

Her Future at Risk.

**The Cost of Humanitarian Crises
on Women and Girls.**

Focus. Lived Realities and Collective
Action of Palestinian Women and
Women-Led Organisations





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Edited and reviewed by WeWorld Research Committee

A Research Committee, comprising members from WeWorld and WeWorld team in Palestine, was established to conceptualise, produce, review, and validate this report. 60% of members of said Committee are Palestinian. This research would not have been possible without their guidance and dedicated efforts. For security reasons, we are unable to disclose their names, but we wish to express our sincere gratitude to each of them.

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Foreword

In Palestine, crisis is not an interruption to life, but the atmosphere in which life unfolds. For generations, women have learned to live within uncertainty, not as a passing storm but as the ground beneath their feet and the sky above their heads. **What the outside world often calls “resilience” is, in truth, a long and exhausting practice of survival without alternatives.** It is the discipline of waking up each day in a context where movement is controlled, rights are conditional, and the future is something negotiated rather than assured. As one woman interviewed for this research put it, “People say we are patient. But patience is what remains when all other doors are closed.”

The current crisis does not fall on an empty page. It lands on bodies already burdened, on lives already narrowed by decades of occupation, fragmentation and gendered inequality. **War does not create these vulnerabilities; it magnifies them.** Structural discrimination becomes a daily emergency. Administrative restrictions become physical danger. Precarity becomes collapse. “What happened to women does not appear in media or reports,” a woman said. “Unless someone listens very closely, our pain remains invisible.”

In Gaza, the destruction of entire neighbourhoods has torn apart more than concrete. It has disrupted social worlds – the ordinary rituals of cooking, morning coffee, schoolbags by the door, neighbours’ greetings across balconies. The collapse of homes has meant the collapse of privacy, dignity and the quiet spaces where women once rested, cared, prayed or cried. Life has moved into tents, classrooms, unfinished buildings or improvised rooms made from cloth and tin. One woman described her place of displacement like this: “My place... it is not a house, not even a shelter. It is a torn piece of fabric over bodies exhausted by cold, hunger and fear.”

Women live physically surrounded by others, yet emotionally isolated in their burdens. They manage households without water; cook over open fires with little fuel; queue for hours for bread or aid distributions; clean shared latrines; calm frightened children; search for medicine; and mourn their dead without privacy or time. Survival becomes an endless sequence of urgent tasks. Reflection is postponed. Pain is postponed. “I became a machine,” a woman admitted. “Before the war, I used creams and perfumes. Now I put on kohl only to remind myself I am still a human being.”

In the West Bank, violence is slower, but it spreads like dust into every corner of life. Checkpoints redraw time and space. Occupation violence reshapes mobility and safety. Economic pressure tightens like a rope. “Nothing explodes here,” a young woman said, “but nothing moves forward either.” Education, livelihoods, public space and community life remain deeply affected by political fragmentation and insecurity. Women carry the emotional labour of stability – protecting children, mediating tensions, sustaining households and navigating shrinking opportunities. Across Palestine, women are silently expected to absorb instability so communities can continue to function.

Humanitarian language frequently praises women’s strength. But strength, when demanded endlessly and without support, becomes another form of harm. Palestinian women adapt not because conditions are bearable, but because collapse is not an option. “If I fall apart,” one mother told us, “Everything falls with me.” Another young woman, who lost both her parents, said: “I became mother and father to my brother. There is no space for breakdown. I will cry later, if later ever comes.”

This report refuses to romanticise that endurance. It asks instead: *What is the cost of living in permanent survival mode? What happens to mental health when distress is normalised? What happens to dignity when toilets require escorts and menstrual needs depend on torn cloth? What happens to agency when hours are consumed by queuing for water, food, fuel and aid – under the gaze of authorities, strangers or armed actors? What happens to a future when a girl who once chose her clothes now dreams only of a solid wall behind her back?*

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Yet Palestinian women are not passive figures in this landscape of crisis. They organise, mediate, teach, heal, negotiate and hold communities together. In crowded shelters and destroyed streets, they cook for dozens, clean shared spaces, run informal schools, support injured or grieving neighbours and mobilise whatever resources they can. Many are humanitarian workers who respond to emergencies while living within them. “I listen, I coordinate, I knock on doors,” one community leader said. “This is not a job; this is responsibility towards those who have no voice.”

Women’s voices matter not because they describe suffering, but because they reveal truths statistical data cannot capture: how families prioritise which child will eat first; how women manage hygiene with contaminated or scarce water; how safety is negotiated minute by minute; how dignity is protected when privacy is lost; and how hope is kept alive through rituals as simple as teaching a child the alphabet or decorating a corner of a tent. As one young woman told us, “Maybe we do not have the luxury of collapse. But every small decision – to study, to refuse humiliation, to help another woman – is resistance.”

This issue of Her Future at Risk, focused on Palestine, is grounded in these voices. It builds on decades of presence and partnership, combining operational data, qualitative research and lived experience to offer a human-centred analysis of how crisis reshapes women’s lives. It does not seek sympathy. It seeks recognition, responsibility and change.

Protecting women’s futures in Palestine requires more than addressing emergency needs. It requires rejecting narratives that normalise suffering or treat women’s strength as infinite. It requires challenging systems that depend on women’s sacrifices while denying them agency. It requires creating spaces for healing, rest, dignity and decision-making power. Without this shift, women will continue sustaining life under impossible conditions – quietly, relentlessly and at immense personal cost.

This report is an invitation to listen differently: to hear Palestinian women not only when they endure, but also when they imagine, demand, rebuild and dream. It is an invitation to act accordingly: with honesty, responsibility and the understanding that Palestinian women have never lacked strength; they have lacked justice.

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This contribution was written by a WeWorld humanitarian worker with expertise in health, who coordinated the Research Committee for this study. For security reasons, her name has been withheld.



Executive Summary

Her Future at Risk is a series dedicated to examining the gendered impact of humanitarian crises, highlighting the experiences of women and girls who bear the brunt of systemic inequalities in conflict-affected contexts. **This report, the latest in the series, focuses on Palestine, where decades of military occupation, political fragmentation, and entrenched gender inequalities have created conditions in which crises are never gender-neutral.**

Since October 2023, the escalation of hostilities in Gaza and the intensification of restrictions and enforcement of occupation policies in the West Bank have dramatically deepened pre-existing vulnerabilities for Palestinian women and girls, turning structural discrimination into an immediate, life-threatening reality. The collapse of essential systems—including health, education, WASH,

shelter, and livelihoods—has placed women at the centre of survival, as they absorb daily risks while sustaining families, communities, and the humanitarian response itself.

This study is qualitative in nature, drawing on 57 in-depth interviews with women and girls across Gaza, the West Bank, and the diaspora, complemented by testimonies from women-led and women's rights organisations (WLOs/WROs) and insights from frontline humanitarian staff working with WeWorld. Anchored in anthropological, non-Western-centric, and ecological perspectives, and guided by a Research Committee composed of over 60% Palestinian members, the research explores how occupation, patriarchy, and prolonged crisis intersect to shape women's lived realities, capacities, and agency.

By centring first-hand experiences, the study provides a holistic and nuanced understanding of both the constraints women face and the strategies they use to navigate an environment where security, dignity, and access cannot be taken for granted.

The research explores how occupation, patriarchy, and prolonged crisis intersect to shape women's lived realities, capacities, and agency.

Across all sectors, Palestinian women experience compounded and intersecting vulnerabilities. Restricted mobility due to checkpoints, risk of violence, curfews, and unsafe routes limits access to education, services, and livelihoods. Care responsibilities are intensified by displacement, infrastructure collapse, and food insecurity, while gender-based violence has surged across homes, shelters, public spaces, and even aid distribution points.

Economic marginalisation continues to deepen, with women's labour force participation already among the lowest globally. Failures in the health system, combined with stigma and lack of privacy, exacerbate reproductive and mental health risks. In this context, survival becomes a daily negotiation, with women carrying disproportionate emotional, physical, and social burdens.

Yet Palestinian women continue to demonstrate extraordinary resilience and leadership. From teaching in tents and organising community support networks to sustaining informal economies and spearheading civil society responses, **their actions embody *sumud*— a form of steadfastness that encompasses everyday practices of endurance, attachment to land, and collective persistence in the face of dispossession.**

Women humanitarian workers are particularly vital to the delivery of services, safe disclosure, protection, and community trust, even as they navigate mobility barriers, emotional strain, and occupational hazards. Women-led and women's rights organisations remain a cornerstone of local humanitarian infrastructure, providing indispensable contextual knowledge, community access, and legitimacy, despite operating under severe funding shortages and structural constraints. Their central role underscores the importance of integrating local women's expertise into gender-responsive and gender-transformative programming.

The study concludes that investing in Palestinian women and women-led organisations is both a protection imperative and an operational necessity. Effective interventions must go beyond addressing immediate needs and instead work to dismantle structural inequalities, **shifting from gender-responsive to genuinely gender-transformative action by centring women's authority in decision-making and grounding all programming in lived realities.**

Five strategic priorities guide the report's recommendations:

- 1. Shift from gender-responsive to gender-transformative action** - redistribute unpaid care work, engage men and boys, and measure tangible shifts in power.
- 2. Strengthen women's economic agency** - expand safe livelihood opportunities, provide childcare and digital work options, and develop timesaving infrastructure to reduce care burdens.
- 3. Address gender-based violence structurally** - improve safety in shelters and distribution sites, strengthen reporting and protection mechanisms, and invest in gender transformative community education.
- 4. Reinforce women's access to essential services** - adapt delivery to mobility restrictions through neighbourhood hubs, mobile teams, safe facilities, and integrated sexual and reproductive health and mental health support.
- 5. Resource and centre Palestinian WLOs/WROs** - provide multi-year, flexible funding, include them in coordination and planning processes, and safeguard civic space for their work.

These priorities include tailored actions for donors, humanitarian and development actors, local governance institutions, and WLOs/WROs themselves, emphasising that meaningful impact requires each actor to exercise its mandate responsibly. Ultimately, the path forward is clear: support must do more than protect Palestinian women—it must enable their leadership, strengthen their agency, and remove the structural barriers that shape their daily lives. Only by centring their voices, expertise, and collective action can humanitarian and development responses become truly effective, sustainable, and just.

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INTRODUCTION.

Understanding the Gendered Impact of Crises

0.1. How crises disproportionately affect women and girls

Crises are not gender-neutral. They interact with pre-existing inequalities and power imbalances, intensifying structural gender-based discrimination and placing women and girls at heightened risk. These dynamics are visible in crisis outcomes: women and children constitute more than 75% of those displaced by conflicts and disasters, reflecting their limited access to resources, mobility, and protection. Educational disruption follows the same pattern. During conflict, girls are 2.5 times more likely than boys to miss school, as care responsibilities increase, household poverty deepens, and gender norms tend to prioritise boys' education (UNDP, 2025). **Whether driven by war, climate shocks, disease outbreaks, or entrenched forms of discrimination, crises tend to affect women first and support them last.** This gendered sequencing of impact does not remain confined to individual households; it triggers wider consequences. As women's livelihoods, safety, and social roles are undermined, social cohesion erodes, economic structures weaken, and insecurity deepens at the community level.

This heightened impact on women and girls is not incidental but produced by a convergence of structural and social determinants. Persistent inequalities in pay and access to resources deepen women's economic dependency, leaving them particularly exposed when livelihoods collapse. Crises also tend to strike sectors where women are overrepresented—such as the informal economy and agricultural trade—while long-standing barriers continue to restrict their access to credit, land, and productive inputs (Root Capital, 2024). Care responsibilities further compound

these vulnerabilities. The loss of male family members deprives women of critical emotional and material support, and widows or surviving women are frequently thrust into the role of sole heads of household, responsible for family survival amid destroyed livelihoods. Repeated displacement intensifies these pressures by disrupting stability, eroding assets, and fragmenting social networks. Each relocation not only heightens exposure to physical danger but also expands caregiving demands, as women assume responsibility for additional dependants, including orphaned children and elderly relatives. **Together, these dynamics create a “triple burden”: the loss of male support, increased caregiving responsi-**

bilities, and heightened risks of hunger and violence (WRC, 2025). These strains are further exacerbated by rising levels of gender-based violence, which intensify across sectors during crises. Structural and social exclusion reinforces this cycle of vulnerability, as women are frequently excluded from decision-making at household, community, and political levels, leaving their specific needs systematically overlooked (Coachability Foundation, 2025).

Crucially, **this vulnerability is not inherent or natural. Women and girls do not face disproportionate harm simply because of biology or personal fragility; rather, it is socially produced, aris-**

DIFFERENT WOMEN, DIFFERENT NEEDS

Women are not a homogeneous group. Their vulnerabilities, needs, and capacities are shaped by intersecting factors such as age, disability, household composition, marital status, and social position, all of which influence how crises are experienced and managed (UNESCWA, 2024). These differences determine access to resources, exposure to risk, and the ability to cope with and recover from shocks.



WOMEN WITH DISABILITIES often face compounded barriers in accessing healthcare, education, and humanitarian assistance—barriers that intensify during crises as services become scarce or physically inaccessible.



OLDER WOMEN may experience heightened isolation, reduced mobility, and untreated health conditions, limiting their ability to seek assistance or participate in recovery efforts.



YOUNGER WOMEN AND GIRLS are disproportionately exposed to exploitation and gender-based violence, particularly in contexts of displacement and insecurity where protection mechanisms are weakened.

ing from entrenched gender norms, systemic gender-based discrimination, and unequal power relations. These structural barriers—ranging from restricted access to resources and services, to laws and policies that limit mobility or decision-making—interact with crises to magnify women's exposure to poverty, displacement, and violence. In **humanitarian contexts, the stakes are particularly high.** As already stated, crises often exacerbate pre-existing inequalities: disrupted services, destroyed infrastructure, and fractured social networks intensify the pressures that women and girls already face. **Traditional humanitarian responses tend to focus on immediate protection or survival needs, which, while essential, do not challenge the underlying power imbalances that produce vulnerability.**

That is why a gender-transformative approach becomes essential, as it seeks to go beyond short-term relief. **Such an approach explicitly targets the root causes**

of inequality, aiming to reshape social, economic, and political structures. In practice, this can mean ensuring women's meaningful participation in decision-making at household, community, and institutional levels; promoting equitable access to livelihoods, education, and healthcare; addressing discriminatory laws and practices; and supporting women-led organisations and networks that strengthen local resilience. Applying this lens aligns closely with the **Women, Peace, and Security (WPS) agenda**, which recognises that women's leadership, inclusion, and protection are critical not only for gender justice but also for effective peacebuilding and humanitarian action. **Gender-transformative hu-**

manitarian programming thus does not simply treat women as recipients of aid or victims, but it recognises them as active agents with the knowledge, skills, and authority to contribute to crisis response and recovery. Viewed through this lens, the disproportionate impacts of crises on women and girls are not inevitable. They are socially constructed, and as such, can be addressed and mitigated. Humanitarian interventions informed by gender-transformative principles have the potential to turn vulnerability into capacity, fostering resilience, promoting leadership, and reinforcing the central role of women in sustaining communities even under extreme conditions.

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PREGNANT WOMEN have specific health and protection needs, including access to prenatal care, safe delivery services, and protection from stress and trauma, all of which are frequently disrupted in emergency settings.



FEMALE-HEADED HOUSEHOLDS, especially those caring for children and/or sick relatives, often face increased economic insecurity, food shortages, and disruptions to essential services, as women must balance income generation with caregiving responsibilities in the absence of adequate support.



WOMEN LIVING IN RURAL AND REMOTE COMMUNITIES, including Bedouin women, often face structural disadvantages linked to geographic isolation, limited access to basic services, insecure land tenure, and restrictive social norms. In crisis contexts, these pre-existing constraints can be exacerbated by disrupted mobility, weak service delivery, and exclusion from formal humanitarian assistance, leaving rural women particularly vulnerable while simultaneously drawing on strong informal coping mechanisms and community networks.



WOMEN HUMANITARIAN WORKERS also encounter distinct risks and pressures during crises. While they play a critical role in service delivery, community engagement, and access to affected populations, they may face heightened exposure to insecurity, harassment, and burnout, alongside gender-based barriers within humanitarian systems themselves. These challenges can limit their safety, wellbeing, and ability to operate effectively, despite their essential contributions to crisis response.

Failure to recognise this diversity risks one-size-fits-all responses that overlook those facing the greatest constraints, reinforcing marginalisation and deepening vulnerability. By contrast, analytical approaches that account for intersecting identities enable more targeted and effective interventions, ensuring that assistance responds to differentiated needs and that no woman is left behind.

WHAT DEFINES A GENDER-TRANSFORMATIVE APPROACH?

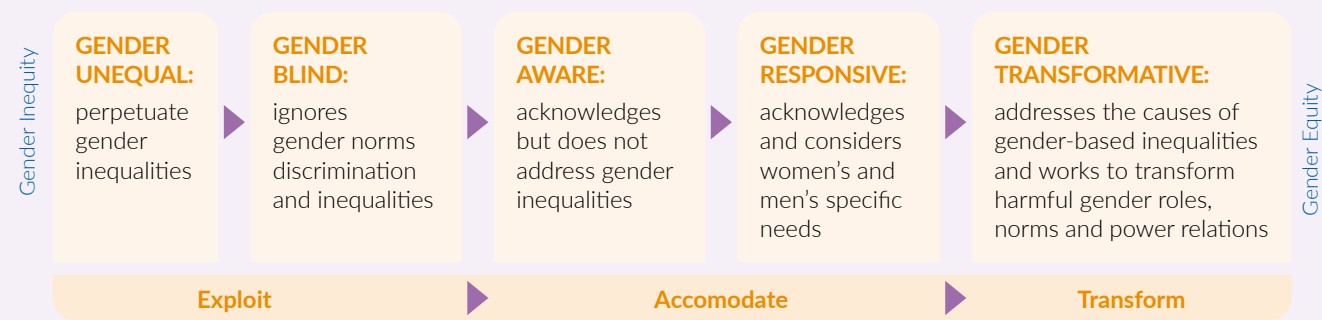
To fully comprehend the impacts of humanitarian crises on women and girls and to adopt effective and long-lasting solutions, **it is essential to operate within the gender equality continuum.** This framework progresses from a gender-unequal approach, which perpetuates existing inequalities through various stages of increasing inclusivity and equity, ultimately reaching the transformative level of gender-transformative approaches. **This continuum not only addresses the immediate needs of women and girls in emergency contexts but also seeks to confront and reform the entrenched power imbalances that exacerbate their vulnerabilities.**

By doing so, it provides a comprehensive strategy that not only alleviates the symptoms of inequality but also targets its root causes, paving the way for enduring systemic change. The ultimate goal is to modify these systemic power imbalances, which are often magnified in crisis situations. Addressing the root causes of inequality and discrimination enables the identification of more suitable, sustainable actions and strategies. Such an approach fosters transformative change that benefits society as a whole, creating solutions that are designed, implemented, and embraced by the community itself.

For an approach to be truly transformative, it must incorporate the following elements:

- **COMPREHENSIVE GENDER ANALYSIS:** This involves identifying and understanding the societal norms and power imbalances that disadvantage women and girls, with a focus on the discrimination they face from early childhood. Such analysis lays the groundwork for effective interventions that address both the symptoms and root causes of gender inequality.
- **ENGAGING MEN AND BOYS:** Actively involving men and boys, particularly young men, as agents of change is critical. By fostering awareness and encouraging them to challenge harmful norms, they can play a pivotal role in creating a more equitable society.
- **BUILDING PARTNERSHIPS:** Collaboration with women and feminist organisations, local actors, community groups and civil society is key to ensuring that solutions are contextually relevant and driven by those who are most affected by these inequalities.

FIGURE 1. Gender Equality Continuum
Source: WeWorld Elaboration on UNFPA, UNICEF and UN Women (2020)



Women's steadfastness is not a limitless resource, it is a response shaped by constraint, not a condition to be idealised.

0.2. Focus on Palestine: a protracted crisis shaped by occupation and resistance

Palestine represents a distinct and complex humanitarian context. Unlike many crises triggered by sudden shocks, the current emergency unfolds in a context of prolonged military occupation and persistent challenges related to rights, governance, and access to resources. **Within this context, Palestinian survival and social reproduction have long been shaped by the concept of *sumud*—a form of steadfastness that encompasses everyday practices of endurance, attachment to land, and collective persistence in the face of dispossession** (Sayigh, 1979; Tamari, 2009). Decades of occupation, the expansion of settlements in the West Bank, and the prolonged blockade of Gaza have progressively eroded livelihoods, access to services, and fundamental freedoms. As a result, the humanitarian crisis was already unfolding well before October 2023. Indeed, **before that date, around 2.1 million Palestinians across the occupied Palestinian territory required some form of humanitarian assistance, with women accounting for nearly half of those in need** (UN Women, 2025a). The escalation of hostilities and accelerated enforcement of occupation policies since October 2023 did not create vulnerability from scratch; rather, it dramatically intensified an already fragile situation shaped by structural violence, restricted mobility, and chronic underinvestment in civilian infrastructure.

Between October 2023 and October 2025, **an average of two women and girls were killed every hour, amounting to more than 33,000 deaths over the two-year period** (UN Women, 2025b). **Women in Gaza experience particularly acute vulnerabilities, shaped both by the current conflict**

and by long-standing structural gender discrimination, including legal frameworks that place women under the protection and guardianship of men (ibid.). While the escalation has generated a protection crisis for the entire population, risks are especially severe for single women, female heads of household, adolescent girls, women with disabilities, and older women. Overcrowded shelters deprive women and girls of privacy, while restricted access to food and water has devastating consequences, especially for pregnant and lactating women, and young women. Safe and dignified latrine and bathing facilities are often unavailable, and menstrual hygiene is seriously compromised (UN Women, 2025a).

The violence has not been confined to Gaza. Even prior to October 2023, the year was already among the deadliest in the West Bank since the Second Intifada. The destruction of Palestinian infrastructures—including homes, commercial buildings, schools, and health facilities—had reached its highest level in six years (ibid.). **In this context, women and girls face the cumulative effects of a prolonged humanitarian emergency compounded by military occupation, expanding settlement policies, severe restrictions on movement, and persistent economic and political instability.**

At the same time, Palestine constitutes a distinctive humanitarian context because of the central role played by women and WLOs/WROs. **Yet Palestinian women are frequently represented through a narrow and polarised lens, positioned at opposite ends of a spectrum: either as passive victims of violence or as heroic, exceptionalised symbols of resistance.** Such framings overlook how

women's everyday labour—care work, community organising, sustaining households under siege—constitutes a gendered form of *sumud*, grounded less in spectacle than in continuity and survival (Peteet, 1991; Hajjar, 1998).

While both narratives capture elements of lived reality, their dominance obscures the wide range of experiences, roles, and forms of agency that exist in between. Such binary representations flatten complexity and render invisible the everyday practices through which women sustain families, organise communities, and engage politically, often in ways that do not conform to dominant images of victimhood or heroism. **Trying to understand Palestinian women and women-led movements, and, by extension, understand the Palestinian society itself, requires moving beyond these oppositional frames, not only to document gendered harm, but also to recognise how women navigate, negotiate, resist, and reshape crisis conditions within a protracted system of violence and occupation.**

Seen through the lens of *sumud*, these practices are not merely coping mechanisms but politically meaningful acts that sustain social life under conditions designed to fragment it, without implying acceptance of, or adaptation to, oppression (Allen, 2013; Richter-Devroe, 2018). This understanding of *sumud* must not be confused with the romanticised narratives that celebrate women's endurance while overlooking the structural forces that demand it. Women's steadfastness is not a limitless resource, it is a response shaped by constraint, not a condition to be idealised.

WEWORLD'S WORK IN PALESTINE

WeWorld has been present in Palestine since 1992, delivering humanitarian assistance and emergency support to communities in vulnerable conditions across the West Bank and the Gaza Strip. The organisation focuses on lifesaving interventions that address urgent needs across multiple sectors, including WASH, education, protection, health, shelter, livelihoods, food security and the environment. Within these sectors, WeWorld combines hard components, such as infrastructure rehabilitation and construction, with soft components, including service delivery, training and community engagement. All interventions are accompanied by awareness-raising and capacity-building initiatives, enabling communities to manage resources independently, sustainably and effectively. Beyond immediate relief, WeWorld promotes economic and social development by supporting livelihoods and income-generating activities, and by strengthening community resilience in the context of protracted crises.

Since the outbreak of the latest hostilities in the Gaza Strip and the intensified enforcement of occupation policies in the West Bank, WeWorld has expanded its operations to provide targeted assistance where needs are most acute. Interventions are regularly reviewed and adapted to ensure they contribute to longer-term development outcomes alongside emergency response. Across all programming, particular attention is given to the needs of women and girls, who face specific barriers in accessing services, mobility and protection. WeWorld integrates gender-sensitive approaches throughout its work, ensuring that services are safe, accessible and responsive to the lived realities of women and girls across Gaza and the West Bank.

0.3. Purpose of the study and research approach

This study examines the impact that Palestinian women and girls have faced, and continue to endure, as a result of the escalation of hostilities and enforcement of occupation policies since October 2023 in the Gaza Strip and the West Bank. The research is part of *Her Future at Risk: The Cost of Humanitarian Crises on Women and Girls*, a series published by WeWorld, first focusing on Afghanistan in March 2025 – launched at a side event at Conference on the Status of Women (CSW) 69 in New York – and later updated to highlight Ukraine in July 2025 – and presented at a side event at the Ukraine Recovery Conference 2025 in Rome. Drawing on both desk research and field evidence, the study investigates how the ongoing conflict has exacerbated pre-existing gender inequalities and created new vulnerabilities.

The research was structured around a central question: **How has the intensification of violence and enforcement of occupation policies since October 2023 affected Palestinian women and girls?** From this question, four primary objectives were developed:

1. Assess changes in access to fundamental rights and services.
2. Examine consequences on gender-based violence (GBV) in its direct, structural, and indirect forms.
3. Explore implications for women's participation in decision-making at family, community, civic, and political levels.
4. Understand how Palestinian women and girls narrate and represent themselves, moving beyond the dominant binary that casts them solely as victims or as symbols of resistance.



By integrating gender analysis, field data, and consultations with women and WLOs/WROs, the study aims to capture the full spectrum of challenges and opportunities for advancing gender-transformative programming. Its purpose extends beyond addressing

immediate vulnerabilities: it seeks to challenge unequal power relations, strengthen women's agency, and amplify voices and experiences that might otherwise go unheard. While acknowledging certain limitations, the study's findings are intended to inform We-

World's humanitarian action and guide recovery efforts, ensuring interventions are practical, equitable, and just, with women's perspectives central to decision-making.



THE STRUCTURE OF THE REPORT

The report is organised into five chapters, following this introduction:

- **CHAPTER 1: METHODOLOGY** – This chapter describes the mixed-methods approach employed to produce the study. In addition to drawing on secondary data from authoritative sources and programme data from WeWorld and partners, we collected 57 interviews with women from the Gaza Strip, the West Bank, and the diaspora, as well as with WLOs/WROs and WeWorld humanitarian staff.
- **CHAPTER 2: A WOMEN'S LENS ON PALESTINE** – This chapter provides a lens for the rest of the report. It traces the history of women-led movements in Palestine and offers a composite narrative of the evolution of women's roles in society. It also examines the perspectives of Palestinian women-led and women's rights organisations (WLOs/WROs) and explores how women frame their own stories, resisting simplistic portrayals as either solely victims or solely heroic figures.
- **CHAPTER 3: SECTORAL IMPACT OF ESCALATING HOSTILITIES ON WOMEN AND GIRLS** – This chapter analyses the gendered effects of the last two and a half years of intensified violence and enforcement of occu-

pation policies on access to essential services and rights across key sectors: WASH, health, education, livelihoods, food security, and shelter. Each factsheet combines qualitative testimonies with quantitative data, highlighting differences, as well as similarities, between the Gaza Strip and the West Bank. Within each sector, the chapter examines how gender shapes exposure to risks—such as gender-based violence—and opportunities for women's participation, solidarity, and resistance. Short summaries of WeWorld's interventions illustrate practical responses to these gendered challenges.

- **CHAPTER 4: WOMEN HUMANITARIAN WORKERS IN PALESTINE** – Using secondary data from reputable INGOs and CSOs, alongside testimonies from WLOs/WROs and WeWorld staff, this chapter examines the everyday challenges faced by women humanitarian workers, amplifying voices that often go unheard.
- **CHAPTER 5: CONCLUSIONS AND RECOMMENDATIONS** – The final chapter draws on the collected evidence to provide actionable insights for gender-transformative interventions and programming, aiming to inform both immediate humanitarian response and long-term recovery strategies.

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CHAPTER 1.
Methodology

1.1. Research aim and objectives

The aim of this research is to understand the gendered impact of the intensified conflict and escalation of occupation policies since October 2023 on Palestinian women and girls, capturing both the constraints they face and the ways they exercise agency, in order to inform more gender-responsive – and possibly, transformative – humanitarian action and programming.

From this central aim, four main research objectives were defined:

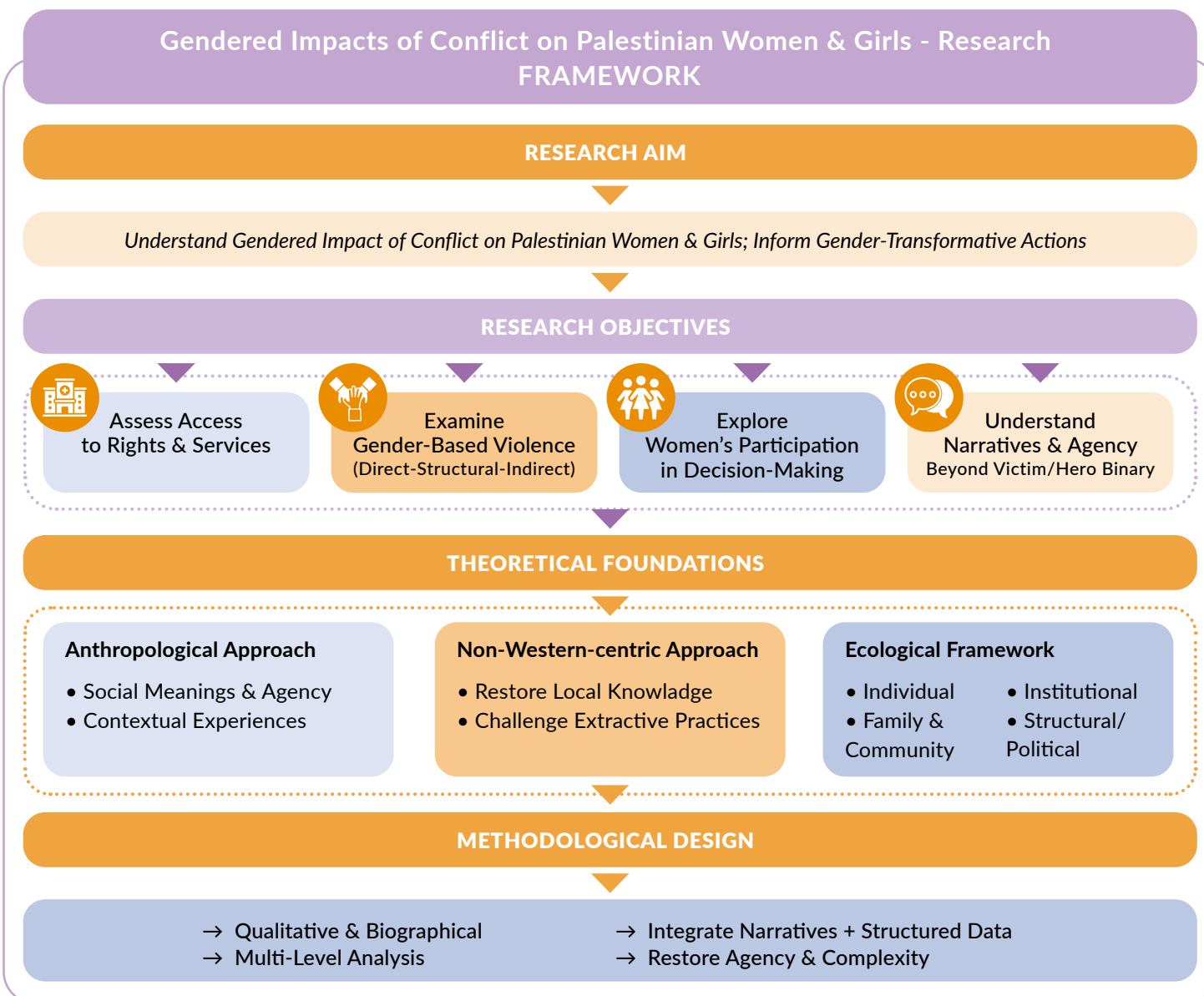
1. **Assess changes in access to fundamental rights and services.**

2. **Examine consequences on gender-based violence (GBV) in its direct, structural, and indirect forms.**

3. **Explore implications for women's participation in decision-making at family, community, civic, and political levels.**

4. **Understand how Palestinian women and girls narrate and represent themselves, moving beyond the dominant binary that casts them solely as victims or as symbols of resistance.**

The study's methodological design was therefore intended not only to collect data but also **to restore agency, plurality, and nuance to participants' experiences.** In line with this approach, the research emphasised integrating a gender perspective across WeWorld's programming and humanitarian response, treating gender-responsiveness as a central dimension rather than a siloed issue, and ensuring interventions are informed by the realities, needs, and aspirations of women and girls in the communities reached.



1.2. Theoretical foundations

THE ANTHROPOLOGICAL APPROACH

The methodological design was informed by an anthropological perspective that values social meanings, everyday practices, ambivalences, and forms of agency emerging in crisis contexts. Literature from the Levant area and conflict anthropology research demonstrate that individual experiences can never be separated from political systems, territorial control, war economies, and community relations. In defining the theoretical framework, we drew upon an anthropological and non-Western-centric orientation, strongly informed by contemporary critical studies on gender, gender-based violence, and geopolitics. In particular, we adopted the analytical perspectives proposed by Abu-Lughod (2007; 2023), Hammami (2023), and Shalhoub-Kevorkian (2009; 2015; 2019; 2023), who have offered a critique of the international discourse on gender-based violence.

Their work emphasises the importance of listening to the voices of women in contexts of conflict and occupation, restoring their agency and historicity. This lens is particularly crucial for understanding women's experiences, as their daily movements, responsibilities, and survival strategies are directly shaped by militarisation, restricted mobility, and care burdens. This theoretical framework aligns closely with the research methodology (qualitative, biographical, situated, and attentive to power, representation, and complexity) and supports the decision to combine structured data, individual narratives, and multi-level analysis, in order to in-

terpret women's experiences not merely as objects of study, but as subjectivities capable of reflection, resistance, adaptation, and transformation.

In the Palestinian context, an anthropological lens is essential, as everyday practices, coping strategies, and gender roles are inseparable from occupation, fragmentation of territory, protracted displacement, and the erosion of civilian infrastructures.

NON-WESTERN-CENTRIC AND NON-ORIENTALIST PERSPECTIVE

This research adopted a non-Western-centric and non-Orientalist analytical approach¹ drawing on scholarship that examines how unequal power relations shape knowledge production and representation (Icaza R., 2017; Finden A., 2023; Pappé, I., Dana, T., & Nasar-Najjab, N., 2024). This approach was applied to avoid reproducing epistemic

¹ This analysis is informed by a critical perspective that examines how historically rooted systems of domination continue to shape contemporary relations of power, knowledge, and inequality. Rather than treating past systems of rule as closed historical episodes, this approach highlights how their legacies persist through political, economic, racialised, and gendered structures, influencing whose knowledge is valued and whose voices are marginalised. Within the aid and development sector, this perspective has contributed to growing critiques of externally driven humanitarian and development models. These critiques point to how international interventions have often prioritised external expertise and universalised frameworks, while overlooking or undervaluing local leadership, contextual knowledge, and lived experience. In response, this approach calls for practices that strengthen local ownership, recognise diverse forms of expertise, and support self-determined priorities (Peace Direct et al., 2021). This perspective has also shaped critical feminist scholarship. Scholars have highlighted how dominant understandings of gender and social organisation have been formed through hierarchical systems that dehumanised certain populations and imposed rigid binaries, with lasting effects on how gender, power, and identity are understood today. In contrast, this body of work emphasises knowledge produced by women and gendered subjects whose experiences have historically been marginalised, including those from Indigenous, Afro-descendant, migrant, rural, and mixed backgrounds (Lugones, 2010). Taken together, these approaches seek to reframe questions of justice by centring lived experience, relational understandings of power, and the coexistence of multiple ways of knowing, while challenging enduring structural inequalities.

injustice² (Brunner, 2021) or interpretive frameworks that marginalise local voices and lived experiences. Contemporary Palestinian scholars (Omran, W., & Yousafzai, S., 2023a and 2023b; Alqasbiya W., 2023; Nashef H. A. M., 2021; Hawari Y., 2019) have highlighted how many international studies reduce Palestinian women to passive subjects or abstract categories ("refugee women", "victims of war"). In response, this research centres locally produced knowledge, treats women as active social and political actors, and situates their experiences within their specific historical and socio-political contexts. In line with such an approach, this research therefore aimed to:

- restore centrality to local knowledge;
- recognise the role of women's organisations as knowledge producers;
- acknowledge power dynamics inherent in data collection;
- avoid extractive research practices often present in humanitarian settings, such as collecting testimonies without ensuring benefit, feedback, or contextual interpretation for participants.

² Epistemic injustice, a concept developed by Miranda Fricker (2007), refers to the forms of inequality and harm that occur specifically in the domain of knowledge—how it is produced, shared, and valued. Emerging from the field of social epistemology, this framework shifts the focus from the isolated individual to the social and structural conditions that shape who is recognised as a credible knower. It highlights how power relations within society affect the distribution and legitimacy of knowledge. These injustices are particularly pronounced for women and for groups whose knowledge systems have been historically stigmatised, especially when they do not conform to dominant Western epistemological frameworks. This is especially true for Indigenous women, whose ways of knowing have been excluded, dismissed, or appropriated through occupation and patriarchal systems. Such epistemic violence is not merely interpersonal but systemic, as Martinez Dy (2020) argues, calling attention to the institutional and structural foundations of such injustices. In response, epistemic resistance—through the affirmation of Indigenous epistemologies, oral traditions, and embodied and relational ways of knowing—emerges as a vital form of decolonial occupation and feminist praxis. It reclaims the authority to name, interpret, and transmit experience, challenging hegemonic narratives and redefining what counts as knowledge and who holds the power to produce it.

THE ECOLOGICAL FRAMEWORK

The analysis employed an ecological framework (Fulu, E., & Miedema, S., 2015), widely used in studies of gender-based violence (Heise, 1998) and increasingly applied to the impacts of armed conflict. This model helped to interpret phenomena across four interconnected levels:

- **Individual:** psychological effects, health, mobility, and personal experiences of violence;
- **Family/Community:** gender norms, care networks, and shifts in social relations;
- **Institutional:** access to services and barriers caused by occupation or collapsed infrastructure;
- **Structural/Political:** occupation regime, militarisation, displacement, siege, and fragmented governance.

Applying the ecological model to a gendered analysis allowed the study to trace how women's vulnerabilities and forms of agency, shift across these interconnected levels. This multi-level approach avoided oversimplified explanations and enabled the integration of micro-level experiences with macro-level dynamics.

Research Governance: The Role and Functioning of the Research Committee

To ensure rigour, coherence, and operational relevance, a Research Committee was established, composed of WeWorld professionals with expertise in field programming, protection and gender, research, strategic analysis, and advocacy. The strong presence of Palestinian women ensured that the research design and interpretation were grounded in lived experience rather than external assumptions. **Among members, more than 60% were Palestinian, ensuring strong local representation and contextual grounding throughout the research. The Committee guided the entire process, from the definition of the concept note to the validation of the final report.** At the outset, members completed a structured form to define priorities, integrate sectoral perspectives, identify information gaps, and contribute to research tool development. This multi-sector participation ensured the research reflected both WeWorld's operational realities and the complexity of community experiences. This participatory governance structure functioned as a practical expression of the study's commitments, ensuring accountability, contextual sensitivity, and collective authorship.

1.3. Data collection and analysis

QUANTITATIVE RESEARCH

The first methodological component involved **systematising existing data from WeWorld programmes and secondary sources.** In practice, this included extracting, cleaning, and standardising available data to ensure comparability across sectors and geographic areas. Sector-specific templates were developed to collect comparable information on:

- Monitoring Evaluation Accountability Learning (MEAL) and system data;
- Information from national partners and other relevant stakeholders;

- Indicators of access to services and structural barriers;
- Operational and programme evidence.

This phase provided a consolidated data base for triangulation³ with qualitative material and additional secondary data from accredited international sources.

³ Triangulation means using different ways to collect and check information to make sure the results are reliable and trustworthy. By looking at the same topic from different angles—such as talking to different people, using different methods, or checking different sources—researchers can identify consistencies and discrepancies, which helps build a more comprehensive and accurate understanding of the phenomenon being studied. This reduces bias and strengthens the overall findings by ensuring they are not reliant on a single method or source alone.

QUALITATIVE RESEARCH

Qualitative research formed the core of the methodological design. **This was essential in the Palestinian context, where numerical indicators alone cannot capture the emotional, social, and political dimensions shaping women's daily realities under occupation and displacement.** Anthropologically grounded tools were employed to capture the complexity of women's and girls' experiences in different conditions and contexts. All tools were administered between December 2025 and January 2026.



MAIN TOOLS & SAMPLING STRATEGY

MAIN TOOLS

- **Biographical Interviews:** Biographical interviews were conducted with diverse groups of women, reflecting the fact that women are not a homogeneous group. The sample included women from the diaspora, older women, adolescent girls, women with disabilities, sole breadwinners, and women working in different professions such as teachers, journalists, and health workers. This approach was particularly relevant in Palestine, where life stories unfold across displacement, siege, mobility restrictions, and intergenerational trauma. **This diversity was essential to ensure that the narratives collected could function as shared stories reflecting broader social realities rather than isolated experiences.** The biographical interview format allowed examination of phenomena over time, capturing life trajectories across transitions, ruptures, and generational shifts, while highlighting how different social positions shape women's experiences. Including women from the diaspora was crucial to understand displacement pathways, cross-border family responsibilities, and how the crisis reverberates through Palestinian communities globally.
- **Interviews with WLOs/WROs:** In-depth semi-structured interviews were conducted with women's and women-led organisations active in Gaza and the West Bank to understand response practices, mobilisation strategies, political visions, and locally grounded conceptualisations of resilience and feminism.
- **Reflective Interviews with WeWorld Staff:** Reflective interviews were carried out with WeWorld staff through an online form, documenting operational risks, challenges, and observations arising from service delivery.

PARTICIPANT SELECTION AND SAMPLING STRATEGY

Participant selection followed a purposive sampling strategy. This method was appropriate given the constraints of conflict settings, where access is limited, risks vary sharply across communities, and women's experiences are highly heterogeneous. Participants were deliberately chosen based on their direct experience and relevance to the research objectives. This approach aimed to gather rich and meaningful data reflecting the diversity and complexity of women's experiences in conflict- and occupation-affected contexts. Selection criteria considered geographic diversity, age, disability status, displacement, and social roles, ensuring heterogeneous perspectives were included. **The sampling plan included a total of 57 interviews:**

- 12 biographical interviews with women in Gaza
- 12 biographical interviews with women in the West Bank
- 5 biographical interviews with women who had left Gaza and were living abroad
- 3 semi-structured interviews with WLOs/WROs in Gaza
- 4 semi-structured interviews with WLOs/WROs in the West Bank
- 21 interviews with WeWorld staff collected through an online survey

For security reasons, specific locations have been removed from this report. Nevertheless, the sampling followed a purposive approach designed to ensure diversity and representativeness across different social contexts and communities, including urban, rural, and marginalised groups such as Bedouin communities. Sample size remained flexible, **guided by thematic saturation, i.e., the point at which additional interviews no longer yielded new insights. All interviews were conducted with strict adherence to do-no-harm principles, ensuring confidentiality, informed consent, and the safety of participants and researchers throughout the process.**

Data analysis proceeded in three stages:

- Analysis of structured and operational data through sectoral summaries and identification of key access barriers;
- Thematic and narrative qualitative analysis, employing combined de-

ductive/inductive coding and a biographical lens that emphasised ambivalence, agency, and emotional experience;

- Integration using the ecological framework, linking micro (individual), meso (family/community), and macro (institutional/political) levels.

The integrated results were presented combining quantitative and qualitative evidence. The Research Committee supervised the drafting process to ensure accuracy, consistency, and validity. **Palestinian members of the Committee played a central role in validating contextual interpretations and ensuring cultural and political accuracy in the analysis.**

1.4. Ethics, Safety, and Data responsibility

This study addresses profoundly sensitive topics. To uphold the dignity, safety, and wellbeing of all participants and enumerators, the research rigorously followed established international ethical frameworks⁴.

At the heart of the ethical approach lies a deep commitment to three fundamental principles:

- **Beneficence:** Ensuring the research delivers real benefits to participants and communities by informing impactful programmes.
- **Non-maleficence:** Minimising risks of physical, emotional, or social harm, including stigma and retraumatisation.
- **Respect for autonomy:** Guaranteeing voluntary participation through clear, culturally sensitive informed consent. Participants were informed about the study's purpose, their rights to refuse questions, and to withdraw without consequences.

Recognising the cultural diversity and complex power dynamics within and between communities, the research design placed great emphasis on respecting cultural sensitivities. Questions were crafted to be culturally appropriate, avoiding harm or discomfort. Interview settings were thoughtfully chosen to guarantee privacy and emotional safety for participants, while also considering the wellbeing of data collectors. This included ensuring that spaces for dialogue were

free from coercion or surveillance by authority figures, and that facilitators were trained to respond compassionately to distress or disclosures of violence. Confidentiality was paramount: data were anonymised, securely stored and transferred in line with General Data Protection Regulation (GDPR) (EU Regulation 2016/67915) standards, and access to raw data was restricted.

Ethics in this study were understood as a situated, relational practice that required ongoing reflexivity and attentiveness to power imbalances, not only between researchers and participants but also within communities themselves. Building trustful, respectful rela-

tionships throughout the research process was essential to fostering genuine dialogue and co-production of knowledge. **Finally, the wellbeing of research teams was addressed through internal procedures for referral and duty of care, ensuring staff were equipped to navigate sensitive research challenges safely and responsibly.** Recognised limitations included unequal territorial access, potential self-censorship in narratives, rapid contextual change, and difficulties reaching highly marginalised groups. Nevertheless, methodological triangulation and the active role of the Research Committee helped mitigate these challenges.

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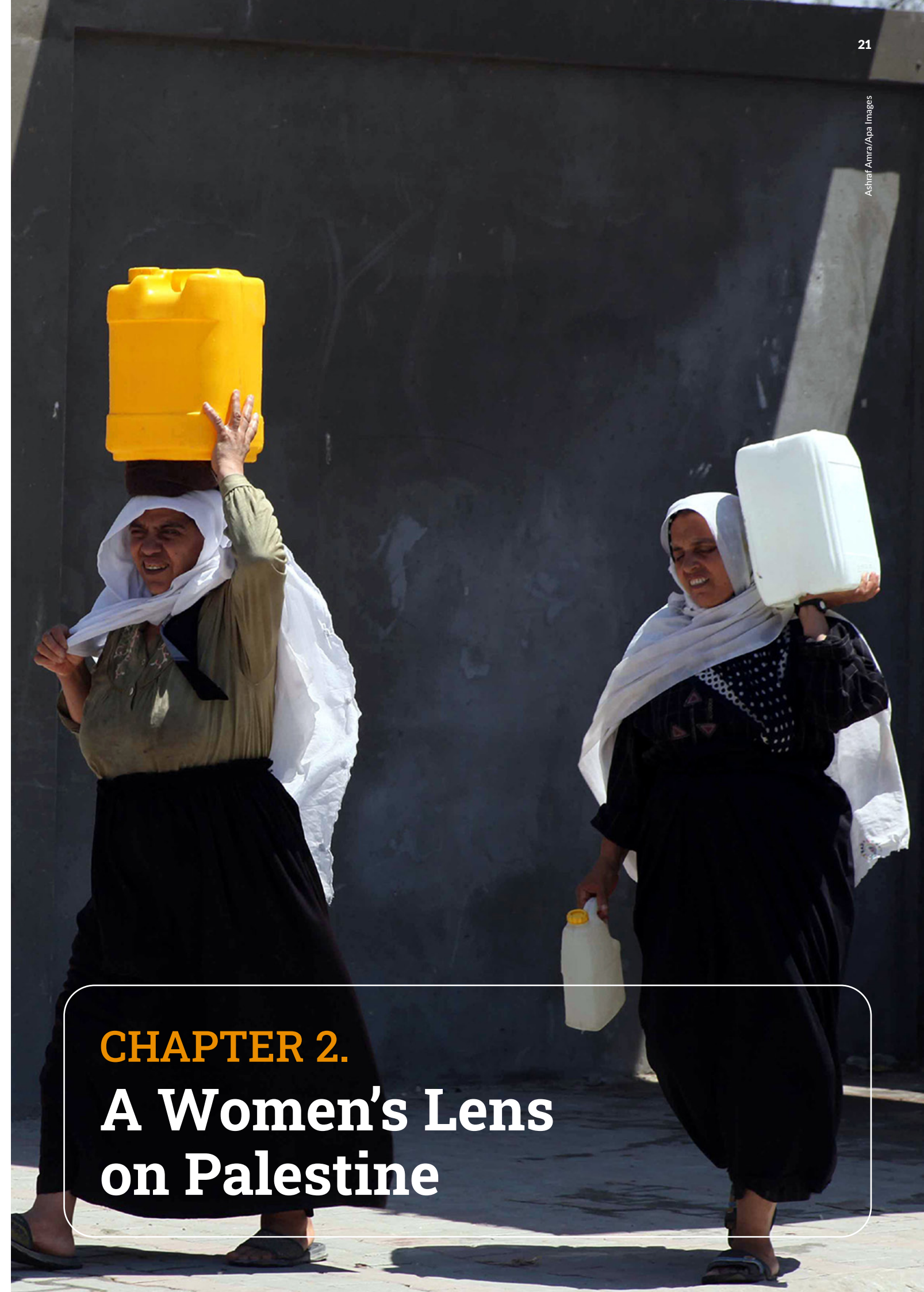
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⁴ Such as the CIOMS International Ethical Guidelines for Health-related Research Involving Humans (2016), the WHO Standards and Operational Guidance for Ethics Review of Health-Related Research with Human Participants (2011), the WHO Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies (2007), and the UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis (2021).



CHAPTER 2.

A Women's Lens on Palestine

NARRATIVES OF LIFE, RESISTANCE, AND AGENCY

This chapter explores the experiences and stories of women, girls, and WLOs/WROs within Palestinian society. Rather than providing a comprehensive overview, it seeks to highlight key dynamics that shape their lives, focusing both on the widespread presence of gender-based violence and sexism, and on the many forms of resistance, agency, and narrative reclaiming they have undertaken over time. **Central to this discussion is the concept of *sumud*, which underpins the everyday strategies through which Palestinian women maintain dignity, sustain their communities, and assert their roles.** The chapter draws on secondary literature alongside direct testimonies from women, girls, and WLOs/WROs working in Gaza and the West Bank. These women and organisations have generously shared their experiences and reflections, often in deeply personal terms. **Their voices allow us to move beyond abstract analysis and to engage with lived realities, demonstrating how knowledge is produced not only in academic spaces but also through everyday practices, activism, and storytelling.** In this sense, women are not merely the subjects of analysis but active narrators of their own histories: women speaking about women, embodying *sumud* through their steadfast engagement in social, cultural, and political life.

The following pages are intended to serve as a lens through which to read the rest of this report, helping to illuminate the social, political, and emotional mechanisms that shape individual and collective responses to the conditions Palestinians have endured for centuries—and continue to endure. These conditions have been dramatically exacerbated by the escalation of violence and the intensified enforcement of occupation policies following October 2023, with particularly severe conse-

quences for women's lives, safety, and autonomy. At the heart of this chapter is a call for a different understanding of Palestinian women and a counter-narrative rooted in situated experience and everyday life. **Too often, Palestinian women are portrayed through rigid and polarised frames: either as passive victims, oppressed by social structures that severely limit women's rights and empowerment, and the effects of prolonged conflict, or as heroic figures of resistance, idealised as moral anchors and social glue. In both cases, women's complexity is reduced and instrumentalised** (Dalla Negra, 2024). This study deliberately resists such simplifications. It foregrounds Palestinian women as individuals with distinct identities, needs, contradictions, and aspirations—not only as victims or heroic mothers, wives, sisters, daughters, or relatives of victims of the occupation, but also as political actors, caregivers, organisers, workers, thinkers, and storytellers in their own right. By centring their voices and experiences, and by highlighting the *sumud* embedded in their daily actions, this chapter argues that Palestinian women have the right to define how they are represented, to tell their own stories, and to determine the roles they wish to occupy in private life, society, and political struggle.

! Disclaimer on Positionality

As stated before, the Research Committee was composed of more than 60% Palestinian members, ensuring strong local insight and contextual understanding. While the writing of this report was carried out primarily by European authors, all content was reviewed and validated by Palestinian committee members. Therefore, it is still important to consider positionality. **Positionality refers to the social, cultural, and political standpoint from which researchers observe, interpret, and represent their subjects. This positionality may influence the framing and interpretation of findings, particularly in efforts to foreground a non-Western-centric lens.** The active involvement and validation by Palestinian members helped mitigate this risk, though it remains an important consideration for readers when interpreting the analyses and conclusions. This awareness is particularly critical in the Palestinian context, where narratives are deeply politicised, and whose stories are often filtered or reframed through external viewpoints.

The chapter concludes with a reflection on Palestinian and Arab masculinities, focusing on the renegotiation and self-narration of gender roles, and on the potential for promoting a gender-transformative approach.

By centring their voices and experiences, and by highlighting the *sumud* embedded in their daily actions, this chapter argues that Palestinian women have the right to define how they are represented, to tell their own stories, and to determine the roles they wish to occupy in private life, society, and political struggle.



Getting to Know Some of the WLOs/WROs⁵ of Palestine

Below is a partial list of WLOs/WROs interviewed for this research. Some participants preferred to remain anonymous. Their reflections are presented either as direct quotes, with full citations to the original source, or integrated into the text as broader analytical commentary.

- **Women's Centre for Legal Aid & Counselling:** Provides legal aid, advocacy, and counselling to support women's rights and to combat gender-based violence in Palestine.
- **Psychosocial Counselling Centre for Women:** Provides mental health and psychosocial support to women, particularly those who have experienced trauma or domestic abuse.
- **Rural Women's Development Society:** Works to empower rural women through skills development, community initiatives, and the improvement of social and economic opportunities.
- **Women's Affairs Centre:** Promotes gender equality and women's rights through advocacy, legal and social support, research, and capacity-building, with a particular focus on empowering women to participate in public life and decision-making and on addressing gender-based violence.
- **Women's Programme Centre Association:** Works in Gaza to promote women's social, economic, and cultural empowerment, providing vocational training, psychosocial support, awareness-raising on women's rights, and community-based initiatives aimed at strengthening women's participation, resilience, and leadership—particularly among marginalised and displaced groups.

⁵ Definitions of women-led and women's rights organisations are drawn from the 2024 IASC Gender Policy. A *Women-Led Organisation (WLO)* is one with a humanitarian mandate and/or mission that is either (1) governed or directed by women, or (2) led principally by women, with 50 per cent or more occupying senior leadership positions. A *Women's Rights Organisation (WRO)* is one that (1) identifies as a women's rights organisation with the primary focus of advancing gender equality, women's empowerment, and human rights; (2) includes the advancement of women's and girls' interests and rights (or uses terms such as "women," "girls," "gender," or local equivalents) in its mission statement; or (3) seeks, through its mission or objectives, to challenge and transform gender inequalities, unequal power relations, and to promote positive social norms. For more information you can refer to UN Women (2025). At a breaking point: The impact of foreign aid cuts on women's organizations in humanitarian crises worldwide. <https://www.unwomen.org/sites/default/files/2025-05/at-a-breaking-point-the-impact-of-foreign-aid-cuts-on-womens-organizations-in-humanitarian-crisis-worldwide-en.pdf> accessed December 2025

Key Insights from Interviews with Women's and WLOs/WROs

Historical and Structural Context

- Women's struggles are defined by a dual oppression: the weight of patriarchal norms intersecting with the realities of military and systemic occupation.
- Palestinian women have a long history of activism, from the 1936 revolution to the Intifadas, yet their visibility and rights have often regressed across political transitions.
- Women's rights and justice movements evolved from grassroots activism to NGO-led frameworks, bringing both professionalisation but also new challenges of donor dependency and fragmentation.

Feminism and Its Contestation

- Feminism is most impactful when it is grounded in the Palestinian context, connecting the empowerment of women with the collective national aspirations.
- Western feminist models are often perceived as partially incompatible or externally imposed, sometimes creating mistrust in some communities.
- Feminist activism is sometimes criticised as symbolic or disconnected from structural transformation, underscoring the need for renewal and deeper community engagement.

Gender Roles and Social Norms

- Patriarchal norms persist despite growing education and labour participation; women's work is often judged through marriageability rather than autonomy.
- Economic dependence is widespread, with limited control over income or property rights.
- Religion is both a source of resilience and a means of social regulation; women's rights advocates work to promote interpretations grounded in justice, dignity and solidarity.

Impact of Intensification of Hostilities and Enforcement of Occupation Policies

- Conflicts increase women's responsibilities without shifting decision-making power ("role inflation without power shift").
- Gender-based violence rises during crises, including sexual extortion and early and forced marriage.
- Psychological suffering is widespread but silenced under social expectations, masking trauma and resilience costs.
- Economic vulnerabilities are exacerbated by systemic attacks on livelihoods.

WLOs/WROs: Strengths and Challenges

- Strengths: Community trust, resilience-focused strategies, adaptability in crises, linking development and emergency response, ability to bridge humanitarian assistance with long-term development.
- Challenges: Funding dependency, restricted access due to mobility and security risks, and reputational pressures from conservative groups or traditional political contexts.

Emerging Themes and Contradictions

- Women's emancipation is often postponed "until after national liberation," though activists argue the two must advance together.
- Resilience is celebrated yet masks profound psychological and physical costs.
- Concerns about generational regression: younger women and men sometimes adopt more conservative views than their predecessors.

Strategic Insights

- Feminisms and women's rights re-visions must be localised and rooted in Palestinian socio-political realities to regain legitimacy.
- Gender justice should be integrated with humanitarian and development efforts.
- Economic empowerment is a key lever for breaking cycles of dependency and violence.
- Mental health support should be mainstreamed, challenging societal expectations.
- Advocacy should be community-centred rather than donor-driven to counter accusations of foreign agendas.

2.1. Being women in Palestine

Palestinian women occupy a distinctive position in the Levant, facing what scholars describe as a "double oppression," where gender-specific barriers intersect with the ongoing constraints and restrictions associated with the military occupation (Jabali et al., 2025). Their experiences are shaped by both patriarchal norms and the ongoing effects of the military occupation, creating overlapping constraints that influence many aspects of their lives, from domestic responsibilities to public and political participation. Despite these challenges, Palestinian women demonstrate notable resilience. They create opportunities for social and political engagement through grassroots organising, digital platforms, and civil society initiatives, asserting both individual and collective voices in pursuit of equality (Jabali et al., 2025; Bajes, 2024). For many of the women interviewed, this struggle is lived not in abstract terms but through the daily negotiation of safety, fear, mobility, and dignity—forms of *sumud* that are rarely recognised in formal political narratives.

Palestinian women's social reality differs from many other Arab contexts. Rising numbers of single women⁶, patterns of early (but not universal) marriage, and limited economic opportunities reflect both cultural norms and the pressures of political instability (Johnson, 2010). The military occupation further shapes women's lives, determining restrictions on basic rights such as freedom of movement, expression, and political participation (Nidatya et al., 2024). These structural constraints intersect with patriarchal norms, producing a dual oppression that has not been addressed yet:

“Women's struggles exist on multiple levels. If we want to create meaningful change, we need a strong foundation. Today, if we review the laws that have been enacted over the past two to four months regarding family and women's rights, we find that there are effectively no formal laws, only presidential decrees. Without a legitimate legislative framework, there are no solid foundations upon which these changes can be built.”
– Woman, representative of a women-led organisation

These compounded challenges position Palestinian women as pillars and agents of societal resilience. Historically, they have supported their families while actively contributing to national aspirations, from providing sustenance to political activists during the British Mandate, to sustaining social cohesion during the Nakba, and participating in uprisings and political organising. (Kawar, 1970; Jabali et al., 2025). At the same time, Palestinian women often face societal misconceptions when exercising agency outside traditional roles or engaging in rights-based and women-led activism. This tension between societal resistance and active engagement shapes much of their lived experience. Their struggle encompasses not only gender equality but also a culturally grounded and politically aware form of feminism that is inseparable from the broader struggle for national liberation. **As many activists note, women's rights and national aspirations are mutually reinforcing rather than sequential demands; advancing one requires advancing the other.**

Their experiences are shaped by both patriarchal norms and the ongoing effects of the military occupation, creating overlapping constraints that influence many aspects of their lives, from domestic responsibilities to public and political participation.

⁶ This category includes unmarried women, widows, and women heading households, groups whose vulnerabilities have grown as economic and political instability deepens.

2.2. Historical development of the Palestinian women's movement

The Palestinian women's movement has deep roots, tracing back to the early 20th century, and has been actively involved in the broader national movement. Activism initially emerged in elite circles, with women from prominent families engaging in charitable and social welfare work during the British Mandate (Bracco, 2019). Yet even these early efforts contained seeds of resistance: **during the 1936 Great Revolt, women provided food and medical assistance to besieged villages, transforming charity into a politicised act of solidarity against occupation policies** (Nazzal et al., 2023). Women also played a critical role during the Nakba of 1948, sustaining family structures amid displacement and upheaval (ibid.). These early roles were not only practical responses to crisis but also quiet political acts that laid the foundation for later feminist consciousness and collective mobilisation.

The formation of the **General Union of Palestinian Women** (GUPW) in 1965 marked a turning point, institutionalising women's activism within the Palestine Liberation Organisation (PLO) (McCarthy, 2002). **Twelve women were invited as delegates to the first Palestinian national assembly in East Jerusalem, establishing a platform that combined national and gender justice objectives.** The GUPW bridged social welfare, political engagement, and women's rights, setting the foundation for organised activism that extended into the diaspora. By the 1970s, new forms of organising emerged through the **Women's Work Committees**, particularly in the West Bank. The first Federation of Women's Work Committees in 1978 brought together village women, promoting cooperatives in food processing and agricul-

ture while fostering political discussions that naturally evolved into dialogue about women's rights and empowerment (Holt, 1970; McCarthy, 2002). **These committees exemplified grassroots activism, creating spaces where**

women could assert agency despite occupation and societal constraints. Testimonies from contemporary activists highlight the evolution and tension of this diversified movement:

“ *Out of respect for all women since 1948, I honour every woman who tried to bring change to society. Yet today, we continue to face a very strong form of masculinity, not simply in terms of male or female, but in the sense of entrenched patriarchy. This patriarchal system has accompanied us throughout history, and in every crisis, it grows stronger.”* – Woman, representative of a women-led organisation

“ *When we first started our work during the Intifada, we faced many difficulties, such as society's lack of acceptance of us and accusations that we were carrying and promoting Western ideas foreign to our culture. We suffered at that time and were even forced to close some of our sites in areas north and south of the West Bank to avoid quarrels, attacks on our sites, or threats to our team. Despite these challenges, we continued to work to provide services that met the needs of the people, not only women, but also families, youth, and children, which eventually led to a tangible impact.”* – Woman, representative of the Rural Women's Development Society

“ *We have certainly endured many challenges and storms. We cannot overlook the meetings and conferences where individuals were publicly confronted, institutions were insulted, and their roles harshly criticised, particularly during discussions on raising the age of marriage, amending laws, or demanding legal reforms. At times, we faced rejection from segments of society, but this opposition, though obstructive, became part of the challenges we had to overcome.”* – Woman, representative of the Women's Affairs Centre

These reflections illustrate how gender equality activism has consistently evolved under pressure—legal, political, social, and military—requiring women to navigate competing expectations and risks. The

1980s and 1990s introduced a shift from grassroots, voluntary activism to NGO-led structures, further boosted by the establishment of the Palestinian Authority in 1994. **While this “NGOisation” brought**

resources and institutional support, it also created dependency, fragmented local engagement, and at times alienated activists from their communities:

“ *The rise of NGOs and the Palestinian Authority represented a step backward for women's rights movements. The discourse shifted from resistance and empowerment to protection and service delivery, reflecting donor priorities rather than local needs. This created mistrust and accusations of opportunism.”* – Woman, representative of the Psychosocial Counselling Centre for Women

“ *International funding and partnerships have played a dual role in the trajectory of the Palestinian women's rights movement, on the one hand, contributing to strengthening its institutional presence and expanding the scope of its intervention, while at the same time imposing constraints on it that have reshaped its human rights agenda. (...) After the establishment of the Palestinian Authority, the women's rights movement turned to organised institutional work, and women's rights and human rights organisations were established aimed at empowering women, legal advocacy, and calling for the amendment of laws and public policies. With the outbreak of repeated crises and wars on the Gaza Strip (...) a large part of the work of these institutions was redirected towards the humanitarian and relief response while maintaining the human rights and advocacy dimension.”* – Woman, representative of the Women's Affairs Centre

Palestinian women have historically navigated the complex tension between nationalism and women's emancipation, often prioritising national aspirations while simultaneously advocating for social and gender equity:

This tension remains central to contemporary women's rights organisations and movements: raising awareness without reforming the surrounding structures can heighten risks, reinforcing why women's rights must be embedded

within broader social and political transformation. Resistance, therefore, has always been multidimensional: anchored in survival, social solidarity, and political struggle. The evolution from elite charitable work to grassroots organising, to institutionalised NGO activism reflects both the adaptability and the ongoing challenges faced by Palestinian women in balancing societal expectations, national struggle, and gender justice aspirations (Nazzal et al., 2023; Jarrad et al., 2024). **It also highlights women's persistent efforts to claim space, voice, and dignity in a landscape shaped by fragmentation, occupation, and shifting political realities.**

“ *The feminist movement made some mistakes caused by a kind of dissociation from society, forgetting that women's issues are also issues of society. Women alone cannot change. When we raise women's awareness of their rights without working to change their surroundings, we are increasing their misery, because awareness without the ability to change becomes an ambush. So, women's issues must be considered as part of a whole, and the issues they suffer from extend to society as a whole.”* – Woman, representative of the Rural Women's Development Society



2.3. Women's roles, rights, and challenges within the Palestinian society

Palestinian women's social, economic, and cultural conditions cannot be understood outside the intersection of occupation, patriarchal norms, and structural inequalities. Within this landscape,

women's *sumud*—expressed through daily survival, caregiving, and community organisation—becomes both a necessity and a political act. **Their marginalisation is not a series of isolated problems but**

a complex web, where gender, political context, social expectations, and economic deprivation intersect, producing compounded burdens.

Women's roles can be understood across four main dimensions: the reproductive, productive, social, and political roles. The reproductive role remains the most dominant. This is a role traditionally and primarily carried by women, encompassing childbirth, childcare, cooking, laundry, and daily household responsibilities. Over the past two years, this role has intensified, particularly under conditions of war and displacement. The productive role, however, remains limited. The proportion of working women is still unsatisfactory, especially when compared to the high levels of education among women. Economic participation has not kept pace with women's educational attainment. Women's social role has been particularly visible and significant during the war. Women played a major role in volunteer work, contributing to the establishment of free educational centres in camps and tents. Some women even taught from within their own tents, ensuring their continued role as mothers and educators and preventing children from being deprived of education. In contrast, women's political role remains very weak. Their representation in official and governmental bodies is limited, as is their participation in decision-making processes, negotiations, division, and reconciliation efforts. As we move into the stage of recovery and reconstruction, there is hope that women's role will be stronger than in previous phases. Women continue to perform all four roles, but in unequal proportions: where the reproductive role has expanded, while the political role has significantly diminished.

- Woman, representative of the Women's Affairs Centre

ECONOMIC MARGINALISATION

Female labour force participation in Palestine remains extremely low, at approximately 15% (Lyrot et al., 2025), reflecting systemic exclusion rather than individual choice. This exclusion is produced through overlapping structural factors: occupation-related restrictions, eco-

nomically precarious, and deeply entrenched gender norms. **Palestinian women's economic activity is largely concentrated in informal and home-based work, which both reproduces traditional gender roles and functions as a strategy of everyday resistance, sustaining households under political and economic constraints** (Althalathini et al., 2023; Al-Dajani et al., 2018; Sabella et al., 2019). In

this context, women's economic participation often becomes what scholars describe as a **"resistance economy,"** an economic practice that sustains life under siege, maintains social cohesion, and resists the political aim of fragmentation and dependency where survival itself is a form of agency, highlighting the limits of liberal notions of empowerment in contexts of structural oppression.

Most women who work end up working in two places: their job outside the home and then their responsibilities at home. For almost all women, coming home does not mean resting; it means immediately starting household chores. Even before the war, and especially during it, as soon as a woman got back to her tent, she would start cleaning, lighting firewood for cooking and baking, washing clothes, and taking care of the family. (...) Some men do help with cooking, childcare, and household chores, but most don't. So, women end up juggling their jobs and their home life while carrying a sense of guilt, because society still thinks it's the man's 'right' to let them work outside. Still, women know the value of work. They see how it gives them independence, helps them feel fulfilled, and allows them to prove themselves, even within a system that often expects them to only take care of reproductive labour." - Woman, representative of the Women's Affairs Centre

Measures associated with the occupation, such as checkpoints, travel restrictions, and permit procedures, create significant challenges for women in moving freely and participating in formal employment (Griffiths et al., 2020). Even women who do not directly cross checkpoints experience indirect effects: men's

extended commutes and precarious employment reshape household dynamics, requiring women to absorb instability while maintaining family responsibilities. Mobility limitations can also affect women's access to protection or employment, as reliance on male relatives or restricted routes reduces their op-

tions. As a result, women's participation in economic activities often adds to their overall workload, layering paid work on top of unpaid domestic and care responsibilities—a pattern that reflects the ongoing tension between social norms and economic necessity.

In most cases, women go to work out of economic necessity for their families. In some instances, employment even serves as a pathway or 'license' for marriage. I wish that, in our society, women would pursue work driven by a conviction in the value of their contributions and their role in economic and social development." - Woman, representative of the Rural Women's Development Society

Here, women's labour is instrumentalised: it is valued primarily for household survival or marital eligibility rather than as a site of autonomy or social recognition. Education, similarly, is frequently framed through patriarchal logics, reinforcing the relational valuation of women's economic and social roles. Such logic can transform even education, which is often understood as a pathway to empowerment, into a tool of social conformity rather than personal autonomy.

Sometimes the most painful aspect is that a woman's chances of getting married increase if she is educated...not because she has the right to learn, or because her education is valued for her personal or intellectual development, but because having a degree makes her more 'eligible' for marriage." - Woman, representative of a women-led organisation

Gendered expectations of unpaid care work persist despite women's engagement in public, political, or economic spheres (Jabali et al., 2025) The com-

bination of ongoing occupation-related measures, conflict, and economic constraints can intensify these burdens, while social expectations and move-

ments that emphasise women's roles in the home often frame economic scarcity as a justification for limiting women's labour outside the household.



I don't believe there has been any real improvement in women's roles. On the contrary, the escalation of war, occupation, injustice, and restrictions has had a direct and harmful impact on women and their social and economic participation. Social media also plays a significant role in reinforcing negative stereotypes, often reducing women's value and contributions to domestic roles alone. This occurs within an unjust economic system that reinforces economic dependency and denies women their full economic rights. These conditions vary from one place to another, but in general, inequality becomes more pronounced the farther we move from urban centres, and it persists even among educated men. Many women themselves have internalised the belief that men are responsible for work outside the home, while women's roles are confined to domestic labour. There is no issue when a woman chooses this role freely and with full consent; the problem arises when this role is imposed rather than chosen. In our current reality, women's wages and economic conditions are particularly poor. At the same time, movements have emerged that call for restricting women's work to the home, arguing that women's participation in the labour market deprives men of job opportunities, an argument that ignores the structural economic inequalities at the root of unemployment.

- Woman, representative of the Women's Centre for Legal Aid & Counselling

Economic marginalisation is especially acute for divorced women, who face intensified stigma and material vulnera-

bility. Access to income can create limited yet meaningful spaces for agency, enabling women to make independent

decisions, pursue education, and reclaim social and economic mobility.



Despite the oppression many of them face, being 'divorced' remains socially unacceptable in many areas and the label is burdened with stigma and negative stereotypes. We believe that providing this group with economic empowerment enables women to make freer and more independent decisions. For example, many divorced women are unable to return to their parents' homes because their families cannot support them or their children. At the same time, they are unable to own or rent housing due to the lack of independent income. By empowering women economically, we have helped them gain a degree of freedom and decision-making power, and we have seen tangible success with several women. There are also cases of young divorced women who were forced to leave school. Through our support, many of them were able to return to education after their divorce and rebuild their lives.

- Woman, representative of the Rural Women's Development Society

Overall, Palestinian women's labour, both paid and unpaid, is central to household survival and social reproduction under occupation. Yet it remains undervalued, feminised, and constrained by political, economic, and social structures. Economic participation often intensifies women's unpaid care burden rather than

alleviating it, highlighting the limitations of labour-market inclusion in the absence of structural transformation, gender-just social norms, and recognition of women's full economic contributions. **Women's labour in Palestine functions simultaneously as a site of survival, a source of constrained agency, and a marker**

of widespread marginalisation: participation is necessary for household and community reproduction, yet the conditions under which it occurs reproduce inequalities and constrain the possibilities for genuine empowerment.

THE ISSUE OF GENDER-BASED VIOLENCE

Gender-based violence (GBV) in Palestine arises from both individual and broader systemic factors, shaped by the intersection of patriarchal norms, the prolonged effects of military occupation, and significant socio-economic pressures. Chronic stress linked to occupation-related constraints, unemployment, displacement, and political instability often manifests within domestic spaces, where women and children are most affected. **GBV cannot be understood solely as interpersonal abuse; it must also be considered in relation to long-standing and intergenerational patterns of vulnerability, particularly for women whose lives are shaped by over-**



There are radical causes in society and compelling reasons that have imposed a certain reality in Palestinian society. Violence, for example, is linked to the violence of the occupation (...), what psychology calls 'projection,' as well as poverty, unemployment, psychological and social pressure, and sometimes fear." - Woman, representative of the Rural Women's Development Society

lapping social, economic, and political constraints. In the Palestinian context, militarisation influences household dynamics and social norms, affecting how bodies, sexuality, and social expectations are regulated and experienced.

This framing situates domestic violence within broader socio-political conditions, highlighting how occupation-induced stress interacts with patriarchal

structures. **Violence is sustained not only by abusive individuals but by systemic constraints that foreclose exit options. Economic dependence, lack of institutional protection, and fears for children's safety mean that care responsibilities and moral obligations often function as mechanisms of containment rather than protection.**



I have endured a great deal of suffering throughout my life. I gave birth to all my children at home because my husband never took me to hospitals or doctors. My life has been full of hardship and responsibility. From the first year of my marriage, I was beaten by my brother-in-law (...) My husband was aware of this but did not intervene, which made the situation worse. I reported the incident to my parents and brothers, which caused further conflict, as my brother tried to hold my brother-in-law accountable and was resisted. I cannot divorce my husband, so I stay with him to care for my children, even though he fights me. I remain because I fear for my daughters and worry about what might happen to them if I were not there." - Woman, Bedouin community, West Bank

In addition to intimate partner violence, culturally sanctioned practices such as early and forced marriage illustrate how gendered social norms are internalised

and perpetuated, often shaping women's sense of value and social legitimacy. Early and forced marriage is not only a personal milestone but also carries sig-

nificance for family honour and community standing. Women may perceive early marriage as a way to assert their identity and meet socially expected roles.



Customs and traditions often say, 'Take them young and raise them,' (...) This culture fosters a desire for early marriage and, unsurprisingly, produces many stories of failed early marriages. Yet, even with these challenges, older women sometimes insist there is something 'successful' in early marriage. I remember asking one woman, 'How long have you been a mother? When did you marry your husband?' She would respond with stories of marrying at sixteen, full of folklore and pride. I would tell her, 'You are too young; this will fail!' Yet when we documented 100 stories of early marriage, all 100 women confirmed that, given the chance to go back in time, they would marry early again. Women are keen to prove themselves, even in circumstances society often views as limiting."

- Woman, representative of the Women's Affairs Centre

Occupation and militarisation intensify these gendered pressures, reinforcing socially prescribed gender roles and shaping how women's bodies are mon-

itored and regulated in both social and political spheres. Concepts of honour and women's purity are often invoked to justify these restrictions, creating con-

straints that operate on multiple levels: externally, through military and administrative measures, and internally, through social norms and expectations.



(...) men are arrested and threatened through references to the 'honour' of their women, as they describe it. (...) In this way, a discriminatory status quo is maintained...one that privileges men at the expense of women. - Woman, representative of the Women's Centre for Legal Aid & Counselling

Forms of GBV experienced in Israeli prisons and in shelters highlight how gendered social norms intersect with broader systemic pressures. Women's vulnerabilities often increase during periods of conflict, displacement, or eco-

nomical hardship, as they take on primary provider and caregiver responsibilities with limited support. Survival imperatives can suppress public acknowledgment of violence, contributing to situations where abuse, exploitation, and

early or forced marriage continue under conditions of necessity.



Many women in these situations have been blackmailed, assaulted, or exploited as a result of need (...) In shelters, some women have been subjected to extortion and exploitation. The marriage of girls has increased in abundance as a way to alleviate financial burdens arising from poverty and displacement. These social problems surface later because, at the moment, the priority is survival. - Woman, representative of the Rural Women's Development Society

Detention and incarceration illustrate the broader social impact of GBV, extending harm beyond individual victims to collective fear, social discipline, and constrained mobility:



There is increased fear related to detention, as well as concern that work permits may be suspended after the war, which would affect many families. Inside [Israeli] detention facilities, there is what is described as a 'black hole,' where there is no access for organisations and no clear oversight. The situation is complex, and the violence experienced is the result of attacks within this context. (...) These acts are not random or isolated, but occur in brutal, degrading ways, (...) sometimes carried out by female soldiers. This reality affects not only the women who are directly subjected to these violations, but also the wider collective consciousness of society. - Woman, representative of the Women's Centre for Legal Aid & Counselling

Collectively, these accounts reveal that GBV in Palestine is structurally produced, sustained by the entanglement of occupation, economic precarity, patriarchal norms, and honour-based control.

Women navigate a complex terrain in which survival, caregiving, and resistance coexist, often at great personal cost. Addressing GBV therefore requires interventions that move beyond legal

remedies, confronting the political and economic systems that make violence pervasive and structurally permissible.

CULTURAL AND RELIGIOUS NORMS AND PSYCHOLOGICAL RESILIENCE

Faith and religion occupy overlapping but distinct roles in Palestinian women's lives, each influencing experiences, social positioning, and psychological resilience. **Faith, understood as a personal and internalised form of belief, provides women with meaning, emotional grounding, and interpretive frameworks that help make sense of hardship.** It allows women to navigate prolonged instability and socio-political uncertainty with a sense of purpose, and endurance, offering comfort that is often independent of communal expectations or institutional authority. **Religion, by contrast, operates as a normative and socially codified system, encompassing rituals, communal practices, and moral frameworks that shape everyday life, regulate behaviour, and can reinforce social hierarchies.** While religion can provide legitimacy, moral authority, and social belonging, certain interpretations may also enforce traditional gender roles and constrain emotional expression. This duality renders religion neither static nor singular; it functions as a dynamic social mechanism that interacts with personal faith, social networks, and broader political realities. **Religious practice in Palestine is inseparable from occupation, collective trauma, loss, community solidarity, and the ongoing need for meaning under persistent insecurity.**

For many Palestinian women, faith provides a source of psychological grounding, offering narratives and practices that allow them to manage fear, grief, and uncertainty. Through faith, women cultivate psychological endurance, drawing on spiritual frameworks that help make sense of hardship even when material stability or political protection is absent.



Perhaps it is by Allah's grace that my strength is rooted in the Quran, my prayers, my daily remembrances, and the wisdom I have gained. These guide me in mastering fearful thoughts, and this is something not everyone can do. - Woman, 33 years old, she left Gaza and now lives abroad



Our spirituality and faith have given us the strength to remain standing and to continue despite everything. Without them, we would have collapsed long ago. In the end, our Islamic faith sustains and motivates us by reminding us that this life is only a passage, and that true victory belongs to those who are patient. Islamic history bears witness to this truth: all those who carried justice and truth, people like us, were driven not by surrender, but by perseverance. Patience was their greatest strength, and it is a virtue that is rewarded above all other deeds. - Woman, 37 years old, she left Gaza and now lives abroad



Personally, the strongest comfort came from my faith, my belief in destiny, good and bad. It gave me internal peace that what we are living is ultimately for good in ways we might not understand yet, and that relief will come. It helped that we were oppressed, not oppressors, that we were weak people subjected to unjust destruction. - Woman, age unspecified, Gaza

Faith in destiny and moral guidance allows women to situate suffering within ethical and spiritual frameworks, providing a sense of coherence and resilience that sustains them in contexts of prolonged instability. It strengthens the inner self and provides interpretive tools for understanding and coping with

hardship. **In contrast, religion interpreted through rigid or authoritarian lenses can discourage reflection, enforce compliance, and limit women's agency.** Such interpretations may present moral frameworks in ways that freeze critical thinking, encouraging people to rely on authority rather than personal reflection:



While religion itself is based on tolerance, acceptance, and deep reflection, it has often been presented in a way that freezes people's minds. Instead of thinking, people rely on 'this was said' or 'that was said' and respond without reflection. - Woman, representative of a women-led organisation

Authoritarian interpretations may legitimise silence, endurance, or submission under the guise of moral obligation. Women activists highlight the distinction between interpretations grounded in compassion and solidarity and those that legitimise control:

“ We worked to establish a safe space for women (...) and it was led by women supporting their families. However, we faced fierce attacks and alarming opposition from extremist religious groups, which severely hindered our work. These groups distort religion as the values and morals they claim to represent are not mandated by religion itself. (...) Ultimately, the centre was forced to close due to the risk of violent attacks that could cause serious harm. (...) The correct understanding of religion based on solidarity, compassion and extending a helping hand is the true religion, but the authoritarian religion, which gives absolute power to man to do what he wants and to blame others, is nonsense, and contradicts the true religion, and there is no religion that legitimises this matter. Religion and representations believe in reason, respect for human dignity, resistance to injustice and intolerance.” – Woman, representative from the Psychosocial Counselling Centre for Women

Therefore, rigid interpretations can transform religion into a tool for policing women's spaces, reinforcing male dominance, and constraining agency, even while faith itself remains a source of psychological support. **Social and religious norms also extend to women's**

emotional lives, particularly in relation to grief. In Palestinian society, caregiving and the management of loss are framed as women's responsibilities. When faced with the killing of family members, women are often expected to seek solace in collective narratives that

frame endurance as a source of social value. **While these narratives provide communal meaning, they also police grief, limiting women's opportunity to process and express sorrow.**

“ Psychological resilience is a very important source of strength for individuals and for society. We place enormous pressure on ourselves. If we look at the mother of a martyr, for example, the songs and words used around her often suppress her real emotions. She may be expected to express pride, but she also needs space to experience her grief, and nothing truly allows her to do both.” – Woman, representative of a women-led organisation

These expectations create a hidden mental-health burden. Emotional suppression becomes a form of unpaid labour that sustains social cohesion while exacting a psychological toll. Women are required to perform strength publicly while privately enduring loss.

Ultimately, faith and religion together constitute an ambivalent system for Palestinian women. Faith provides personal grounding, comfort, and interpretive frameworks that allow women to cope

with hardship and maintain coherence in their experiences. Religion structures the social world, providing belonging, moral authority, and collective coping mechanisms, but it can also reinforce hierarchies, regulate emotional expression, and constrain agency. This duality highlights the ambivalence inherent in faith and religion: they can simultaneously provide psychological comfort and impose social and emotional costs. Women navigate this terrain by reinterpreting faith, resisting authoritarian

norms, and seeking spaces in which grief and strength, can coexist. Recognising this tension is essential to understanding the nuanced ways in which faith and religion shape coping strategies, emotional endurance, and social positioning under conditions of prolonged occupation and socio-political marginalisation.

POLITICAL PARTICIPATION AND DECISION-MAKING

Palestinian women have historically played central roles in political struggles, yet formal political participation has long been constrained by occupation, gendered norms, and institutional structures. Their activism has consistently emerged from necessity rather than choice:



“ Historically, the more severe the political and economic challenges, the greater the role women are forced to assume, and often it is not a choice. Palestinian women, like the Palestinian people as a whole, have rarely experienced freedom. From the era of the Ottoman Empire to the Mandate and ongoing occupation, they have faced persistent social and political struggles, carrying burdens and paying a high price throughout history.” – Woman, representative of the Rural Women's Development Society

“ Throughout all stages of Palestinian history, women have been an integral part of the general struggle and an essential part of the resistance to occupation. In all sectors of life, women are present and active: in education, in health, in agriculture, and in every other sector. All of this is part of women's struggle for their rights, and this struggle represents the sumud of society itself. Even the woman who remains inside the home is a working woman.” – Woman, representative of the Women's Affairs Centre

Women have participated not only as supporters but as central actors in national movements. **Yet despite this extensive engagement, formal political structures have often sidelined them.** The establishment of the Palestinian Authority's brought formal structures and quotas, it also coincided with persistent

and deep-rooted underrepresentation of women in the core political elite. Women are largely excluded from the most powerful decision-making bodies, and gains in numbers often remain symbolic rather than reflective of genuine influence (Jabali et al., 2025). Contemporary statistics illustrate this persistent gender

gap: the PLO Executive Committee has no female members, the Central Council shows 23.1% women, and the Palestinian National Council has 17.4% female representation, with only one woman serving as governor out of sixteen (Jabali et al., 2025).

“ The reason women are often prevented from reaching positions of responsibility or leadership, such as in government, is not a lack of ability, but the existing social reality. This includes systems that prioritise men's needs in many areas, as well as prevailing ways of thinking within the judiciary and the legal system in general. This reality is reinforced by the patriarchal system, which gives preference and priority to men.” – Woman, representative of the Women's Centre for Legal Aid & Counselling

“ Throughout our history, Palestinian women hoped that the establishment of a Palestinian entity would bring justice and equality, but that hope was not fulfilled. Even after the creation of the Palestinian Authority, women were largely absent from key decision-making bodies; for example, the technical teams involved in the Oslo peace talks included no women. It took a long series of struggles before women were finally granted a quota in the elections, marking an important, though hard-won, step toward representation. (...) Many women are placed in positions as symbolic figures or for appearance’s sake, rather than as decision-makers. This is deeply painful. From this perspective, I sometimes feel that we, as women, are deceiving ourselves. We know that a woman may be placed in a certain position and presented in the media, but the real question is: does she have the authority to make decisions?” - Woman, representative of the Rural Women’s Development Society

International frameworks, such as UN Security Council Resolution 1325 on Women, Peace, and Security, provide aspirational models for participation, yet activists remain cautious about their practical impact:

“ We produce reports and hold discussions around these commitments, but the critical question remains: is any of this reflected in real change?” - Woman, representative of a women-led organisation

Faced with limited formal space, Palestinian women have developed alternative modes of political engagement. Grassroots organisations, youth movements, and digital campaigns have created avenues for influence beyond institutional constraints (Jabali et al., 2025). As one activist recalled the early days of village-based women’s clubs:

“ Over time, our women’s clubs became highly respected, trusted, and appreciated in their areas. For example, in one village, the village council⁷ gifted us a piece of land to build a women’s club. In another, the municipality offered us a space on the roof of its building to establish a headquarters for the women’s club. All of this is the result of accumulated effort, trust-building, and ensuring that our discourse aligns with society, its values, and its needs, while refraining from interference in religion or politics and maintaining our progressive ideology.” - Woman, representative of the Rural Women’s Development Society

⁷ Village councils are local administrative bodies in Palestinian rural areas that manage basic services and act as intermediaries between communities and higher levels of governance.

This highlights an essential principle of Palestinian women’s political engagement: legitimacy and trust must be grounded in local context. Movements disconnected from community realities often face rejection:

“ The feminist movement has successes and failures. One of the biggest challenges we face is that we have not been able to reach the large women base as 51% of society is composed of women. If we do not reach them and work with them and for them, the situation will not change. We cannot be disconnected from society; we must gain their trust.” - Woman, representative of the Rural Women’s Development Society

Contemporary crises continually reshape women’s engagement. Following October 2023, the urgent need for humanitarian assistance in Gaza temporarily shifted priorities from political campaigns to survival strategies, illustrating how emergency contexts modulate participation modalities (for more information see “Chapter 4. Women Humanitarian Workers in Palestine”).

“ The deepening of occupation policies and injustice fuels a conservative tide that views women’s emergent role and participation in public life as the reason for the existence of occupation. There is a lot of writing that frames defeat and decline as resulting from women’s freedom and public presence, placing the blame on women. It is, therefore, unsurprising that, as occupation intensifies its tactics, there is a corresponding retreat in women’s participation and in their rights.” - Woman, representative of the Women’s Centre for Legal Aid & Counselling

Palestinian women’s political participation is, thus, a story of resilience amid structural barriers. While formal representation remains limited, women

have creatively carved spaces for influence at local, national, diaspora, and digital levels. Their engagement is inseparable from the intertwined struggles

against occupation and entrenched gender norms, underscoring the enduring principle that political and social liberation are mutually reinforcing.

2.4. Daily practices of resistance and activism

Palestinian women’s activism is both multifaceted and deeply rooted in the society’s long-standing culture of endurance, grounded in the principle of *sumud*, which is not limited to acts of protest or political mobilisation, but

woven into the everyday life, narratives, and survival strategies of Palestinians, shaping the roles and expectations of women across generations. *Sumud* infuses these practices, linking individual and collective endurance to

broader socio-political struggles. It is a collective and historical practice that encompasses both national aspirations and social justice, reflecting the intertwined nature of resilience as resistance.

“ Palestinian women are not only the ‘sister of the martyr’ or the ‘wife of the prisoner’; they themselves are at the heart of the event.” - Woman, representative of the Rural Women’s Development Society

“ Resistance is present in daily life: surviving, educating children, maintaining dignity, and asserting autonomy within families and communities. These acts, though less visible than political protests, are fundamental to societal resilience.” - Woman, representative of the Psychosocial Counselling Centre for Women

Resistance is central to Palestinian identity. From the Nakba of 1948 to contemporary struggles under occupation and intensification of violence, **Palestinian society has developed a social and**

cultural fabric that treats resilience as an essential survival mechanism. Families, communities, and institutions have historically organised to sustain social cohesion despite displacement and sys-

temic oppression. As seen before, within this framework, women are often at the forefront, carrying out roles that combine physical, social, emotional, and intellectual forms of resistance.

“A woman’s abilities are honed through the oppression she experiences. These skills allow her to manage multiple tasks effectively. Oppression creates tools that are similar in concept to resistance against occupation.” - Woman, representative of a women-led organisation

Resistance is both ordinary and extraordinary, integrated into daily routines and choices while simultaneously contributing to national and women’s rights struggles. It is contextual, relational, and adaptive, often balancing external pressures from occupation with internal pressures from gendered

norms. As seen before, historically, women’s resistance began with direct support for national struggles. Contemporary resistance, of multiple layers of oppression, extends to economic domains, particularly through entrepreneurship and digital work. Many women operate home-based businesses in

sectors like embroidery, cosmetics, and food preparation, navigating restrictions imposed by occupation while contributing to family survival (Althalathini et al., 2023; Al-Dajani et al., 2018; Sabella et al., 2019). One activist explained:

“Digital technologies and entrepreneurship have become tools of resistance. They allow women to sustain their families, assert independence, and challenge both economic marginalisation and social constraints.” - Woman, representative of the Psychosocial Counselling Centre for Women



Resistance also involves legal and advocacy efforts. Women confront barriers ranging from underrepresentation in decision-making to violence and societal stigma.

“We are also working to raise awareness among women about international conventions that protect women and civilians during conflicts, as well as international humanitarian law. Our efforts operate on multiple levels to empower Palestinian women and strengthen their resilience. For example, we have sent a message to the United Nations on behalf of Palestinian rural women, highlighting the escalating settler violence. Our work must function on two levels: first, providing women with psychological, social, and economic support during emergencies; and second, advocating on their behalf at the highest levels, ensuring their voices are heard and documenting the various forms of repression they face.” - Woman, representative of the Rural Women’s Development Society

Grassroots organisations build credibility through long-term engagement with communities, emphasising service provision aligned with local needs rather than external agendas:

“There is a disparity between reactions to feminist institutions. Some groups try to sabotage our work, but families and women support us. Everything new is resisted, but we approach people with dialogue, and we don’t impose things on them.” - Woman, representative of the Psychosocial Counselling Centre for Women

Cultural resistance is equally central. Palestinian women reclaim creative spaces to challenge male dominance in storytelling, using diaries, autobiographies, and literary work to document experiences under occupation and **traditional gendered norms** (Jarrad, 2020). These narratives reinforce both feminist consciousness and national identity, showing how personal experience

intersects with collective struggles. **The occupation imposes a gendered dimension on oppression: women’s bodies are frequently politicised, and threats of violence limit mobility and public engagement** (Kayali, 2024). Yet women continue to work as “shock absorbers” for their communities, sustaining resilience while taking on expanded economic and caregiving roles, often

without increased decision-making authority (ibid.).

As mentioned in previous sections, **resistance can also be psychological.** Activists emphasise the importance of acknowledging emotional trauma rather than suppressing it under the burden of societal expectations:

“There are fear, pain, and anxiety, but we rarely speak of it. Acknowledging psychological suffering strengthens us rather than weakening us. Mothers of martyrs need space to grieve while navigating societal expectations (...).” - Woman, representative a women-led organisation

Resistance intersects with daily life and social structures. Women develop strategies to navigate domestic and community responsibilities, alongside the external pressures of military and administrative occupation. Skills honed through household labour—managing multiple responsibilities and mediating conflict—

function as tools of resistance, enabling women to sustain both families and communities. Rooted in *sumud*, these practices demonstrate persistence, endurance, and attachment to place, which are essential to both individual and collective survival. In Palestinian society, resistance is both collective and indi-

vidual, overt and subtle, immediate and long-term. For women, it encompasses political engagement, economic survival, cultural production, and psychological resilience, and is inseparable from the broader national struggle.



Feminism(s) in Palestine

Feminism – or feminisms⁸ – in Palestine is deeply shaped by the intertwined realities of occupation, male-dominance, and social conservatism. Women's engagement with feminism varies: some reject the label as foreign, others redefine it, and some adopt it strategically. Yet across these differences, there is a shared conviction that women's liberation cannot be separated from national liberation.

⁸ In Arabic, the term *niswi/niswiyya* is used ambiguously; while it may denote feminist thought or activism, it is also commonly employed to describe women-related initiatives or women's rights movements without an explicit feminist ideological positioning, particularly in the Palestinian context.

“*Liberation of women and liberation of Palestine must move together.*” – Woman, representative of a women-led organisation

FEMINISM IN EVERYDAY LIFE AND CRISIS

As previously indicated, Palestinian women navigate a complex landscape of challenges that shape both daily life and gender equality practice. Recurrent crises have reshaped gender roles, placing women in leadership and responsibility out of necessity rather than choice.

“*At every stage, the women's rights movement has played an important role, but during the war of extermination, the challenges were the greatest. Traditional gender roles were often set aside, as priorities shifted toward urgent needs (...) women's leadership and adaptability became essential, allowing them to meet critical challenges while promoting empowerment.*” – Woman, representative of a women-led organisation

Women-led institutions are widely recognised for their practical impact. They provide women with support, legitimacy, and access to services, even when broader society neglects women's issues:

“*At a time when many people do not pay attention to women's issues and concerns, women's rights institutions stand out for their attention to even the smallest details... If you ask women who have received services or support, institutions working on women's affairs will be at the forefront. This means that women have a door to knock on, and that door is a women's rights institution.*” – Woman, representative of the Women's Affairs Centre

PUBLIC PERCEPTIONS AND MISUNDERSTANDINGS

Despite their fundamental contributions, feminism in Palestine is often misunderstood. It is frequently perceived as a threat to morality or social norms, a perception reinforced by political rhetoric and social conservatism:

“*When it came specifically to feminism, the concept was often understood as women being against men, or as women stepping outside societal laws and norms. There was strong hostility toward the terminology itself... Most of the attacks come from places where there is no culture, knowledge, or clear reference.*” – Woman, representative of a women-led organisation

“*Much of what is said about feminist institutions is misleading, often driven by rhetoric rather than evidence. A frequent claim is that feminist organisations aim to dismantle or destroy the family. In truth, our focus is on reform and positive social engagement.*” – Woman, representative of the Women's Centre for Legal Aid & Counselling

INSTITUTIONAL CHALLENGES AND NEGOTIATION

Leading women's rights organisations requires navigating patriarchal expectations, maintaining credibility, and balancing donor pressures. Women often face scrutiny when foreign funding intersects with local politics, requiring careful negotiation to preserve trust and legitimacy:

“*Very few institutions in the Gaza Strip are led by women, and these institutions existed after suffering in a patriarchal society. The woman who leads an organisation must be strong because this is a reality that we live in a patriarchal society, even from women... women have knowledge of what women need.*” – Woman, representative of a women-led organisation



Many of these institutions receive funding from Western countries, which naturally raises the question: if European states fund these organisations while also supporting Israel, how credible are these institutions? This is a logical concern and explains why people question their work.” – Woman, representative of the Women’s Centre for Legal Aid & Counselling

SITUATED AND COMMUNITY-ROOTED FEMINISM

Palestinian women emphasise that feminism must emerge from local realities. It is inseparable from daily survival, caregiving, community support, and broader political struggles. Some women shape their understanding of feminism by drawing on their social and cultural context, their connections with local communities, and narratives that emphasise the specificity of the Palestinian feminist experience.:



The Palestinian women’s rights movement draws its continuity from a combination of strengths that reinforce each other. It maintains an organic connection to the local community, grounding its programmes in the real needs of women rather than abstract theoretical models. Its resilience and adaptability allow it to respond to crises and rapid political and social changes, while its historical roots provide social legitimacy and a wealth of accumulated experience. By integrating both humanitarian and human rights approaches, the movement is able to respond immediately to urgent needs without losing sight of long-term goals for change. Strong solidarity networks and alliances, both local and international, expand its capacity for influence and advocacy, while community-based women leadership, deeply attuned to the realities of women’s lives, builds trust with the people it serves. Together, these strengths form a solid foundation that enables the Palestinian women rights movement to endure and continue its work despite the intensity of ongoing crises and the multiplicity of challenges it faces.” – Woman, representative of the Women’s Affairs Centre



I don’t think the Palestinian women’s rights movement should simply follow other feminist movements... We can develop a Palestinian feminist theory specifically for Palestinian women, one that women around the world could learn from. We have all the tools to write about ourselves as Palestinian women, without needing to transfer or replicate experiences from elsewhere.” – Woman, representative of a women-led organisation

Across the interviews, a differentiated understanding of the impact of faith and its interpretations also emerged, suggesting that it can guide support provided to women, and inform approaches within women’s movements to ensure aligning with the Palestinian context and provide more tailored and appropriate supportive mechanisms to women. Feminist practice reflects the coexistence of multiple realities: urban and rural women face different challenges, generational experiences of activism differ, where, sometimes opposing approaches operate alongside one another. Despite these differences, women emphasise shared goals:



A change is urgently needed, a new movement, a new spirit, but the question remains: how will it happen, and who will lead it? I do not know the answer, but one thing is certain: this change must take place... every change must come from within society, and the specificity of the Palestinian society has no parallel around the world.” – Woman, representative of a women-led organisation

NARRATIVE AND KNOWLEDGE PRODUCTION

Producing narratives and knowledge is central to Palestinian feminism. Women claim spaces of agency, assert control over representation, and integrate context-informed perspectives, daily survival, and formal activism. **These acts of storytelling and knowledge-making also function as resistance to epistemic injustice, challenging the erasure, misrepresentation, or marginalisation of Palestinian women’s experiences in dominant discourses.** Because Palestinian feminism is **deeply embedded in social life**, it holds transformative potential: by grounding resistance in the fabric of communities, women unsettle and challenge **all form of occupation and oppression, linking struggles for gender justice with national progress and social transformation.**



Part of our united struggle as women is to dismantle the structures of oppression and increase the production of knowledge that is relevant to our context instead of using foreign examples. Of course, we learn from the experiences of others, but we have to have an identity and respect for our context.” – Woman, representative of the Psychosocial Counselling Centre for Women



Women’s rights organisations address society’s expectations of women’s roles through a realistic and gradual approach grounded in a deep understanding of the social and cultural context. Rather than confronting these norms directly, they seek to work from within them. These organisations do not view women as separate from society, but as part of a broader social fabric shaped by long-standing traditions and norms, particularly in times of crisis and war. Their interventions therefore prioritise the protection of women and the support of their traditional roles, recognising them as essential to the survival of families and communities. (...) At the same time, women’s rights organisations work to redefine these roles: not as marginal or secondary, but as forms of struggle and sources of value (...) Thus, women’s rights organisations adopt a strategy of “empowerment from within social reality,” empowering women without isolating them from their communities or directly clashing with cultural structures. Instead, they build on women’s existing roles, strengthening them by grounding these roles in both humanitarian and human rights dimensions.” – Woman, representative of the Women’s Affairs Centre



Voices of Women on Being Palestinian Women

Palestinian women speak about their lives in practical, grounded terms, emphasising responsibility, endurance, relationships with other women, and the desire to live with dignity. Their narratives situate personal experience within broader histories of struggle and collective action, showing how women understand themselves in relation to families, communities, and political realities.

SOLIDARITY AND MUTUAL SUPPORT

Solidarity emerges as a central pillar of women's identity. Women-led organisations are valued not for formal authority but for their ability to understand local needs, reach vulnerable families, and foster trust within communities.

“Women, wherever they are, show solidarity with one another. They have the ability to organise, coordinate, and drive change through struggle. Women have always aspired to the best and sought their rights, dating back to the time of the Prophet. Every era has seen some form of feminist struggle; it is a constant, as enduring as women themselves.” – Woman, Women's Centre for Legal Aid & Counselling

“Women are best positioned to understand and assess their own needs. They are the ones who decide what they want, when, and how. Women's leadership is a voice that truly represents women—allowing them to speak for themselves. Women have the unique ability to reach other women, including those being abused, as well as every home and family. This enables them to build bridges of trust, making it far easier to support and engage with vulnerable families effectively.” – Woman, representative of Women's Programme Centre Association

Support among women is often informal, embedded in daily interactions and mutual care. These networks sustain both individuals and families, providing emotional and practical reinforcement.

“Whenever a woman from the neighbourhood needs something or seeks support, she turns to me, and that fills me with pride. It gives me hope and reinforces my strength, because knowing that people place their trust and hopes in my presence makes me feel capable and resilient.” – Woman, 47 years old, West Bank

In marginalised areas, shared exhaustion and invisibility highlight the isolation produced by systemic neglect.

“What I want to convey to the world about the situation of women in our community is that we all live the same suffering. I have three sisters-in-law, and they all feel exhausted and extinguished inside. If you were to sit with any one of them and ask her about her life, you would hear the same story, the same pain, and the same struggles that I am describing.” – Woman, 54 years old, West Bank

ENDURANCE AND RESILIENCE

Endurance is frequently framed as a necessity learned through experience rather than a voluntary trait. Conflict, displacement, and social expectations have taught women to withstand adversity while remaining active within their families and communities.

“We, the women of Gaza, are not supernatural beings. We have to endure all these experiences, we have to get hurt, but we have learned very well how to hold out and stand tall until the end. These two years have not defeated us; they have made us stronger, more resilient, and determined to reach the life we deserve.” – Woman, 33 years old, Gaza

For many, strength is inseparable from responsibility and loss. Widows, heads of households, and primary breadwinners describe resilience as emerging directly from necessity.

“Strength grows from my weakness. The more life tries to break me and treats me as if I were an easy target, the stronger I become.” – Woman, age unspecified, Gaza

HUMANITY, VULNERABILITY, AND SHARED EXPERIENCE

Across Gaza and the West Bank, women describe themselves first as ordinary people, with aspirations and vulnerabilities akin to women elsewhere. They long for stability, comfort, and moments of safety amid ongoing uncertainty.

“We are human beings. We are energy. We are women, just like the rest of the world. We want a decent life. We long for comfortable days, days when we can simply live with ourselves. Days that give us a chance to build a family and a life that makes us feel safe and at ease, even if only for a few moments.” – Girl, 17 years old, Gaza

Women resist portrayals that cast them as invulnerable or exceptional:

“*Women in Gaza are not legends, and we are not made of iron or steel. We are hearts, full of feelings, and we cry. Loss overwhelms us and pain touches us deeply.*” – Woman, age unspecified, Gaza

Women who have left Gaza similarly emphasise commonality and dignity:

“*Palestinian women are just women. Some of them are career women, others are mothers. They love life and they face the struggles other women around the world face. They fight for their rights and dignity.*” – Woman, 39 years old, she left Gaza and now lives abroad

“*My message is that we, Palestinian women, are like any women in the world. We are not superheroes as they say. We are women with feelings, emotions, and pain.*” – Woman, age unspecified, she left Gaza and now lives abroad

PRIDE, HOPE, AND THE PURSUIT OF DIGNITY

Alongside fatigue and frustration, pride and hope are recurrent themes. Women express determination to endure, resist, and inspire future generations.

“*The daughter of Palestine is the strongest girl, and she will not be defeated, no matter how great the challenges around her. I wish that women everywhere could be like us: strong, hopeful, and full of high morale.*” – Woman, 37 years old, she left Gaza and now lives abroad

Dignity emerges as a central concern, encompassing recognition of women's humanity and agency.

“*We are women, we are mothers, we are bodies and souls. We have hearts that feel sadness and joy. We love life and rejoice even in the simplest things. You must understand that we need dignity.*” – Woman, age unspecified, Gaza

Ultimately, Palestinian women see themselves and each other as individuals carrying responsibility, managing loss, supporting others, and seeking stability and recognition. Their experiences are shaped by geography, age, social position, and the histories of dispossession and conflict, yet they are united by shared endurance and solidarity. By speaking in their own words, women assert perspectives often absent from formal political or institutional narratives, offering insight into the daily realities of life under occupation and the persistent exercise of agency within constrained circumstances.

2.5. Masculinity under occupation. Understanding gender roles' transformation at times of systemic violence

This contribution was written by Marta Tarantino⁹

INTRODUCTION: WHY MASCULINITY NOW AND WHY IT MATTERS

Since the second half of the 20th century onward, gender-focused study and research, both in academic and humanitarian contexts, have rightly emphasised the experiences, vulnerabilities, and agency opportunities of women and girls, both in peaceful and conflict settings, from the Global South and especially in the SWANA (South West Asia and North Africa) region. **Yet gender equality does not operate in silos and cannot be understood as a static subject. As a relational system, it is structured through social expectations, institutional organisation, and power hierarchies that involve women and men together, with a constant production and reproduction of structures and power dynamics that vary according to specific socio-economic and cultural conditions** (Connell, 1987; Messerschmidt, 2018).

Under normal, peaceful circumstances—and even more in crisis contexts marked by military occupation, physical and psychological violence, and recurring humanitarian hazards—the questions of men's engagement and women's rights emerge as intrinsically linked and interdependent. **Accordingly, any gen-**

der-transformative approach to analysing women's rights, agency, and participation in social justice processes cannot occur in a vacuum but must critically engage with men and masculinities' role in society. Contrary to common perceptions, this is not about shifting attention from women or flattening the conversation on gender-based inequalities and violence against women and girls (VAWG). Rather, it is about holistically considering how men's expectations, vulnerabilities, desires, and physical or psychological burdens are produced and reproduced, both in peaceful settings and under conditions of occupation and prolonged humanitarian crisis (Moser and Clark, 2001). Such a shift is increasingly necessary to show how specific conditions of loss, deprivation, and violence affect both men's and women's lives across livelihoods, physical and mental health, education, and social participation.

Since October 2023, the escalation of violence and the worsening of the humanitarian situation in the occupied Palestinian territory have intensified the material and emotional burden on individuals, families, and whole communities, both in Palestine and in diaspora. Men and the male social role they embody and perform have long been reshaped through perpetual conditions of violent displacement, loss of income, injury and death, administrative de-

This perspective allows understanding men and masculinities in their entirety, moving beyond simplistic or reductive Western-Orientalist views. More importantly, the potential of a gender-transformative approach lies in avoiding both stigmatisation and romanticisation, letting continuity and change in gender dynamics under conflict or occupation emerge.

tion, and the erosion of basic social services. These transformations burden men's lives and mental health, and also affect women, particularly in access to resources, care burdens, exposure to gender-based violence, and the capacity to exercise agency.

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Understanding the correlation between women's and men's realities, starting from the paradigmatic case of Palestine, is essential to a nuanced approach in analysing gendered experiences for humanitarian programming. This perspective allows understanding men and masculinities in their entirety, moving beyond simplistic or reductive Western-Orientalist views. More importantly, the potential of a gender-transformative approach lies in avoiding both stigmatisation and romanticisation, letting continuity and change in gender dynamics under conflict or occupation emerge.

MASCULINITY AS RELATIONAL: EMERGING TENSIONS AND POSSIBLE CHANGES

The gendered subjects of men and masculinities are plural, relational, and historically situated. **Masculinity is not a fixed identity or a universal set of behavioural traits, but a social position constantly shaped by specific power relations—between men and women, among men, and between individuals or collectives and political structures such as the State and the military** (Connell and Messerschmidt, 2005). Masculinity should therefore not be approached as a fixed biological identity, nor as inherently violent or oppressive; it results from socially produced expectations, emotional boundaries, and shared practices (Butler, 1988) that can reproduce or challenge gender inequalities.

Occupation projects, systemic violence, or war—as in Palestine, Syria, Sudan, Iraq, and many others—are rarely untethered from patterns of gender domination: they function as deeply material and symbolic systems organising gender identities. In Palestine, men are nominal household heads and breadwinners according to the

heteronormative order yet structurally deprived of conditions required to perform this role. Restrictions on mobility, chronic unemployment, and destruction of social infrastructures undermine men's integrity, dignity, political agency, and private wellbeing. Exemplary is the denial of recognition of Palestinian men as victims of gender-based violence (Weishut, 2015; Lubna Masarwa, 2025, Middle East Eye). **This creates tension between prescribed heteronormative masculine roles and structural barriers imposed by occupation, a central aspect in understanding harmful and transformative gender dynamics.**

In Palestine, men are nominal household heads and breadwinners according to the heteronormative order yet structurally deprived of conditions required to perform this role. Restrictions on mobility, chronic unemployment, and destruction of social infrastructures undermine men's integrity, dignity, political agency, and private wellbeing.

This contradiction between socially determined roles and real opportunities became more pressing after October 2023, reshaping the material and symbolic foundations of masculinity in Palestine. Men's roles as providers, protectors, and mediators between family and public space are increasingly unattainable due to unemployment, movement restrictions, infrastructure destruction, and systemic violence. For many men and boys, this translates into frustration, shame, and powerlessness, which shapes family dynamics, decision-making, and everyday interactions in turn af-

fecting boys, women, and girls. At the same time, women's growing participation in informal economy and sustaining households under systemic violence can challenge long-established gender hierarchies, producing transformations and sometimes provoking backlash.

While these conditions may reinforce imbalanced power dynamics, they also allow restructuring of male gender roles: militarised occupation, economic and social violence, or displacement expose the fragility of hegemonic masculinity but open spaces for alternative gendered experiences rooted in family care, openness to vulnerability, and collective responsibility (IMAGES 2017; Tarantino 2024). Humanitarian crises become a *site* of continuous negotiation of gender roles—sometimes reinforcing inequalities, sometimes transforming them. Any humanitarian circumstance for men and women under conflict or occupation should never be seen as gender-neutral. Loss of services, shelters, and livelihoods should be recognised as elements reshaping family responsibilities, social burdens, and risks for women and men alike. Masculinities are not static and play critical roles in humanitarian sectors like WASH, livelihoods, and education.

Humanitarian crises become a site of continuous negotiation of gender roles—sometimes reinforcing inequalities, sometimes transforming them. Any humanitarian circumstance for men and women under conflict or occupation should never be seen as gender-neutral.

RECONFIGURATION OF GENDERED RESPONSIBILITIES UNDER CONDITIONS OF VIOLENCE

The gap between normative male roles and precarious realities materialises in everyday life. Loss of water and sanitation infrastructure forces families to renegotiate responsibilities for water collection, hygiene, and caregiving. Women and girls typically handle these aspects (UNICEF and WHO, 2023), but men's roles in WASH practices during crises are often overlooked. Men may secure water from distant or militarised locations, negotiate access, or construct alternative sanitation facilities, facing significant risk. When men cannot perform these functions due to detention, injury, or death, the burden shifts to women and girls, increasing labour, exposure, and vulnerability.

Similarly, livelihoods are a domain of renegotiation. In Palestine, long-term erosion of employment undermines men's ability to act as providers, intensified by humanitarian collapse. This distress may lead to withdrawal, depression, or violent assertion of authority but can also unsettle historical hierarchies within households and communities. **Everyday practices of survival and *sumud* under occupation—shaped by structural dispossession—reconfigure men's agency in new but not necessarily regressive ways.** Stigma around mental health and care-seeking continues to limit service access, yet the collapse of health and education systems also pushes men into new relational responsibilities. Palestinian men increasingly engage in caregiving and supportive roles (IMAGES 2017), managing family health needs, prioritising children's care, accompanying women to facilities, thereby informally challenging traditional models of masculine authority rooted in hierarchies, emotional distance, and control.

Where men value care, responsibility, and collective survival, they actively support women's health and girls' education under hardship. This is visible intergenerationally: fathers' and male guardians' attitudes shape boys' experiences. Emergency and crisis spaces become opportunities to reassess norms, allowing men to adopt relational, caring, and future-oriented approaches to masculinity.

BEYOND THE WESTERN-ORIENTALIST GAZE: PALESTINIAN MEN AND THE RIGHT TO SELF-NARRATION

Traditional media and geopolitical analyses, especially from Europe and the US, have historically fabricated Arab-Islamic masculinities through orientalist stereotypes that invisibilise men and flatten reality. This narrative, particularly since September 2001 and after the escalation of violence in October 2023, reduces Arab and Muslim men to inherently violent actors or associates them with religious terrorism. **These power dispositifs misrepresent reality and produce epistemic violence by stripping men and boys of moral complexity, relationality, and narrative security, namely the capacity to produce and inhabit self-determined identities and futures** (Tarantino, 2025). In Palestine, narrative security and counter-narrative production are a form of resistance (Solombrino, 2018).

This stigmatised reading resurfaced at the onset of the increase in violence since October 2023, flattening complexity and limiting attentive analysis. Palestinian boys, men, and elders responded through counter-narrative production—mostly via social media—through everyday acts of *sumud*. Amid

violence and destruction, they enacted agency grounded in care, shared responsibility, and collective survival, beyond traditional representations of Arab and Muslim masculinities. Thousands of social workers, volunteers, medical personnel, journalists, artists, writers, poets, and ordinary individuals in Palestine, particularly Gaza, undertook dangerous tasks to sustain life: setting tents, keeping hospitals functioning, recovering bodies, collecting aid, producing alternative energy, assisting births, moving ambulances, sharing censored information, and recording destruction through art (Mikdashi, 2014; Bennett, 2023; Amnesty International, 2024).

These experiences exemplify how Palestinian men and masculinities, while still subjected to epistemic distortion, unsettle stereotypes through care amid destruction, departing from Western-oriented views of masculinity in crisis (Amar, 2011). Shaped by violence, loss, care, and *sumud*, Palestinian men defy externally imposed epistemologies, producing alternative imaginaries from a self-determined perspective.

CONCLUSIONS

From Palestine and the post-October 2023 violence, these masculinity reconfigurations reveal a more nuanced reality than usually acknowledged. Recognising them allows researchers, humanitarian actors, and policymakers to avoid partial analyses, particularly when men face crisis and occupation. Engaging these examples critically opens ethical and transformative approaches to gender justice. Gender-transformative engagement requires moving beyond recognising male subjectivity to understanding power redistribution under occupation, war, or crisis.

Masculinities are not secondary or a branch of Women's Studies but a space where rights and futures of men and women are negotiated. Shifts toward care, relational responsibility, and narrative self-determination among Palestinian men show transformative potential, though constrained by persistent

hierarchies and invisibilised by media. Future gender analysis must focus on men and masculinities as a critical *locus* through which women's rights, collective solidarity, and just gender relations can be reimagined. **Humanitarian interventions must understand how gender relations are reassessed, who can em-**

body emerging masculinities, under what conditions, and their consequences for women's agency. Engaging men and masculinities is therefore an essential pathway to addressing gender inequalities, and grounding humanitarian action in scientifically robust and context-specific analysis.

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CHAPTER 3. Sectoral Impacts of Escalating Hostilities on Women and Girls



WASH

Access to safe water, sanitation, and hygiene (WASH) is a fundamental human right, yet in Gaza and the West Bank, conflict, occupation, and damaged infrastructure leave millions without adequate or safe WASH services and resources. Women and girls are disproportionately affected, bearing the physical and emotional burden of collecting water, managing household hygiene, and ensuring the wellbeing of children and other family members, while limited privacy and inadequate facilities compromise menstrual hygiene and sexual and reproductive health. WASH insecurity also acts as a risk multiplier for gender-based violence, particularly in contexts of displacement, overcrowding, or conflict, where women must travel long distances to get water or rely on unsafe shared facilities. For adolescent girls, limited access to safe WASH facilities directly affects school attendance, social participation, and psychosocial wellbeing. Despite these challenges, women demonstrate remarkable resilience, adapting daily routines, rationing scarce resources, and organising households and communities to maintain hygiene and protect their families.



Gendered Impacts on WASH Rights, Resources, and Services in the Gaza Strip

The collapse of WASH services in the Gaza Strip has produced severe and gendered consequences. Water supply, sanitation systems, and hygiene resources are deeply interconnected, yet each

has been disrupted in distinct ways that compound risks to health, dignity, safety, and survival. Women and girls are disproportionately affected due to socially ascribed care responsibilities, mobility constraints, and specific hygiene and menstrual health needs. These gendered burdens intensify for female-headed households, women with disabilities, and adolescent girls navigating privacy-sensitive needs.

WATER: SCARCITY, INFRASTRUCTURE DESTRUCTION, AND GENDERED BURDENS

Over the last two years, armed conflict has devastated Gaza's water infrastructure. Aquifers have been polluted with sewage and debris from bombed buildings, while wells are largely destroyed, inaccessible, or located within military buffer zones. Two of Gaza's three main water pipelines have been repeatedly struck, causing an estimated 70% of water to be lost through leaks (MSF, 2025). Since October 2023, 89% of Gaza's water and sanitation systems have been damaged or destroyed, leaving more than 96% of families water insecure (MSF, 2025; UNRWA, 2025). UN experts have raised concerns that the deliberate restriction of water, hunger, and dehydration constitutes a grave breach

of international law and an act against humanity. **As a result, more than two million people lack access to safe drinking water** (UNICEF, 2025b). Only 39% of water production facilities remain operational, and over 70% of water is biologically contaminated (UNICEF & WASH Cluster, 2025). **Average water access has fallen to approximately 22 litres per person per day—less than half the humanitarian minimum standard of 50 litres. Around one million people survive on fewer than six litres per day, while half a million cannot meet even basic**

hygiene needs (OCHA oPt, 2025a). Over 77% of families rely on trucked water under crowded and hazardous conditions, with 15% depending on children to collect it. Women and girls bear the brunt of water scarcity, shouldering responsibilities for sourcing, transporting, storing, and rationing water under dangerous and exhausting conditions. Women frequently describe water collection as one of the most exhausting and dangerous daily tasks, performed under bombardment, displacement, and long queues in unsafe spaces.



Average water access has fallen to approximately 22 litres per person per day - less than half the humanitarian minimum standard of 50 litres.

Around one million people survive on fewer than six litres per day, while half a million cannot meet even basic hygiene needs

(OCHA oPt, 2025a)



At the beginning of the war, there were hygiene supplies like soap and shampoo, but we didn't think the shortage would last, so we didn't store enough. After a while, these supplies ran out completely. Most of the soap and shampoo were made locally in Gaza, but the quality was poor, and the water itself was bad, unsafe in many cases. We would go to my uncle's house or other local sources every day to fill water for each family. Each person needed enough for daily use, but sometimes the water supply was interrupted completely. Water trucks were rare, and sometimes we had to buy clean water, which was exhausting. Carrying it home, up multiple flights of stairs, was physically draining, especially for women and children. Water shortages affected everything: washing children, cleaning clothes, and general hygiene became constant struggles. Health issues worsened, and for pregnant women, it created extra risks. Some families simply gave up, because there was no practical solution. During the shortages, we had to buy everything in small quantities at high prices. Shampoo, soap, laundry detergent, toothpaste, and even basic medicines were rare and expensive. We tried to stockpile as much as possible for months at a time. This constant struggle for basic necessities was stressful, exhausting, and sometimes overwhelming... even causing nervous breakdowns. Even simple tasks, like taking a shower, became a source of anxiety because you never knew if you would have enough water or supplies. Even with some availability, merchants often exploited the situation, selling essential items at inflated prices or rationing them unfairly. This added to the stress and forced people to hoard or plan meticulously. For families with multiple children, the burden was even heavier. Everyday hygiene, which under normal circumstances is simple and taken for granted, became a major source of worry. Thankfully, in our current home, water and supplies are more available, and we can maintain basic hygiene. Still, the memory of scarcity and the stress of those days lingers. Even now, small things, like buying toilet paper or tissues for allergies, remind me of how difficult it used to be, and how much tension it caused." — Woman, 33 years old, Gaza



I look for water, book my turn, and wait in line to get enough for myself. I have three containers of water: one for drinking and two for daily use. If we don't have enough water for daily needs, we bring a bucket from the sea to use. Life is impossible without water. After securing water, I must find a hospice, because without it, we cannot cook our food or prepare a proper meal. For water, I use it for drinking and also share some with neighbours, or sometimes I don't drink at all. There were days when I went without drinking water for a whole day. For soap, I used to wash my hands with sand. As for sanitary pads, I borrow them from a friend who is married. Her husband works as a guard at a medical point, and she provides me with pads regularly.” – Girl, 17 years old, Gaza

SANITATION: SYSTEM COLLAPSE, HEALTH RISKS, AND LOSS OF DIGNITY

The breakdown of sanitation infrastructure compounds the water crisis, increasing exposure to disease and eroding pri-

vacy. Over 70% of pumping stations and 130,000 metres of sewage pipelines are damaged, with untreated sewage often released near homes. Shared latrines or buckets are widespread, and families frequently lack soap or other hygiene materials (OCHA oPt, 2025a). Women and girls, as primary caregivers, experience

the most severe impacts. For women and girls, the absence of lockable toilets, distant latrines, and mixed-gender facilities heighten risks of GBV, infections, and loss of dignity.



Providing personal water was not the problem, but the real issue was the lack of storage containers. Sewage services were not a daily problem for me. Water scarcity causes stress and tension for everyone, especially when there is a need for a shower, and I feel oppressed by this situation. For soap, I had to rely on all kinds of homemade substitutes, and it was an extremely difficult time when it was not available.” – Woman, age unspecified, Gaza



My daily routine with water is very difficult...At home, the sewage system is destroyed because of the bombardments on the streets and neighbouring houses. For washing, we used alternatives such as toothpaste when it was available, and handmade soap that I used for cleaning and washing. For sanitary pads and diapers, we used worn clothes that we cut and repurposed, but this often led to the spread of diseases.” – Woman, age unspecified, Gaza

HYGIENE: SCARCITY, MENSTRUAL HEALTH, AND GENDERED DEPRIVATION

Hygiene challenges are further exacerbated by limited access to soap, detergents, sanitary pads, and diapers. Approximately 63% of families lack soap, and around 500,000 women and girls are unable to access sufficient menstrual hygiene materials (OCHA oPt, 2025a).

The scarcity of hygiene items compounds emotional stress and daily labour burdens. This forces women and girls to use unsafe substitutes—cloth, tissues, or ash—raising risks of infection, stigma, and severe psychological distress.



Approximately **63% of families lack soap**, and around **500,000 women and girls are unable to access sufficient menstrual hygiene materials**

(OCHA oPt, 2025a)



At the beginning of the war we didn't have sanitary pads, so we had to use fabrics.” – Woman, 24 years old, Gaza



There was no water even to wash our hands. I had a child who used diapers, and at that time, a single packet could cost \$100. Sometimes, I had to go without them. With no water for even the simplest things, I couldn't even clean my child's space or wash her food before she ate it. (...) Perhaps one of the biggest problems I face daily is securing enough water to meet our basic needs for drinking and daily use. As for cleaning, the amount of water we have is barely enough, so washing is done with the smallest possible amount. For my personal hygiene, I sometimes had to use wet wipes, dry tissues, or cloths...all alternatives that were far from ideal and left us uncomfortable and unsatisfied. For soap, I used toothpaste for a long time, and at one point I even resorted to sand. Later, I learned about using ash and tried that as well. Fortunately, I was able to store enough soap eventually, but the first time I faced a shortage of detergents, it was very difficult.” – Woman, age unspecified, Gaza



I lived through the days when my child was only one year old and needed diapers, but I couldn't buy them. I had to ask my mother for help, which was a big burden on her, yet she bought them because I had no source of income. I am forced to ration diapers, keeping only six pieces that my father-in-law brought, trying to make them last a whole month, even though my child cannot stay in one diaper for a whole day. Every time I run out, I feel fear and shame before I ask for more.” – Woman, age unspecified, Gaza



I start my day by collecting water from nearby distribution points, making sure to secure enough for our daily needs and store it safely. Because water is scarce, I use it very carefully and try to reduce waste as much as possible. I wash clothes and covers by hand using very limited amounts of water and soap. At times, I have to postpone washing altogether because there simply isn't enough water. When I do wash, I make sure to dry the clothes in the sun to help sterilise them. Since the escalation, my access to water, sanitation, and hygiene items has changed drastically and become extremely difficult. Water is now scarce and often only available intermittently from unstable sources, which forces me to store it for long periods and use it very carefully. At the same time, sanitation services have deteriorated due to the disruption of sewage networks, increasing health risks and making it difficult to access clean and safe sanitation facilities. Hygiene materials such as soap, cleaning supplies, and disinfectants are in severe shortage, which sometimes forces us to use inappropriate alternatives or limit their use only to the most essential needs.” – Woman, age unspecified, Gaza

Severe water scarcity has also led to a rise in dehydration-related complications, particularly among pregnant and lactating women, who face increased

risks of preterm labour, low amniotic fluid, and life-threatening fatigue. Women and girls additionally reported frequent kidney and urinary tract infections due

to restricted water access, inadequate hygiene conditions, and the need to delay urination until reaching a safe toilet.



Gendered Impacts on Wash Rights, Resources, and Services in the West Bank

In the West Bank, access to water, sanitation, and hygiene is a daily challenge shaped by occupation, conflict, and systemic restrictions. Israeli attacks on water infrastructure, chronic shortages, and occupation-related restrictions have left thousands of households with insufficient or no water access (OCHA oPt, 2025). The cost of transportation has doubled since July 2025, compounded by a severe fuel shortage—a critical issue given that the WASH initiative requires approximately 70,000 litres of fuel daily to operate water pumping stations, desalination plants, sewage pumping stations, and solid waste collection services (WASH Cluster, 2025b).

Many isolated and vulnerable communities across the West Bank, particularly in Area C, continue to face severe challenges in accessing adequate WASH services. 329 communities across the West Bank, representing nearly 37% of the total population, have water consumption levels below 50 litres per person per day, falling well below the WHO recommended basic needs standard. Among these, 71 communities report consumption levels below 30 litres-per-day, with the highest concentrations in Jenin, Hebron, and Bethlehem governorates (oPt Flash Appeal, 2026).

Between January and September 2025, around 128 water and sanitation structures were destroyed in Area C (OCHA oPt, 2025e). These systemic constraints disproportionately affect women and girls, who bear the physical, economic, and emotional burdens of securing safe water, maintaining hygiene, and protecting household health.

WATER: SHORTAGES, INFRASTRUCTURE DESTRUCTION, AND GENDERED BURDENS

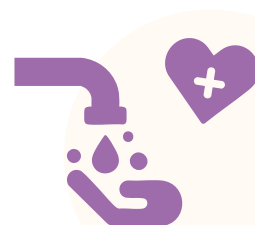
Water shortages are particularly severe in regions not connected to the main water network, leaving many households chronically deprived due to demolitions, settler vandalism, and military operations. In early 2025, over 40 kilometres of wa-

ter supply infrastructure showed signs of damage. WASH challenges are especially acute for displaced or impoverished families: 16% live in poverty and depend on costly water delivery, 10% have poor access to water, and nearly 37% of West Bank communities report using less than 50 litres per person per day, with 71 communities reporting levels below 30 litres daily (OCHA oPt, 2025e).

Women and girls bear a disproportionate burden, often responsible for physically collecting trucked water and rationing it for household use, sometimes sacrificing their own hygiene to prioritise children's needs (UNFPA, 2025a). Movement restrictions, curfews, and checkpoint closures further exacerbate water scarcity, with families sometimes going ten days or more without reliable access.

“We have a water line, and I have water for drinking and washing and everything in limited quantities because the Israeli side is the one who controls the quantities, so we had to adapt.”
— Woman, 24 years old, Bedouin community, West Bank

“The main burden in our area is the lack of water and the absence of a proper transmission line. The village council began extending a water line, but the work was never completed... We also have a private family well at home, but it is very old and was never replaced... When water is cut off, it feels like a disaster... We don't live in luxury; we live the least life one can live but cutting off water or feeling that you don't have the minimum necessities of life... makes you live in distress that really scratches your dignity.”
— Woman, 47 years old, West Bank



Between January and September 2025, around **128 water and sanitation structures were destroyed in Area C** (OCHA oPt, 2025e)

Maternal health is severely impacted by these water shortages. As of March 2025, approximately 73,000 pregnant women in the West Bank faced critical health risks due to movement restrictions and checkpoint closures, limiting access to antenatal, postnatal, and delivery care (OHCHR, 2025; UNFPA Palestine, 2025b). In areas such as Jenin, Tulkarem, and Tubas, road blockages, curfews, and attacks on health institutions left over 230,000 women and girls without reproductive healthcare as of June 2025.

Data collected by WeWorld as part of the Community Protection Approach (CPA)¹⁰ assessment highlights structural and protection constraints: across the 195 communities surveyed, access to water is constrained by a combination of distance, cost, and insecurity. In several communities, households must travel long distances or face unaffordable wa-

¹⁰ The Community Protection Approach (CPA) is a community-engagement and empowerment methodology developed by WeWorld to design Integrated Protection Programming. It combines quantitative and qualitative analysis to identify threats, vulnerabilities and capacities, and supports communities in developing localized strategies to improve safety, dignity, and access to services. The CPA provides structured tools for multi-sector analysis, participatory planning, and continuous monitoring across humanitarian and development contexts.

“The bathroom in my house is not connected to the water, and when I need to do washing, I have to use drums to transfer water to the bathroom... The bathroom is also not fully functional, so we have to use one of my mother-in-law's outdoor portable toilets. In addition, the settlers occasionally break the water line, so we try to rationalise the use of water and not wash daily except, when necessary... As for the sewage, there is no sewage system at all, we had a very old septic pit, but it was very small, and we could not use it at the moment.”
— Woman, 27 years old, West Bank

“We rely on prepaid meters to recharge our water supply, and water reaches us about five days a week. This has forced us to limit laundry to one day a week in order to save water and soap... The area where we currently live does not have a sewage network; instead, it relies on absorption pits.”
— Woman, age unspecified, Bedouin community, West Bank

CPA findings underscore these risks: about 20% of communities reported female adults face problems accessing latrines, with similar levels for girls (19%) and elders (18%). Among communities

“The area doesn't have many water wells, and of course, water tanks and gas cars are not allowed to enter the area... Sometimes, we are cut off from water for ten days without a single point of water at all... We used to buy it from the shops with the aim of drinking and trying to save as much water as possible.”
— Woman, age unspecified, West Bank

ter prices, while damaged or inadequate roads further complicate collection.

Accessing water is not only physically demanding but also increasingly unsafe. Communities report harassment during water collection, alongside exposure to settler violence along access routes and movement restrictions imposed through checkpoints, walls, and other man-made barriers. These conflict-related constraints turn a basic daily task into a protection risk, disproportionately affecting women and girls, who are most often responsible for water collection.

Among households that must fetch drinking water, median travel time to reach water is 60 minutes (max 240), and

median reported cost is 50 NIS/person (max 500), which often forces rationing and deprioritisation of hygiene needs.

SANITATION: SYSTEM COLLAPSE, HEALTH RISKS, AND LOSS OF DIGNITY

Sanitation systems are similarly compromised. Many communities lack private, functional latrines or rely on small septic pits, absorption trenches, or outdoor toilets. Infrastructure damage and settler vandalism worsen existing deficits, leaving women and girls exposed to unsafe or unhygienic conditions.

reporting latrine risks, 92–95% cited lack of privacy as the main concern; other frequent issues included lack of doors, locks, or lighting (72–76%), poor cleanliness (76–78%), and lack of maintenance

(72–77%). Environmental risks, such as animals (53–59%) and accessibility barriers (32–36%), disproportionately affect pregnant women, caregivers, adolescents, and older women.

HYGIENE: SCARCITY, MENSTRUAL HEALTH, AND GENDERED DEPRIVATION

Access to hygiene supplies is severely constrained. Around 9% of households lack basic hygiene materials, and menstrual hygiene management (MHM) is

particularly compromised. Women and girls often improvise or borrow materials, exposing themselves to physical and psychosocial risks.

CPA data also highlights significant compounded hygiene challenges faced by persons with disabilities. Around one-third of communities reported hav-

ing a large proportion of households identify disability-specific WASH barriers, particularly related to bathing and latrine use. Many facilities remain physically inaccessible, lack appropriate adaptations, or cannot be used safely or independently by persons with disabilities.



Water is available only once every four days, and sometimes it is completely cut off... Laundry is also a challenge. Most of the time, we have to wash clothes by hand because the washing machine is broken, which is very tiring. — Girl, 17 years old, Bedouin community, West Bank



There is no regular water supply where I live... The water that reaches us is agricultural water and is not suitable for drinking at all. For bathing and washing, we heat water on gas, struggling to manage the smallest daily needs. There is also no sewage system; instead, we rely on covered absorption pits. — Woman, 59 years old, West Bank



WeWorld's Response



Since chronic water scarcity, infrastructure damage, and access restrictions have repeatedly undermined safe and dignified WASH access across Palestine, WeWorld has responded for decades with a layered, gender-responsive approach addressing both immediate needs and longer-term service reliability under severe constraints. In the West Bank, interventions focus on communities affected by fragmented access, movement restrictions, and infrastructure degradation, while in Gaza the response is implemented since October 2023 under extreme access constraints and large-scale displacement, where WASH services are not only repeatedly disrupted, but facing a nearly complete collapse. Across both contexts, women and girls—particularly widows, adolescent girls, and women with disabilities—are systematically prioritised in assessments, programme design, and distributions due to heightened safety, privacy, and dignity needs, alongside older persons and persons with disabilities.



Rapid and context-adapted water support includes the provision of household and communal water tanks, plastic tanks (1–5 m³), wheeled water tanks, cistern construction and rehabilitation, water reservoirs, filling points, and water trucking to reach displaced, isolated, or underserved households. In Gaza, storage solutions are prioritised to reduce reliance on repeated and unsafe travel to water points, while hygiene and dignity kits—including menstrual hygiene materials—are distributed to mitigate affordability and access barriers. In the West Bank, acute affordability constraints are addressed through subsidised potable water, water coupons, hygiene kits, and chlorination tablets. Hygiene promotion and menstrual health sessions reach women and girls across both contexts, supporting safe practices and daily coping under crisis conditions.



Longer-term infrastructure support includes the construction, rehabilitation, and extension of water networks, main transmission pipelines, household connections, pump installation, and well rehabilitation where feasible, improving continuity of supply and community resilience. In Gaza, WeWorld rehabilitates damaged pipelines, pumping stations, and wells when access allows, while sanitation facilities are constructed or upgraded with functioning locks, lighting, and designs that protect privacy. Across both Gaza and the West Bank, sanitation and bathing facilities incorporate accessible features to ensure persons with disabilities can use them safely, and gender-sensitive designs enhance safety and dignity for all users.



Protection-sensitive measures are integrated throughout WASH interventions. Water points and sanitation facilities are located in accessible areas to reduce risks associated with unsafe travel, isolation, harassment, and exposure to GBV or other protection concerns. By directly addressing WASH-related risks—including unsafe sanitation, long travel distances, limited control over water access, and overcrowded facilities—interventions contribute to reduced exposure to protection risks. Where essential needs remain unmet or protection concerns are identified, WeWorld's Individual Protection Approach (IPA) enables immediate and safe referral or self-referral to appropriate services, functioning as a cross-cutting mechanism across sectors.



Community engagement and accountability underpin all WASH programming. Women participate actively in hygiene promotion, site planning, feedback sessions, and monitoring of WASH services, with structured engagement adapted to care responsibilities, safety considerations, and accessibility needs. Women's participation in facility design and monitoring strengthens accountability and ensures services reflect real community priorities.

Gender-based Violence and Protection Risks

The breakdown of WASH services has heightened women's and girls' vulnerability to gender-based violence (GBV) across multiple contexts. Long distances to water points, inadequate or shared toilets, and travel during unsafe hours increase the risk of harassment, exploitation, and assault. Girls frequently bear primary responsibility for water collec-

tion, while challenges in managing menstruation contribute to school absenteeism and dropout.

In Gaza, where WASH infrastructure has largely collapsed, overcrowded shelters and displacement sites often lack safe, private, and gender-sensitive facilities. This contributes to elevated risks of GBV, including sexual assault and exploitation, with most cases outside the family unit reported in such settings (UNFPA Palestine, 2025a). Resource scarcity, including limited water and hy-

giene supplies, forces women to access poorly lit, unsecured communal spaces, further undermining autonomy, dignity, and safety (UNFPA Arab States, 2025). Girls frequently skip school during menstruation due to lack of privacy or safe facilities, reinforcing long-term gender inequalities in education.

Women with disabilities face extreme risks when assistance is required for bathing or escorting, increasing exposure to abuse or humiliation:



Inadequate provision and access to water and sanitation mean that access to the toilets or the point where the water is drawn becomes more distant, and where, particularly in the early morning or evening, the risks of harassment and assault become quite pronounced and contribute to the perception and reality of insecurity for the victims. Coping behaviours that women and caregivers have used include coordinating trips in groups to reduce individual risk, limiting movement after dark, using makeshift privacy screens, or forgoing sanitation needs altogether. While protective in intention, these coping behaviours often entail secondary negative impacts on health, dignity, and psychosocial wellbeing.” — Woman, age unspecified, Gaza



Women and girls encounter numerous problems with respect to the trucking delivery of water, whereby they have to fetch water along with jerrycans of hundreds of metres through hazardous areas... Emotional distress pervades such areas. Experiences of embarrassment, discomfort, or loss of dignity remain common because of fear of accessing washing facilities among adolescent girls. In fact, such contexts also cause school dropout among girls due to managing menstruation or accessing water.” — Woman, age unspecified, Gaza

In the West Bank, inadequate WASH facilities similarly increase women's and girls' exposure to gender-based risks, though the challenges manifest differently. Menstruation has become both an emotional burden and a safety hazard due to the absence of clean water, hygiene products, and private toilets. Restricted mobility caused by curfews, road closures, and attacks on supply chains forces women and girls to improvise with fabrics or rely on informal support networks, exposing them to further privacy

and safety risks (UNFPA, 2025b). Economic constraints exacerbate these vulnerabilities, as the high cost of trucked water and hygiene products often forces families to prioritise children's needs over women's, creating a cycle of deprivation that undermines dignity, health, and autonomy.

Data from the CPA underscores the protection risks linked to WASH access: 19 communities reported harassment while accessing water points, 22 cited settler

violence along collection routes, and 14 mentioned man-made barriers such as checkpoints, walls, or trenches. In 45 communities where households must fetch drinking water, the task is predominantly assigned to male adults, suggesting that insecurity, physical burden, and social norms limit women's mobility and control over water access.

Across both contexts, individuals with physical impairments, older adults, and women with disabilities are particularly

Women's Roles in Household and Community WASH Management

affected by overcrowded shelters, inaccessible distribution points, and inadequately equipped hygiene kits. Many temporary shelters lack accessible latrines, and hygiene packages often omit essential items such as adult diapers, bedpans, or additional sanitising materials. These gaps heighten daily hardships and increase the risk of harassment or exploitation, especially for older women and girls with disabilities (Global Protection Cluster, 2025).

Despite severe constraints, women and girls demonstrate remarkable resilience and agency in managing WASH needs. They actively participate in household and community-level water, sanitation, and hygiene management, helping maintain health, safety, and dignity amid chronic deprivation. Their strategies include rationing water, improvising hygiene solutions, coordinating domestic labour, and liaising with local committees and humanitarian actors to influence latrine placement, water point accessibility, hygiene kit distribution,

and feedback mechanisms. Such participation ensures that WASH services are adapted to local needs, enhancing both safety and dignity.

Women's involvement extends beyond household management into broader community engagement. They advise on latrine placement, identify unsafe areas, support hygiene promotion, and ensure adolescent girls' needs are considered in distributions. These roles illustrate how women convert constrained environments into micro-systems of governance, preserving dignity, health, and safety under extremely challenging conditions.



Managing the water supply for domestic use remains everyone's responsibility. Washing clothes has also been shared—since the first day of the war, I asked everyone, including my husband, to wash their own clothes. I am talking about a family of six, and all washing is done by hand. I cannot take responsibility only for my clothes and the clothes of the 5-year-old child.” — Woman, age unspecified, Gaza

In both Gaza and the West Bank, women adopt innovative strategies to cope with water and hygiene shortages. They collect rainwater, purchase small quantities from local vendors, reuse or improvise menstrual materials, and carefully rationalise consumption to maintain hygiene. A woman in Gaza explained:



When essential items such as water, soap, or sanitary pads are not available, I try to adapt in any way possible. I look for alternative sources of water, such as collecting rainwater or buying small amounts from local vendors when possible. In the absence of soap, I use whatever temporary substitutes are available, including basic household cleaning products. When sanitary pads are unavailable, I reuse them with extreme caution by cleaning and sanitising them carefully, or I use clean clothes as a temporary alternative. I also try to reduce the need for these materials as much as possible by carefully rationalising consumption and maintaining personal hygiene in the simplest ways. In addition, I seek support from humanitarian organisations or from the local community to help secure these basic necessities.” — Woman, age unspecified, Gaza

Similarly, a woman from a Bedouin community in the West Bank described household-level improvisation and resource-sharing:

“ When water is not available, we use wipes or vinegar for sterilisation, and as I mentioned before, we store water in containers to use when needed. As for soap, when a bar of soap becomes very small and crumbly and can no longer be used normally, my mother grinds the remaining pieces and gathers them inside a piece of gauze. When soap is unavailable, we use these collected crumbs instead. When sanitary pads are not available, I use a clean cotton cloth as an alternative.” – Woman, age unspecified, Bedouin community, West Bank

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HEALTH

Health in Palestine is a gendered crisis. Years of conflict, displacement, and infrastructure collapse have left women and girls at heightened risk of preventable illness, maternal complications, and psychosocial distress. Restricted access to care, chronic shortages of medicines and medical staff, and exposure to gender-based violence combine to create life-threatening conditions, particularly for pregnant and lactating women, adolescents, and those with disabilities. In the current scenario, women navigate extreme deprivation, protect their families, and endure trauma, making access to holistic, gender-responsive health support not just urgent but lifesaving.



The Gendered Impact on Health in the Gaza Strip

The health landscape in Gaza is defined by a severely damaged infrastructure. **Over the last two years of intensified violence, approximately 94% of hospitals have been damaged or destroyed** (OHCHR, 2025), leaving the population with extremely limited access to care.

The destruction of health facilities and repeated interruptions to supply chains **have turned otherwise treatable conditions into life-threatening emergencies, particularly for women, children, and persons with disabilities**. WHO (2025) estimates that only about 50% of health facilities are partially functional, operating with critical shortages of staff, supplies, and electricity.

“ I am a heart patient. My operation was scheduled for the day the war began, just three days after my diagnosis. As a result, my surgery was postponed for 18 days (...) The operation lasted nine hours, and I went through very difficult circumstances. The hospital did not neglect us, but for the poor, they could not provide everything we needed. I remember living for three months with only one shekel in Gaza.” – Woman, age unspecified, she left Gaza and now lives abroad

Over the last two years of intensified violence, approximately **94% of hospitals have been damaged or destroyed**

For persons with disabilities, health risks are compounded:



I suffered from salt buildup in my body and chest inflammation because of drinking water that is not suitable for drinking. The food available is mostly canned and unhealthy, and we are constantly exposed to fire, smoke, and gases. There is a severe lack of detergents and basic hygiene supplies, which makes maintaining personal cleanliness very difficult. All of this is happening under very poor financial conditions and with an unstable psychological state, which has deeply affected my physical and mental health.” – Woman, age unspecified, she has a visual impairment, Gaza

IMPACT ON SEXUAL AND REPRODUCTIVE HEALTH

The breakdown of health services has had a devastating impact on sexual and reproductive health. Over 500,000 women lack access to reproductive care, and 700,000 struggle daily to manage menstruation safely (UNFPA, 2025c).



Over **500,000** women lack access to reproductive care, and **700,000** struggle daily to manage menstruation safely

(UNFPA, 2025c)



I sometimes had to resort to using cloth when [sanitary pads] weren't available. On occasions when I could afford it, I bought sanitary pads, but often at very high prices. When I wasn't working, I had no choice but to rely entirely on cloth. (...) Before the war, I took care of myself and used the best cosmetics and skincare, but now I barely even wear eyeliner, just enough to feel a little human comfort. Sometimes I forget that I am a human being with dignity and rights; I feel like I've become just a machine to earn money and provide for others, neglecting my own body and wellbeing.” – Woman, age unspecified, Gaza



We had to buy necessities, and we suffered a lot because we couldn't do without them, especially sanitary pads. At times, I couldn't even buy food because I had to prioritise sanitary pads. For me, the most important thing is that I cannot imagine wearing dirty clothes. What dignity is this, when I have to take an escort with me just to use the bathroom, standing there by the door? What dignity did I have when I lost my job and became dependent on my family, after being the one who provided for them?” – Woman, age unspecified, she has a visual impairment, Gaza



Even after I left Gaza, the stress is still there. Periods have become noticeably heavy. Wearing the same sanitary pad as much as you could increase the risk of infections. Add to that the lack of running water and the lack of medicines... so, now I'm only left with the consequences of the stress, but thankfully have all sanitary requirements needed.” – Woman, 39 years old, she left Gaza and now lives abroad

Lack of clean water, safe sanitation, and privacy also directly increases risks of reproductive tract infections, uterine infections, and postpartum complications, disproportionately affecting women and girls.

Maternal care has been particularly affected: women are now three times more likely to die during childbirth and three times more likely to miscarry than prior to October 2023 (OHCHR, 2025). Birth rates fell by 41% during the first half of 2025 compared to the same period in 2022, reflecting both physical and psychological barriers to maternal

health (OHCHR, 2025). Between January and June 2025, Gaza registered 2,600 miscarriages, 220 pregnancy-related deaths, 1,460 preterm births, and 1,600 underweight newborns (Women's Refugee Commission, 2025). Women continue to give birth outside hospitals without skilled attendants (OCHA oPt, 2025b).



Birth rates fell by 41% during the first half of 2025 compared to the same period in 2022, reflecting both physical and psychological barriers to maternal health (OHCHR, 2025)



Water shortages affected everything: washing children, cleaning clothes, and general hygiene became constant struggles. Health issues worsened, and for pregnant women, it created extra risks. Some families simply gave up, because there was no practical solution.” – Woman, 33 years old, Gaza



One of the hardest moments I experienced was when my daughter was shot in the hand during our displacement. I was pregnant at the time and had to leave our belongings behind. Reaching an ambulance for my injured daughter was nearly impossible. I had to walk about two kilometres along bypass roads to avoid the army. When labour pains started, I almost had to leave her in a tent for a few moments. Ambulances were busy responding to shelling everywhere, and when my daughters called for help, the situation was overwhelming. There was no transportation available, no fuel... only carts pulled by animals.” – Woman, 37 years old, Gaza

The crisis has worsened maternal nutrition: in October 2025 alone, around 8,300 pregnant and breastfeeding women were admitted for acute malnutrition, averaging 270 admissions per day (OHCHR, 2025). Limited food, restricted baby formula and therapeutic milk, and poor maternal diets have contributed to deaths among children and compromised maternal health (OCHA oPt, 2025b).

In 2024, an Integrated Food Security Phase Classification (IPC) survey revealed that only one-third of the population had access to a kitchen, while 69% relied on unsafe cooking methods that generate harmful smoke, disproportion-

ately affecting women, who are primarily responsible for food preparation (UN Women, 2024).

Child morbidity is also high: in September 2025, there were roughly 5,000 weekly cases of diarrhoea in children under five.

Acute respiratory infections made up 68% of consultations, and 9,300 children were admitted to Severe Acute Malnutrition (SAM) treatment programmes in October 2025 alone. Movement restrictions and insecurity continue to block consistent aid entry, including maternal and reproductive health services (UNFPA, 2025b; OCHA oPt, 2025a).



In October 2025 alone, around 8,300 pregnant and breastfeeding women were admitted for acute malnutrition, averaging 270 admissions per day

(OHCHR, 2025)



I couldn't provide milk for my daughter. Milk was being sold for five hundred shekels, which I couldn't afford, and it was a heavy, almost unbearable burden to know my child was hungry. She relied on breastfeeding, but sometimes I was unable to satisfy her because of the lack of food, including even fruits and vegetables that could support my health and help me produce milk." - Woman, 37 years old, Gaza

Within this broader health emergency, many of these harms can be understood through the concept of **reproductive violence**. **Reproductive violence refers to conditions and practices that undermine women's reproductive autonomy and safety not only through direct acts of coercion or abuse, but also through structural constraints that deny access to essential reproductive, maternal, and neonatal healthcare.** In Palestine, this includes forced delays in reaching hos-

pitals, births without skilled attendants, lack of pain management or emergency obstetric care, and the inability to make informed choices about contraception, spacing, or pregnancy outcomes.

DIFFICULTIES IN ACCESSING SERVICES

Access to health services is severely restricted due to infrastructure collapse, repeated displacement, ongoing vio-

lence, and resource scarcity. Essential medicines, equipment, and trained staff are often unavailable, and patients must navigate unsafe conditions to reach functioning facilities. For many, the cost of treatment or travel is prohibitive.



I neglected my physical health to the extent that I didn't take my sinus treatment throughout the war, and I was just living on painkillers in the market, yes, the market, not pharmacies." - Woman, age unspecified, Gaza

Caregivers bear additional burdens:



I was responsible for my father and my mother, as my father is a cancer patient and my mother suffers from a chronic disease. The most important challenges were providing medicines and treatments, securing good water, continuously charging the electricity card, and being able to provide food and proper meals. (...) There are no medications for chronic illnesses. I search all medical points, and when I cannot find them, I buy them at my own expense. Sometimes I make advance appointments at private clinics through acquaintances, especially since I am an analysis specialist and I previously worked in more than one institution." - Woman, age unspecified, Gaza



The Gendered Impact on Health in the West Bank

In the West Bank, the health system has come under increasing strain since October 2023, as escalating violence, movement restrictions, and economic deterioration undermine access to essential services. **An estimated 830,000 people currently require urgent healthcare assistance, including 232,000 women and**

girls who face acute barriers to accessing sexual and reproductive health services (UNICEF, 2025). In high-conflict areas, primary health centres often operate only two days a week, while hospitals function at reduced capacity to 70% due to chronic shortages of medicines, fuel, and staff (WHO, 2025). **Nearly 20% of families report that since October 2023 their children were unable, at least once, to access necessary medical care or medications** (OCHA oPt, 2025).

The military operations and associated violence in the northern West Bank have severely strained the local health system. Access to healthcare has been disrupted by frequent closures of roads and checkpoints, making it difficult for ambulances and emergency teams to reach patients and for people to travel to clinics and hospitals. Health facilities and mobile clinics have been damaged or obstruct-

ed, and medical staff and patients have been injured while trying to access care, with WHO reporting dozens of attacks on health services across the West Bank (WHO, 2025). In Jenin and Tulkarm, prolonged military presence, displacement of families, and restrictions on movement have worsened public health outcomes, compounded by increased psychological stress and limited delivery of essential

medicines and reproductive health services. These pressures have contributed to reduced coverage of routine care and heightened vulnerability among affected communities.

This growing pressure on public services is also reflected in changes in health-seeking behaviour:



The pressure on government clinics increased after the war because of the change in people's behaviour in going to doctors. Before the war, they used to visit private doctors, but after their work in Israel stopped following the war, they had to go to government clinics, which increased the pressure on health workers, including us." - Health worker, 27 years old, West Bank

For women managing chronic illness, these systemic failures translate into daily pain and untreated conditions:



Some medicines are not available at all, and when they are, they are very expensive, for example, paying 30 shekels¹¹ for just 10 pills. I sometimes need to take two pills a day, and some of them are very strong. We rely on transportation to reach the pharmacy or clinic, but this is not always possible. If settlers are present, we sometimes cannot go at all, forcing us to endure pain and illness without treatment. During these times, no one checks on us or asks how we are doing, leaving us completely alone in managing our health." - Woman, 54 years old, West Bank

11

The equivalent of about 8 euros.

IMPACT ON SEXUAL AND REPRODUCTIVE HEALTH

As of May 2025, approximately 14,813 pregnant women in the West Bank were living without sufficient access to adequate antenatal care, often in unsafe and unhygienic environments (UN, 2025). Displacement, stress, poor nutrition, and limited-service availability increase the risks of infection, low birth weight, delivery complications, and post-partum morbidity. Maternal health conditions such as anaemia, infections, haemorrhage, hypertensive disorders, and psychological distress are expected to rise under these conditions (UN, 2025). Although 61% of healthcare centres remain operational, access to maternal services is severely constrained by checkpoints, roadblocks, curfews, and damaged infrastructure e.

Physical inaccessibility remains the primary barrier, with pregnant women frequently delayed or denied passage, disrupting referrals and emergency obstetric care (ibid.). Mobile health units are often the only viable option for women living in isolated or high-risk areas, or for those unable to afford transportation (UNFPA, 2025a).

Data collected by WeWorld and the West Bank Protection Consortium through the Community Protection Approach (CPA) assessment across 195 communities in the West Bank highlights that limited-service availability further constrains access to reproductive healthcare. less than one-third of communities report the presence of a gynaecologist or obstetrician at the nearest primary healthcare facility, while only around one-quarter report access to a midwife.

As a result, many women are forced to travel long distances or rely on irregular referrals to obtain essential reproductive and maternal health services, increasing delays, costs, and protection risks particularly in areas affected by movement restrictions and insecurity.



Although **61% of healthcare centres remain operational, access to maternal services is severely constrained by checkpoints, roadblocks, curfews, and damaged infrastructure.**

(UN, 2025)

Beyond clinical care, access to basic hygiene and menstrual health supplies remains a persistent challenge for women and adolescent girls, particularly in marginalised communities.



When it comes to hygiene and personal care, especially for girls, we make do with whatever we have. During their periods, girls often end up using parts of their clothes, like pants or tops, or cutting up ribbons instead of sanitary pads, just to get through each day. This makes them feel uncomfortable and ashamed, so many try to cover up by wearing long clothes during this time. We are forced into this situation because fathers or even brothers often don't bring these supplies. That's why it's important for us to have menstrual hygiene products available here all the time. If this continues and girls are left to rely only on cloth, it can seriously harm their health in the long run." – Woman, 54 years old, West Bank

Difficulties in Accessing Services

CPA assessment highlights structural barriers. For primary healthcare, **76% of communities report that women face difficulties reaching the nearest facility, with a median distance of 4 km, a median travel time of 20 minutes, and average transport costs of around 25 NIS¹².** Barriers intensify sharply at the hospital level, where **92% of communities** report access constraints. The median distance to hospitals increases to 20 km, with median travel times extending to **around 60 minutes** and **transport costs rising to 50 NIS.** These delays are particularly dangerous in pregnancy- and childbirth-related emergencies, where any disruption in referral pathways can have life-threatening consequences. Communities reported that uncertainty around travel time, coupled with the risk of delays at checkpoints or along insecure routes, often leads women to delay seeking care until conditions become critical.

Across both primary and hospital-level services, women's access to healthcare is shaped by a combination of geographical isolation, financial barriers, and protection risks. Long and fragmented journeys, the high cost of transport relative to household income, and exposure to harassment or insecurity along travel routes discourage regular health-seeking

behaviour. Movement restrictions and physical obstacles further undermine predictability and safety, while damaged or poorly maintained roads increase travel time and physical strain, particularly for pregnant women, older women, and those requiring frequent follow-up or chronic care.



I broke my foot on October 30, 2023. The Red Cross and the Palestinian Liaison arranged for an ambulance to come, but the soldiers refused, saying it was a curfew and we had to wait until the next day. I stayed in pain all night, and only the next day did they allow the ambulance in. I had to go to the hospital on crutches, with the help of my husband and children. Palestinian cars are strictly not allowed to enter unless they belong to the Red Cross or an ambulance, and even then, soldiers rarely allow them through. There was an elderly woman with cancer who needed to go to the hospital in Bethlehem for chemotherapy, but the soldiers did not let her leave and did not allow an ambulance to enter to pick her up. Another elderly woman fell and injured her chest, leaving her with severe pain in her ribs, but she was also stopped at the checkpoint and denied access to the hospital. The soldiers told us to wait, saying we were under curfew because of the war, and that these restrictions apply only to Palestinians." – Woman, age unspecified, West Bank

Children's health is also affected through disrupted preventive services and nutrition pathways. While 91% of communities report access to vaccination services, 13 communities report no access, and 10 communities reported undernutrition cases in the previous

At hospital level, these same challenges are amplified by greater distances and higher costs, turning access to referral care into a **high-risk and time-sensitive decision** for many women

three months. **Only 2% of communities report access to a psychologist or counsellor at the nearest primary facility, and 4% to a psychiatrist, leaving most women and children reliant on informal coping mechanisms.**

WeWorld's Response



WeWorld delivers a health-sensitive, gender-responsive approach across Palestine, with health outcomes primarily achieved through WASH-based prevention, infrastructural upgrades, risk reduction, and community engagement, rather than through comprehensive health or clinical care packages. In Gaza, this approach is implemented in shelters and displacement settings, while in the West Bank it is delivered primarily through WASH interventions combined with basic health-system support in coordination with local institutions. Across both contexts, women are central to programme design and implementation, ensuring interventions remain culturally appropriate, accessible, and responsive to displacement- and conflict-related risks.



WASH serves as the primary entry point, with emergency sanitation, solid waste management, safe water supply, and hygiene promotion directly reducing exposure to water-borne, skin, and infection-related diseases that disproportionately affect women and children in shelters, displacement settings, and vulnerable communities. These activities also contribute to the prevention of malnutrition-related infections. In both Gaza and the West Bank, hygiene kits are provided to reduce immediate exposure to infection risks and support personal dignity, while hygiene promotion activities are adapted to context and access constraints.



Women's and children's health needs are integrated through targeted hygiene actions, including menstrual hygiene management, distribution of dignity kits, and hygiene promotion sessions adapted, where possible, for pregnant and lactating women and caregivers, supporting dignity, safety, and daily coping capacities under crisis conditions.



Mental health and psychosocial support is integrated through community engagement, non-focused small group sessions embedded within hygiene promotion activities, peer support, and community-based approaches, particularly for women caregivers and children exposed to stress, trauma, and displacement. Local networks support early identification of stress, anxiety, and psychosocial distress, facilitating timely referral to appropriate specialised services.



Programming adapts continuously to access constraints, insecurity, and sudden displacement through community-based structures such as Local Hygiene Committees, women-led activities, and rapid response mechanisms. Cultural sensitivities are addressed through the engagement of female hygiene promoters and the use of safe and trusted community spaces.



Facility level actions focus on both demand-side measures that reduce immediate health risks and supply-side actions that strengthen nearby service points, including clinic construction, upgrading, rehabilitation, and furnishing.

Overall, WeWorld's approach across Palestine balances health engagement by focusing on **prevention, risk reduction, community-based support, and referral pathways**, while leaving clinical care to specialised actors. Future priorities include **expanding integration across health-, nutrition-sensitive WASH and mental health programming in both Gaza and the West Bank**, without substituting specialised clinical services.

Gender-based Violence and Protection Risks

GBV has severe and far-reaching consequences for women and girls across contexts, affecting physical health, mental wellbeing, mobility, and access to essential services. While the manifestations differ between Gaza and the West Bank, common patterns emerge: insecurity, restricted movement, weakened

health systems, and limited access to services intensify women's vulnerability and constrain their ability to seek protection and care.

In Gaza, GBV is closely linked to the broader humanitarian crisis, recurrent displacement, and the collapse of healthcare infrastructure. Survivors frequently suffer physical injuries, long-term disabilities, and life-threatening complications. Sexual violence exposes women and girls to unintended preg-

nancies, unsafe abortions, and sexually transmitted infections, risks compounded by the widespread lack of medical care. Among pregnant women, exposure to violence is associated with miscarriage, stillbirth, and complications during labour, all intensified by shortages of trained staff and essential supplies (UNFPA Palestine, 2025a).

Restricted mobility and insecurity further limit access to basic rights and services, particularly for persons with disabilities:



I shouldn't have to beg people to obtain services that are my basic right. Today, I have no independence, and I cannot rely on myself, not because I lack ability, but because the entire country is unsafe. I used to go to work on my own, but now I cannot even make the simplest visit without a companion. I am trained in issues related to gender-based violence against people with disabilities, and through my experience I know at least twelve cases of displaced families who were forced to leave behind their children with disabilities, and those children were executed in cold blood by the occupation. I also know families who prevented help from reaching their daughters simply because they are disabled. My greatest fear is that all of these crimes, all of these lives, and all of this suffering will eventually be reduced to nothing more than numbers, stripped of their names, their stories, and their humanity. – Woman, age unspecified, she has a visual impairment, Gaza

Healthcare workers in Gaza highlight the growing difficulty of providing care to survivors under these conditions:



Limited access to medical resources has made work even more difficult. For women and girls, some situations have been particularly challenging. Emergency deliveries or health complications during displacement, especially in areas far from hospitals, create high-stress conditions. Treating injuries caused by violence or accidents can be psychologically traumatic for both the patient and the caregiver. Cases that require strict confidentiality and privacy, such as those involving domestic violence or mental health issues, add an extra layer of difficulty, highlighting the sensitive and complex nature of the care women and girls often need. – Nurse, 26 years old, Gaza

In the West Bank, GBV has intensified under conditions of economic stress, insecurity, and restricted mobility, while access to survivor-centred health and protection

services remains limited. Damage to facilities and disrupted referral pathways restrict access to clinical management of rape, emergency contraception, STI treat-

ment, and psychosocial support (UNFPA Palestine, 2025a). At the household level, violence and control directly affect women's ability to access healthcare:



To this day, whenever I have a health problem, my husband refuses to take me to the doctor. When I tell him about my pain, he ignores me. Sometimes I have to borrow money from my brothers and sisters in order to see a doctor. – Woman, age unspecified, West Bank

Again, girls with disabilities face compounded risks due to neglect, exclusion, and lack of appropriate information:



Girls often experience psychological harm, sometimes unintentionally caused by others. In schools, girls with disabilities are not provided with education or guidance on personal hygiene during menstruation, and they do not receive the support or advice they need during this time. – Woman, 34 years old, mother of a girl with visual impairment, West Bank

Movement restrictions and checkpoint closures further exacerbate risks, particularly for mothers and caregivers:



I told the soldier that my house was just a few steps from the checkpoint and that it would not take him even three minutes to reach it. I pointed to my home and explained that he only needed to let me enter, because I am the mother of an eight-month-old child who was sick and I needed to check on him. Instead of listening, he shouted at me and ordered me to wait. During clashes in the West Bank between occupation soldiers and Palestinian youths, the first action taken by the soldiers is to close the checkpoints. When this happens, anyone who is outside their home becomes trapped outside, and anyone inside is trapped in. The soldiers do not require military orders to close checkpoints; they shut them arbitrarily, often inventing flimsy excuses such as claiming the computer system is down or the surveillance cameras are not working, simply to harass and control the local population. – Woman, age unspecified, West Bank

Across both contexts, GBV is reinforced by overlapping structural barriers. However, the pathways may differ. In Gaza, the collapse of healthcare and mass displacement intensify the health consequences of violence. In the West Bank, movement restrictions, economic stress, and disrupted services create persistent barriers to care and protection. Together, these dynamics demonstrate how GBV both reflects and deepens broader humanitarian and protection crises affecting women and girls.

Women's Resilience Strategies

Despite extreme hardship, women's resilience is expressed not only through material survival but through the sustained effort to find meaning, purpose, and psychological stability amid prolonged crises. **Across contexts, women draw on self-care rituals, spiritual coping, peer support, and engagement**

in family and community life to protect their physical and mental health and psychosocial wellbeing. These strategies help restore a sense of direction and agency in environments marked by loss, insecurity, and uncertainty.

In Gaza, resilience is often grounded in acts of care and service to others, which provide women with emotional anchoring and a sense of continuity:



Today, helping others is what gives me strength and stability. Whenever I witness the suffering of other people, I remind myself that I am still able to keep going. Seeing difficult cases—especially amputations and the struggles of elderly people—motivates me to continue. My ability to support others gives me purpose and resilience. I draw strength from responding to people's vulnerability and appeals for help, and this drives me to stand up and meet their needs. – Woman, age unspecified, Gaza

Family bonds and peer relationships also play a central role in sustaining psychological resilience:

“*Spending time with my children also makes a great difference; their laughter and simply having them close to me relieves stress and gives me the motivation to keep going. Talking with my friends and with women who share the same environment and experiences helps ease my worries. When I share my concerns with those who truly understand, I feel less alone. (...) In addition, engaging in community work gives me strength, because feeling that I have a role and that I am contributing something useful to others brings me positive energy. Despite all the difficulties, these small moments make a big difference in maintaining my psychological resilience and helping me continue.*” – Woman, age unspecified, Gaza

In the West Bank, while the crisis may be less characterised by mass displacement, movement restrictions and access constraints shape women’s resilience strategies. Women mobilise informal networks to protect health, dignity, and caregiving responsibilities, particularly around menstrual hygiene and basic supplies:

“*My periods were heavy due to the medications I was taking, and sometimes because we couldn’t get to the shops, I had to ask for these things like sanitary pads from my neighbour, and I wasn’t the only woman going through these conditions. When we were cut off from these needs, women in the area would wait for the school children when they returned to bring sanitary pads with them, and we would wait until the road was opened for such needs to be available.*” – Woman, age unspecified, West Bank

Health workers in the West Bank also adopt preparedness and coping strategies to manage chronic shortages and protect their families:

“*When these basic necessities are not available, I do the impossible to secure them. I search for soap and water by any means, because life cannot continue without them. I have learned to store water whenever it is available so that I can use it during times of shortage. I also make sure to keep a reserve of sanitary pads for my daughter, because this is not something that can be postponed or compromised. There must always be a backup, even if it is small.*” – Health worker, 59 years old, West Bank

Across both contexts, women-led peer support and community sessions play a critical role in sustaining psychosocial resilience. These informal spaces enable emotional release, mutual support, and the sharing of practical knowledge:

“*Women themselves hold awareness and psychological support sessions, creating spaces for emotional release and mutual support. Through these sessions, displaced women exchange experiences and positive energy, each contributing according to her specialisation, education, and life experience. The discussions focus on practical issues such as caring for the elderly during crises and how to deal with children under these extremely difficult circumstances. (...) Caring for others is a form of strength and resistance because those who have the ability to care for others in such circumstances have a supernatural and great strength and this is a kind of resistance by keeping myself and others strong, steadfast and able to confront.*” – Health worker, 59 years old, West Bank



WE CARE: Mental Health Is Lifesaving

Beyond statistical evidence and field observations, **the testimonies collected for this research offer indispensable insight into how psychological distress is lived, interpreted, and managed in everyday life across both Gaza and the West Bank.** Together, they reveal a pro-

found gap between the scale of mental health needs, particularly among women and girls, and the accessibility, acceptability, and social legitimacy of mental health support. **While trauma is pervasive, it is rarely named as such. Instead, it is absorbed into daily life, reframed**

as endurance, and managed through individual or collective coping strategies rather than formal care. In Gaza, several testimonies illustrate how emotional distress is actively suppressed by social expectations that equate strength with silence:

“*There were many people who used to communicate with us about the war, giving advice like ‘be patient, be patient (...)’ But the problem was that if we expressed that we were tired, frustrated, or overwhelmed, they would react as if it were forbidden to feel that way, as if it were shameful or unacceptable. We could never be fully honest about our feelings. We were expected to always appear strong, to never complain, to never admit weakness. This made it very difficult to talk openly, because it felt like we were not allowed to express anything. This attitude reflects a broader philosophy among the people of Gaza: in almost any circumstance, you are expected to endure everything without complaint. It is a cultural reality of constant endurance, even when it feels unbearable.*” – Woman, 33 years old, Gaza

This pressure to endure is mirrored, in different forms, in the West Bank. There, prolonged exposure to settler violence and military presence has led to a form of emotional desensitisation, and fear is gradually replaced by indifference as a survival mechanism:

“*Settlers attacks become a part of our daily life, and we have grown used to it. This constant presence has made us less reactive and less afraid; we have become indifferent to many of the things that happen. We have learned how to behave when the settlers arrive: we move away from them, ignore their provocations, and stay inside the house until they leave. They are always waiting for any action from us that could give them an excuse to attack or evict us. Knowing that I am not alone helps me cope. Everyone in the community suffers from the same conditions, and we all respond in the same way, supporting each other through this shared experience.*” – Girl, 17 years old, Bedouin community, West Bank

Across contexts, **this adaptation is often interpreted as resilience. Yet testimonies suggest that what appears as emotional strength is frequently a form of psychological numbing.** For example, one woman reflects on how overwhelming circumstances became “more bearable,” not because suffering decreased, but because tolerance for distress increased:

“*What’s remarkable is that I never became completely depressed. Things that could have overwhelmed me instead became more bearable.*” – Woman, 37 years old, she left Gaza and now lives abroad

But women also describe a more deliberate and pedagogical process, in which emotional restraint is actively taught to children as a survival strategy. Exposure to armed presence is reframed as normal and non-threatening, and fear is consciously discouraged:

“People are always on alert, and they make predictions of what might happen the next day. At first, the children were afraid of the army, but over time I started to encourage them and instil in them the conviction that this is our land, and there is no reason to be afraid, because we have not done anything wrong. And over time, they got used to these conditions, and when the army came, they didn't run home as before, but they stood and watched quietly. And that reflected positively on their personalities, and they became more powerful and stable.” – Woman, 27 years old, West Bank

In this sense, **resilience appears to shift into a form of resistance**: not overt or confrontational, but embedded in everyday practices of emotional regulation, meaning-making, and identity formation. **This process is intergenerational,**

as women transmit coping strategies, political consciousness, and behavioural norms to their children. As previously seen, while such strategies may foster stability and a sense of strength in the short term, they may also involve emo-

tional suppression, with potential long-term psychosocial costs that remain insufficiently visible. Indeed, other testimonies reveal how constant deprivation, loss, and uncertainty generate relentless mental strain:

“Humiliation is an extremely difficult feeling, and to be humiliated for not having basic necessities, I'm not talking about luxuries, is a very, very bad experience. There is no comfort in war, neither physical nor mental. You think and keep thinking about every small and big thing you need or don't need, about the future, about the worst that might happen, and about the best that might come.” – Woman, age unspecified, Gaza

“The ongoing occupation has a profound impact on both the sense of security and the daily lives of individuals and society as a whole. It creates a constant state of anxiety and fear due to daily threats such as checkpoints, searches, raids, and military confrontations. People may feel unable to plan for the future or experience stability at home, school, or work. Restrictions on movement and closed roads make it difficult for people to travel between villages and cities, increasing social isolation and weakening community ties.” – Woman, 26 years old, Gaza

Others describe emotional shutdown following repeated bereavement:

“The occupation affected my feelings toward everything. I no longer feel anything. A friend of mine once told me that he did not forget to bring me a Ramadan lantern this year, and he died eight days after that call. After that, I lost my passion for everything, and I felt as if I had lost all my loved ones at once.” – Woman, age unspecified, Gaza

Importantly, **psychological distress does not end with physical displacement**:

“But honestly, physical health is not in a better state than it was in Gaza. The psychological pressure we cannot get rid of, or the traumas we lived through in Gaza, are still deeply embedded in our health.” – Woman, age unspecified, she left Gaza and now lives abroad

Women also describe struggling to manage distress privately, often without space or permission to prioritise their own mental health

“When I feel stressed and need to get away from work or family, I go for a run or go up on the roof with a cup of coffee. I don't hide it...I just need a break. After all, I'm human. If I get angry, I sit quietly in one direction, and my children understand that I'm upset and leave me alone. Sometimes I even scream, but every mother yells at her children at some point.” – Woman, 47 years old, West Bank

For others, psychological distress directly affects physical health and treatment adherence:

“For my part, I neglected my medications because I feel depressed and the whole family interferes in my affairs and my children's affairs, the issue of depression has increased for me.” – Woman, 24 years old, Bedouin community, West Bank



Overall, mental health suffering is normalised, hidden, or managed alone, rather than supported through accessible services. **This dynamic is further unpacked in the following testimony from a health expert working with We-World, based on her direct engagement with women during this research. Her reflections illuminate not only women's reluctance to access formal mental health and psychological wellbeing services, but also the deeper social, cultural, and intergenerational forces shaping how distress is perceived, endured, and managed:**

“ During interviews with women conducted for this research, it became clear that many were hesitant to engage in follow-up through traditional referral systems or helplines. However, several said that if they had the opportunity to speak directly with a specialist, without intermediaries, bureaucracy, or paperwork, they would do so. This was particularly true for women who were already aware of how recent events were affecting their emotional wellbeing. Many others, however, were not yet fully conscious of this impact. We asked ourselves why women were so reluctant to discuss these issues. One key reason appears to be the persistent stigma surrounding mental health and psychological wellbeing. Admitting to emotional distress can carry social consequences, and for women this can be especially heavy. Younger women, in particular, expressed concern that being perceived as ‘unwell’ could affect their prospects for marriage. It is important not to judge the institution of marriage through a Western lens. In this context, marriage remains a central social structure, and choosing not to marry carries very different implications. While challenging patriarchal norms is essential, this is long-term work. In the present, women are carrying an overwhelming burden, with significant consequences for their mental health.

Women, who hold families and communities together, often live in a state of constant survival, as if trapped in an endless present. They minimise their own pain, partly as a coping mechanism, but also because their environment does not allow them to express it. They are told that others have it worse, that they should not complain, that they should be grateful to still be alive. As a result, they rarely have the time, space, or perceived right to acknowledge that something is wrong. Many women have assumed the role of the ‘man of the house’ after husbands were killed, detained, or disappeared, juggling caregiving, income generation, and emotional labour simultaneously. Palestinians have lived under these conditions for generations, and women appear to have developed an adaptive capacity that might be considered resilience, but which would be unsustainable elsewhere. It is like a wound that never fully heals.

People tell themselves, ‘I’m used to it,’ and so they do not seek help. Yet, beneath this adaptation, there is a growing awareness that this war has deepened the wound in unprecedented ways. This apparent resilience is often less a choice than a necessity. Women discover strength they did not know they had, but at a high cost: they rarely act for themselves and never fully stop. In an effort to avoid being seen as victims, they are pushed, by society and circumstance, into the role of heroines. Yet this raises a critical question: what purpose does such heroism serve when there is no vision of a future?

I have also observed, particularly in discussions within the diaspora, a tendency to frame Gaza’s suffering as inevitable or exceptional, ‘this is how Gaza is.’ This logic can justify or normalise extreme hardship and, over time, becomes internalised. When suffering is perceived as deserved or unavoidable, people are less likely to seek support or demand care.

The legacy of intergenerational trauma, combined with stigma and structural barriers, prevents mental health from being addressed as it should be. Mental health is a health issue, and it is lifesaving. Humanitarian interventions must therefore treat mental health as a cross-cutting priority, integrating it particularly within protection programming. Reducing intermediaries and enabling direct access to individual counselling is essential, as people need safe spaces to speak and to be heard. Without such support, women continue to bear unbearable burdens in silence, sustaining not only their families but the wider community. Recognising and addressing their mental health is essential, for survival, for dignity, and for sustaining hope in a future that too often feels out of reach.”

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EDUCATION

Since October 2023, repeated attacks on schools, universities, and cultural sites have severely damaged educational infrastructure and resulted in injuries and loss of life among students and teachers. Some analysts have described the scale and pattern of these incidents as “scholasticide”, referring to the widespread destruction of spaces essential for learning and cultural life (Nicoll, 2024). Across Gaza and the West Bank, children are experiencing displacement, hunger, psychological distress, and prolonged interruptions to their schooling. Girls and other marginalised groups are particularly affected, as disruptions to education tend to reinforce existing inequalities. In this context, education remains not only a fundamental right but also an essential source of stability, protection, and resilience for children and young people amid ongoing crises.



Gendered Impacts on Education in the Gaza Strip

The intensification of hostilities in Gaza has devastated the education system,

with attacks on schools resulting in both fatalities and injuries among students and teachers. Since 2023, over 17,000 students and 741 teachers have been killed, while more than 25,000 students and 3,096 educators have been injured. The educational system is at risk of collapse: for the third consecutive year, the 2025/2026 academic year began with almost no reliable, face-to-face education available to school-age children (Education Cluster, 2025b). **While all children are affected, girls face specific risks: increased domestic responsibilities, early and forced marriage, and movement restrictions mean that interruptions to schooling are more likely to become permanent for them than for**

boys. The loss of schooling threatens long-term economic prospects, as research indicates that losing a year of education can lead to up to a 10% decrease in income over time (Nicoll, 2024). The destruction is widespread: over 95% of school buildings have been destroyed, resulting in \$870 million in damage (ETF, 2025). Prior to the conflict, these institutions served half a million learners and employed over 20,000 educators, covering approximately 88% of students and 87% of educational personnel (Education Cluster, 2025a).

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Since 2023, over **17,000 students and 741 teachers have been killed**, while more than **25,000 students and 3,096 educators have been injured**

(Education Cluster, 2025b)

“Before the war, life was 100% different. My life, like the life of any Palestinian, was somewhat stable. We had big dreams, an image of life, and goals. As for me, I had recently completed a doctorate in mental health and psychological counselling. I was working on research with my supervisor, and I was about to begin discussing master’s theses. But when the war began, all of these things suddenly disappeared, and our lives literally turned 180 degrees...not only my life, but the life of all my people.” – Woman, age unspecified, Gaza

With limited infrastructure, students are forced to attend Temporary Learning Spaces (TLSs) in tents or damaged buildings. TLSs are often exposed to harsh weather and are continuously at risk of demolition or displacement orders; 164 TLSs have been affected in 2025, interrupting education for more than 99,000 students and nearly 2,800 educators (Education Cluster, 2025b). Female teachers, while vital in enabling girls’ access and monitoring safety, face the same security constraints, household burdens, and childcare responsibilities as the learners they support, further limiting their capacity. **TLSs focus on restoring “safe routine” rather than full curricular coverage.** The learning environment is shaped by scarcity of materials, staff discontinuities, acoustic overload, and the need to adapt to overcrowded or unsafe spaces. Despite these limitations,

TLSs and community-based programmes attempt to maintain structure, provide basic stabilisation, and support psychosocial wellbeing.

LOSS OF CHILDHOOD

The collapse of schools has eroded childhood itself. **Children are forced into adult responsibilities such as queuing for water and food, caring for siblings, and contributing to household income. These responsibilities fall particularly on girls, who are often expected to care for younger siblings and manage household tasks, further shrinking the time and energy available for study and school attendance.** These shifts undermine psychosocial development and expose children to risks like child labour or recruitment into armed groups (Menth and Al-Madi, 2025; Nicoll, 2024).

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“I wish I could go back to the school benches, to carry my bag, wear my uniform, and sit in the classrooms. I long to continue my studies, to see my teachers and classmates again.” – Girl, 17 years old, Gaza



My hope is that my children, through this period of displacement, can receive better education, have wider opportunities, and have doors opened for them around the world so they can gain real experiences far from occupation, far from the borders and the prisons we used to live inside.” – Woman, age unspecified, she left Gaza and now lives abroad



Another factor that pushed me to leave was that the education system was collapsing completely. How could I continue living like this? How could my children study or learn? Their education was crucial to me, so I immediately started thinking about leaving Gaza.” – Woman, 37 years old, she left Gaza and now lives abroad

Teachers report extreme challenges managing classrooms: high student-to-teacher ratios, destroyed furniture, lack of writing materials, and students coping with trauma. Female teachers, in particular, navigate these conditions while attending to their own families' safety and survival.



Teaching is a very painful experience. I don't feel like a proper teacher anymore; I am mostly trying to maintain calm and control in the classroom. (...) Two academic years have been lost, and students do not know even the simplest basics. The student-teacher relationship has also suffered. Many students are absent-minded, withdrawn, or even violent, and they need psychological support that is not available. Female teachers face confusion and exploitation. We have to leave our own children to go to school, often with no available resources, no blackboards, no chairs, no tables. Children sit on the floor, and we have to explain lessons group by group, sometimes only using a notebook.” – Teacher, age unspecified, Gaza



Gendered Impacts on Education in the West Bank

Since October 2023, the West Bank has experienced escalating violence and instability, profoundly affecting access

to education. Over 813,000 students face barriers to safe schooling due to over 850 military checkpoints and road barriers, attacks by Israeli settlers, and the demolition of school buildings (Education Cluster, 2025a). During the 2024/25 academic year, the Education Cluster recorded 2,040 education-related incidents, with half occurring in Area C, impacting 541 schools and 84,749 students. **School closures due to military operations disrupted learning, while 85 schools face demolition orders, threatening education for 13,005 students (6,557 girls) and 1,089 teachers (ibid.).**

At the start of 2025/26, continued security deterioration and movement restrictions kept 10 UNRWA schools in

northern West Bank camps and six in East Jerusalem closed, affecting about 5,200 students (oPt, Flash Appeal 2026). In Jenin and Tulkarm, sustained military operations have repeatedly halted schooling, forced the closure of UNRWA and government schools, and left thousands of students unable to attend regular classes because of insecurity, displacement, and restricted movement. Many families were displaced or displaced children had to miss months of school (OCHA, Sept 2025). Many students were suddenly forced into online learning, but infrastructure constraints and lack of devices created further inequities.

Over **813,000 students** face barriers to safe schooling due to over **850 military checkpoints and road barriers**, attacks by Israeli settlers, and the demolition of school buildings

(Education Cluster, 2025a)



Schools were closed and we could not continue teaching in the usual way. We then shifted to e-learning, but the environment we live in is made up of ordinary people who lack adequate infrastructure. Access to technology and communication tools is limited and often unreliable. Many students do not have devices, and internet access depends on recharging phone SIM cards, which is not always possible.” – Teacher, 47 years old, West Bank

Data collected by WeWorld through the Community Protection Approach (CPA) assessment across 195 communities shows that physical proximity to schools does not translate into real access to education. While **over four-fifths of communities report that the nearest public primary school is located within their municipal or community boundaries**, access remains severely constrained, with **more than two-thirds of communities still facing significant barriers**.

These barriers are largely linked to long and unsafe journeys to school, exposure to settler violence along access routes, the absence of school transportation, and movement restrictions imposed through checkpoints, walls, and other man-made obstacles. Even where schools are geographically close, fear, insecurity, and restricted mobility continue to prevent children from attending regularly.

Access challenges are even more pronounced at the secondary level, where **over three-quarters of communities report persistent obstacles**. Longer travel distances, heightened security risks, lack of school buses, and movement restrictions disproportionately affect adolescents, increasing dropout risks, particularly for girls. As a result, schooling is frequently disrupted, face-to-face learning time is reduced, and reliance on remote or irregular learning has increased, contributing to widening learning gaps and growing teacher exhaustion.



This year, education has been reduced to three days instead of five, and new methods are being tried, such as open education without textbooks for students. Teachers often cannot afford laptops to keep up with modern teaching, which increases their workload. Schools do not provide these resources. Additionally, the curriculum is generally beyond the students' abilities. It doesn't account for individual differences and contributes to gaps in learning. For students who lack basic skills, parents rely entirely on the teacher's explanation, but teachers lack the necessary resources. All of these factors have resulted in weak and regressive education. The social status of teachers has also declined, especially since they are not receiving their full salaries or benefits.” – Teacher, age unspecified, West Bank



As a teacher during the war, my role felt like a real struggle in itself. From morning until around 11 or 12, according to my schedule, I taught children online. From 12 to 1, I prepared meals with the limited food we had, while the children helped a little with tidying the house. After that, I conducted face-to-face group lessons for children of different levels—preparatory, first grade, and second grade—all together. I tried to integrate them, teaching as a group despite their different ages and abilities. We continued until around 4 o'clock, after which the day was completely spent.” – Teacher, 47 years old, West Bank

LOSS OF CHILDHOOD

The disruption of schools has forced children into adult responsibilities, eroding childhood itself. Household chores, caregiving, and economic activity often replace education, particularly for girls in Area C.



I do not go to school. My responsibilities are limited to working inside the house and helping my mother with cleaning and cooking...We do not have a TV to pass the time, and I do not carry a mobile phone because, in our family, it is forbidden for a girl to have one. None of us can go out of the house freely. Someone must always stay at home to protect the house from settlers (...) Staying inside is not a choice but a necessity for our safety and the protection of our home...Before the war, my life was very different: I attended school, participated in activities, volunteered in community centres, spent time with friends, visited neighbours, and went with my family to see relatives. Now, everything has changed. We can no longer go out freely, and I stay at home all day, every day, with no escape from this confined life.” – Girl, 17 years old, Bedouin Community, West Bank

According to CPA data, children with disabilities face significant exclusion. 45 communities report no children with disabilities attending primary school, and systemic exclusion is even more pronounced at secondary level. **Gendered outcomes emerge strongly in adolescence: girls are twice as likely to drop out after age 12, particularly in rural areas, while boys face increased risk of dropping out to support household income.**



The most prominent challenge I faced was being a single mother with a child who has a disability. My husband left us when my daughter was just five days old because he refused to care for her (...) My daughter has a visual impairment, and her eye needed urgent medical attention, which meant travelling for surgeries and treatment (...) My biggest concern was ensuring she could receive proper care and education, but her father refused to provide financial support (...) Because of her visual impairment, she needed to study in a private school that uses the Braille system, which doesn't exist in Tulkarm; she had to go to Ramallah. She was able to attend for only a month due to the high costs, difficult transportation, and the effort required to complete her studies there. After October 7, I lost my job and could no longer meet my daughter's needs or cover her treatment and schooling. This loss meant she missed years of education, despite her intelligence.” – Woman, 34 years old, West Bank

Data from the CPA confirm that Socio Emotional Learning (SEL) needs are high: children experience fear, hypervigilance, grief, anger/irritability, sleep disturbance, and difficulty concentrating (UNICEF, 2025). Female teachers are central to maintaining safe learning spaces, delivering SEL routines, and identifying protection concerns, yet they are also limited by safety and mobility challenges.

WeWorld's Response



WeWorld delivers **integrated Education–Child Protection–MHPSS programming** across Palestine through a unified approach adapted to context and delivery modality. In Gaza, where formal education has been interrupted in the past two and a half years due to the latest war, activities are implemented through Temporary Learning Spaces (TLS) and other temporary learning arrangements in displacement sites, while in the West Bank the same principles and activities are delivered within formal school settings. Programming prioritises **predictable routines, structured group learning, and Socio Emotional Learning (SEL)–informed activities** to restore a sense of safety, regulation, and continuity for children affected by crisis.



Safe, structured learning environments are established through play-based, child-friendly approaches, co-operative tasks, and calming routines that reduce distress and support re-engagement. Social and emotional learning is embedded in daily sessions, including emotion recognition, grounding and breathing techniques, peer support, conflict resolution, and problem-solving, with differentiated approaches for younger children and adolescents.



Protection mainstreaming and safeguarding are integrated across education activities in both Gaza and the West Bank, including staff codes of conduct, supervised sessions, safe-session rules, and child-friendly feedback and complaint mechanisms. Education touchpoints support the identification of protection risks, including exposure to violence, neglect, separation, exploitation, and early marriage risk, with safe referral pathways activated through coordination with specialised Child Protection actors and established Standard Operating Procedures (SOPs). Particular attention is given to identifying girls at risk of early and forced marriage or other forms of gender-based violence, using education spaces as an entry point for safe disclosure and support.



Girls' participation and inclusion are supported through female teacher and facilitator presence where possible, culturally sensitive scheduling, attention to privacy needs, and the availability of adolescent-girl-focused spaces or sessions to increase comfort, participation, and safe disclosure. Menstrual dignity needs are addressed through referral and linkage mechanisms, alongside MHM-sensitive messaging and practical support when available. Inclusive strategies are adapted for children with disabilities.



Psychosocial support for education staff is embedded through coaching on SEL delivery, crisis classroom management, and psychological first aid basics. Peer-support mechanisms, including group check-ins and debriefs, help mitigate secondary trauma among teachers and facilitators. Parent and caregiver engagement reinforces safeguarding awareness, supports girls' attendance, and strengthens positive coping at household level. Community-based volunteers support outreach, attendance follow-up, and dissemination of safe-access information.

Especially in Gaza, **programme design adapts to damaged, overcrowded, or resource-constrained infrastructure** through flexible shifts, rapid set-up learning corners where needed, low-material activities, and modular session plans. Crowd-management and safe-spacing principles are applied to reduce stressors and protection risks, while contingency planning allows rapid adjustment to access restrictions, relocation, or site closure.

Additional context-specific measures are implemented in the West Bank, where education activities take place in schools rather than TLS. These include **school safety and infrastructure improvements** such as rehabilitation and yard works, installation or upgrading of school WASH facilities, provision of sunshades, and distribution of safety equipment including fire extinguishers and first-aid kits, alongside first-aid training. **Protection-oriented actions** also include the establishment of **complaint and reporting mechanisms for violations and harassment**, addressing gaps in reporting in contexts where incidents are underreported. Overall, this package combines **exposure reduction** with **preparedness and response measures** (safety equipment, training, and reporting systems), contributing to safer school environments for children and education staff in the communities of the West Bank that are most underserved or under pressure due to ongoing displacement.

Gender-based Violence and Protection Risks

The erosion of safe and accessible education environments significantly heightens protection risks for girls and young women. Across affected communities, the breakdown of schooling removes one of the few protective spaces available to girls and increases exposure to

gender-based violence, early marriage, and exploitation. Families facing acute economic hardship may view marriage as a survival strategy; in some cases, girls under 16 have been married off in exchange for basic necessities (Women's Refugee Commission, 2025). Temporary learning spaces often lack privacy, gender-appropriate WASH facilities, and adequate safety measures, further exposing girls to harm. These vulnerabilities are especially acute for girls with disabili-

ties, orphaned children, and those separated from their families (UNFPA, 2025).

In the West Bank, protection risks are particularly visible along school routes and at checkpoints, where girls face harassment, sexualised violence, and severe mobility restrictions.



High school girls, when passing through checkpoints on their way to school, were subjected to very humiliating searches by soldiers. Some girls even gave up their dream of education because of these practices and harassment. Parents felt they had no choice; for example, one high school girl stopped attending school after being harassed, because her parents feared she might be assaulted. Dropping out became the only option, and a young girl's dream of completing secondary education and shaping her future was lost. Girls and women are also subjected to verbal abuse, as well as provocative (...) gestures and comments from soldiers.” – Teacher, age unspecified, West Bank

These threats frequently lead families to restrict girls' education as a form of protection. Indeed, fear of violence, delays, and mobility constraints can directly prevent girls from pursuing higher education:



I have a daughter who finished high school, and it became necessary for her to join the university, even though she is married and has a child. No one objected to her pursuing her education, despite the difficult financial and living conditions we face. However, when I took her to register at the university, we faced delays and the hardships caused by road closures and checkpoints. I feared that she would be late frequently, face great difficulties on the roads, and risk encounters with settlers who might obstruct, detain, or harm her. Because of this, I decided to prevent her from joining the university for the time being, hoping that God would improve the situation and allow her to continue her education safely in the future.” – Teacher, 47 years old, West Bank



Field observations indicate a significant rise in early and forced marriage in areas surrounded by checkpoints and settlements, as families attempt to remove girls from environments perceived as dangerous.

While these decisions are often framed as protective, they are closely linked to social norms around family honour and fears of harassment or violence. Field observations indicate a significant rise in early and forced marriage in areas sur-

rounded by checkpoints and settlements, as families attempt to remove girls from environments perceived as dangerous. In some communities, the absence of girls-only schools further discourages attendance, as families prefer not to send

daughters to mixed settings. As a result, gender norms and safety concerns interact to limit girls' mobility and educational opportunities.



Many girls either do not receive an education at all or drop out at an early stage, unlike boys, who are more likely to complete their schooling. This disparity is largely due to difficulties in access, which tend to be more severe for girls, not because they are unable to access education, but because social perceptions and norms restrict their mobility. Testimonies from girls in early marriages reveal a strong desire to continue their education. Their exclusion from social media in these areas also plays a role, as it is perceived as a means of enforcing conservative norms and further isolating them.” – Woman, representative of the Women's Centre for Legal Aid & Counselling, West Bank

Evidence confirms that schools and school routes themselves are often sites of heightened vulnerability rather than guaranteed safe spaces. CPA data show that one quarter of assessed communities reported protection incidents inside or near schools, yet only a minority resulted in formal complaints. Fear of retaliation, lack of trust in reporting mechanisms, and social pressure—particularly

affecting women and girls—contribute to widespread underreporting.

These risks intensify at the secondary level, where dropout has been reported in over one third of communities, especially in Hebron and Jericho. Here, access constraints, protection incidents, and economic stressors intersect. Household poverty, combined with entrenched

gender norms, increases the likelihood that families deprioritise girls' education, restrict their mobility, or withdraw them from school due to safety concerns.

Alongside mobility restrictions and protection risks, social expectations and domestic dynamics also shape girls' educational trajectories.



I began to truly feel myself when I reached high school. I realised that I was living in a very strict society and that I needed to study hard to build a better future for myself than the one I had experienced with my family. I focused on achieving high grades so I could enter the best universities. My dream was to study journalism, media, or law. But my reality was that I was living in a Bedouin society, with all its limitations and expectations. This reminds me of an incident in high school when I delayed choosing the scientific branch. My older brother came and tore up all my books because I had planned to study in the scientific branch outside the region. As a result, I had to transfer to the literary branch. During this period, several men proposed to me, and my brothers agreed to my marriage.” – Woman, 24 years old, Bedouin Community

Intra-household violence further restricts participation in education. Prolonged exposure to violence or witnessing abuse undermines children's sense of safety and wellbeing, generates stress and trauma, and impedes their ability to learn. Across both Gaza and the West Bank, girls face intersecting risks driven

by insecurity, poverty, and entrenched gender norms. However, while checkpoint harassment and mobility restrictions are particularly prominent in the West Bank, broader structural barriers—including unsafe learning environments, early marriage as a coping strategy, and domestic violence—cut across contexts.

In combination, these factors reinforce gendered patterns of exclusion and undermine girls' sustained access to safe, quality education.

Women's Resilience Strategies and the Role of Teachers

Despite pervasive insecurity, displacement, and material deprivation, women—particularly teachers—play a central role in sustaining education, protecting children, and providing psychosocial support across diverse contexts. **When participation is safe, confidential, and**

well-structured, women's engagement in education functions as a critical protection mechanism. Female educators and community members facilitate feedback, identify children at risk, and support referral pathways, while adapting learning environments to reduce harm. These adaptations include small-group sessions, privacy-sensitive layouts in temporary learning spaces, and targeted attention to girls with disabilities. **Beyond immediate pro-**

tection, women teachers also model alternative gender roles, demonstrating women's leadership in public and community life and contributing, over time, to shifts in social expectations for both girls and boys.

In Gaza, women's resilience is often expressed through persistence in prioritising education despite displacement, loss, and extreme hardship:



A widow with four children (...) strives to educate her children despite extreme displacement and overwhelming hardships. She sends them to a school far from her temporary home, determined to provide them with an education. Her persistence and dedication to her children are her source of strength. – Humanitarian worker, age unspecified, Gaza

Women in Gaza also take on collective roles that extend beyond formal schooling, combining education, care, and mutual aid. One woman highlighted how women-led initiatives continue even amid siege and scarcity:



Many women have also participated in educational and awareness initiatives, leading workshops and lectures to teach children and other women the basics of health, hygiene, and legal rights, even with very limited resources. In times of crisis, such as during sieges or food shortages, women come together to distribute aid to families in need and prepare communal meals to ease the burden on mothers. – Woman, age unspecified, Gaza

This commitment to education is often framed as a source of collective identity and survival:



You see a woman moving among the tents, searching for a volunteer teacher to educate her children, even though she herself struggles to provide enough food for them. This is exactly what I have said from the beginning: the reason I wanted to leave was to continue my children's education. Our people have never been a people of ignorance. Our strength has always come from education, and behind that strength has always stood the Palestinian woman. – Woman, 37 years old, she left Gaza and now lives abroad

In the West Bank, while displacement may be less acute, teachers operate under persistent movement restrictions, insecurity, and protection risks. Within these constraints, educators creatively adapt teaching methods to preserve learning, emotional safety, and a sense of normalcy:



Education has changed in many ways. We focus instead on activities that provide emotional and academic support. (...) I try as much as possible to be friendly, approachable, and close to my students because I believe that a teacher's proximity and the student's trust are essential for learning. I always aim to make the material easy to understand, presenting it in a smooth and engaging way, often using music, songs, and drawing to enhance learning. When teaching students at my home, I use games and songs, take them outdoors to explore the fields and bushes, and organise sports activities in the street. I love teaching and seeing them enjoy their studies. What helps me stay strong while supporting students who are scared, exhausted, or displaced is their love and encouragement. Their attachment to me and their eagerness to learn give me the strength to continue. – Teacher, 47 years old, West Bank

Across both contexts, teachers maintain routines, creatively adapt lessons, and offer emotional support—often at personal risk—to help children cope with fear, exhaustion, and displacement. Whether in settings of mass displacement or under chronic movement restrictions, women and teachers remain at the forefront of sustaining education, protection, and hope for future generations.

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LIVELIHOODS

Access to livelihoods is not gender neutral. For Palestinian women, income is directly linked to privacy, dignity, decision-making power, and protection. When livelihoods collapse, women's dependence increases, unpaid care responsibilities expand, mobility is constrained, and exposure to gender-based violence intensifies. Livelihoods, therefore, sit at the centre of women's protection and survival under conditions of occupation, displacement, and protracted crisis.



Women's Livelihoods and Economic Experiences in the Gaza Strip

Before October 2023, Gaza's economy was already fragile, shaped by decades

of military occupation, blockade, and economic isolation. The fragmentation of Gaza into isolated enclaves severely restricted the movement of people and goods, producing chronic unemployment and widespread poverty. **By 2023, nearly eight out of ten Palestinians living in poverty resided in Gaza, where the poverty rate rose from 38.8% in 2011 to 63.7%** (World Bank, October 2025).

Women faced particularly precarious conditions within this context. **Female labour force participation stood at 17.9%, among the lowest globally, while unemployment reached 41%, nearly double that of men** (World Bank, 2024). Women's economic participation was largely confined to a narrow range of sectors, predominantly education, public adminis-

tration, health, and social services. Rural women, small farmers, and entrepreneurs struggled to access land ownership and productive resources, while many contributed to family farming and subsistence agriculture through unpaid labour (FAO, 2024). These structural constraints were reinforced by patriarchal norms, legal restrictions on certain types of work, workplace harassment, and the lack of childcare infrastructure, collectively limiting women's ability to enter, remain in, or advance within the labour market. Women repeatedly described how economic exclusion shaped their social roles, limited decision-making power, and increased dependence on male relatives — vulnerabilities that intensified dramatically after October 2023.

“One of the most significant challenges I faced as a woman during the years of the siege leading up to October 7 was the high unemployment and the near-total lack of job opportunities, particularly for women. With the continuous closure of crossings, economic prospects became extremely limited. Many women, despite being highly educated and professionally qualified, were unable to exercise their basic right to work. This challenge was not only financial but also psychological and social, as women often felt helpless and overburdened despite their relentless efforts to support their families. As a result, many were compelled to accept temporary, low-paid, or even unfair work just to preserve a minimum level of dignity and independence.” – Woman, age unspecified, Gaza

Livelihood insecurity also shaped women's household arrangements and exposure to conflict and dependence:

“My life was hell before the war, I was living with my husband and our financial situation was very, very weak, so I was saving money intensively for him and I to buy a separate house so that he and our children would settle down and stay away from my problems with his family, my life with them was full of problems for the most trivial circumstances” – Woman, age unspecified, Gaza

IMPACT OF THE 2023 ESCALATION

The escalation of violence in October 2023 marked a devastating rupture for Gaza's economy and women's livelihoods. Real GDP contracted by 87.4 percentage points between 2023 and 2025 (ILO, 2025), pushing the entire population of 2.3 million into poverty (UNCTAD, 2025). Female unemployment soared to 67%, compared to 39% for men (ILO,

2024). Livelihood sectors that had sustained households were almost entirely destroyed. Agriculture and fishing collapsed, with 86% of cropland damaged, only 1.5% of farmland remaining usable, and 83% of water wells destroyed (UNCTAD, 2025). Legal and social barriers further compounded this collapse. The absence of effective anti-discrimination protections, combined with heightened insecurity and entrenched patriarchal norms, continued to restrict women's ac-

cess to formal employment and widened gender pay gaps (FAO, 2021). These losses also erased women's informal income sources — home-based production, small-scale sales, tailoring, and food processing — eliminating economic autonomy that many had built over years. For women inside Gaza and those who later left, economic insecurity emerged as a central obstacle to coping, recovery, and mental health:

“Financial stability is key. Not having to worry about having a roof over you, your family's head, having food on the table. Affording medical aid is a basic human right. Taking off the economic burden would help women deal with other mental problems. You can treat a person with PTSD worrying about where she's staying next month, or what is going to feed her kids that day. Helping women find jobs is the first step to help them adapt or cope.” – Woman, 39 years old, she left Gaza and now lives abroad

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(ILO, 2025; UNCTAD, 2025)



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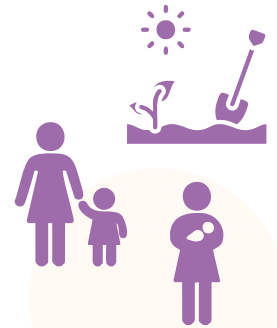
Even women who retained savings were often unable to access them safely due to banking collapse and exploitative cash withdrawal mechanisms:

"A major challenge is the lack of cash. I have money in the bank, but to withdraw it I must do so at a loss. I am forced to lose more than half of the amount just to be able to spend and meet basic needs." – Woman, age unspecified, Gaza

CARE WORK AND HOUSEHOLD SURVIVAL

Palestinian women have historically borne the majority of unpaid care work, spending an average of 35 hours per week on childcare, household duties, and family agriculture, compared to men's five hours (UN Women, 2020). The conflict dramatically intensified this burden. Limited access to water, electricity, and cooking gas transformed routine domestic tasks into time-consuming, physically exhausting labour. These daily survival tasks – water collection, firewood gathering, bread baking, laundry by hand

– have become life-threatening under bombardment and displacement. Displacement and the destruction of homes further expanded women's responsibilities, often forcing them to manage survival for entire families under conditions of extreme scarcity.



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(UN Women, 2020)

"After my parents passed away, I felt completely without support in life. Each day became a struggle just to survive, waiting in line for water, baking bread, searching for firewood or fuel. I have been displaced 14 times, and with each move, I lost not only money and possessions but also a part of my dignity." – Girl, 17 years old, Gaza

"The domestic and family responsibilities placed on me increased significantly. I found myself taking on roles I had never carried before. At times, I felt overwhelmed by the sheer number of tasks like fetching water, washing by hand, baking in a clay oven, and cooking over an open fire. The constant strain left me exhausted and worn down by life itself. At times, the harshness of our circumstances felt deeply insulting." – Woman, 26 years old, Gaza

For widows and women who lost male relatives, care responsibilities expanded to include full economic and emotional responsibility for children and extended family members:

"My responsibilities increased and changed dramatically after my husband's death, so I became a mother and father to children..." – Woman, age unspecified, Gaza

Women repeatedly described how the collapse of infrastructure multiplied their roles and drained their physical and emotional capacity:

"I used to be a mother and a teacher, but now I am a mother, a teacher, a researcher for water, a shopper for food, and I wait my turn to bake bread..." – Woman, age unspecified, Gaza

Others spoke of becoming sole providers for elderly parents as well as children, with entire days consumed by survival tasks:

"Because of this, I often feel that my entire day passes without any real benefit, only exhaustion." – Woman, age unspecified, Gaza

For others, the rupture between past aspirations and present realities remained stark:

"From high goals and ambitions like discussing master's theses, my goals became just lighting a fire and helping my mother..." – Woman, age unspecified, she left Gaza and now lives abroad



Women's Livelihoods and Economic Experiences in the West Bank

Before the escalation of violence and occupation in 2023, poverty in the West Bank had been slowly declining, from 17.8% in 2011 to 11.7% in 2023 (World Bank, October 2025). **Economic opportunities were more diversified than in Gaza, yet this did not translate into equitable access for women and girls.**

Military operations over 2025 especially in the North of the West Bank have had a severe impact on livelihoods, particular-

ly for daily-wage workers, small traders, farmers, and informal workers. Recurrent raids, prolonged closures of refugee camps, roadblocks, and checkpoints have restricted access to workplaces, agricultural land, and local markets, resulting in widespread income loss and business disruption. Damage to infrastructure and displacement of families especially in Jenin, Nur Shams, and Tulkarm camps have further eroded household coping capacities, forcing many families to rely on negative coping strategies such as debt, reduced food consumption, or child labour. The prolonged insecurity has also discouraged local economic activity and investment, deepening poverty and unemployment in an already fragile socio-economic context.



Structural barriers rooted in entrenched patriarchal norms, legal restrictions, and unequal access to productive resources continued to limit women's economic

agency, particularly in rural and Bedouin communities. **Women's roles were often defined by responsibility rather than control.** Women from rural com-

munities carry out substantial agricultural labour, yet rarely benefit from its proceeds, which are typically controlled by male relatives:



Palestinian women play complex roles as mothers, wives and women who are active in society, and these roles are not easy. The dialogue with the husband is a part of it (...) For example, rural women are responsible for agricultural work, but women's access to the proceeds of agricultural work is very limited, and it usually goes to the man who spends it on his favourite smoke and other things."

- Woman, representative of the Women's Social Counselling Centre

For many women, these inequalities began in childhood, with unpaid labour and caregiving responsibilities shaping their lives from an early age:



My life was full of suffering. Our houses were in very poor condition, and water was hard to reach. When I was eight years old, I used to ride a donkey and travel long distances just to fetch water. This Bedouin society expects girls to start hard work from a very young age. For example, I never formally learned to cook, yet I found myself in the kitchen with my mother, cooking every day. I had a huge responsibility to cook for my brothers. Since childhood, my sisters and I were exhausted. My father was sick, my older brother was in prison, and five of my other brothers were at university. It became our responsibility to gather firewood, work the farm, etc. I remember being twelve years old, carrying all these responsibilities while living under these harsh conditions."

- Woman, 24 years old, Bedouin community, West Bank

IMPACT OF THE 2023 ESCALATION

Since October 2023, the West Bank has experienced a sharp economic downturn. Short-term poverty increased from 12% pre-conflict to 28% by late 2024, pushing more than 339,000 additional people into poverty (World Bank, September 2025). According to World Vision International (2025), 74% of families now live below the minimum standard of living, compared to 21% in 2023. Real GDP declined by 17.1% between 2023 and 2025 (ILO, 2025). While some sectors showed limited recovery in 2025, construction and transport continued to contract due to movement restrictions. The agricultural sector, traditionally a coping mechanism in times of crisis, recorded a 26.8% increase in value added

compared to 2024, underlining its role in sustaining rural livelihoods despite mounting pressure (ibid.). **Unemployment reached 31.7% for men and 33.7% for women in 2025, while female labour force participation declined further due to caregiving responsibilities, restricted mobility, and shrinking job opportunities** (ILO, 2025). Women-owned businesses were particularly affected: 62% reduced staff, 58% reported decreased operations, and 18% resorted to under-employment (UNCTAD, 2025).



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For many women, the economic shock translated directly into heavier workloads, fear, and exposure to violence. A woman from a Bedouin community describes how economic dependence, domestic labour, and control over her movements intersect in her daily life:

“ In the morning, I bake bread, and if I am late, my husband becomes angry. I prepare breakfast for the children before they leave for school. After that, I work with the sheep, feeding them, cleaning them, milking them, and working in cheese production. I also prepare lunch for the children, and when they return from school, I continue working with the sheep. I try to stay busy all the time with housework and tidying, mainly to avoid seeing my husband. I live in fear of nightfall because I cannot bear to face him; he becomes very angry, forces me to do many tasks, and beats me if I do not follow his instructions.” - Woman, age unspecified, Bedouin community

Others describe how the loss of partners, income, or social protection forces women into sole responsibility for children while simultaneously exposing them to social interference and judgement:

“ Reality forced me to be a mother and father to my children and all those around me interfere in my life because I am without a husband currently” - Woman, 24 years old, Bedouin community, West Bank

Movement restrictions have also made formal employment increasingly difficult to sustain:

“ I was employed shortly before the war, as I started working in June. At first, things were normal and stable, and I worked without any difficulties. However, the situation changed after the war, as it was almost impossible to work under frequent and daily closures... As a result, I would arrive home without being able to continue my children’s studies, meet the needs of the house, or take care of my young children, which greatly increased the responsibilities and pressures.” - Health Worker, age unspecified, West Bank

CARE WORK AND HOUSEHOLD SURVIVAL

Women in the West Bank continue to bear the primary responsibility for unpaid care work, including childcare, eldercare, domestic chores, and agricultural labour. **These responsibilities restrict women’s participation in the labour market, particularly when access to formal employment is constrained by movement restrictions, safety concerns, or the lack of childcare infrastructure.**

Data from the Community Protection Approach assessment conducted by WeWorld in 195 communities highlights how care responsibilities shape women’s

economic options. **Women’s available work is largely local, home-based, or agricultural, reflecting both caregiving obligations and restricted mobility.** Domestic work and housekeeping are most commonly reported as the only available employment options, followed by seasonal agricultural labour and herding or livestock care. Opportunities for stable or higher-earning work remain extremely limited, reinforcing cycles of economic dependency and insecurity.

At the same time, many livelihood programmes fail to account for childcare responsibilities or to adopt inclusive approaches for women with disabilities, who experience **systematic exclusion**

from economic opportunities. These gaps further restrict women’s participation and compound vulnerability. Household coping strategies increasingly reflect the growing pressure placed on women’s time and unpaid labour, as they absorb economic shocks while balancing care responsibilities, informal work, and household survival needs.

Across communities, 92% report that households are in debt, a situation that has become nearly universal as families struggle to cope with prolonged access limitations and livelihood constraints. Many families are exhausting limited savings or selling assets to meet basic needs, steadily eroding their resilience.

As adult coping capacity becomes increasingly overstretched—particularly for women, who shoulder a disproportionate burden of unpaid care—households are increasingly turning to harmful strategies to meet their basic needs. In some communities, this pressure is translating

into **child labour, with girls disproportionately affected as they are pushed into income-generating activities or domestic work to compensate for reduced adult availability.** These dynamics highlight how economic stress, gendered care burdens, and limited access to services

intersect to heighten protection risks for children, especially girls.

Within this context, women describe the emotional conflict between paid work and caregiving, and the constant calculation required to sustain family survival:

“ I often think of quitting my job, especially when faced with a difficult situation or one of my children gets sick. But when I think about our lives before the job and how it changed after I got it, I tell myself I have to keep going.” - Woman, age unspecified, West Bank

WeWorld’s Response



WeWorld works in the West Bank to address the compounded effects of conflict, movement restrictions, and economic precarity on women’s livelihoods through:



Economic Empowerment and Livelihood Support: WeWorld supports women’s livelihoods through small-scale projects, skills training, and capacity-building programmes. These initiatives help women start home-based businesses, engage in agriculture, handicrafts, or other income-generating activities, and increase their economic independence. Programmes are designed to be flexible, recognising that most women balance household and childcare responsibilities.



Care Work and Time-Sensitive Support: Programmes take into account women’s unpaid care work, providing solutions that allow participation close to home or through remote work. By acknowledging the disproportionate care responsibilities women bear, interventions help free up time for income-generating activities and skill development.



Psychosocial Support and Community Solidarity: Women receive support to strengthen resilience, leadership, and social connections. Community networks, including local groups and diaspora connections, help women share resources, advise on income-generation, and maintain social ties even during displacement or crisis.



Inclusive Access: Efforts are made to ensure women with disabilities or other vulnerabilities can participate in programmes. Accessibility and equity are prioritised, ensuring that all women benefit from livelihood and empowerment initiatives.



Women’s Agency and Participation: WeWorld emphasises building women’s confidence and decision-making power within households and communities. Programmes foster leadership, mentorship, and peer support, enabling women to take on social and economic roles despite constraints.

Gender-based Violence and Protection Risks

Economic collapse, displacement, and intensified unpaid care responsibilities have significantly heightened women's exposure to GBV. Overcrowding, dependency, and household tension increase psychological pressure, with women often absorbing emotional labour and mediating conflict under extreme stress. Women-headed house-

holds, widows, caregivers, elderly women, and women with disabilities face particularly high vulnerability, as financial dependence and disrupted livelihoods limit their ability to leave abusive situations or safely access support (UNFPA, 2025). Overcrowded shelters and the loss of private space exacerbate risks of intimate partner violence, community harassment, and exploitation. Restricted digital access and male control over phones further reduce women's options for safe reporting.

In Gaza, women describe the compounded pressures of scarcity, displacement, and household responsibilities:



Women in Gaza were already disproportionately vulnerable during the war. The greatest burdens fell on women of all ages; from securing food under extreme scarcity, to cleaning, to household tasks that completely changed under bombardment and displacement. The psychological pressure was also usually placed on the woman, whether intentionally or unintentionally, by men.” - Woman, 37 years old, she left Gaza and now lives abroad



Because of overcrowding, the atmosphere in the house became tense and filled with psychological pressure. My husband suffers from high blood pressure and could not cope with these conditions. He often vented his anger by interfering in my work and through frequent outbursts of rage. I found myself caught in the middle, trying to absorb the pressure from all sides. Aware of how serious the situation was, I often asked my husband to leave the house temporarily to calm things down. I felt forced to take these measures to reduce tension and prevent constant arguments. Over time, my relationship with my husband became increasingly fragile, marked by conflicts, interference, and family problems that had never existed before.” - Woman, 59 years old, Gaza



Over the past two years, family dynamics have changed significantly due to the ongoing pressures from difficult political and economic conditions, particularly following the war and displacement. Relationships with husbands or heads of households have sometimes become strained because of feelings of helplessness, insecurity, and the instability caused by a lack of job opportunities, which affected men's sense of their role as providers. At the same time, women have taken on additional responsibilities, becoming more involved in managing family affairs and providing psychological, moral, and sometimes material support through initiatives or emergency work opportunities. These changes have sometimes strengthened family bonds, as everyone worked together to face the crisis. Other times, however, they have increased psychological stress and strained family harmony, especially due to overcrowded shelters and the lack of privacy.” - Woman, age unspecified, Gaza

In the West Bank, economic pressures intersect with restricted mobility, settler violence, and the erosion of livelihoods, creating additional protection risks. For women in rural and Bedouin communities, settler attacks on grazing land directly undermine economic survival while instilling constant fear for themselves and their children:



After the war, the settlers completely banned us from grazing our sheep... I am deeply afraid that they will harm my sons and daughters because these attacks have escalated to include women from the settlements targeting us, including my daughters.” - Woman, age unspecified, Bedouin community, West Bank

Even women who attempt to sustain livelihoods from home face structural challenges linked to occupation and resource restrictions:



Even women who choose to work from home face serious challenges. For example, women producing dairy products and cheese from their own livestock often experience frequent electricity cuts caused by settlers. These interruptions prevent them from refrigerating their products, leading to financial losses or the complete inability to produce.” - Woman, representative of the Women's Centre for Legal Aid & Counselling, West Bank

Across contexts, economic stress, displacement, and restricted mobility combine to increase women's exposure to GBV. While Gaza reflects extreme humanitarian pressures and household overcrowding, the West Bank demonstrates how occupation-related restrictions and settler violence compound economic vulnerability and protection risks. In both settings, women absorb disproportionate responsibility for family survival, often at great personal risk, and their ability to seek help is limited by structural, social, and digital barriers.

Women's Resilience Strategies

Despite profound hardship, women continue to be central to the social fabric of both Gaza and the West Bank, demonstrating resilience, leadership, and adaptability in the face of crisis. Across contexts, they sustain households, support communities, and contribute to humanitarian response, education, healthcare, documentation, and income-generating activities. Their resilience reflects not invulnerability, but the structural necessity

of maintaining families and communities under extreme precarity.

In Gaza, women describe the daily challenges of asserting agency and contributing meaningfully in a context of displacement, insecurity, and limited accessibility:



I challenge myself and insist on adapting and participating in society, working with the community no matter the consequences. I continue despite the looks of pity, despite the words and whispers that I hear. I insist on moving forward and not stopping. At times, I feel helpless, and sometimes I give up for a moment, standing confused and retreating, but even then, the challenge remains inside me. People with disabilities are often not given real opportunities, and this in itself is a major challenge that needs serious evaluation. The lack of accessibility, the constant need to prove oneself, the struggle to build self-confidence, and the effort required to convince others of my ability to give and contribute...all of this makes the journey harder. Yet despite these obstacles, I continue to try, to participate, and to claim my place.” - Woman, age unspecified, she has a visual impairment, Gaza

Women in Gaza also emphasise the importance of documenting stories and maintaining collective memory as acts of resilience:

“Many women have to tell their stories: some of them are finding their source of livelihood, and some of them died, and we have to dig their story in memory (...) these are all stories that cannot be erased from memory. It is very important to document our stories.” – Journalist, age unspecified, Gaza

Even when physically removed from the crisis, women maintain practical and emotional support networks:

“I also try to support them in practical ways despite the distance. Often, when friends or relatives needed something, like tents, supplies, or shelter, I would quickly try to help: reaching out to contacts in NGOs, arranging funds, or finding solutions. Even with women I don't know well but know are struggling financially, I try to help them think of ways to earn an income based on their skills, like selling pastries or handmade crafts, and I guide them to places where they could offer their products. Small ideas can make a big difference. These efforts make me feel connected, productive, and able to support them more from afar than I could have if I were physically stuck in the same crisis.” – Woman, 37 years old, she left Gaza and now lives abroad

In the West Bank, women similarly mobilise socially and economically, sustaining households and communities through informal networks, empowerment projects, and income-generating initiatives. These efforts enhance not only survival, but also autonomy, confidence, and social cohesion:

“Empowering women through special projects greatly increases their self-confidence. Even a small income allows them to meet their needs and provides a sense of independence (...) When the mother is balanced and supported, the entire family benefits and becomes more stable.” – Woman, age unspecified, West Bank

Collective action and solidarity also provide protection and foster a sense of resistance:

“70 women from the community went on a hunger strike when the Israeli occupation detained the body of a man from the community. Women here live in very difficult circumstances, and they need support in many ways, for example, financial independence and independence in decisions. I ask women to be a support for other women.” – Woman, age unspecified, West Bank

Informal networks and social solidarity mitigate isolation and fear, particularly in closed or militarised areas:

“The women's social solidarity in the region and the presence of a group on WhatsApp made us feel our solidarity. Because we live in an isolated and closed area, we created a family atmosphere so that we do not feel alienated from this world.” – Woman, age unspecified, West Bank

Across Gaza and the West Bank, women's resilience is expressed through leadership, collective action, and the creation of supportive social networks. While Gaza's challenges often stem from acute displacement, conflict, and accessibility barriers, the West Bank's context highlights

isolation, restricted mobility, and the need for localised social cohesion. In both settings, women's efforts sustain households, reinforce communities, and create spaces of agency, dignity, and solidarity under extreme and enduring pressures.

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Arturas Morozovas/WeWorld

FOOD SECURITY

Even before the escalation of violence in October 2023, Gaza and the West Bank faced widespread food insecurity due to conflict, economic restrictions, and market disruptions. Access to sufficient, nutritious food was limited, threatening the health and wellbeing of children, pregnant and breastfeeding women, and other vulnerable groups. Today, in light of the escalation of hostilities and the intensification of occupation policies, women and girls carry the heaviest burden, responsible for securing, preparing, and rationing food while managing households under extreme stress. These pressures intersected with displacement, economic collapse, and protection risks, highlighting that food security is deeply shaped by gender, caregiving roles, and women's daily labour.



Gendered Impacts on Food Security and Household Survival in the Gaza Strip

Even before October 2023, food security in Gaza was extremely fragile. Escalating violence, repeated bombardments, the blockade, and the collapse of farming and markets had already left households struggling to meet basic nutritional needs. **By 2025, nearly one in three people faced acute food insecurity,**

putting the population at severe risk of famine (Women's Refugee Commission, 2025a). Key foods such as dairy, eggs, fruit, and meat had largely disappeared, making it nearly impossible to maintain a balanced diet. **Pregnant women were unable to access vital supplements, increasing the risks of miscarriage, premature birth, birth defects, and infant mortality, while breastfeeding women faced stress and lack of privacy, threatening newborn survival** (UN Women, 2025a).

"I suffered greatly. I fainted once, and after medical tests it was discovered that I suffer from malnutrition. The doctor prescribed a set of medicines and treatments, but unfortunately, I was unable to buy them because the economic situation was very difficult, and I could not obtain them from medical points." - Woman, age unspecified, Gaza

"Famine was one of the hardest challenges we faced. Displacement itself was a challenge, and even more painful was being forced to depend on others after a time when we were self-reliant and able to provide for ourselves." - Woman, 34 years old, Gaza

"I remember the stage of famine, when I had to divide bread among my children sometimes only two loaves, never more. When they asked for anything they needed, I often had nothing to give. That stage of famine was extremely harsh. I only went out when absolutely necessary, transportation was very difficult, and there was no change in our circumstances." - Woman, age unspecified, Gaza

CHALLENGES IN SECURING FOOD

Women and girls bear the heaviest burden of ensuring household survival. They manage rationing, source scarce items, and often skip meals themselves. Economic collapse and skyrocketing food prices, reaching over a 100% increase in 2024, further undermine access to essentials (FAO, 2024). Humanitarian aid,

although essential, is often difficult for women to access because assistance records frequently list only male heads of households. Adolescent girls, older women, and persons with disabilities face additional barriers, needing to travel long distances and compete in crowded distribution points (IPC, 2025b).

Economic collapse and skyrocketing food prices, reaching over a 100% increase in 2024, further undermine access to essentials

(FAO, 2024)



*"Flour... Flour was one of the hardest things. At first, we used to buy a bag of flour, then the price increased like crazy, and we were many... Getting flour became a big challenge. It started with moving to a new place where you are not comfortable, and then the fear of bombing turned into fear of lack of food. (...) Now that the war has stopped, we are getting better because we are eating something healthy." – Woman, 33 years old, Gaza**

*This testimony was collected during the ceasefire in December 2025

Scarcity, price inflation, and restrictions on essential goods force families into daily survival struggles, while repeated displacement and the destruction of markets and infrastructure create profound barriers to food access. **Cooking constraints, including fuel scarcity, unsafe cooking spaces, and lack of utensils, push households toward less nutritious options.**

"One of the most difficult experiences was hunger; standing helpless in front of your children, unable to give them anything, even though you had money, because there was simply nothing available to buy. (...) Cooking is done over a fire, and we have had to give up many things, we no longer use many spices and have sacrificed much in our daily meals." - Woman, age unspecified, Gaza

Daily survival strategies often involve long queues for bread and water, sharing food even when rationed, and cooking with firewood or makeshift ovens when gas runs out. **Women absorb the operational burden of survival, managing logistics, preparing meals under unsafe conditions, and ensuring that children and other household members are fed.** Women and girls with disabilities face heightened risks as they may be unable to queue safely, access aid independently, or escape violence.



I would spend around three hours with my husband going around the market looking for basic food that was at least somewhat healthy for the kids, like vegetables, meat, nuts...anything to keep them from getting sick. The scale of priorities kept shifting. What began as searching for meat and vegetables turned into searching for anything edible.” - Woman, 37 years old, she left Gaza and now lives abroad



I prepare food using the available ingredients and nutritional supplements, making sure the meals are simple and as balanced as possible. I cook on primitive stoves or sometimes in cooperation with neighbours. At times, we have to reduce the amount of food because of the severe scarcity of resources.” - Woman, age unspecified, Gaza



I try to find creative alternatives when flour and food are scarce. As a breastfeeding mother, feeding my child during these times is especially difficult. On some of the worst days, I would use pasta instead of bread or cook rice with pasta and lentils to prepare a single meal that could satisfy my children’s hunger. Often, this was only one meal a day. I face fear with a jovial spirit, turning pain into laughter so that my children don’t lose hope or fall apart.” - Woman, 37 years old, Gaza

Overcrowded shelters limit safe food preparation, increase the risk of contamination, and make it difficult to store perishable items. Price volatility and transport challenges restrict households’ ability to plan purchases and maintain minimum diet quality. Stress linked to scarcity heightens household tension and emotional distress, affecting caregiving quality, while women’s time poverty limits ability to pursue livelihoods or recovery options.



Displacement was extremely hard, especially during the period of famine and the spread of skin diseases, when physical health became a daily struggle for us as a displaced family living in harsh conditions inside the camps. Food shortages and malnutrition were widespread, largely because the Israeli occupation prevented the entry of food supplies, particularly flour. This led to a serious deterioration in our children’s health, weakening their immune systems, and causing vitamin deficiencies. As a result, both we and our children experienced symptoms of general weakness and frequent dizziness.” - Woman, age unspecified, Gaza



The most difficult moments in my life have been returning to my home during the war and facing famine, with no diapers for my child and no food for my family of four children, the oldest being only nine years old. (...) Now, I don’t prepare food, and I depend on the hospice, which provides only one meal a day. I don’t have the ability to start a fire or properly take care of my family.” - Woman, age unspecified, Gaza



Gendered Impacts on Food Security and Household Survival in the West Bank

Food security in the West Bank is deeply shaped by movement restrictions, occupation policies, and ongoing economic pressures. Rising violence, demolitions, and land access constraints have significantly disrupted households’ ability to procure and afford food. By 2025, 78% of households reported buying less food than they could afford before October 2023 (World Vision, 2025).

Demolitions have disproportionately affected rural and Bedouin communities, as **26% of destroyed structures were agricultural, reducing local production and leaving entire communities without access to basic services** (JLAC, 2025). Dietary diversity has sharply declined: meat, once eaten four times a week, is now consumed only twice weekly, and families have cut back on dairy, vegetables, and carbohydrates (World Vision, 2025). Households with elderly, disabled, or pregnant members face the greatest strain, while children

are particularly vulnerable: 70% regularly skip meals, and nearly half reported missing meals more than ten times in a single month (ibid.).

Food security indicators all deteriorated in 2025 compared with pre-conflict levels, reflecting the combined effects of unemployment, income loss, and access restrictions. At the same time, the ongoing fiscal crisis, along with restrictions on employment in Israeli settlements, continues to erode purchasing power (oPt Flash Appeal, 2026).

Military operations and the sustained presence of Israeli forces in northern West Bank areas such as Jenin and Tulkarm have deeply affected food security by disrupting local markets, movement and livelihoods. The establishment of checkpoints, road closures and large-scale raids have impeded farmers’ access to their land and slowed the transport of produce to markets, increasing food prices and reducing household purchasing power. In Jenin, Tulkarm and Nur Shams refugee camps, extensive demolition of infrastructure and displacement of tens of thousands of residents has compounded these pressures, making it harder for families to procure food and for humanitarian agencies to deliver assistance efficiently. Movement restrictions tied to these operations continue to limit access to essential goods and agricultural inputs, heightening the vulnerability of already precarious food systems in the north of the West Bank (OCHA, June 2025)

Women, traditionally positioned as primary caregivers, now face intensified responsibilities. They manage rationing, negotiate with neighbours, and shoulder the logistics of securing scarce food, often under the stress of settler violence and army harassment.



Households with elderly, disabled, or pregnant members face the greatest strain, while children are particularly vulnerable: 70% regularly skip meals, and nearly half reported missing meals more than ten times in a single month

(World Vision, 2025)



My life was full of suffering even before the war. Our houses were in very poor condition, and water was hard to reach. When I was eight years old, I used to ride a donkey and travel long distances just to fetch water. This Bedouin society expects girls to start hard work from a very young age... I would see my schoolmates with sandwiches of oil and thyme, the simplest thing, and I craved it desperately, because I rarely had even that.” - Woman, 24 years old, Bedouin community, West Bank



Sometimes we would stay for several days without a piece of bread because the curfew applies to shops and groceries as well. If you don't have flour at home, you have to wait for the curfew to be lifted. And what we were doing to face these crises was to share the food that we had as families living through the same crisis. We went through very difficult circumstances due to lack of income and curfews, where we, as women, were suffering from lack of food.” – Woman, age unspecified, West Bank

Women frequently absorb the burden of intra-household food allocation, often reducing their own intake to prioritise children and family members. Evidence indicates that mothers commonly skip meals or eat last, elevating the risk of maternal undernutrition and associated health consequences (UN Women, 2025).

MARKET ACCESS AND STRUCTURAL BARRIERS

Evidence from the 2025 Community Participation Approach (CPA) assessment, conducted by WeWorld and the West Bank Protection Consortium across 195 communities, illustrates how food access is shaped by both physical constraints and protection risks rather than availability alone. Among women facing difficulties in accessing markets, long distances (87%) reflect the concentration of functioning markets outside or far from many communities, often requiring travel through insecure or restricted areas. The lack of affordable transport (73%) further limits mobility, particularly for female-headed house-

holds, older women, and families already facing financial strain.

Protection concerns play a decisive role in shaping market access. Reports of harassment during travel and exposure to settler violence indicate that food procurement has become a high-risk activity, forcing households to limit market visits, rely on others to purchase food on their behalf, or accept higher prices from nearby informal vendors. In addition, man-made barriers such as checkpoints, walls, or trenches were cited by half of respondents, highlighting how movement restrictions disrupt regular supply routes, increase travel time and costs, and reduce the predictability of access to food. Men reported similar experiences, confirming that these constraints affect entire households and are not limited to women alone.

Economic and livelihood shocks further undermine households' ability to secure adequate food. Focus group discussions show that lack of employment opportunities (85%) is the dominant driver of food

insecurity, reflecting widespread job losses, restricted access to workplaces, and the collapse of local economic activities. Insufficient income (80%) underscores the erosion of purchasing power, even among households that retain some form of livelihood. These pressures are exacerbated by the destruction of agricultural land and productive assets, reducing both food availability and income from traditional coping mechanisms.

At the same time, food assistance remains limited, reaching only 14% of communities, leaving most households reliant on markets they struggle to access. Where assistance is available, it is primarily delivered through in-kind food distributions (61%) and vouchers; however, recipients face the same movement, cost, and protection barriers encountered when accessing markets. As a result, assistance modalities do not consistently offset access constraints, limiting their ability to stabilise food consumption or reduce negative coping strategies.



As for preparing food, we often do not have everything we need. Many times, there is no food at home to cook, and we cannot go out to buy ingredients. Even if we could, we often do not have money because my father has been suspended from working in the settlement, which has made life much harder than before.” – Girl, 17 years old, Bedouin community, West Bank



What we were doing to face these crises was to share the food that we had as families living through the same crisis. We went through very difficult circumstances due to lack of income and curfews, where we, as women, were suffering from lack of food.” – Woman, age unspecified, West Bank



WeWorld's Response

WeWorld responds across Palestine with a layered approach addressing both immediate needs and longer-term household resilience under severe constraints, adapted to context while applying the same protection- and gender-sensitive principles.



Immediate and context-adapted food support includes the provision of food baskets and vouchers designed to reach households safely while reducing reliance on long and risky travel. Where vouchers are used, redemption is structured to strengthen women's practical role in household purchasing and meal planning, allowing choice and greater dietary diversity while ensuring safety during distribution.



Livelihood and agricultural support mitigate disruptions to local food production by targeting households affected by destroyed agricultural assets, loss of grazing land, and other shocks, particularly in the West Bank. This complements immediate assistance and reduce reliance on negative coping strategies.



Gender- and vulnerability-based prioritisation supports all food security interventions, with a focus on female-headed households, widows, pregnant and lactating women, adolescents, older persons, and people with disabilities. Assistance is distributed in ways that address protection and mobility concerns, ensuring safe access to food without exposing recipients to risks.



Protection-sensitive measures are integrated throughout the response. By directly addressing food-related risks—such as unsafe travel to markets, exposure to harassment, and dependence on male intermediaries—WeWorld reduces vulnerability to GBV and other protection concerns, including transactional exploitation.



Community engagement and accountability mechanisms ensure that women and persons with disabilities are consulted so that interventions reflect local priorities, while safe feedback mechanisms allow households to report barriers, exploitation risks, and gaps in coverage. Referral pathways are activated when protection or urgent needs are identified.



Gender and conflict sensitivity support all assessments and monitoring actions, which ensure the inclusion and protection of women, girls, and children. Samples are randomly selected but stratified to guarantee balanced gender representation. Enumerator selection also supports protection goals by prioritising women and, where needed, especially in Gaza, recruiting or allocating enumerators from different areas to reduce risks and maximise protection for both communities and staff.

Gender-based Violence and Protection Risks

Food insecurity and hunger are closely linked to heightened risks of GBV. When households face prolonged shortages, stress and tension increase, sometimes contributing to conflict between partners and to the use of food as a means of control within the household. Beyond the home, women and girls may face

harassment, intimidation, or violence while searching for food or fuel, particularly when travelling long distances or waiting in queues for assistance (UNFPA, 2025a). Aid distribution points can also present protection risks, as unequal power dynamics may be exploited, including situations where access to food or money is conditioned on compliance (UNFPA et al., 2025a; UNFPA et al., 2025b). Overcrowded shelters, competition over scarce resources, and poorly managed queues further heighten

the risk of harassment and exploitation (Women's Refugee Commission, 2025). In response to these pressures, some households adopt harmful coping strategies such as begging, transactional sex, and early or forced marriage. Overall, rising GBV during periods of hunger reflects not only individual behaviour but the ways in which scarcity, displacement, and weakened institutions intensify existing gender inequalities.



The risk of (...) violence and exploitation is particularly high in these circumstances, especially when it comes to the distribution of relief materials or food. Women are often coerced or blackmailed by those providing services. For example, we had a case of a woman whose husband had been martyred. When she sought assistance at a camp, she was told to bring her husband. When she explained that he had died, she was still denied help. Some women try to return at later hours, but distributions do not continue into the evening. As a result, many women are exposed to harassment or worse, and they call to share their experiences, questioning why they were asked to come at times when no one was present or when it was dark. From what I have observed, this is exploitation rather than protection. Aid was sometimes withheld or diverted, rather than being used to safeguard those in need. Relief parcels were meant to contain specific items, but some women did not receive all the materials they were supposed to get.” - Woman, representative of a women-led organisation

In the West Bank, economic disruption, displacement, and food scarcity create similar pressures, but these are shaped by movement restrictions, land seizures, and settler violence that undermine access to markets and livelihoods (UNFPA et al., 2025b). These constraints strain household dynamics and frequently contribute to domestic abuse, including economic violence. Women's traditional role in managing household food and finances becomes increasingly difficult, leaving them more exposed to discrimination and exploitation.

Data from the CPA's multi-sectoral assessment confirm that women's safety and mobility concerns are closely linked to food access. Women reporting barriers to markets consistently describe movement as unsafe and intimidating.

Harassment, threats, and exposure to settler violence are among the most frequently cited risks, compounded by checkpoints, walls, and other physical barriers that restrict freedom of movement. While men report similar security concerns, women face additional gender-specific risks and heightened fear of harassment while travelling. Market access is therefore widely perceived as dangerous for all, but disproportionately restrictive and stressful for women.

As access to markets becomes increasingly constrained, households are resorting to negative coping strategies to meet basic needs. More than two-thirds report accumulating debt, while many reduce the quantity or quality of food consumed, substitute nutritious foods with cheaper alternatives, or cut essen-

tial expenditures such as healthcare and education. Some families are forced to sell productive assets, undermining long-term resilience and recovery prospects.

In a smaller but significant number of communities, these pressures are already translating into harmful survival strategies. **Fourteen out of 195 communities report practices such as child labour, withdrawal of children from school, and early marriage. Although not yet widespread, these trends signal escalating protection risks for women and children as economic stress and access constraints continue to deepen.**

Women's Resilience Strategies

Across crisis and displacement settings, households adopt a range of coping strategies to manage severe food insecurity, including reducing meal frequency,

substituting cheaper foods, accumulating debt, and selling remaining assets (Women's Refugee Commission, 2025). Yet beyond these survival strategies, women play a central role in organising collective responses that sustain households and strengthen community resilience.

In Gaza, testimonies illustrate how women mobilise social networks, coordinate food distribution, and prioritise the most vulnerable despite extreme shortages:



There are many challenges, especially when a hungry child stands in front of you. I often gave up my own food for the child. Once, before the roads were completely closed during my displacement in Gaza, I managed to smuggle a barrel of flour weighing 150 kilos. I kneaded it and distributed it to families through relatives and friends outside Gaza. They would send me money, which I withdrew with a small commission to buy food. At one point, I also bought liver and motivated women from the community to prepare meals for the camp. In addition, we distributed cash and clothing to people, especially those with amputations who lost limbs in the war. I consider all of this a challenge, particularly because the needs of the local community are so great, and they constantly turn to me for help.” - Woman, age unspecified, Gaza

Social networks frequently become a lifeline, enabling families to access food, clothing, and other necessities across different locations:



Honestly, the hardest part of the war was securing resources. With no food and no clothes, winter came and we didn't even have warm clothing. My wide network of relationships, built over many years, saved me again and again—something I never imagined I would one day depend on for such simple necessities. Friends from Rafah helped us, people we knew in the middle area helped, people in Khan Younis helped.” – Woman, 37 years old, she left Gaza and now lives abroad

Women also draw on traditional knowledge and household management skills to stretch limited resources:



Sometimes I call elderly women to learn from them the traditional ways they used to preserve food, so that it does not spoil.” - Woman, age unspecified, Gaza



In times of crisis, such as during sieges or food shortages, women come together to distribute aid to families in need and prepare communal meals to ease the burden on mothers” - Woman, age unspecified, Gaza



I have become skilled in managing storage and household supplies. Hygiene tools, flour, sugar...everything is carefully calculated to ensure we have enough. I always keep an eye on the pantry and make sure family members are aware of shortages. Everyone has a responsibility to inform others when an item is running low.” - Woman, age unspecified, Gaza



“ Even during crisis, we tried never to deny help to anyone: if someone asked for food, we would share even if we had only two loaves. That gave me a sense of safety—that giving would bring blessings in return one day” - Woman, 37 years old, Gaza

Across contexts, these testimonies reflect a broader pattern: women organise informal food-sharing networks, neighbour-to-neighbour support, and pooled cooking. In displacement settings, they coordinate shared resources such as fuel, utensils, and water for communal food preparation, often prioritising children, persons with disabilities, and other highly vulnerable households.

Women-led strategies also include pooling ingredients for communal cooking,

scheduling turns to use shared ovens or stoves, and leveraging social networks to access distant markets or support from relatives. These approaches are both practical and protective, strengthening household resilience while reducing the need for individuals to travel alone or take risks to secure food. However, participation in these networks is not universal. Isolated women, those with disabilities, and adolescent girls may face barriers to inclusion unless deliberate measures are taken. Community feedback and safe

reporting channels are therefore critical to supporting women’s decision-making and protecting against exploitation, particularly around food distribution points.

Recognising and reinforcing women’s informal leadership helps maintain social cohesion, mitigate conflict, and spread practical knowledge about nutrition, hygiene, and safety under highly constrained conditions.



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SHELTER

Shelter is not a gender-neutral issue. For women and girls, the loss of safe housing directly affects privacy, dignity, decision-making power, and personal safety. Since October 2023, repeated displacement in Gaza and forcible transfers in the West Bank have pushed women and girls to live in overcrowded schools, tents, and makeshift shelters with limited privacy, inadequate sanitation, and weak protection. These conditions heighten exposure to gender-based violence, health risks, and psychological distress. At the same time, women assume the primary role of organising life in shared and unsafe settings, ensuring children's safety, rationing supplies, and maintaining family cohesion. Creating practical strategies to preserve dignity and safety. Understanding shelter access, services, and conditions through a gender lens is therefore essential for responses that protect dignity, reduce harm, and support women's resilience and leadership.



Shelter, Displacement, and Gendered Impacts in the Gaza Strip

Since October 2023, women and girls in Gaza have experienced repeated displacement, often living in overcrowded schools, tents, or fragile shelters with limited privacy, ventilation, and access to basic services. These conditions heighten exposure to disease, gender-based violence, and psychological stress, par-

ticularly for women with disabilities and female-headed households. Displacement disrupts daily routines, caregiving responsibilities, and women's ability to exercise agency, while eroding stability, social networks, and a sense of home (OCHA, 2025a; OHCHR et al., 2020). **Women emphasise that displacement is both physical and psychological rupture, the loss of home, certainty and belonging. Some have been displaced as many as eight or fourteen times, losing homes, possessions, routines, and social networks that anchor daily life.**



We were displaced eight times. We might have stayed for a week and then we were displaced. It was terrifying because it was the first time we'd lived something like this. And the idea of the unknown itself was very scary (...) We left without knowing anything, with a small bag." - Woman, 33 years old, Gaza



We felt that as Palestinians, we are pursued by our prison wherever we go. Even if we are free in this wide world, our nationality alone is enough to put us in a cage wherever we are. (...) From the very first days, we involuntarily lost any sense of stability. We kept moving from one place to another with only our bodies – without our belongings, without our memories, and without any sense of safety." - Woman, 39 years old, she left Gaza and now lives abroad



Before, even during wars, we had the idea of a home we would return to. Now, that idea is gone. There is nothing left. In all of Gaza, we have no boundaries, no place, no house. Every small or big detail reminds us of the life we lost, the smell of our rooms, the sound of family gatherings, the comfort of privacy. I am not missing moments of joy; I am missing an entire life. Since October 7, I have not lived a single normal day. I am missing a whole life." - Woman, age unspecified, she left Gaza and now lives abroad



Displacement has deeply affected my sense of belonging. Moving away from the place where I grew up weakens my connection to the local community. Losing neighbours, friends, and familiar places only adds to the feelings of alienation and isolation. It can be hard to engage with life in a new community in the same way I once felt at home." - Woman, 26 years old, Gaza

Women with disabilities face compounded vulnerabilities, losing essential tools, mobility, and independence.



The most difficult moments of the war for me were related to movement and the loss of the most basic and important needs. I lost my laptop, which for me was not just a device but my main tool as a person with a visual impairment. Prices rose sharply, work stopped, and I lost my colleagues and friends. (...) One of the most disturbing and humiliating experiences was that every time I needed to go to the bathroom, I had to be accompanied by someone. I also clearly remember the day we left Gaza on foot, while I was blind, walking in fear and uncertainty." – Woman, age unspecified, she has a visual impairment, Gaza

Decision-making around displacement is often restricted by social and economic factors. Widows, divorced women, or those with independent income are among the few able to decide to leave safely.

“The decision to leave is rarely in the woman’s hands, unless she is financially independent. Usually, if the man decides to leave, the family follows. But if he doesn’t, the woman is often forced to stay, even if she is the most harmed. Only a very small number of women could independently decide to leave, usually widows, divorced women, or working women with independent income.” – Woman, 39 years old, she left Gaza and now lives abroad

SHELTER CONDITIONS

Shelters—official, informal, or makeshift—are largely inadequate, overcrowded, and poorly serviced. Poor lighting, distant or shared sanitation facilities, inadequate ventilation, and improvised partitions compromise privacy

and dignity, particularly for women and girls (UN Women, 2025a). Shelters rarely meet menstrual hygiene needs, forcing women and girls to manage menstruation without privacy, supplies, or sanitation—further eroding dignity and increasing health risks. Limited access to water, hygiene items, and healthcare increases vulnerability to disease, while older

women and those with chronic illnesses face heightened risks, as well as women with disabilities, since shelters rarely meet their necessities. Fragile shelters are highly vulnerable to climate hazards, and access restrictions delay repairs or reinforcements (The Guardian, 2025).

“As you can see, this is a room for fishermen where I live. It is made entirely of stone, and water leaks from everywhere, but it doesn’t matter. It has a door, which I lock from the inside with a stone and secure from the outside with a wire. Right now, this is one of the better places that people live in. It even has a bathroom. I don’t need a kitchen because I don’t have the ingredients, and I don’t prepare any food. I have two plates for me and my brother, and three glasses for drinking. Thank God, that is enough.” – Girl, 17 years old, Gaza

“Being a displaced mother in a tent is a double effort, and caring for my daughter’s children adds more responsibility. Daily routines are complicated, especially during my period, when using a shared bathroom that is used by five families is challenging. Bathing is extremely difficult in harsh winter conditions, and each stage of daily life brings its own set of responsibilities.” – Woman, age unspecified, Gaza

Even where shelter conditions are marginally better, women report minimal safety and privacy. Shelter becomes a “minimum horizon” for survival, enabling routines, schooling, and family cohesion under precarious circumstances.

“A tent in the camp is shared by people from the same family or relatives, but there is no strong bond between us and them. Life feels very stressful, between the noise of the street and the voices of the neighbours, to the point that we are afraid to talk about private matters for fear that they might hear us. (...) I lost my sense of belonging to everything. I lost the house, and with it I lost belonging, love, and even the beautiful memories. The house is no longer there, and I lived in a tent on the street. The house became a dream, just a dream of leaning my back against a wall.” – Woman, age unspecified, Gaza

Before the war, homes represented normality, privacy, routine and, mostly, identity. During displacement, women live in shared rooms with strangers, tents, or improvised spaces. Even minimal measures of privacy, such as securing doors, are crucial to maintain dignity.

“I lived in tents for a year and a half. Before the tents, I used to sleep in the front cabin of a driving school car. Then I moved to live in a tent with my husband and mother. After a year and a half of the war, we returned to our house in Gaza. Now, the roof has cracks and is falling apart, but I still live in it. Even so, this is not as bad as living in the tents...” – Woman, age unspecified, Gaza



Shelter, Displacement, and Gendered Impacts in the West Bank

In the West Bank, prolonged occupation has intensified over the past two years, with increased military operations, settler violence, and rising risks of displacement. Restrictive planning policies in Area C and East Jerusalem continue to prevent Palestinians from meeting basic housing needs, with home demolitions remaining the primary driver of displacement (ACAPS, 2025). Between 1 January and 30 September 2025, approximately 1,288 structures were demolished for lacking permits, displacing over 1,400 people and affecting more than 38,000 others (Norwegian Refugee Council, 2025). Field reports indicate that many demolitions and military-related damages are not officially documented. The loss of one’s homes, or even the threat of it, carries profound psychological consequences, particularly for women, for whom homes represent personal space, stability, and security.

Since October 2023, settler violence, demolitions and access restrictions have increasingly driven forced displacement of Bedouin and herding communities across the occupied West Bank, particularly in Area C under full Israeli control. According to UN OCHA, thousands of people from these communities – including over 3,000 Palestinians (around 558 households) – have been displaced, mostly citing repeated attacks by Israeli settlers and movement restrictions that damage property, grazing lands and livelihoods and make continued residence untenable. Bedouin households have suffered burning of shelters, destruction of agricultural structures and chronic insecurity, prompting many families to seek refuge elsewhere or live in temporary, insecure conditions. The pattern of displacement has escalated sharply compared with years prior to October 2023, underscoring the acute vulnerability of pastoral and Bedouin populations in the West Bank to ongoing violence and land pressures (OCHA, October 2025).

Military operations carried out since 2024 in the northern West Bank, particularly in Jenin and Tulkarm, have caused extensive damage to housing and civilian infrastructure, resulting in large-scale displacement of more than 40,000 Palestinians and acute shelter needs. According to UN OCHA, repeated incursions, the use of armoured vehicles and bulldozers, and demolition of residential structures in Jenin, Nur

Shams and Tulkarm refugee camps have rendered many homes partially or fully uninhabitable, forcing thousands of families to seek temporary shelter with relatives or in overcrowded accommodation. Movement restrictions and ongoing insecurity have further delayed repairs and reconstruction, while access to shelter materials remains constrained. UNRWA has reported a sustained need for emergency shelter and cash-for-rent assistance for displaced families, underscoring the severity and protracted nature of the shelter crisis in the northern West Bank.



Between 1 January and 30 September 2025, approximately 1,288 structures were demolished for lacking permits, displacing over 1,400 people and affecting more than 38,000 others

(Norwegian Refugee Council, 2025)



I feel that displacement may be imminent and scary. We are more vulnerable than ever before right now, with a demolition notice (...) I am afraid of being deported from my home, and at the same time I want to live outside the place where I lost my husband..." – Woman, 24 years old, Bedouin community, West Bank



For me, leaving this area is not an option under any circumstances. I feel deeply attached to this land and this place. My entire life and all my suffering are tied to it. All my children were born in my tent, which has only strengthened my resolve to stay here, no matter what happens." – Woman, age unspecified, Bedouin community, West Bank



If I say that the idea of displacement or being forced out of our area has never crossed my mind, I would be lying. In the corner of the bedroom, you would find wooden sticks, because we have no other means of defence. We are simple people. We keep these sticks only as a precaution, out of fear of being attacked by settlers (...) Whenever we close doors and windows, we know we have nowhere else to go. This fear lives with us daily. It affects everything, we hesitate to change anything in the house because of the constant thought that we may be forced to leave at any moment. We do not know what the future holds for us." – Woman, 47 years old, West Bank



I have chosen to remain in this community because of my deep attachment to the land. This land is my right, and my sumud here is a form of resistance. Despite all the difficult and harsh circumstances, I do not want to move to another place. Leaving is not an option for me." – Woman, 21 years old, Bedouin community, West Bank

Children also experience trauma, showing signs such as nightmares, panic attacks, and difficulty concentrating at school (MSF, 2025a; MSF, 2025b).

SHELTER CONDITIONS

Evidence from the Community Protection Approach (CPA) assessment conducted by WeWorld in 195 communities shows that **access to safe shelter is shaped by coercive pressures and legal-administrative constraints**. In 2023, shelter-related demolition orders and stop-work orders were reported in 43 communities, directly limiting re-

pairs and upgrades. Shelter conditions are frequently overcrowded and inadequate. Many shelters lack essential protection features. In the majority of affected communities, homes have no internal partitions, cannot be securely locked, or are poorly lit and ventilated. These conditions heighten protection risks for women, girls, and persons with disabilities by undermining privacy, safety, and overall wellbeing, and by increasing exposure to stress, health risks, and gender-based violence.

These conditions reduce privacy and dignity for women and girls, affecting breastfeeding, menstrual hygiene management, and caregiving.



The place is a small apartment consisting of two rooms, a kitchen, and a bathroom in which eighteen people live, despite the overcrowding, but it is a place without the spirit of daily life... all quarrels and problems with children, but there is something beautiful: that we are all together." – Woman, 34 years old, she has a daughter with visual impairment, West Bank



Men usually don't care much and may sleep anywhere, while women need privacy, and they are the ones who bear the most concern when any demolition occurs. I remember that when the demolitions occurred, women were the ones who were most preoccupied, especially during the winter, when suffering was exacerbated by water leaks or roof problems. Caravans are prone to water leakage, and women's suffering is always increasing." – Woman, 27 years old, West Bank

Structural constraints—including lack of permits (reported by 80% of communities) and movement restrictions—further limit repairs and improvements, disproportionately affecting female-headed households and women with disabilities, who have fewer economic resources and additional barriers to safe shelter.



WeWorld's Response



WeWorld has responded across Palestine with rapid displacement support and targeted shelter upgrading under severe constraints, addressing urgent shelter needs while enhancing safety, privacy, and dignity. In the West Bank, this response has focused on areas affected by demolitions, mobility restrictions, and seasonal exposure, while in Gaza it has been implemented in displacement settings following the October 2023 escalation. Across both contexts, shelter and Non-Food Items (NFI) interventions are guided by protection mainstreaming and gender- and vulnerability-sensitive prioritisation, with women and girls systematically prioritised in needs assessments, targeting, and distributions due to heightened safety, privacy, and protection risks, alongside female-headed households, widows, families with many girls, and persons with disabilities.



Rapid and context-adapted shelter support includes immediate provision of tents, tent covers, tarpaulins, blankets, and jerry cans for newly displaced households, alongside rehabilitation of existing shelters, internal insulation, and more durable construction where feasible, such as pre-insulated roofing or block-based structures. Emergency shelter support is closely linked with WASH interventions, including the construction of family latrines close to tents to improve privacy and safety, particularly for women and girls, later adapted for accessibility through caregiver support, improved pathways, and wooden supports for persons with disabilities. Where appropriate, winter energy support, including firewood and solid olive residues, complements shelter interventions to ensure resilience against cold and harsh weather conditions.



Gender- and vulnerability-sensitive prioritisation is operationalised through community-based identification, safe distribution timing and locations, and direct delivery or escorted collection for households facing high mobility or safety risks.



Protection-focused measures are integrated across shelter upgrades, including internal partitions to improve privacy and reduce overcrowding, lockable doors to prevent intrusion, and improved lighting to enhance night-time safety. These measures are always combined with clear referral pathways and child protection and GBV mitigation strategies to ensure that shelter and NFI interventions not only meet basic needs but also strengthen protection outcomes.



Gender- and vulnerability-sensitive needs assessments and monitoring approaches inform Shelter and NFI responses, with beneficiary selection modalities that include women-headed households, systematic monitoring of inclusion of persons with disabilities, particularly through post-distribution monitoring, and gender representation within samples. Protection mainstreaming indicators are incorporated across all monitoring tools.



Community engagement and accountability mechanisms¹³ ensure that women and persons with disabilities are actively engaged in targeting, feedback, and monitoring, through awareness sessions, and community structures, allowing interventions to remain responsive to evolving needs. Flexible, context-specific approaches enable rapid deployment and adaptation in the face of recurrent demolitions and access constraints, maintaining continuity of support while creating safer, more dignified living spaces.

¹³ A key lesson learned from Shelter/NFI responses, reflected in the Protection Mainstreaming in Shelter checklist adopted by the oPt Shelter Cluster in 2023, is the importance of actively engaging women and girls in the design of shelter and NFI interventions to uphold the *do no harm* principle. In several operations, standard kits included items that were not sustainable for households in vulnerable situations to replace or maintain over time, creating unmet expectations and, in some cases, tension within households. This prompted WeWorld to go beyond Sphere guidance where necessary, co-design kit contents with the participation of different age, gender, and diversity groups, and consider Cash-for-NFI options to ensure dignity, choice, and appropriateness.



In Gaza, over **690,000 women and girls live in overcrowded shelters**, where cramped conditions, lack of privacy, and mixed-gender spaces heighten the **risk of abuse**

(UN Women, 2025c)

Gender-based Violence and Protection Risks

In both Gaza and the West Bank, inadequate shelter significantly increases women's and girls' exposure to GBV, har-

assment, and exploitation. In Gaza, over 690,000 women and girls live in overcrowded shelters, where cramped conditions, lack of privacy, and mixed-gender spaces heighten the risk of abuse (UN Women, 2025c). More than half of GBV cases reported to the Child Protection Area of Responsibility involved survivors

living in the same shelter as perpetrators (Child Protection AoR, 2025).

Women with disabilities, widows, and adolescent girls are particularly vulnerable. Limited lockable doors, unsafe sanitation facilities, and poorly lit shelters further compromise safety and privacy:



Previously there were many organisations that would protect women or provide legal consultation. After the war, contacting those organisations became difficult due to geographical distance and the deterioration of mobile network connections.” – Woman, 39 years old, she left Gaza and now lives abroad

Shelter inadequacy also intensifies household stress and conflict. Overcrowding, economic hardship, and the absence of private space contribute to tension, family fragmentation, and psychological distress:



Women and girls face multiple, overlapping challenges in displacement settings. One of the most serious is the lack of privacy. Tents and makeshift shelters do not provide adequate personal space, which causes psychological distress and a constant sense of insecurity. Alongside this is the growing fear of harassment or violence.” – Woman, age unspecified, Gaza

In the West Bank, similar challenges are observed, particularly in Bedouin communities and rural areas affected by settler violence. Families live in cramped caravans or temporary shelters, often sharing rooms across genders, reducing control over personal space and increasing exposure to GBV:



I live in a Bedouin community. About a month ago, our community was completely closed off by the settlers. I live in a caravan with my family, with seven of us sharing just two rooms. The space is cramped, and we often feel upset because it cannot accommodate all of us. I dream of having a room of my own where I could place a bed, keep my toys, and decorate it the way I like, but this is impossible because my male brothers share the same room with my sister and me. Daily life has become tragic. We face repeated attacks by settlers... threatening and frightening us, blocking our paths, making it nearly impossible to move.” – Girl, 17 years old, Bedouin community, West Bank

Inadequate shelter also shapes coping strategies, including early and forced marriage, school dropout, family separation, and tolerance of intimate partner violence, as families attempt to reduce perceived risks or costs (MSF, 2025a; MSF, 2025b):



The place where I live now, my tent, is filled with fear. My life is dominated by constant anxiety. I am afraid of my husband, who restricts my movements, prevents me from visiting my sick mother, and controls all my communications. Once, when I told him I was at his house for the sake of my children, he pushed and beat me. I replied that even if he hit me, I would not leave my children and would stay with them. Since that day, my sons and daughters have turned against me and stopped talking to me.” – Woman, age unspecified, Bedouin community, West Bank

Across both contexts, access to medical, psychosocial, and legal services remains limited. Women and service providers report low confidence in formal institutions to address GBV, citing weak enforcement, slow protection mechanisms, and structural barriers that leave women reliant on informal coping strategies. **Shelter inadequacy thus not only increases immediate exposure to GBV but also reinforces broader patterns of household stress, social vulnerability, and constrained mobility, underscoring the critical need for safe, private, and accessible living spaces.**

Women's Central Role in Household and Community Resilience

Despite extreme constraints, women remain central to household survival, community organisation, and social cohesion. Conflict, displacement, and economic hardship have increased caregiving burdens while expanding women's agency out of necessity. Women manage water, food, fuel, hygiene, shelter, and displacement planning, often without recogni-

tion, formal support, or corresponding rights. Their efforts reflect structural necessity rather than innate resilience, as survival tasks have become gendered obligations under extreme duress.

In Gaza, women describe how safety, privacy, and routine transform shelters into spaces that feel like home, despite material deprivation and overcrowding:

“What truly makes a place feel like a place for me, and for many women, is the sense of security and privacy. Safety means being able to sleep without fear, move without constant worry, and raise our children without threats. Privacy means having a space that respects our presence, our feelings, and our needs as women...away from prying eyes and social pressures. When we are stripped of security and privacy, a place becomes nothing more than a physical space without a soul. But when safety and support exist, even within a simple tent, it can begin to feel like a home, a homeland, and a true refuge.” – Woman, age unspecified, Gaza

“Maintaining a simple routine, such as preparing food, looking after the children, and tidying the house, provides a sense of control and stability even in difficult circumstances. Adapting to available resources, like sharing needs with neighbours or creatively reusing what's at hand, helps manage daily challenges. Examples of strength, creativity, and solidarity among women include collaborating on daily chores, such as preparing group meals.” – Woman, 26 years old, Gaza

Women in Gaza also lead community-based initiatives that provide practical support and education, even with minimal resources.

“Women in the camp have organised small psychological and community support groups, meeting regularly to share experiences and provide each other with emotional support, which helps them cope with the stresses of daily life. Many women have also participated in educational and awareness initiatives, leading workshops and lectures to teach children and other women the basics of health, hygiene, and legal rights, even with very limited resources. These efforts reflect the resilience and solidarity of women, who continue to support each other and their communities despite immense challenges.” – Woman, age unspecified, Gaza

In the diaspora, women rebuild solidarity networks that mirror those left behind, combining practical support with the affirmation of national identity:

“Creativity, solidarity, and the strength of Palestinian women in the diaspora truly exist. I have seen this through many projects, especially through social media, where girls share the stories of the small businesses they open as a way to compensate, even if only slightly, for what they lost. In my own life, one of the ways I practice strength and resistance since leaving Gaza is simple but constant. Whenever someone asks me where I am from, I say clearly that I am a Palestinian from Gaza.” – Woman, age unspecified, she left Gaza and now lives abroad

In the West Bank, women sustain informal support networks and collective strategies to protect households and communities, particularly in displacement settings:

“Women themselves hold awareness and psychological support sessions, creating spaces for emotional release and mutual support. Through these sessions, displaced women exchange experiences and positive energy, each contributing according to her specialisation, education, and life experience. The discussions focus on practical issues such as caring for the elderly during crises and how to deal with children under these extremely difficult circumstances. Caring for others is a form of strength and resistance because those who have the ability to care for others in such circumstances have a supernatural and great strength and this is a kind of resistance by keeping myself and others strong, steadfast and able to confront.” – Woman, 59 years old, West Bank

Women's informal leadership strengthens social cohesion and mitigates household and community risks. Participation often expands out of necessity, highlighting resilience alongside persistent gaps between responsibility and recognition:

“The sit-in organised to demand a return to the camp was carried out entirely through the solidarity and collective effort of the women of the camp.” – Woman, 34 years old, West Bank

“Displaced women from the camps in the north of the West Bank consistently come together as though they were one family. Among them is an elderly woman who was injured as a result of the army's violence during the displacement. Despite this, she took it upon herself to support the displaced families. She began sourcing vegetables and fruit from local traders and selling them to the displaced women. Before the displacement, she owned a shop, which she was unable to reopen afterwards. Nevertheless, despite the extremely difficult circumstances, she adapted her work to the new reality and continued in a way that was both appropriate to the situation and responsive to the needs of the displaced women as a whole.” – Woman, representative of the Women's Centre for Legal Aid & Counselling, West Bank

Across Gaza, the West Bank, and the diaspora, women's resilience is expressed through creativity, solidarity, and practical leadership. While contexts differ – Gaza's constraints are shaped by acute displacement and insecurity, the West Bank by militarisation and restricted mobility, and the diaspora by distance and loss – women consistently maintain household stability, reinforce community cohesion, and create spaces of protection, dignity, and shared purpose under extreme pressure.

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CHAPTER 4.

Women Humanitarian Workers in Palestine

GENDERED CHALLENGES IN HUMANITARIAN RESPONSE

The ongoing escalation of conflict and occupation policies has created one of the most complex and dangerous humanitarian environments in the world. Widespread destruction of infrastructure, mass displacement, and severe restrictions on movement have profoundly disrupted daily life and essential services. Healthcare, education, livelihoods, WASH services and systems have been severely compromised, requiring sustained, large-scale humanitarian intervention.

Women make up a significant share of the humanitarian workforce in Palestine, working across healthcare, protection, education, and community outreach. Many operate in environments with minimal security, facing constant threats of bombardment, harassment, or direct violence. For female humanitarian workers, these risks are compounded by gender-specific constraints, including social

norms that limit mobility and heightened exposure to gender-based violence. **In this context, humanitarian work is inseparable from the struggle for daily survival: women often navigate professional responsibilities alongside personal and family duties without stable infrastructure, security guarantees, or adequate psychosocial support.** For these reasons, any report documenting women's experiences of war must also consider the realities faced by women on the front lines of humanitarian response. Understanding their conditions is essential not only to safeguard their wellbeing but also to ensure the sustainability, quality, and ethical foundations of humanitarian action.

This section presents general, secondary evidence on the environment in which female humanitarian workers operate in Palestine. It draws on academic literature, humanitarian research conducted by INGOs, and public health studies to outline the structural, operational, and gender-specific challenges they face. It also incorporates insights from biographical interviews with women in Gaza and the West Bank, as well as representatives of WLOs/WROs. **The section concludes with reflections from WeWorld humanitarian staff on how their work is evolving, the changing needs of women in the communities they work with, and the personal challenges they continue to navigate.**

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4.1. Women working within a collapsing humanitarian system

Structural Dependency and Shrinking Humanitarian Space

WLOs/WROs interviewed for this research described operating within a humanitarian system strained by overlapping emergencies, prolonged occupation, and escalating violence. Across both Gaza and the West Bank, they high-

lighted deep structural dependency and instability: most WLOs/WROs lack financial autonomy and rely on short-term donor funding, undermining continuity, staff security, and institutional memory. Donor agendas further complicate their work, as externally imposed priorities often diverge from locally identified needs, fuelling accusations that women-led organisations serve foreign interests rather than their communities.

These financial pressures intersect with shrinking humanitarian and civic space across Palestine, constraining access to communities and increasing operational risk. As violations accelerate and insecurity deepens, organisations report growing difficulty monitoring, documenting, and responding to needs.

“ Access to the field was also affected and reduced because it was surrounded by many dangers, which led to an increase in violations and, as a result, an increase in work pressure. The context was accelerating, violations (...) were unprecedented, and we could not be aware of all the violations that we received or monitored.” – Woman, representative of the Women's Centre for Legal Aid & Counselling

Within this environment, WLOs/WROs also face reputational and political attacks, as conservative actors exploit moments of crisis to delegitimise women rights institutions, portraying them as corrosive to social norms and traditions.

Organisational Adaptation: From Long-Term Change to Emergency Response

Across both Gaza and the West Bank, structural fragility and insecurity have compelled many organisations to pivot away from long-term empowerment, legal advocacy, and social change initiatives toward short-term emergency response, with significant implications for sustainability and institutional resilience.

“ As a result of the current reality, and even the priorities of donors, we were forced to focus on emergency work. This shift had a significant impact on our ability to ensure the continuity of the association, because short-term emergency projects often affect job security for staff. The effects were not limited to our association but extended to women's associations across the board.” – Woman, representative of the Rural Women's Development Society

For several organisations, this shift has also transformed how priorities are identified, documented, and acted upon.

“ This reality changed everything. We work through continuous emergency meetings, constantly adjusting priorities and reallocating parts of the budget to provide direct support for women and material assistance. Even our documentation has changed. Every year we used to set priorities for field documentation, but this shifted as we reached Jenin, Tulkarem, and Hebron camps, where we witnessed widespread reproductive violence (...). We began documenting these violations more extensively (...). All priorities had to change. There can be no training on inheritance or joint funds when people have nothing to eat and are at risk of dying. We learned how to reassess priorities in order to better meet women's needs. – Woman, representative of the Women's Centre for Legal Aid & Counselling

Despite these pressures, WLOs/WROs have continued to adapt their roles while maintaining political and ethical commitments.

“ With repeated waves of violence and displacement, much of the work of women rights organisations has shifted toward providing psychosocial support, humanitarian relief, and protection for women against various forms of violence and exploitation, while continuing awareness-raising and human rights work. Despite the political divide, women rights movements have maintained a critical distance from partisan polarisation, focusing on issues that affect women regardless of political affiliation. This has allowed them to remain relatively neutral spaces, serving society as a whole. (...) They continued documenting violations and engaging in international advocacy, ensuring that the human rights dimension of the feminist struggle remained central even in the most extreme circumstances.” – Woman, representative of the Women's Affairs Centre

The Gaza Strip

While structural fragility is common across Palestine, the collapse of humanitarian space manifests differently in Gaza and the West Bank. In Gaza, the collapse of humanitarian space has reached an unprecedented level. The scale of destruction has rendered humanitarian operations increasingly untenable and, in many cases, actively life-threatening. Severe restrictions on aid delivery mean that even life-saving assistance cannot be reliably provided without a sustained humanitarian ceasefire (Missoni et al., 2025). Since October 2023, Gaza has become the deadliest context on record for humanitarian and health workers, marking a profound collapse of protection norms under International Humanitarian Law (International Rescue Committee, 2025). Data from 2025 indicate that at least 70 aid workers were killed in the first six months of the year alone, placing Palestine above Afghanistan in historical lethality for humanitarian personnel (ibid.). 2024 was accounted as the deadliest year on record for humanitarian personnel worldwide, with Gaza alone accounting for more than half of all aid worker killings globally. Nearly 97% of those killed were nationally recruited staff, underscoring how local humanitarian workers bear the greatest risk (CIVIC, 2024).

Prior to the ceasefire instated in October 2025, medical and humanitarian organisations repeatedly warned that no place in Gaza could be considered safe. Evacuation orders, raids, sieges, and direct attacks on hospitals were documented, including the prolonged siege of Nasser Hospital, during which INGO staff were forced to flee after shelling struck the orthopaedic department. At least five MSF staff members and several of their family members were killed (MSF, 2024).



The West Bank

Humanitarian action in the West Bank unfolds within a context of chronic insecurity, militarised control, and sustained restriction. Organisations operate amid frequent military incursions, arbitrary arrests, territorial fragmentation, and settler violence, all of which constrain access and expose humanitarian workers, and women in particular, to intimidation and harassment.

Despite these constraints, continuity of intervention in the West Bank is often sustained through the construction of local networks, including women's networks, which allow activities to persist even when organisational access is restricted.



“The difficulty of reaching institutions that used to visit us increased because of closures and fear of accessing Area C. On the way, settlers confronted cars bringing parcels, asked about donors, and accused us of working with terrorist organisations. We became afraid that cars with institutional logos would be confiscated. In one situation, people came to document the village and the occupation forces confiscated their cameras. (...) The continuity of intervention comes from building women's networks. We strengthened emerging women's centres in marginalised areas, and established safe spaces and women protection committees in Bedouin communities, managed by women themselves.” – Woman, representative of the Psychosocial Counselling Centre for Women

Psychological Toll and Protection Risks

Within this collapsing system, women humanitarian workers experience distinct and compounding harms. Testimonies collected for this research and from other INGOs reveal constant displacement, chronic fear, physical exhaustion, and profound moral injury, meaning the psychological distress of attempting to deliver aid while their own families remain under threat, displaced, injured, or killed (ActionAid, 2024).

“Before the war, I worked within civil society and international organisations, heading a position that allowed me to supervise a project related to safe spaces for women and girls. I gained extensive experience over almost 15 years. Through these organisations, I was able to build myself professionally and serve my community in an organised and structured way, which helped me acquire a wide range of skills. It allowed me to shape my life on my own terms, whether by becoming financially independent as a woman in Palestinian society, or by having the ability to raise my voice and bring change to my environment through my work. (...) It was a huge challenge: to move between displacement sites and the hospital under bombardment, and to function psychologically while we ourselves were deeply traumatised. We were emotionally wounded yet expected to provide care for other wounded people. It was an extremely difficult cycle for us, for the patients, and for the entire environment we were working in.” – Woman, 37 years old, used to be a humanitarian worker, she left Gaza and now lives abroad

Research consistently shows that female humanitarian workers experience higher levels of mental health distress than their male counterparts. Systematic reviews document elevated rates of PTSD, burnout, anxiety, and emotional exhaustion (Cameron et al., 2024; Jachens et al., 2018; Strohmeier et al., 2018). Studies show that 36% of women engaged in humanitarian work report high emotional exhaustion, compared to 27% of men, while nearly half of female humanitarian workers experience low levels of personal accomplishment (Cameron et al., 2024; Jachens et al., 2018).

“Saving the life of a critically ill patient during childbirth or caring for an injured person in a conflict, despite limited resources, shows remarkable dedication. The team supported one another in difficult circumstances, working with solidarity and cooperation to overcome major challenges. (...) Supporting women health workers is essential to ensure they can continue their work safely and with dignity.” – Woman, nurse, age unspecified, Gaza

In Gaza, female healthcare workers present significantly higher PTSD scores than male colleagues, particularly in relation to avoidance behaviours and hyperarousal symptoms (Amro et al., 2025). Earlier studies following the 2014 attacks similarly warned of the need for immediate psychological support (Abu-El-Noor et al., 2016). As emerged during interviews for this study, in the West Bank, psychological distress is often less visible and less acknowledged, despite pervasive exposure to fear, insecurity, and economic strain.

“When we talk about Gaza, people there are more aware of mental health issues than in the West Bank. In the West Bank, mental health is not discussed much, even though everyone has been affected. (...) We live with a contradiction: strong social warmth and solidarity, but experiences that are not acknowledged or processed. We also live within a constant narrative of heroism.” – Woman, representative of a women-led organisation

Finally, the workplace itself can frequently become a site of violence. Studies show that 76.1% of emergency department staff in Palestinian healthcare settings experienced workplace violence within a twelve-month period, including verbal abuse, threats, and harassment (Rija et al., 2022; Hamdan et al., 2015). Fear of retaliation and weak reporting mechanisms mean most incidents remain undocumented.



STRUCTURAL RESPONSIBILITY AND LEGAL FAILURE

These experiences take place within a wider context shaped by longstanding challenges and gaps in legal protection. The Office of the UN High Commissioner for Human Rights has noted that some of these documented patterns may raise concerns under international law, highlighting Israel's responsibilities, as the occupying power, to safeguard humanitarian personnel and to facilitate safe, unhindered aid delivery (OHCHR, 2024). Despite these obligations, recurring constraints on border crossings, damage to health and education facilities, and disruptions affecting humanitarian operations have made the delivery of assistance increasingly difficult. Considered together, these findings point not only to a profound humanitarian crisis, but also to a gradual weakening of the conditions required for humanitarian work to function effectively.

4.2. Insights from WeWorld Staff

To better understand the situated realities of humanitarian workers in Palestine, we conducted an internal qualitative survey with 21 WeWorld staff members working across Gaza and the West Bank (11 men and 10 women). For security reasons, all personal identifiers were removed. The testimonies provide insight into how humanitarian work is experienced from within contexts of prolonged conflict and restriction, and how gender, social norms, and spatial constraints shape both daily practice and programme outcomes. Rather than describing a single experience of crisis, the responses reveal two intertwined ways of interpreting risk and need. One is grounded in everyday, embodied experience; the other in system design and structural response. **Together, they offer a more complete understanding of what it means to operate and to design humanitarian action in Palestine, but also of what it means, in practice and in identity, to be a humanitarian worker operating under sustained pressure and constraint.**

Methodological Note and Limitations



The qualitative sample comprises 21 WeWorld staff members. Of these, 10 are women and 11 are men. In terms of geographical distribution, most women are based in the West Bank (8), with a smaller number working in Gaza (2). Among men, five are based in Gaza, four in the West Bank, and two work across both areas. **Additional contextual descriptors were collected to situate responses but were not used for analytical weighting to prioritise gender analysis.** Women respondents were primarily engaged in multi-sector or integrated programming (5) and WASH (3), with the remainder working in other sectors. Men were distributed across a wider range of sectors, including other functions (4), multi-sector or integrated programmes (2), WASH (2), education (1), food security and livelihoods (1), and protection (1). In terms of tenure, most respondents of both genders had between one and three years of experience (6 women ; 6 men), followed by those with more than five years (3 women; 3 men), while one woman had three to five years of experience and two men had less than one year.

The findings presented here are based on a small, non-probabilistic sample. As such, results should be interpreted as indicative rather than statistically generalisable. The thematic analysis relies on keyword-based categorisation in both English and Arabic. While this approach allows for systematic comparison, it may under-represent themes that are expressed implicitly or through highly contextual language. Percentages reported throughout the section indicate the proportion of respondents of a given gender who mentioned a specific category; categories are not mutually exclusive, and responses often engage with multiple themes simultaneously. Sub-group figures by area (e.g., women in Gaza) involve very small numbers and should be read cautiously. **Despite these limitations, the consistency between quantitative patterns and qualitative testimonies strengthens the analytical validity of the findings, offering a solid basis for reflective, gender-responsive programming.**

Living and Working Under Restriction

Daily life for humanitarian staff unfolds under constant limitation. In the West Bank, movement is shaped by check-

points, road closures, and settler violence, affecting access to workplaces, communities, and services. Women described these restrictions not as abstract constraints but as concrete interruptions to daily routines, often linking mobility

directly to education, employment, and personal safety. Survey data reflects this emphasis: around 80% of women identified movement restrictions as a major risk in, compared to almost 55% of men (80% vs 54.5%).



Settler attacks, mobility obstacles... girls being denied education and work.” - Woman, West Bank



Fear for their daughters when moving through checkpoints or going to universities... these places are not always safe.” - Woman, West Bank

In Gaza, the pressures of displacement, overcrowding, and the breakdown of basic infrastructure dominate daily experience. Women frequently mentioned the implications of inadequate WASH facilities, water scarcity, and lack of privacy, describing how these conditions affect

physical safety, mental wellbeing, and dignity. Men also acknowledged these deficits, but typically in more general terms. Quantitatively, concerns related to WASH/MHM and dignity feature far more often among women across questions (e.g., 70% of women vs 18.2% of

men referenced WASH/MHM). In the very small Gaza female sub-sample (2 women), WASH/privacy/mobility were raised in 100% of responses, a signal that should be read qualitatively rather than statistically.



No safety or privacy in bathrooms... lack of hygiene items and water... queues and long distances to carry water.” - Woman, Gaza



Overcrowded shelters and tents offer no privacy... women experience prolonged grief and trauma.” - Man, Gaza

Risk and Needs Analysis

Across the full set of open-ended responses, a clear pattern emerges. **Women consistently foreground the everyday mechanics of vulnerability: how people move, wash, study, seek care, and manage daily responsibilities under constraint.** This is reflected in the risk analysis, where women more frequent-

ly cited mobility/checkpoints (+25.5 percentage points vs men), education (+40.9), sexual and reproductive health (+20.9), and WASH/MHM (+10.9). In the needs analysis, women prioritised WASH/MHM (+41.8), psychosocial support (+31.8), mobility (+22.7), and education (+12.7) relative to men.

These concerns are not simply about the availability of services, but about wheth-

er services can be used safely and with dignity. Toilets, water points, transport routes, and schools may formally exist, yet remain inaccessible due to lack of privacy, unsafe conditions, long distances, or social constraints. **In this sense, vulnerability is produced not only by absence, but by friction, meaning the points where systems fail to align with lived reality.**



It's not the lack of a toilet, it's the lack of safety when using it.” - Woman, Gaza



Women in remote areas spend most of their money on food and cannot afford dignity items; safe spaces and basic hygiene are essential.” - Woman, West Bank



We need private, safe toilets... and safe spaces when collecting water.” - Woman, Gaza

Men’s responses tend to frame crisis through a more structural lens. Issues such as protection, gender-based violence, shelter, psychosocial stress, and sexual and reproductive health are described as pillars of an effective hu-

manitarian response. In the risk analysis, men more frequently identified MHPSS and protection/GBV (e.g., MHPSS: 45.5% men vs 10% women; GBV: 45.5% vs 20%). In the needs assessment, they emphasised shelter and SRH (e.g., shel-

ter: 27.3% men vs 9.1% women; SRH: 54.5% vs 40.0%). Privacy, when mentioned by men, was primarily discussed as a security requirement within shelters and collective spaces, rather than as an everyday dignity issue.



Education helps women understand their rights better... but we also need safer, more dignified shelter and GBV response.” - Man, West Bank



Women leaders contribute gender-sensitive perspectives to project planning... but psychosocial stress and anxiety are chronic.” - Man, Gaza

This difference in framing does not signal disagreement, but complementarity. Women’s accounts expose how systems are experienced on the ground; men’s accounts articulate how those systems are meant to function. One perspective identifies where daily life becomes unsafe or unusable, while the other outlines the infrastructure and protocols intended to prevent this. **While gender shapes how staff interpret and experience risk, it is important to acknowledge that sectoral specialisation also influences prioritisation patterns¹⁴.** Respondents working in WASH, Protection/GBV, Shelter, Education, or Multi-sectoral Programming tend to emphasise risks and

needs most closely aligned with their daily technical focus. For example, staff in WASH teams (where women are more represented) more frequently reference privacy, safety in latrines, and menstrual hygiene, while staff working in shelter or protection (with more men represented) more often highlight GBV, privacy in collective spaces, and psychosocial stress. Thus, some differences in emphasis may reflect professional roles and programmatic exposure, not only gender-based perspectives. **Given the small, non-probabilistic sample, we therefore proceeded primarily through a gender-differentiated analysis as a consistent comparative lens across responses; sectoral specialisation is treated as an interacting contextual factor rather than a statistical control, and sub-group splits (e.g., by area or sector) are interpreted cautiously.** Nevertheless, even when accounting for sector affiliation, women’s responses consistently return

to the embodied, everyday usability of services, while men more often frame risks and needs through structural or system-level considerations, suggesting that sectoral positioning interacts with—but does not fully explain—the gendered patterns observed.

Social Norms, Trust, and Gendered Roles

Social and cultural norms mediate humanitarian engagement in complex ways. Female staff play a critical role in accessing women and girls, building trust, and enabling disclosure of sensitive issues, particularly related to protection and sexual and reproductive health. Shared experience and social proximity often facilitate more open communication and more contextually appropriate programming.

¹⁴ Geography further shapes these experiences. In Gaza, women’s responses (even though the sample is very small) converge strongly around WASH, privacy, and mobility, reflecting the acute strain on dignity and safety caused by overcrowding and infrastructure collapse. In the West Bank, women emphasise mobility and access to education, alongside protection and reproductive health, highlighting how territorial fragmentation and movement control structure everyday risk. Men’s responses vary by context but consistently return to psychosocial stress, protection, and service organisation.



We’re from the same villages... this builds trust and makes sensitive conversations easier.” - Woman, West Bank



Female colleagues open communication channels with women; they notice details men often overlook.” - Man, West Bank

At the same time, women navigate additional constraints, including scrutiny of movement, heightened exposure to harassment, dual work and care responsibilities, and limited access to leadership roles.



Family discouragement due to risks on the road... after hours at checkpoints, there is no time left for self-care.” - Woman, West Bank

Despite these barriers, women increasingly occupy positions of responsibility, shaping programmes rather than merely delivering them. Men frequently acknowledged that working alongside women expanded their understanding of risk and improved programme relevance.



Women we work with have shifted from aid recipients to leaders.” - Woman, West Bank



Clear safeguards and gender-sensitive tasking build trust and improve programme results.” - Woman, Gaza

On Being Women Working in the Humanitarian Sector

To conclude the survey, we asked our staff a rather personal question: **“What does being a woman, or working closely with women, in the humanitarian sector mean to you?”** Their reflections reveal not only the values and commitments that drive their work, but also the gendered challenges that shape daily realities and influence programme design. Many women frame their work as a form of public service, extending responsibility beyond their families into broader society:



Close to acute humanitarian cases, I feel myself useful for the society, not just for my family.” - Woman, West Bank



I feel a huge responsibility to connect the voices of communities to the organisation I work for.” - Woman, West Bank

Women in the field see their role as carrying, translating, and elevating women's voices into institutional decisions. Their work is not only operational but deeply ethical, rooted in accountability to communities and recognition of women's lived realities. A recurring theme is the uniquely relational nature of women-to-women interactions. Female staff described how being present with other women creates a sense of safety, trust, and emotional support:

“ Personally, being a woman in the humanitarian sector means a great opportunity to be supportive, even if only emotionally, to help another woman overcome crises, remain resilient, and develop herself.” - Woman, West Bank

“ I do believe that no one can understand a woman like a woman; a woman can feel safer with the presence of another woman.” - Woman, West Bank

Several women articulated the importance of visible leadership. They consciously model resilience and agency, showing communities how to navigate extreme conditions:

“ I am a hard-working woman; I feel pride and honour in what I provide to exhausted women whose lives have changed since the war. When I listen to women who live the same circumstances—fetching water, finding ways to cook, washing by hand—I try to be strong and steadfast so I can be a model they can follow.” - Woman, West Bank

Respondents also described a moral dimension to their work, emphasising conscious, sustainable empathy over emotional overextension:

“ It made me more committed to humanitarian principles, and more convinced that conscious empathy, not exhaustion, is what enables us to continue and make a real impact.” - Woman, West Bank

Nonetheless, despite pride and agency, some testimonies also convey ambivalence and emotional strain:

“ I try to forget being a woman; in truth, I know this may be a psychological condition... honestly, I really hate being a woman, but working closely with women reveals many hidden truths and realities.” - Woman, West Bank

“ We always feel fear and stress... mixed emotions of pride and love for my work, alongside psychological pressure and exhaustion.” - Woman, West Bank

Men's Perspectives: Becoming Allies

Male respondents reflected on the significance of working alongside women, highlighting perspective shifts and heightened responsibility:

“ It brings a different perspective. Female colleagues highlight issues less visible to men due to different social positions. This helps ground analysis in lived reality and shapes responses through a wider and different lens.” - Man, Gaza

“ Working closely with women means understanding the challenges they face every day and listening to their concerns. It gives a bigger sense of responsibility to support more inclusive and respectful humanitarian work.” - Man, West Bank

“ Working closely with women widened our lens and made programmes more relevant.” - Man, Gaza

Operational Implications: Translating Insight into Action

Taken together, the findings suggest that gender-responsive humanitarian action in Palestine requires holding two perspectives simultaneously. **The experiential perspective, more prominent in women's accounts, identifies the everyday points at which life becomes**

constrained, unsafe, or undignified. The structural perspective, more prominent in men's responses, outlines the systems—shelter, protection, psychosocial support, and health services—needed to address risk at scale. Humanitarian effectiveness emerges at the intersection of these frames. Systems designed without attention to daily experience risk remaining unusable; attention to lived realities without structural investment remains insufficient. Women's participation in programme design and leadership

is therefore not symbolic, but functional. It is through this integration that humanitarian responses become not only operationally sound, but genuinely accessible, safe, and dignified in practice.

The findings point towards a set of operational implications that cut across sectors and underscore the importance of designing interventions that are not only available, but usable, safe, and dignified in practice.

Key areas for action include:

- **WASH AND DIGNITY AS A HIGH OPERATIONAL PRIORITY.** Women's strong emphasis on WASH and menstrual hygiene management—reflected in a +41.8-percentage point gender gap and reiterated in multiple testimonies—aligns with reports of lack of privacy, insecurity, and physical strain. This calls for WASH facilities explicitly designed around women's daily realities: separate and well-lit latrines, reliable doors and locking systems, and regular MHM kits. Water access similarly requires attention to queue management (including women-designated time slots) and nearby, safe collection points, reinforcing the insight that dignity is shaped by conditions of use rather than by infrastructure alone.

“ Encouraging women to claim their right to services... tailoring services to girls' and women's needs.” - Woman, Gaza

- **SAFE MOBILITY AND ACCESS TO SERVICES.** Mobility emerged as a significantly higher priority for women, reflecting how checkpoints, distance, and insecurity restrict access to education, health care, and humanitarian assistance. When feasible, programming should be planned around movement constraints, with activities scheduled at times and locations compatible with checkpoint regimes. This should be complemented by safe transport options, transport reimbursements, and mobile teams that bring services closer to women and girls instead of requiring travel through high-risk environments.



“Safer zones for women and children; without safe routes, services remain out of reach.” - Woman, West Bank

- **DIFFERENTIATED MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT.** Men more frequently identified MHPSS as a major risk (45.5% men vs 10% women), pointing to chronic stress and exposure affecting both staff and communities. This suggests the importance of structured support mechanisms such as supervision and defusing sessions, particularly for male staff. Women, by contrast, framed MHPSS primarily as a practical need linked to daily pressures (50% women vs 18.2% men), highlighting the value of accessible, women-only counselling points and group support activities. Integrating these services into WASH, education, or community-based programming can help reduce stigma and logistical barriers.



“We fear what happens to them could happen to us... the pressure is doubled.” - Woman, Gaza



“Compassion fatigue, chronic stress and anxiety are constant.” - Man, Gaza

- **SEXUAL AND REPRODUCTIVE HEALTH AND SHELTER AS INTEGRATED PRIORITIES.** Men placed greater emphasis on SRH and shelter, underlining the need to embed comprehensive SRH services—such as antenatal and postnatal care, contraception, and breastfeeding support—within accessible centres, while improving shelter conditions to ensure privacy and safety (SRH: 54.5% men vs 40% women; shelter: 27.3% vs 9.1%). These interventions are strengthened when paired with cash or multi-purpose cash assistance, enabling women to cover hygiene, transport, and health-related costs that would otherwise limit uptake.



“Shelter must reduce overcrowding and provide private sanitation; SRH should be stigma-free and easily reachable.” - Man, Gaza

- **EDUCATION AND PROTECTION AS MUTUALLY REINFORCING.** For women and girls, safe learning pathways require protected learning spaces, tutoring or alternative modalities, safe transport, and clear GBV prevention/referral protocols. Men's emphasis on GBV/protection in risks reinforces the need to invest in safe spaces, confidential reporting mechanisms, and accessible information on available services, ensuring that protection frameworks are visible, trusted, and effective.



“What we need is increased awareness about the importance of education for girls.” - Woman, West Bank

- **REDUCING THE BURDEN OF UNPAID CARE WORK.** Many testimonies point to the growing weight of domestic and care responsibilities, which limits women's ability to participate in programmes, trainings, or income-generating activities. Practical mitigation measures—such as on-site/mobile childcare, nearby water points, or designated laundry areas—can significantly reduce these barriers and improve sustained participation. Notably, men also flagged care burdens, indicating cross-gender recognition of this barrier.



“Standing in lines for bread consumes extra hours.” - Woman, Gaza

- **GENDER-RESPONSIVE TEAMS AND GOVERNANCE.** Effective gender-responsive programming also depends on internal organisational practices. This includes flexible and safety-oriented policies for female staff, visible women's leadership in decision-making processes, and field planning that pairs male and female staff. Such approaches help navigate cultural norms while ensuring that women are not excluded from engagement with community leaders or programme design.



“Humanitarian responses must integrate gender as a capacity lens... invest in women's leadership and livelihoods.” - Man, West Bank



“We should move from viewing women only as vulnerable to recognising them as agents of change.” - Man, West Bank



TOWARDS A GENDER-RESPONSIVE AND TRANSFORMATIVE HUMANITARIAN PRACTICE

Despite extreme challenges, humanitarian actors in Palestine remain deeply committed to delivering life-saving assistance to communities affected by conflict and occupation. Their work goes beyond technical or logistical interventions, combining adaptability, ethical commitment, and a human-centred approach that responds to urgent needs while protecting dignity, rights, and justice. Women humanitarian workers are central to this effort, ensuring that vulnerable groups, including women, girls, and marginalised populations, can access essential services even amid restrictions on movement, social space, and civic engagement. By creating safe spaces, supporting community-led initiatives, and adapting programmes to local realities, they help preserve resilience and agency. In this sense, **humanitarian work contributes not only to survival today but also to the capacity of communities to imagine and sustain a future of their own making, a practical expression of intergenerational continuity, resistance, and the possibility of breaking cycles of trauma, something that could be described as “the right to the future”.**

Qualitative research with women and WLOs/WROs in Gaza and the West Bank, and with WeWorld staff highlights that daily risks, mobility constraints, care burdens, and institutional barriers shape how women operate in the field and affect their reach. Yet these women bring critical strengths: contextual

knowledge, relational trust, ethical commitment, and the ability to model resilience and agency. Male colleagues affirm that working alongside women broadens perspectives, strengthens accountability, and can foster gender-transformative practices when men act as allies.

These insights demonstrate that gender equity is central to effective humanitarian response, not an optional addition. Programmes that place communities—and particularly women's voices—at the centre, institutionalise participation in decision-making, protect dignity, and support staff wellbeing through safe infrastructure, flexible schedules, psychosocial support, and livelihood opportunities are better equipped to respond to immediate needs while strengthening long-term community resilience. **By integrating humanitarian, development, and peace-oriented approaches in a nexus perspective, such interventions help communities safeguard their present while laying the foundations for a future shaped by their own priorities and capacities.** The experience of women humanitarian workers in Palestine shows that when operational, ethical, and relational dimensions align, humanitarian action becomes both **responsive and transformative**, supporting not just survival but the intergenerational continuity of agency, hope, and collective sense.

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Francesca Volpi/WeWorld

CHAPTER 5.

Conclusions and Recommendations

Intersecting Crises, Gendered Impacts, and Women-Led Responses

This study confirms what Palestinian women, alongside women-led and women's rights organisations, have long asserted: crises are never gender-neutral. In the context of occupation, gendered harm is not incidental but structurally produced, as male-dominance and military control operate together to constrain mobility, livelihoods, care work, and bodily autonomy. **Within this landscape, women's endurance is often expressed through *sumud*: steadfastness rooted in remaining, sustaining life, and asserting presence under conditions of protracted violence.** Rather than a form of passive endurance, *sumud* expresses the everyday work of living, caring, and organising within conditions that place significant strain on Palestinian communities. Women's lives are circumscribed not only by checkpoints, curfews, and military closures, but also by unpaid domestic labour and social expectations, pressures that intersect across health, education, WASH, food security, shelter, and livelihoods, creating persistent and systemic vulnerability.

While women's resilience is often framed as heroic, this study shows that it is less a matter of choice than a survival strategy internalised or imposed by circumstances. Women absorb systemic collapse by extending care, rationing scarce resources, sustaining micro-safety nets, teaching in tents, and managing stress within overcrowded shelters, yet the social expectation to be endlessly strong masks distress and obscures the psychological toll of grief, fear, and trauma, denying women the right to rest, to express pain, or to receive care. **Therefore, our study rejects simplistic binaries such as "victim" versus "heroic resister," revealing instead that women's agency is everyday, diverse, and situated, expressed through home-based economies, micro-businesses,**

legal accompaniment, mutual aid, storytelling, and community organising.

Palestinian feminisms and women's rights movements are equally plural and locally grounded, reflecting strategies that are simultaneously against occupation and anti-patriarchal, draw meaning from faith while resisting its authoritarian misuse, prioritise legitimacy with communities over imported models, and insist that donors and international actors fund interventions that are effective locally rather than those designed to appeal externally. These movements do not operate in isolation: they are embedded within the daily realities of communities, mediating risks, sustaining social cohesion, and shaping both humanitarian and development responses in a context of constrained mobility and scarce resources. **Their work can be understood as a collective form of *sumud*—not as endurance for its own sake, but as an active effort to hold communities together while contesting both occupation and male-dominance constraints.**

Evidence for this study was drawn from interviews with women and WLOs/WROs across the West Bank, Gaza, and the diaspora, supplemented by organisational reports, field data, and consultations with WeWorld staff. **The analysis demonstrates how gendered harm manifests across multiple dimensions—from limited access to services and exposure to violence, to the invisibility of care work and the heavy psychosocial burdens that women carry—while also highlighting the indispensable role of women-led and women's rights organisations, which operate under volatile funding, heightened risk, and structural constraints to sustain vital humanitarian and development work.** Frontline humanitarian actors, in turn, provide

services while acting as mediators, advocates, and protectors within communities experiencing repeated crises, underlining that effective interventions require integrating structural provision with attention to everyday experience.

The future of Palestinian women remains highly precarious, shaped by the intersecting forces of military occupation, entrenched gendered norms, and deepening socio-economic precarity, with repeated political crises and everyday disruptions collapsing the distinction between emergency and normality. In this context, women absorb social, economic, and emotional shocks while sustaining family and community life, navigating complex social and political landscapes with few institutional supports, and bearing additional burdens imposed by structural inequalities and social expectations, which render *sumud* an unrecognised labour rather than a freely chosen stance, and transform endurance into a condition of survival rather than a political option. Despite these challenges, Palestinian women continue to exercise remarkable resilience and strategic agency, carving out alternative spaces for political, economic, and cultural participation. **These spaces, often informal and under-resourced, are vital sites of resistance and future-making, and they illustrate that women's visions of the future are closely tied to practical autonomy and dignity rather than abstract notions of empowerment:** work, entrepreneurship, and control over resources are central to their sense of self-determination.

“ We were unable to achieve financial independence. Our work began with volunteers, and volunteering still constitutes a large part of our operations. However, we have not succeeded in achieving self-sustainability, leaving us in constant need of external funding. As a result, the team's workforce has been directly affected, as employment is tied to the duration of funded projects. This has increased pressure on management and has also impacted the beneficiaries of our services, whose access and continuity depend on project timelines as well. In addition, the relationship between Palestinian NGOs and international institutions and donors remains deeply imbalanced. Local organisations are treated as “service providers” rather than as equal partners. This is compounded by political conditions (...). Since the beginning of the war on Gaza, donor selectivity regarding which institutions can be funded or engaged has intensified, further deepening inequality and exclusion, despite claims of neutrality and differentiation.” - Woman, representative of a women-led organisation

“ The most important thing in a woman's life is to have a job that allows her to work with her own hands, to provide for herself and her children without relying on anyone else. I dream of having my own business (...) and I hope to start this project to support myself and my children.” - Woman, age unspecified, Bedouin community, West Bank

Grassroots engagement, civil society participation, and informal networks remain essential arenas for women's influence, as social solidarity, storytelling, and mutual support sustain families and communities where institutional recognition is limited or absent. Women are central to societal recovery and reconstruction, yet prevailing narratives often frame this role in terms of caregiving, risking over-reliance on unpaid labour and obscuring the strategic and organisational contributions women provide.

“ Women are the ones who will make the recovery for the Palestinian society, where we see women as mothers and caretakers of the family, we see that they support their children and give them strength, as well as psychological support and economic empowerment workshops.” - Woman, representative of a women-led organisation

Sustaining these contributions requires structural change. Resilience alone is insufficient if it remains unrecognised or unsupported. **Neither women's agency nor *sumud* can substitute for rights, resources, and political accountability. Endurance should not be treated as evidence of coping capacity, but as a signal of prolonged exposure to harm.** Strategies must account for intersecting identities, socio-economic differences, and political experiences, ensuring that collective agency remains inclusive, responsive, and transformative.

“ Recovery will not be possible without women because women are capable of virtually everything. Without their prior efforts and the steps they have already taken, we would have no hope of reaching this point. No one else would speak my language, and no one else would understand my needs.” - Woman, representative of the Women's Programme Centre Association

This chapter presents these conclusions alongside operational recommendations that aim to strengthen women's agency, reduce structural vulnerabilities, and support the long-term effectiveness of humanitarian and development interventions. It outlines evidence-informed pathways for donors, humanitarian and development agencies, and local governance actors, integrating attention to women's authority, lived experience, and expertise within operationally feasible programmes under the constraints of occupation and recurrent crises.

5.1. Cross-cutting Implications

The field research identifies patterns and dynamics that cut across sectors and contexts, highlighting both structural and lived dimensions of gendered harm in Palestine.

• SYSTEMIC BARRIERS TO ACCESS:

Women's lack of access to essential services is not incidental but the result of overlapping structural, social, and logistical constraints. Checkpoints, harassment, distance, cost, and stigma around mental health all limit usability, safety, and privacy. Even where services exist, these hidden barriers prevent women from benefiting, underscoring the need for interventions that consider both availability and accessibility.

• CARE WORK AS PROTECTION WORK:

Domestic and caregiving responsibilities are high-stakes labour with direct safety implications. Tasks such as water collection, cooking, and child supervision expose women to physical and psychosocial risks. Reducing time poverty and exposure during care is therefore a frontline protection measure. Recognition of unpaid care as essential, high-risk work is crucial for designing meaningful humanitarian interventions.

• MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT:

Women carry immense psychosocial burdens, balancing caregiving, household responsibilities, and survival under occupation. The expectation to be endlessly strong often silences distress, transforming resilience into unacknowledged injury. Men and women alike reported chronic stress, anxiety, and "compassion fatigue" affecting both staff and communities. Accessible, low-threshold, women-led psychosocial support em-

bedded into everyday programming—such as counselling, restorative activities, and grief-aware interventions—is essential to safeguard wellbeing and sustain community resilience.

• SEXUAL AND REPRODUCTIVE HEALTH AND MENSTRUAL HYGIENE:

Access to sexual and reproductive health services and menstrual hygiene management is structurally constrained, undermining dignity, autonomy, and wellbeing. Safe delivery, contraception, informed choice, and menstrual dignity are essential, non-negotiable elements of humanitarian and development programming, and must be integrated into WASH, shelter, and cash interventions.

• WLOs/WROs AS CRITICAL INFRASTRUCTURE:

80% of women's organisations in the Arab region were affected by reductions in foreign assistance, 82% laid off staff, and over 40% anticipated closure (UN Women, 2025a); in Palestine, local WLOs/WROs received just 0.2% of total humanitarian financing in 2024 (UN Women, 2025b). These organisations sustain trust, contextual literacy, and access to marginalised groups, yet operate under extreme operational and financial constraints. Supporting them is therefore central to both short-term service delivery and long-term resilience.

Across all these dimensions, two perspectives emerge as essential for effective action. **The experiential perspective, which identifies the everyday points at which life becomes unsafe, constrained, or undignified. The structural perspective highlights the systems required to address risk at scale: shelter, protection, psychosocial support, and health services. Humanitarian effectiveness arises at the intersection of these frames.** Systems designed without attention to lived realities risk remaining unusable, while attention to daily experience without structural investment remains insufficient. Women's participation in programme design and leadership is therefore not symbolic but functional, ensuring that interventions are accessible, safe, and dignified in practice.

Finally, these observations point to enduring cross-cutting challenges:

→ NATIONAL ASPIRATIONS PARADOX:

Women's emancipation is often deferred until after national aspirations are fulfilled, yet evidence suggests that political and gender justice must advance together.

→ RESILIENCE VERSUS VULNERABILITY:

Women's capacity to absorb multiple crises is celebrated, yet the psychological and physical costs are often unrecognised.

→ GENERATIONAL RISKS:

Younger generations may adopt more conservative gender norms, creating potential backlash and undermining progress.

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5.2. Recommendations for a Gender-Transformative Action

Palestinian women and WLOs/WROs operate within a rapidly changing context shaped by occupation, recurring crises, and structural inequalities. These dynamics are compounded by chronic underfunding, restricted mobility, and social norms that limit women's authority and access to resources. Effective support therefore requires recognising women's expertise and leadership, and integrating gender equity as a cross-cutting, transformative principle rather than a siloed concern. Drawing on evidence from interviews, organisational reports, and frontline insights from WeWorld staff, the recommendations outlined here provide operationally feasible pathways to address immediate needs while strengthening long-term resilience, agency, and structural change. They reflect both the practical realities of aid delivery under occupation and the strategic role of women-led movements in shaping interventions that are safe, accessible, and relevant.

At the core, stands an overarching principle: **invest in Palestinian WLOs/WROs, reduce the burdens they carry, and ensure their authority and decision-making shape all programmes and policies affecting their lives.** The effectiveness of interventions depends on sustained investment in women's leadership, meaningful participation, and structural change. Financial and non-financial support must complement each other to ensure WLOs/WROs can deliver **transformative, contextually grounded, and safe programmes.**

These recommendations are intended for four groups of stakeholders, each with complementary responsibilities:

- Donors – bilateral and multilateral agencies, international foundations
- Humanitarian and Development Actors – NGOs, UN agencies, and international development bodies
- Local Governance Institutions – municipal councils, line ministries, and other authorities
- Women-Led and Women's Rights Organisations (WLOs/WROs) – Palestinian civil society actors delivering services and advocacy

As the context remains highly fluid, and because each actor holds distinct forms of power, resources, and responsibility, recommendations are tailored accordingly to maximise their feasibility and impact. **They represent evidence-informed pathways rather than prescriptive solutions, intended to be operationally feasible while adapting to evolving risks, local realities, and ongoing consultation with women and women-led organisations.**





WHAT “GENDER-TRANSFORMATIVE” MEANS HERE

In a context of protracted occupation, gender-transformative approaches must be pragmatic and responsive to daily realities. They require shifts in who makes decisions, who benefits, and whose time, safety, and well-being are prioritised – but these shifts must account for structural constraints such as checkpoints, mobility restrictions, funding volatility, and entrenched social norms. In Palestine, transformative action can take several feasible, phased forms:

- **REDISTRIBUTIVE:**

Where possible, programmes should reduce women’s unpaid care burdens, improve safe mobility, increase control over income, and expand women’s voice in household, community, and programme decisions. Even small adjustments – like scheduling services to reduce travel or providing time-saving interventions – can meaningfully reduce risk and expand choice within existing constraints.

- **RELATIONAL:**

Men and boys can be engaged as allies to gradually shift social norms, share care responsibilities, and reduce violence. This involvement must support women’s authority, not overshadow it, and can start with small-scale initiatives that model equitable practices in families and communities.

- **REPRESENTATIVE:**

Women – including adolescents, widows, older women, and women with disabilities – should have meaningful opportunities to participate in programme design and budgeting. Representation may begin with advisory roles, community consultations, or co-design sessions, linking gradually to decision-making authority and resource control.

- **SITUATED:**

Programmes should be co-designed with local women rights and gender justice actors, faith leaders open to rights-affirming dialogue, and recognised community structures. Even limited collaboration ensures interventions respond to local needs, respect cultural knowledge, and maintain legitimacy, rather than relying on imported templates.

- **ACCOUNTABLE:**

Monitoring should focus on outcomes that directly affect women’s daily lives, such as time saved, privacy maintained, safety improved, and decisions made by women. Measurement should be feasible and context-sensitive, recognising that full-scale evaluation may be limited by security, access, and resource constraints.

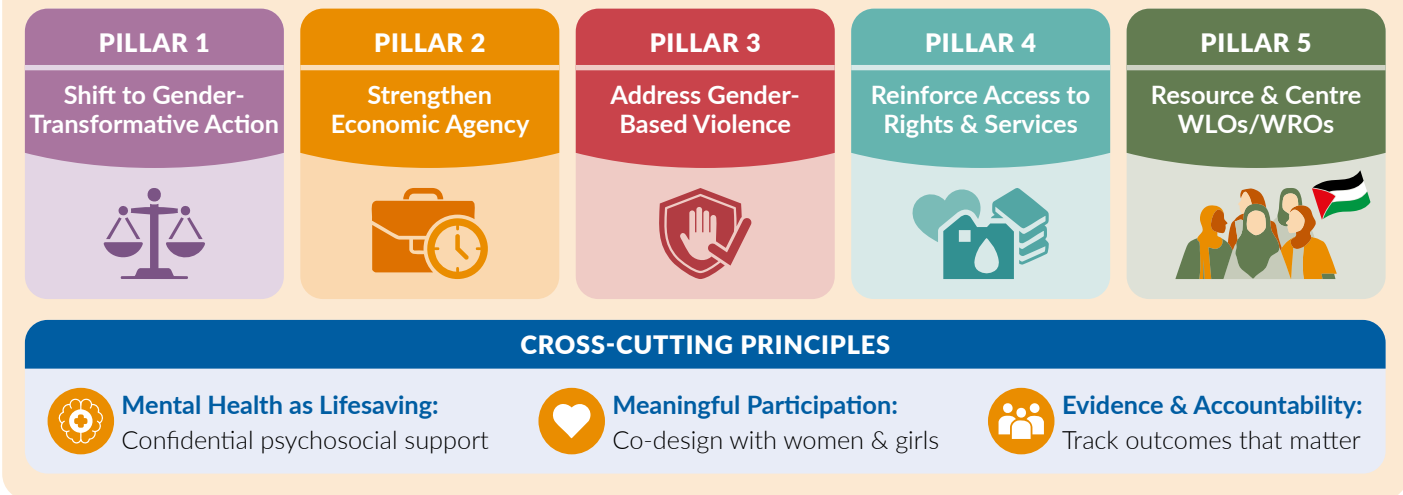
In practice, a gender-transformative approach in Palestine is incremental and context-aware: it redistributes labour and resources, engages men and boys as allies, ensures women’s representation grows in meaningful ways, grounds interventions in local realities, and tracks outcomes that reflect women’s lived experiences. This approach does not promise immediate systemic transformation but provides a realistic pathway to strengthening women’s agency, safety, and authority over time.

In practice, a gender-transformative approach in Palestine is incremental and context-aware: it redistributes labour and resources, engages men and boys as allies, ensures women’s representation grows in meaningful ways, grounds interventions in local realities, and tracks outcomes that reflect women’s lived experiences.

The guidance is structured around five strategic pillars while specifying actions for each stakeholder.

Gender-Transformative Action for Women in Crisis Contexts

From addressing symptoms to transforming systems



PILLAR 1 - SHIFT FROM GENDER-RESPONSIVE TO GENDER-TRANSFORMATIVE ACTION

Systemic violence and male-dominance shape women’s exposure to harm. Interventions must target root causes, not just symptoms.

- **Donors:** Fund programmes that explicitly redistribute unpaid care work, engage men and boys, and embed transformative outcomes in monitoring.
- **Humanitarian & Development Actors:** Conduct mandatory gender analyses across all programme cycles, integrate men and boys as allies, track shifts in power relations, and embed transformative indicators (decision-making, mobility, time-use, etc.).
- **WLOs/WROs:** Lead community-based gender-transformative initiatives, engage men and boys, and document changes in local gender norms.

PILLAR 2 - STRENGTHEN WOMEN’S ECONOMIC AGENCY AND REDUCE TIME POVERTY

Economic collapse and mobility restrictions exacerbate dependence and GBV risk.

- **Donors:** Fund women’s livelihoods programmes, digital entrepreneurship, home-based enterprises, and time-saving infrastructure (water tanks, communal kitchens, etc.).
- **Humanitarian & Development Actors:** Support childcare hubs, cash-for-care schemes, fuel-efficient technologies, and women’s safe employment initiatives.
- **Local Governance Institutions:** Remove administrative barriers to home-based and digital enterprises; streamline licensing; ensure safe transport and municipal support.
- **WLOs/WROs:** Implement livelihoods programmes, manage childcare and time-saving initiatives, and provide skills and financial literacy support to women heads-of-household, widows, and single women.

PILLAR 3 - ADDRESS GENDER-BASED VIOLENCE THROUGH STRUCTURAL MEASURES

GBV is driven by structural and interpersonal violence, exacerbated by displacement, poverty, and economic precarity.

- **Donors:** Prioritise funding for GBV-prevention, survivor-centred services, and menstrual hygiene supplies for women and girls.
- **Humanitarian & Development Actors:** Ensure all facilities have safe lighting, partitions, privacy, secure latrines; deploy female staff; enforce mandatory protection protocols at distribution points.
- **Local Governance Institutions:** Support safe shelters, lighting, and WASH in public spaces; streamline reporting and legal protection for survivors.
- **WLOs/WROs:** Continue GBV-prevention programming, train community focal points, document violations, and provide gender-transformative education on equity and rights. Expand advocacy to challenge discriminatory laws and policies, push for stronger protection frameworks, hold duty-bearers accountable, and coordinate campaigns and coalitions that advance women’s rights and structural change.

PILLAR 4 - REINFORCE WOMEN'S ACCESS TO BASIC RIGHTS AND ESSENTIAL SERVICES

Women face restricted access to health (including SRH and MHM), livelihoods, education, food, WASH, and shelter due to occupation and displacement.

- **Donors:** Fund mobility-sensitive service delivery, neighbourhood hubs, mobile teams, and digital infrastructure for remote access.
- **Humanitarian & Development Actors:** Deliver integrated SRH, MHPSS, legal aid, education, and WASH services; establish safe distribution points and community-based hubs.
- **Local Governance Institutions:** Strengthen neighbourhood-based health and social services, improve WASH and shelter infrastructure, and ensure safe access to public facilities.
- **WLOs/WROs:** Maintain safe spaces, provide SRH, MHPSS, and education services, and tailor programming for girls, women with disabilities, and groups at risk of marginalisation.

PILLAR 5 - RESOURCE AND CENTRE PALESTINIAN WLOs/WROs

WLOs/WROs are critical for trust, local access, and women rights and gender justice programming but remain severely underfunded.

- **Donors:** Provide multi-year, flexible core funding; reduce reporting burdens; protect WLOs/WROs' operational space through diplomatic channels.
- **Humanitarian & Development Actors:** Include WLOs/WROs in cluster coordination, planning, and decision-making; provide capacity-building and operational support.
- **Local Governance Institutions:** Cooperate with WLOs/WROs, grant access to facilities, and avoid restrictive approvals.
- **WLOs/WROs:** Strengthen operational resilience and emergency preparedness; diversify funding and partnerships; document violations; sustain advocacy and leadership in local and international forums.

CROSS-CUTTING PRINCIPLES

- **Mental Health as Lifesaving:** Embed low-threshold, confidential psychosocial support across all sectors.
- **Meaningful Participation:** Co-design interventions with women and girls, especially adolescents and women with disabilities.
- **Evidence & Accountability:** Track outcomes that matter to women (decision-making, time saved, mobility, safety, dignity, etc.), not only service delivery metrics.

! WPS and HDP Nexus Considerations

Efforts to support Palestinian women and WLOs/WROs should acknowledge the limits of predictability in a highly fluid context. While the principles of the Women, Peace, and Security (WPS) agenda—participation, protection, and access to resources—offer a useful lens, they should be applied cautiously, recognising local constraints and risks. Similarly, connecting humanitarian, development, and recovery programming through an HDP nexus approach can strengthen long-term resilience, but requires flexibility, adaptation, and continuous engagement with women and communities on the ground. In this context, placing women and WLOs/WROs at the centre of decision-making, resourcing, and programme design remains a practical and evidence-informed pathway for interventions to be safe, accessible, and relevant. By doing so, stakeholders can support immediate needs while laying the foundation for sustainable agency, resilience, and structural change, even amid uncertainty.

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Afterword

As we bring this edition of *Her Future at Risk* to a close, it is worth recalling that the series was conceived not simply to document crises, but to encourage more careful listening, more responsible interventions, and greater accountability. Each volume has highlighted the gendered consequences of humanitarian emergencies, yet this one confronts a particularly complex reality. In this context, crisis does not arrive as a sudden rupture but unfolds within decades of structural violence, occupation, and entrenched gender inequality, creating what many interviewees described as a form of “double oppression” in which patriarchal norms intersect with military and political constraints to shape everyday life.

Within this reality, Palestinian women are not silent; rather, they are actively reclaiming their narratives with clarity and determination. Their testimonies combine accounts of hardship with expressions of identity, agency, solidarity, and resistance, and they reject being reduced to simplistic roles by insisting on being recognised as political actors, caregivers, workers, thinkers, organisers, and storytellers. In doing so, they highlight the need for humanitarian action that treats women not as passive recipients of aid but as leaders and knowledge-holders who continue to shape their communities even in highly constrained circumstances.

These voices also draw attention to the women who both endure and respond to crisis at the same time. Many simultaneously act as mothers, neighbours, teachers, volunteers, humanitarian workers, and community anchors, coordinating assistance, supporting education in temporary spaces, and helping to rebuild social life while their own homes, health, and safety remain under threat. Their contribution reflects a form of

humanitarianism grounded in necessity and commitment, and it remains indispensable, yet too often overlooked.

This work would not have been possible without the Palestinian Research Committee, whose members guided the development and validation of this report from beginning to end, ensuring that the study remained rooted in lived experience and upheld ethical standards in extremely challenging conditions. Their leadership was complemented by the dedication of the entire WeWorld team in Palestine and all colleagues and partners who actively contributed to the research process, whose professionalism and perseverance made this work possible.

The report itself was produced amid ongoing hostilities, displacement, infrastructural collapse, and restrictions on movement, circumstances that continued to fragment daily life throughout its preparation. Despite these constraints, frontline staff and enumerators collected testimonies and conducted interviews with remarkable care and commitment. Above all, we remain grateful to the women who shared their experiences, often from tents, shelters, or damaged homes, and who spoke not only of hardship but also of aspirations for dignity, stability, education, and health. Their testimonies represent both contributions to knowledge and reminders of the human realities at the centre of every crisis.

Their experiences also underline the essential role of Women-Led Organisations and Women's Rights Organisations across Gaza and the West Bank, whose work remains central to community resilience. Despite chronic underfunding, political pressure, and operational risk, these organisations continue to operate before, during, and after crises, making

sustained support for their work fundamental to any credible humanitarian response.

In this context, WeWorld's commitment to gender-transformative action serves as a guiding framework for practice. This approach requires not only responding to immediate needs but also addressing the structural inequalities and power imbalances that intensify the impact of crises. It involves investing in women's leadership, redistributing care responsibilities, engaging men and boys, and supporting women's rights organisations whose work is often overlooked, while recognising that lasting change depends on women's meaningful participation in decision-making at all levels.

For this reason, the report should be understood as an invitation to listen more carefully and act more responsibly, ensuring that humanitarian responses address the structural conditions that undermine women's security and wellbeing.

To the women of Palestine, thank you for the trust you placed in this process and for the generosity with which you shared your experiences. Your perspectives reinforce the importance of humanitarian responses that are locally led, contextually informed, and grounded in long-term partnership with the communities they aim to support, and we remain committed to ensuring that this work continues to be shaped by your knowledge, priorities, and leadership.

Dina Taddia
CEO & General
Director, WeWorld





weWorld

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WeWorld is an independent Italian organisation engaged in development cooperation and humanitarian aid projects over the last 50 years, operating today in more than 20 countries.

Over the last year, WeWorld has carried out over **160 projects**, reaching over **5.6 million people**, in **Afghanistan, Benin, Bolivia, Brazil, Burkina Faso, Burundi, Cambodia, Jordan, Italy, Kenya, Lebanon, Libya, Mali, Moldova, Mozambique, Nicaragua, Niger, Palestine, Peru, the Democratic Republic of Congo, Syria, Thailand, Tanzania, Tunisia, and Ukraine.**

Children, women, and young people, agents of change in every community, are at the centre of WeWorld's projects and campaigns in the following areas of intervention: access to water hygiene, and sanitation; education; food security, livelihoods and local development; gender and protection; environment and climate.

Mission

We work alongside individuals on the geographic, economic or social margins to overcome inequalities together and build a fairer future which respects the dignity and diversity of people and the environment. We support people and communities with humanitarian assistance in crisis contexts and support pathways to self-determination and development, to contribute to structural change and generate opportunities for all people.

Vision

We strive for a better world in which everyone, especially children and women, have equal opportunities and rights, access to resources, to health, to education and to decent work.

A world in which the environment is a common good to be respected and preserved; in which war, violence and exploitation are banned. A world where no one is left behind.

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