to eradicate any incidents of exclusion of women in the public sphere by monitoring, addressing the different bodies and develop new mechanisms to eliminate this phenomena in general. For example, between 2015-2016 the Authority sent an urgent letter to the director of "Meuhedet" HMO regarding a medicine conference on gynecology in which women were prohibited from participating, because it was aimed at the ultra-Orthodox community. In addition, the Authority has been addressing to different governmental and state bodies who organized conferences in which women were under-represented among the speakers. For example, it approached the Deputy Minister of Foreign Affairs, the mayor of Ramat-Hasharon local Authority and the Israel Intelligence Heritage & Commemoration Center (IICC) regarding the lack of women speakers in the first intelligence conference which was held in Israel; It also addressed the president of the Federation of Israeli Chambers of Commerce and the Israel Securities Authority regarding an annual conference on transport industry which was held in Israel due to under representation of women speakers.

Furthermore, the Authority addresses cases in which women were banned from participating or performing in memorial ceremonies, some of which were held in religious schools; Another example for the action of the Authority is its application to the Ministry of Interior after receiving a complaint that schools issued receipts to pupils' parents mentioning only the father's name, even if the mother was the paying parent.

Women's participation in political parties

As mentioned in the Report, the issue of women's participation in political parties is regarded very seriously. For example, in the elections to the 20th Knesset, publications appeared arguing that unlawful coercion had been exerted on ultra-Orthodox women to

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keep them from running in the elections. According to the allegation, a rabbi had published statements in relation to women approaching any party not under the leadership of the "Great Torah Sages". According to the publication, a woman acting contrary to the rabbi's instructions would have to leave her marriage without her ketubah (*the money due to her upon divorce*), her livelihood would be destroyed (it would be forbidden to study in her educational institutions or to purchase any product from her) and her children will be removed from their institutions of study. In light of the severity of these comments, the Deputy Attorney General (Public and Administrative Law), approached the Chairman of the Central Elections Committee that communicated this matter, together with a strong condemnation of acts of this kind to all the chairpersons of the parties running for the 20th Knesset.

In addition, a petition is pending before the High Court of Justice regarding sections in the statute of an ultra-Orthodox political party ("Agudat Yisrael") which limits women representation in the Party. The Attorney General filed an opinion according to which, although the sections constitute discrimination against women, the relevant legal framework impedes their nullification. In addition, the Attorney General opined that judicial restraint in relation to this subject matter is warranted, given the particular nature of the leeway given to political parties, which obligates maximum flexibility in the acceptance of cultural and world views, even when these may be at odds with the fundamental principles of the legal system or those of the wider public. The petition is still pending. (H.C.J 1823/15 *Itach - Maaci NGO et. al. v. The Political Parties Registrar et. al.*)

Education for Peace

In Israel, the first word that a child learn in the first grade is "Shalom" – peace.

The Following are several efforts taken for education for peace:

- Every year the memorial day of Izhak Rabin assassination is designated as the "**Tolerance Day**" in all schools throughout the country, in which pupils discuss issues such as living together in a multicultural society.
- The Ministry of Education adopted the "**North Ireland Model**" of training education teams to learn and deal with the issue of coexistence under conflict. The model operates in Jerusalem, Ramle, Hasharon and several towns in which Jewish and Arab population live together. In the framework of this program, Arab and Jewish school principals traveled to Ireland to learn the model. This training includes discussion and learning several relevant subjects such as the model "shared roots", multicultural society and the diversity of the Israeli society, emotions under conflict, the Arab-Israel conflict and more. All the trainings are bilingual- held both in Hebrew and Arabic.

Ultra – Orthodox Women in the Ministry of Foreign Affairs

The Ministry of Foreign Affairs approached through the media, a wide range of population groups within the Israeli society, informing them of the possibility of enrolling into its cadet courses, as evident from its composition in recent years.

As for current employees in the Ministry, although there are no specific indicators in the employment records, it is estimated that there are roughly 20 ultra-Orthodox women employees.