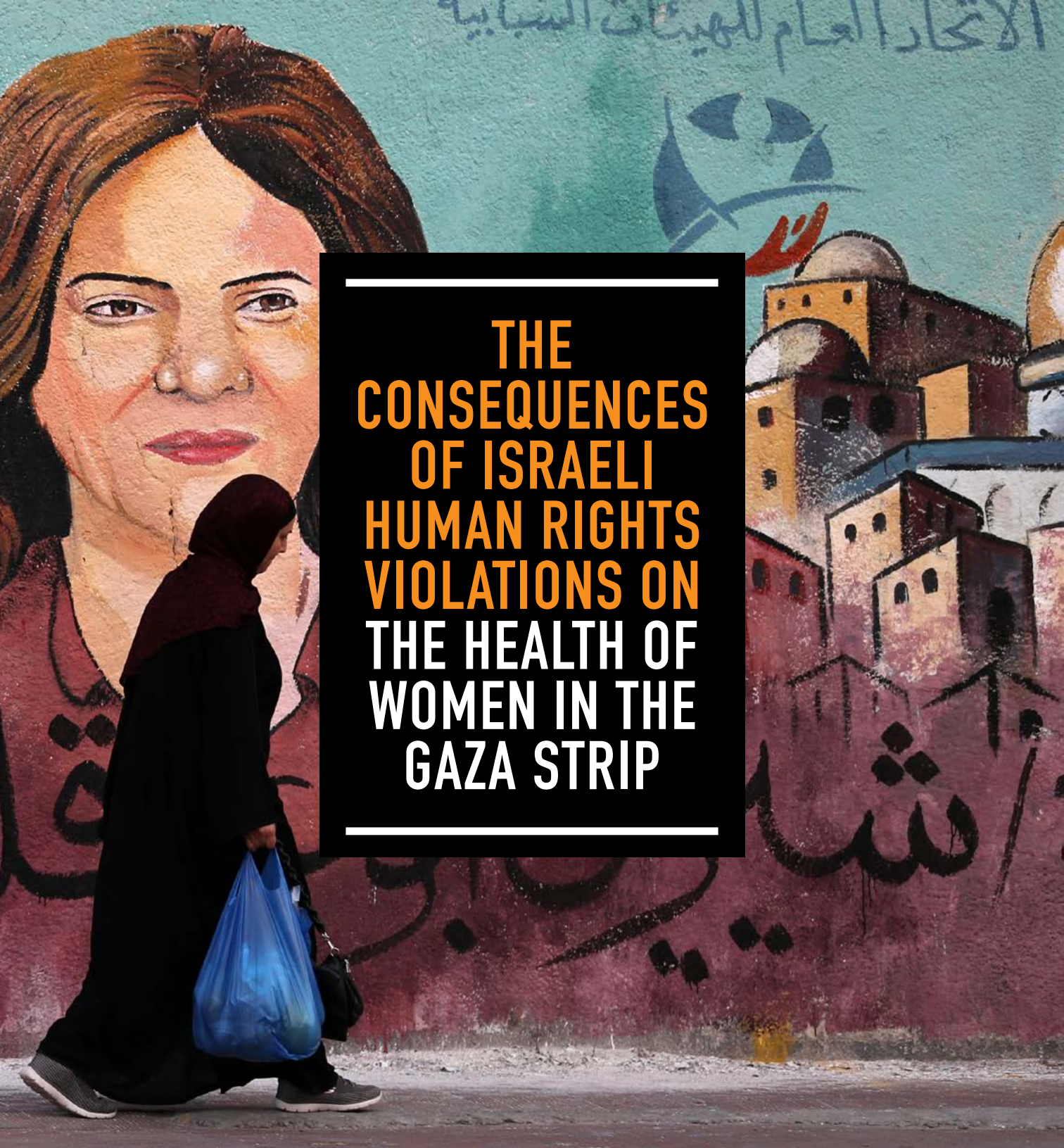


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THE CONSEQUENCES OF ISRAELI HUMAN RIGHTS VIOLATIONS ON THE HEALTH OF WOMEN IN THE GAZA STRIP



HUMAN RIGHTS
إسراء إسحاق

PHYSICIANS FOR
أطباء
لحقوق الإنسان



برنامج غزة للصحة النفسية
Gaza Community Mental Health Programme

Courage, also known as fortitude, is the ability to confront fear, pain, danger, uncertainty or intimidation. It can be divided into : a) Physical courage, in the face of physical pain, hardship and pain of death; b) Moral courage in the face of shame, scandal and discouragement.

V.S.Baga in: Professional Ethics & Human Values

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الاتحاد الأوروبي



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1. Introduction

Palestinian women in the Gaza Strip have experienced multiple and recurrent human rights violations due to Israel's military occupation, blockade, and ongoing military aggression. As a result, women experience persistent, inter-generational, and long-term mental and physical outcomes that manifest throughout their lives. They have felt threatened, were injured by the Israeli military, lost family members, and faced varied restrictions due to Israel's blockade. The following study brings the health of Palestinian women in the Gaza Strip into conversation with Israel's siege and military aggression. It looks into the consequences of Israeli human rights violations on the health of more than 400 women who participated in the study.

Mental health and human rights are intimately linked. Human rights violations have a measurable impact on individual mental health and overall well-being, especially for populations living under ongoing occupation and military violence.¹ Human rights abuse results in severe and possibly life-long mental suffering for individuals, families, entire communities, and future generations.² As a result, a person's mental well-being depends on their ability to exercise the fundamental right to health.

The importance of this study lies in its being the first to comprehensively address the link between Israeli human rights violations and the mental health of Palestinians. These violations include the ongoing Israeli occupation and 17-year blockade of the Gaza Strip, violence against protestors at the 2018-2019 Great March of Return (GMR),³ and the frequent Israeli military attacks between 2009 and 2022 and their impact on the mental and physical health of women living in Gaza.

By identifying Israeli military aggression as a primary detriment of health, our report contributes to the development of an appropriate analysis of Palestinians' right to health. In so doing, this report allows for a nuanced approach that illustrates not only the severity of Israeli human rights violations and their effects

¹ Giacaman R, Rabaia Y, Nguyen-Gillham V, et al. (2011), "Mental Health, Social Distress, and Political Oppression: The Case of the Occupied Palestinian Territory." *Global Public Health*, 6(5): 547-559.

² Gostin LO (2001), "Beyond Moral Claims: A Human Rights Approach in Mental Health." *Cambridge Quarterly of Healthcare Ethics* 10(3).

³ United Nations (April 2020), "Two Years On: People Injured and Traumatized during the 'Great March of Return' Are Still Struggling." <https://www.un.org/unispa/document/two-years-on-people-injured-and-traumatized-during-the-great-march-of-return-are-still-struggling/>

on Palestinian women's health but also advocates for a shift from understanding mental health as an apolitical individual issue toward acknowledging the political context of trauma and collective suffering.⁴ Furthermore, it shows how a human rights approach to the health of Palestinians in Gaza demands accountability and responsibility from the Israeli occupying military power.

The research inquired into the extent to which adult women are exposed to Israeli human rights violations in the Gaza Strip, the severity and frequency of these violations, and how they impact the quality of life of the women living there. Moreover, it investigated the effects of Israeli human rights violations on women's mental and physical health in the Gaza Strip.

The study, the result of a two-year joint project between PHRI and GCMHP focusing on Palestinian women in Gaza, shows a clear link between exposure to human rights violations and psychological distress.

The findings are based on a mixed methods research of the impact of human rights violations on women in Gaza, including a survey developed by mental health professionals of 424 adult women who attended health services in GCMHP community centers and PHRI's mobile clinic. The survey was then followed up by 19 in-depth interviews with women who had scored highly for depression and anxiety. Most participants were aged between 24 and 45 years, more than half lived in refugee camps, and over 90% were unemployed and below the poverty line.

⁴ Helbich M and Jabr S (2022), "Mental Health Under Occupation: an Analysis of the De-politicization of the Mental Health Discourse in Palestine and a Call for a Human Rights Approach." *International Journal of Human Rights in Healthcare* 15(1): 4-16.

2. Human Rights Violations Framework

Health issues of marginalized and racialized populations often lack contextualization of how historical and political factors shape these populations' access to medical and social services and other human rights. For instance, the fact that recurring Israeli bombardments of the Gaza Strip or military violence against Palestinians protesting as part of the GMR resulted in high morbidity and mortality rates is often presented as an inevitable consequence of war and ongoing conflict.⁵ Scholarship on public health in the Palestinian territories and across Israel and Palestine fails to address how settler colonialism and Palestinians' health are interconnected.⁶ In particular, the mental health effects of Israeli military aggression and invasions in Gaza remain markedly understudied.

The preamble for the 1946 Constitution of the World Health Organization (WHO) declares that health "is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition." Similarly, in a shared document by the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the WHO, the right to health is defined as "a fundamental part of our human rights and of our understanding of a life in dignity" (Factsheet 2008, p. 1.) The human right to health includes access to all medical and social services needed to attain the highest standard of physical and mental health and is linked to other human rights that create the conditions for well-being, such as equal access to accurate information, adequate housing, privacy, clean water, and a healthy environment.⁷

The right to health is recognized and protected not only by international human rights organizations and legal frameworks but also by the domestic laws of many nation-states. While the latter may vary in terms of scope and severity, the concept of the right to health is generally acknowledged as a fundamental human right,⁸ and most nation-states have ratified at least one of the various international human rights instruments recognizing it, thereby obligating them to take concrete steps toward its realization.

⁵ Asi Y, Hammoudeh W, Mills D, et al. (2022) "Reassembling the Pieces: Settler Colonialism and the Reconception of Palestinian Health." *Health and Human Rights* 24(2): 229–235.

⁶ Qato DM (2020), "Introduction: Public Health and the Promise of Palestine." *Journal of Palestine Studies* 49(4): 8–26.

⁷ Office of the United Nations High Commissioner for Human Rights, & World Health Organization (2008), "The right to health: Fact Sheet no. 31."

⁸ Hunt P (2016), "Interpreting the International Right to Health in a Human Rights-Based Approach to Health." *Health and Human Rights* 18(2): 109–130.

The right to health also includes a gendered dimension. The 1994 International Conference on Population and Development in Cairo and the 1995 Fourth World Conference on Women in Beijing both affirm that women's rights to reproductive and sexual health are fundamental human rights.⁹ Health challenges for women and children concern issues across the entire life course, and health interventions during childhood or the reproductive years can have latent health effects and inter-generational outcomes. Women's health does not only concern sexual and reproductive issues but is also impacted by chronic disease and mental health issues in particularly gendered ways.¹⁰

A human rights approach thus considers health not just as the absence of disease but as shaped by patients' socio-political contexts. Accordingly, this report uses a human rights violations framework to analyze how the Israeli blockade and recurring attacks on the Gaza Strip severely limit Palestinian women's right to health. The research team examined the extent of exposure to human rights violations by using the frequency of lifetime experiences of Israeli human rights violations among all participants. A 38-item tool was developed to assess the extent of women's exposure to Israeli human rights violations by combining three dimensions (Blockade, GMR demonstrations, and frequent Israeli military attacks.) Responses could be selected from five Likert-style options (Never, 1-3 times, 4-6 times, 7-10 times, and more than ten times.)

⁹ Petchesky RP (2000), "Human Rights, Reproductive Health and Economic Justice: Why They Are Indivisible." *Reproductive Health Matters* 8(15): 12-17.

¹⁰ Bustreo F and Hunt P (2013), "Women's and Children's Health: Evidence of Human Rights Impact." World Health Organization.



3. Findings

This chapter summarizes the study's results, which show that most Israeli military human rights violations in the Gaza Strip have a statistically significant relationship with the quality of life of the women interviewed. This suggests that when Israeli military infringements of human rights occur against Gazan women, their overall quality of life tends to decrease.

3.1 Frequency of Experiences of Israeli Military Violence, Human Rights Violations, and Restrictions to Freedom of Movement

The events most frequently cited by the Palestinian women who participated in the study as having experienced at least once in their lifetime include severely loud buzzing noises of Israeli drones over Gaza's skies (98.8%), residential areas being bombarded by the Israeli forces (91.2%), and Israeli imposed movement restrictions between the Gaza strip and the West Bank and East Jerusalem (83.3%).

82.7% of the women surveyed have faced difficulties meeting basic needs for themselves and their families. Over one-third of the women surveyed (35.6%) experienced the loss of a family member due to an Israeli attack on Gaza, and 31.7% were injured during an attack. A total of 70.2% were unable to access vital medical care due to restrictions on their freedom of movement, and 35.7% lost a family member after they could not obtain an Israeli permit in time to leave for medical treatment unavailable inside the Gaza Strip.

About one-third of the surveyed women (35.4%, n=150) participated in the Great March of Return (GMR) in 2018 and 2019. 81.2% of those who participated in the marches faced the threat of being shot by Israeli snipers, and 67.3% were injured while peacefully protesting near the fence marking the artificial border between the Gaza Strip and Israel. Around 45.3% of the study participants (n=192) have a family member who participated in the GMR demonstrations, of which 66.9% have a family member who had been injured in the events by Israeli snipers. 64.4% of the surveyed women who participated in the GMR lost a family member in the demonstrations.

Around 120 of the women surveyed in the study (28.3%) have a family member imprisoned in Israeli prisons. Of these women, 86.5% have been prevented from meeting or visiting a family member in Israeli prisons, and 85% faced difficulties contacting a family member arrested by Israeli forces.

3.2 Mental and Physical Health Problems Among Participants

The study results indicate that the prevalence of psychological distress (anxiety and depression) was 64.89%, while no psychological distress was only 6.6%. Furthermore, we found that 19.1% of participants face mild psychological distress, 26.7% face moderate distress, and about half (47.6%) suffer severe distress. Around 31% of the participants described their physical health conditions as “very bad,” and most reported at least one physical problem. About 38% of the participants have back pain, 31.4% reported glaucoma and other eye problems, and 30.2% have arthritis. Another 22.4% of the study participants reported body aches and pains, 18.9% reported high blood pressure, 18.4% reported skin conditions, and about 17.7% suffer from digestive issues. 44.1% of the participants indicated that they had undergone surgeries or sustained severe injuries. Despite the prevalence of depression and anxiety symptoms among the participants, only 11.8% sought help from mental health services.

Table (1): Psychological distress (anxiety and depression) among participants

Psychological Distress	%
None	6.6%
Mild	19.1%
Moderate	26.7%
Severe	47.6%

*Scoring: Total score ranges from 0 to 12, with categories of psychological distress as follows: none (0-2), mild (3-5), moderate (6-8), and severe (9-12)

Table (2): Previous illnesses or conditions of the participants

	Previous illnesses or conditions	Yes%
1	Arthritis	30.2%
2	Osteoporosis	18.2%
3	Back pain	38%
4	Asthma	4.7%
5	Diabetes (high blood sugar)	12.7%
6	Liver Disease	1.9%
7	Glaucoma/Eye Problems	31.4%
8	Hearing Problems	10.4%
9	Heart Attack/Disease	5.4%
10	High Blood Pressure	18.9%
11	History of Blood Clots	3.3%
12	Kidney Problems	6.4%
13	Respiratory diseases	14.2%
14	Anemia	11.1%
15	Mental Health Problems	16.3%
16	Skin Problems	18.4%
17	Digestive Problems	17.7%
18	Stroke	0.7%
19	Thyroid Disease	6.8%
20	Body aches and pains	22.4%

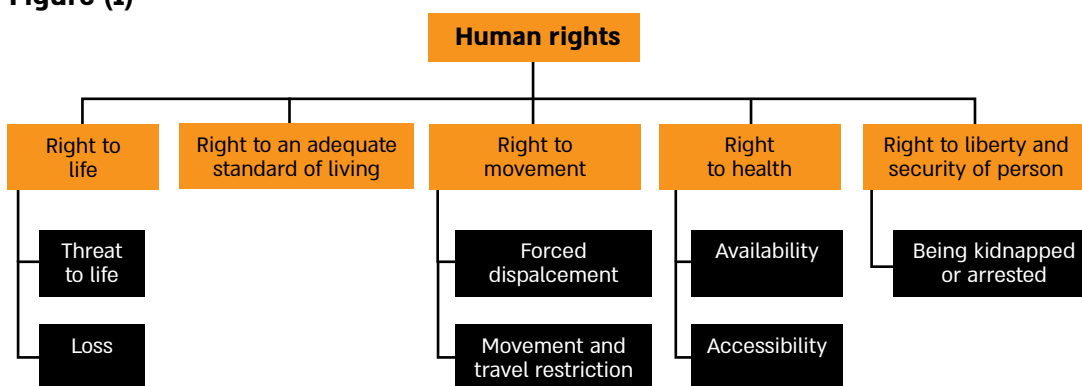
3.3 Exposure to Israeli Human Rights Violations in the Gaza Strip

The qualitative interviews conducted with 19 of the survey participants aimed to better understand their experiences of Israeli human rights violations and the health impact of exposure to attacks, bombardment, restriction of movement, and other military violence. The interviews further aimed to understand these women's coping strategies and support networks.

The women interviewed were asked about the Israeli human rights violations they experienced in their lifetime. The content analysis of the interviews led to a classification into five categories: (1) the right to life, (2) the right to an adequate standard of living, (3) the right to health, (4) the right to movement, and (5) the right to liberty and security of person (see fig. 1 below.)

All participants stated that they were exposed to more than one type of Israeli human rights violations during their lifetime. A clear overlap and correlation between different rights violations is apparent in the women's narratives, stemming from life under Israeli occupation and blockade.

Figure (1)



The Right to Life

The right most often violated was the right to life, which extends to reasonably foreseeable threats and life-threatening situations that can result in loss of life. Every participant experienced multiple Israeli military violations of their right to life. The participants' responses were classified into two sub-categories: (1) threat to life and (2) loss – the loss of a family member or physical integrity.

All participants emphasized that their right to life was violated due to the high risk of harm. Since almost all participants were raised in the Gaza Strip, they experienced more than six Israeli military attacks between 2008 and 2021, including the 2014 Gaza War (also known as "Operation Protective Edge") and the attack on the Great March of Return in 2018, both resulting in the death and injury of tens of thousands.

The participants recounted numerous events where they felt threatened due to Israeli airstrikes and ground invasions. During recurring airstrikes, women were retraumatized and re-experienced fears from previous incursions. In addition to the constant sounds of bombs and missiles, some witnessed the devastating outcomes of the bombardments, while others were the direct victims of attacks on their homes or neighbors' homes.

M., a 40-year-old from Beit Lahia, shared her experience during the 2021 attack on the Gaza Strip: ***“Due to the bombardment that continued all night long, I was scared and crying in the corner of my room. I felt like we would be bombed next. They (the Israeli military) bomb randomly and everywhere.”*** K., a 39-year-old from Khan-Younis, similarly described the danger she and her family experienced during the 2014 aggression: *“We were on the verge of death.”* W., a 48-year-old from northern Gaza, alluded that her family cannot escape the Israeli attacks: *“There is no safe place in our country (Gaza strip). [The Israeli Military] can bomb at any time.”*

Another major threat comes in the form of ground incursions. Some study participants mentioned experiencing or witnessing incidents of Israeli forces shooting, intimidating, and beating other Palestinians as part of a military invasion. The effects of such attacks are particularly worrying for women, as made apparent from the testimonies of the participants, and can negatively impact their reproductive, maternal, newborn, and child health (RMNCH). H., a 49-year-old resident of Jabalia, described an incident in which she and her fetus were under threat when Israeli forces stormed her home. She explained: ***“I was nine-month pregnant when the Israeli soldier beat me up. Afterward, I started bleeding, which led to delivering my baby.”***

The participants explained that their right to life was not only violated through perceived danger and threat, many also experienced trauma due to the loss or injury of family members during the bombardment of civilian homes and infrastructure. K., for example, described her daughter's injury: *“My daughter's leg was hit by shrapnel. At that time, she received proper medical care for the injury. However, two years later, she complained of swelling and pain in the same leg, after which doctors found additional shrapnel remnants.”* B., a 62-year-old, described an experience from 2014: *“My nephew was injured, so we hurried to the hospital. When I saw him, his face was partially disfigured [from the bombing]. He lost an eye. His leg was on the verge of being amputated.”* As these testimonies indicate, Israeli aggressions can have a long-term negative impact on Palestinians.

The Right to Adequate Standard of Living

The Israeli blockade and recurrent attacks have tremendously impacted the economic conditions in the Gaza Strip. According to Euro-Mid Monitor, “the Israeli blockade has impoverished more than 61% of Gaza's total population of about 2.38 million. Moreover, it has disrupted the work of approximately 47% of workers and left nearly 53% of the population facing food insecurity” and without access to water and sanitation services.¹¹ These circumstances make it difficult for the

¹¹ “Occupied Palestinian territory(oPt): Gaza WASH sector damage assessment,” ReliefWeb, 29 Jun 2021.

population in Gaza to achieve an adequate standard of living. Many of the women interviewed reported suffering from electricity shortages, lack of access to clean water, unfair housing, and wholesome food.

I., a 39-year-old woman from the Al Bureij Refugee Camp, described living in inadequate housing, lacking essential services and security of tenure. She shared that it is her dream to own her own home and that she has lived with her six children in a single room at her in-laws' house for over 20 years. She added: *"The room has a refrigerator, a washing machine, and an oven. In addition, the home has a tin roof and water leaks on us when it rains."*

Repeated military aggressions on the Gaza Strip have caused extensive damage to homes and infrastructure, exacerbating the difficult living conditions and limiting access to food, water, electricity, and gas. S. noted that her housing conditions were inadequate due to the partial destruction of the Israeli military bombing in 2014 aggression. She said, *"In the winter, the frost air enters through the broken windows."* G., a 43-year-old from Al-Nasr in Gaza City, also described the harsh conditions during the 2014 events: *"We were trapped. There was no work, electricity, gas, or water. The neighbors made clay ovens at the front of the houses for baking, and I used to get water from the mosque."*

The homes of the study participants lacked not only habitability and security of tenure but were also culturally inadequate. As one participant shared: *"The living room in my house has no roof, making it an exposed area for neighbors to see. I had to cover it with curtains to move freely in my home"* (W., 50, northern Gaza.)

The Right to Health

While Israel's control and responsibility over most health determinants vis-à-vis Palestinians require it to ensure their protection and implement their right to health, Israel ignores its legal obligations as stipulated in international human rights law and its duties under international humanitarian law as an occupying power. Israel denies Palestinians healthcare resources, blocks their access to medical care, and attacks health care infrastructure and facilities. Israel argues categorically that it bears no responsibility for the health of Palestinian residents in the OPT, contrary to several human rights conventions, including the Geneva Convention. Israel's policy in the Gaza Strip has resulted in a flagrant violation of Palestinian women's right to health, with limited availability and accessibility of treatments, leaving them vulnerable to various health issues and challenges.¹²

¹² United Nations (March 19, 2020), "COVID-19: Israel Has 'Legal Duty' to Ensure That Palestinians in OPT Receive Essential Health Services – UN Expert," <https://www.ohchr.org/en/press-releases/2020/03/covid-19-israel-has-legal-duty-ensure-palestinians-opt-receive-essential>; M. Alkhalidi, R. Coghlan, S. Miller, et al. (2022), "State Accountability for the Good Health of Palestinians Has Failed: What Can the Global Health Community Do Next?" *Health and Human Rights Journal* 24:1.

Healthcare Availability The unavailability of health services in the Gaza Strip includes a lack of available and trained staff – particularly for specific specialties and sub-specialties – and shortages in essential medicines, supplies, and medical equipment. As noted by the WHO: “Of 1493 permit applications via the Palestinian General Authority of Civil Affairs for health and non-health staff to exit the Gaza Strip for conferences from 2019 to 2021, just 10% were approved, with 51% denied and 39% remaining pending.” Moreover, Israel’s dual-use list applies to the entry of medical supplies, with restrictions affecting communications equipment, spare parts, nuclear medicine technology, and materials used in limb prostheses.¹³

The testimonies of the study participants echo this severe deficiency in adequate resources and medical expertise. 45-year-old M. from northern Gaza, for example, recalled an incident in which her paralyzed husband suffered from severe abdominal bleeding and required urgent medical intervention: *“My husband started vomiting blood, so we took him to the hospital. However, doctors could not deal with his condition, and he was referred to an external hospital.”*

One participant, a cancer patient, shared her experience amid a lack of medications and diagnostic radiology devices: *“I have been treated for cancer for six years. During this period, I should have undergone a PET scan twice. Unfortunately, [due to the unavailability of PET scan devices in Gaza] I could not do this.”* According to the WHO, 26% of referrals for treatments outside of Gaza between 2019 and 2021 were for cancer patients, and 46% were for female patients.

Healthcare Accessibility Since Israel controls all exits and entries in the OPT through its permit regime, it is able to control the flow of people, including patients, medical equipment, and pharmaceuticals, between East Jerusalem, Gaza, and the West Bank. Thus, the Palestinian system depends on Israeli permits for the referral of every patient.¹⁴

According to the WHO, Israel continues to require the submission of non-urgent patient permit applications 23 working days in advance of any hospital appointment, increased from 10 working days in 2017. Yet applying ahead of time does not necessarily guarantee that patients will obtain the permit, as applications are often delayed or denied. Moreover, “from 2019 to 2021, only 65% of patient permits were approved in time to reach hospital appointments. Over the past 15 years, there has been considerable variation in rates of approval (ranging from a high of 94% in 2012 to a low of 54% in 2017).”¹⁵

¹³ Ibid.

¹⁴ G. Majadle and Y. Rosner (2021), “Responsibility Shirked: Israel and the Right to Health in the Occupied West Bank during COVID-19.” Jaffa-Tel Aviv: Physicians for Human Rights Israel.

¹⁵ World Health Organization (2023), “Right to health: barriers to health and attacks on health care in the occupied Palestinian territory, 2019 to 2021.”

The challenging and time-consuming process of applying for a medical exit permit is recounted in many participants' testimonies. B., a 62-year-old from northern Gaza, described her experience applying due to requiring knee joint replacement surgery: *"It took me three years to get my permit approval."*

The Committee on Economic, Social and Cultural Rights (CESCR) has repeatedly called for immediate steps to facilitate the free movement of Palestinians within the OPT, including East Jerusalem and the Gaza Strip, and ensure that any measures restricting the free movement of civilians and goods from, into and within the Gaza Strip are in line with the CESCR Covenant. Moreover, the denial of medical exit permits has been described as a form of torture by the Special Rapporteur on Extrajudicial, Summary, or Arbitrary Executions; the Special Rapporteur on the Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health; and the Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment.¹⁶

The Right to Liberty and Security

The violation of the participants' right to liberty and security was linked to their fears of their own or loved ones' arrest, particularly while Israeli forces roamed freely in the Gaza Strip before 2005. The participants recounted that during numerous assaults on the Gaza Strip, the Israeli military would raid their homes and forcibly handcuff and extract young men, forcing them to remove their clothes in the process. Participants also reported that some of their relatives were placed in administrative custody, a procedure that enables the Israeli army to hold detainees without charge or trial for an indeterminate period for security reasons. The participant H. shared: *"In 2005, the Israeli army detained my husband in administrative detention for six months; he was detained again shortly after release for another six months."*

Women living in the Access Restricted Areas (ARA), previously the most vulnerable to Israeli invasions, testified that when they sensed an incoming Israeli attack, they would escape with their family members to other areas in the city believed to be safer, for fear of being arrested or abused.

The blockade has turned the Gaza Strip into an open-air prison, severely restricting the movement of people and goods, constituting a gross violation of the right to liberty. The normalization of such circumstances underscores the systemic abuses of human rights that the people of the Gaza Strip face daily.

¹⁶ <https://docstore.ohchr.org/SelfServices/FilesHandler.ashx?enc=4slQ6QSmIBEDzFEovLCuWofekJcyLV E4h%2FkYmh4jSatSY66nsJOxboaAu4bfCDK5HY6MTTcGy79Oycfl9hr1wv3zD%2FCRdXz86uGTURl%2BJvrNJQLfgjL9wSE7OE5dJet; https://spcommreports.ohchr.org/TMResultsBase/DownloadPublicCommunicationFile?gld=24047>



The Right to Movement

The women interviewed have been subjected to widespread violation of their right to freedom of movement. Nineteen participants described their struggles while moving inside or outside the Gaza Strip via Erez Crossing. These testimonies have been classified into two sub-categories: (1) forced displacement and (2) movement restriction.

Forced Displacement

Many women described being forced to leave their homes in search of safer places due to heavy bombardments and the depletion of essential resources such as food, water, medicine, and electricity. In these situations, women often find themselves displaced multiple times, moving from one house to another as the bombings continue. One participant in the study described the extreme conditions Gazan women face during Israeli assaults, including the limited time to prepare their families for escape. Often, there is no time to pack their belongings or to dress according to Islamic social expectations. Forced to flee amid panic and chaos, safety and survival become the only concern. As R., a 39-year-old mother of 5 from Beit-Lahia, described: *"My children, my husband, and I went out, barefoot and without a Hejab."*

K. described her struggle during the 2014 aggression, forced to leave her home for a long time and find shelter in a UNRWA school with her family: *"We left our homes for fifty days and sheltered in schools. Oh God, we have been displaced... We were running into the streets at night."* H., another participant, described the chaotic scenes of internal displacement during an Israeli attack: *"All people are straying, carrying their elders and their bags; my sister's husband was carrying the children and waking them from sleep."*

Movement Restrictions and Obstacles

The participants recounted how Israeli military assaults restrict their right to freedom of movement and limit their capacity to leave their shelters to obtain necessities such as food and medication. The women also spoke about the difficulties they faced when moving to areas they believed safer during the attacks. N., a 36-year-old from Sheikh Redwan, described her experiences during the 2014 assault: *"I was traveling by car to my parent's house with my daughters. On the way, a car was bombed in front of me. All cars had parked on the side, and I was terrified for my daughters."* N., a 40-year-old from Beit Hanoun, added: *"We were afraid to go out. Once, my husband got sick and needed medicine. With great difficulty, I crept out until I reached a pharmacy."*

Additionally, participants recounted incidents where they could not obtain medical care due to ongoing Israeli bombings. N. described an attempt to bring one of her sons to a clinic due to sickness while her other son was hit by shrapnel on the way: *"We performed first aid on him and just barely succeeded in getting him out of there."* 40-year-old M. from Beit Lahia detailed her struggle to access medical treatment for an eye issue during the 2021 attack on Gaza: *"My eyes were shut; I asked my husband to take me to the hospital; he was afraid to get us out due to continuous bombardment."*

In terms of obstacles to free movement, some participants described the suffering they experienced while exiting the Gaza Strip via Erez Crossing, including the struggle to obtain an Israeli permit, the long lines at the army checkpoints in Gaza and the West Bank, and being forced to strip naked during military inspections. As 48-year-old W. describes:

"The most unpleasant thing in traveling is the checkpoints, especially the strip search. I feel like it violates our dignity. I had a mastectomy operation, so every time I cross, they make me go into the strip search room because something appears on their devices, which may be related to my stitches or a medical device."

3.4 Consequences of Israeli Human Rights Violations of Women in the Gaza Strip

The participants listed many consequences of Israeli human rights violations. These were divided into four main categories: (1) Mental health, (2) physical health, (3) social relationships, and (4) financial consequences.

3.4.1 Mental Health Consequences

The participants detailed their psychological and emotional condition in light of ongoing exposure to the different types of Israeli military violations of Palestinians' human rights. This theme consists of seven categories: (1) fear, (2) hopelessness, (3) emotional blunting, (4) state of anticipation, (5) sleep problems, (6) psychosomatic symptoms, and (7) nervousness.

Fear was the most prevalent psychological symptom identified. The participants reported that their fear took on many forms, such as the fear of death; fear of future bombings or attacks on Gaza; and fear of losing a family member or a home.

43-year-old G. shared her fear of losing loved ones during Israeli aggressions on the Gaza strip: ***"Fear is all I feel. I fear waking up to the news of the death of X or Y."*** R., a 39-year-old mother of five from Beit-Lahia suffering from breast cancer, described her horrific experiences during the 2014 assault when Israeli jets struck her father's home. She expressed her fear of losing family members as she was uncertain who could survive the Israeli bombing of their homes. She further described:

"My parents live on Salah-Alddeen road, the bombing hit everywhere, so I got out of my house... I saw my parents' apartment was reduced to stones and smoke. I started shaking and screaming, "My family has died." The first thing that came to my mind was that none of my family is alive anymore."

F., 39, from northern Gaza, described her sense of fear amid an attack on a family member's neighborhood: *"On the eve of Eid, they announced that a house had been bombed in the northern Gaza area of Zayed, where my sister lives. I thought my sister was in danger and tried to call her, but no one answered the phone at her home, and I collapsed."*

Participants also described intense feelings of fear and panic due to the gruesome scenes they were exposed to. F., a 39-year-old mother of seven from northern Gaza, spoke about the trauma of witnessing the flesh of dead people during an Israeli assault: ***"The worst thing I saw in 2021 was the bombing of our neighbors' home. Their bodies were covered in rubble, and my daughter was screaming."***

A recurring concern among participants was their children's feelings of fear during the Israeli attacks, which in turn exasperated their own fears. However, maintaining the role as mothers and caregivers, they described a sense of responsibility to hide their fears in front of their children. As B., 62, from northern Gaza, noted: *"Whenever something terrifying happens, I have to hide my fear so my kids will not become afraid."*

That fear is the most commonly cited emotion among the participants comes as no surprise in light of the relentless bombings of residential areas, leaving no one feeling safe. The primary cause of concern is the possibility of losing loved ones. As mothers, however, they bear the added burden of being their children's primary source of emotional strength and support. Consequently, they are forced to conceal their emotions and silently endure their suffering, fearing they may negatively impact their children.

Hopelessness Due to the traumatic experiences and ongoing challenges participants have faced due to the Israeli blockade and aggression, some participants noted that they lost their optimism and expectation that things may

improve. Study participants expressed a loss of hope for a secure life, stability, or any improvement in the economic and political conditions in the Gaza Strip. As the participant F. shared: *"I am tired of living! We will only find peace with death."* Another participant echoed this sentiment by noting: *"We survived the previous aggressions. However, we will not survive the next one."*

The wide-reaching psychological impact of the Israeli Military aggression on Gazan women is evident, resulting in the long-term loss of hope in the possibility of living in security or improved conditions. Moreover, the women used plural speech to convey the collective nature of suffering rather than merely individual experiences. This reveals the profound impact of these traumas on the thoughts and emotions of Palestinians, leading many to adopt a pervasive sense of hopelessness toward life.

Emotional Blunting As a result of the severe and repeated exposure to various forms of human rights violations, some participants experienced a numbing of positive and negative emotions alike. I., a 39-year-old woman with breast cancer from Al Burij Refugee Camp, described her reaction to witnessing the destruction of her family's home during the 2014 Israeli military aggression: *"I no longer care about anything at all; my relatives describe me as blunted."* As I.'s testimony underscores, Palestinian women in Gaza have become desensitized to life's upheavals over time, to the extent that even traumatic events no longer elicit an emotional response.

State of Anticipation Amid the many challenging experiences they are forced to endure, women in the Gaza Strip often grow anxious about experiencing repetitions of their traumatic events. 29-year-old mother of three F. from Al Nuseirat described how the mere sound of fireworks frightens her and her family because of the resemblance to the loud noises of bombings:

"When you hear the sound of an explosion, for example, whether it is simple or not, even when caused by fireworks or firecrackers, it reminds us of the aggressions that we faced. Israeli military aggressions are still a nightmare; we still have not recovered. Whenever we hear about the possibility of an Israeli military assault, both we and our children are affected psychologically."

As made apparent by this testimony, even after everything returns to the usual state and the attacks on Gaza are over, women continue to experience the terror that eventually gives way to anticipation. Even the sound of fireworks causes people to believe another Israeli aggression has started, much like the sound of planes. Every event, sight, or sound may serve as a reminder of the struggles they endured.



Sleep Disturbance Several women reported experiencing sleep disturbances during and after Israeli military aggressions on the Gaza Strip. G., a 43-year-old from Nassar, described experiencing sleep disturbances during and after the May 2021 Israeli aggression, resulting in constant fatigue and limited capacity to function throughout the day. She stated: *“Even last night, I could not sleep past 3 am... I truly wish I could sleep.”* R., 39, from Beit Lahia, began experiencing sleep disturbances after seeing the flesh of a dead martyr in 2014. She recalled: *“The scene is vivid in my mind, and it continues to haunt me like a nightmare... My sleep is disturbed.”*

The Israeli military aggressions on the Gaza Strip result in traumatic experiences that have immediate and long-term effects on Gazan women's sleep patterns. The emotional impact of these experiences causes nightmares and flashbacks, further disrupting their sleep patterns. The long-term effects of these disturbances can negatively impact their physical and mental health.

Psychosomatic Symptoms While living under constant stress, anxiety, and trauma due to frequent military aggressions, some women in Gaza experience physical symptoms such as headaches, chest pains, and fatigue without any apparent medical cause.

N, 40, from Beit Hanoun, described her physical symptoms after experiencing repeated displacements and having her home partially destroyed by Israeli attacks: *“My whole body is aching. I have a headache from which my head is about to blow.”* I. described a medical issue from which she suffered for 17 years following traumatic experiences during the 2008 military aggression when she witnessed body parts buried under the rubble: *“I am unable to do anything, and I am always tired. Now and then, I feel my heart stop beating, and I feel stiff,”*

The testimonies of Gazan women highlight the negative mental health consequences of continuous exposure to Israeli human rights violations. Psychosomatic symptoms associated with exposure to traumatic events and ongoing difficult living circumstances have affected these women's motor function, making it challenging to carry out daily activities.

Nervousness Participants reported feeling constantly on edge, fearful, and anxious due to the unpredictable and volatile nature of their lives under occupation. Participant N. described her state when she heard about the possibility of another Israeli assault: *“I got nervous. I did not know what to do. I collected all the Kawasheen (birth certificates) and identity cards... I was scared.”* F., a 39-year-old from Al-Burij, added: *“Whenever I hear any sound, I get nervous and anxious.”*

Nervousness and other mental health consequences experienced by women in the Gaza Strip are not solely the result of Israeli military aggressions but also stem from the ongoing blockade and its impact on all aspects of life. The daily struggles of living under blockade, including limited access to resources, freedom of movement, and essential services, create a sense of uncertainty and burden that can take a toll on women's mental health and well-being in the Gaza Strip.

3.4.2 Physical health consequences

Physical health problems related to Israeli human rights violations were prevalent among many participants. S., for example, suffered from malnutrition due to the dire economic circumstances resulting from Israel's repeated aggressions and blockade. She stated: *"I have fractured my leg from a minor fall, and it took a very long time to recover. It turns out I have calcium deficiency and malnutrition."* Her experience highlights the severe health consequences of malnutrition, which can result in weakened bones and slower healing times.

W. recalled her experience hearing the sounds of Israeli bombing for the first time in 2000 while pregnant: *"My blood pressure was very high, and I was admitted to the hospital. They (the doctors) had to induce labor due to the high blood pressure."* M., a 40-year-old from northern Gaza who suffers from asthma, shared her experience of asthma exacerbations during Israeli aggressions on the Gaza Strip. She explained that she often experiences shortness of breath due to fear during attacks or from the dust coming from bombings. M. recounted her fear amid Israel's use of white phosphorus: *"When the Israeli military used white phosphorus, I was terrified. Whenever I smell it, I become short-breathed."*

Such experiences highlight the severe physical health consequences of the repeated Israeli aggressions on the people of Gaza, particularly for those with pre-existing medical conditions. Using weapons such as white phosphorus, which can cause severe respiratory distress, further exacerbates the situation for asthmatic patients like M. Thus, alongside deaths and injuries resulting from Israeli military assaults, it is vital to thoroughly investigate the long-term physical health impacts of living under occupation.

3.4.3 Social Consequences

The social consequences of Israeli human rights violations on Gazan women are numerous and profound. These violations directly impact the daily lives of Gazan women and their families. The Israeli military occupation has significantly

exacerbated existing problems, such as domestic violence and gender-based violence within Palestinian society. This is partly due to the economic and social stressors created by the occupation and the impact of ongoing conflict, leading to increased stress for families and individuals. Moreover, some participants cannot see their families due to movement restrictions imposed by Israel.

Several participants reported that they physically and verbally abused their children due to the stress they endured. Participant K. described how the repeated Israeli aggressions impact her relationship with her family and how she sometimes resorts to uncontrolled physical abuse of her children: *"I'm always nervous and stressed... Sometimes I hit my kids."*

Concurrently, these conditions can also lead to women being the victims of domestic abuse. W. recalled her first experience being violated by her husband: *"Israeli aggressions have affected the relationship between my husband and me. I was easily triggered and nervous. During an argument, he resorted to physical abuse. It was the first instance of such behavior in our marriage."*

Movement restrictions imposed by Israel significantly impact Palestinian women's ability to connect and communicate with their families. W. described the difficulty of being unable to visit her family in Jordan for over 17 years due to movement restrictions. After finally meeting her family recently, she said: *"This experience affected me a lot. When my nieces and nephews came to welcome me, I told them, please introduce yourself... Many times, I need my family around. I isolated myself socially, and I say, 'I only want my family.'"*

In addition to the direct harm caused by domestic violence and gender-based violence (GBV), family dynamics and relationships may be negatively disrupted. Moreover, the inability to visit family members due to movement restrictions can contribute to a sense of isolation and disconnection from community and family, significantly impacting Palestinian women's overall well-being and quality of life.

3.4.4 Economic Consequences

The Israeli blockade's economic impact on Gaza has devastated the lives of Gazan women and their families, as highlighted by most study participants. Many shared their hardships in providing for their families and their challenges in generating enough income to meet their basic needs.

H. shared that she started working as a housemaid to meet her family's needs after her husband lost his job as a result of the Israeli blockade. She noted: *"Our refrigerator contains only bread and water... Whenever my kids ask for food, I start crying."* W. described similar circumstances: *"We do not have money. We cannot*

afford basic needs. In terms of clothing, my sister gives me her old clothes, and I usually go to thrift shops to buy clothes for my kids." She added, *"If there were no blockade, people would have worked, and the financial situation would be better."*

As a result, some participants described the forced emigration of relatives hoping to escape the hardships and difficult living conditions under the occupation and blockade. As one participant stated: *"My brothers were forced to emigrate from Gaza because of the difficult situation in Gaza"* (R., Bait-Lahia, 39 Years.)

The blockade has led to a severe economic downturn, resulting in high poverty and unemployment rates. This has placed a significant burden on women, who are often responsible for caring for their families and ensuring their well-being. Economic hardship has also increased stress, anxiety, and mental health issues among women and their families, compounding daily challenges.

3.5. Coping Strategies and Social Support Systems

This study also addressed the strategies utilized by women in Gaza to cope with the violent reality, repeated Israeli aggressions, and resulting mental health impact. Additionally, the research examined social support systems and their role in mitigating the adverse effects of Israel's human rights violations.

Coping strategies cited by participants were divided into four main categories: (1) Productive coping; (2) non-productive coping; (3) problem-solving, and (4) other coping strategies.

Notably, most women used productive coping strategies to overcome and live with difficulties and hardships. This category consisted of five classes: "seek relaxing diversions," "focus on the positive," "ignore the problem," and "seek spiritual support and humor." Many engaged in activities with friends and family to help them relax and cope with anxiety and distress. One common productive coping strategy utilized during difficult situations, especially during military aggressions, was focusing on positive aspects like evading danger, staying alive, and being in good health with their children and family.

Despite the high prevalence of depression and anxiety symptoms among study participants, very few have sought professional support. The study's findings emphasize the need to encourage more women to seek professional help and for greater access to affordable mental health services in Palestine. Moreover, the resilience and resourcefulness of Palestinian women in coping with mental health challenges is evident from the interviews.

The content analysis of participants' responses regarding their social support systems can be divided into two main categories: (1) informal social support and (2) formal social support. Informal support includes help from relatives, friends, and neighbors, while formal support includes assistance from the government and non-governmental organizations in the Gaza Strip.

While acknowledging the value of formal social support, there was a clear consensus among participants regarding the greater importance of informal social support systems. All participants mentioned that informal social support played the most significant role in supporting them and helping them cope with the challenges of life under Israeli occupation and blockade. Social support may assume various forms, including emotional, practical, and financial.



4. Discussion and Conclusions

This project aimed to comprehensively address the link between Israeli human rights violations and Palestinian women's mental health in Gaza by understanding how Gazan women are exposed to these violations and how their quality of life is impacted. To that end, a team of researchers from PHRI and GCMHP conducted a mixed-methods study that included surveys and semi-structured interviews to determine participants' current mental and physical health status in light of their continued exposure to Israeli human rights violations.

The WHO defines mental health as a "state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community." Blockades, bombings, economic deterioration, and lack of choice and opportunities are some stressors women in Gaza face. Exposed to these stressors over time, women in Gaza have become unable to work, achieve economic stability, protect their families, and move freely amid a reality of uncertainty and lack of control.

The study clearly links exposure to human rights violations and psychological distress. Ongoing exposure to human rights violations, such as the right to life and health, including witnessing the death of relatives and neighbors and having limited access to health care services, persistently affects participants' mental health. This study has identified the following health impacts:

- Fear, manifesting in fear of death, repeated bombings, and the loss of a family member. For many, this presumably resulted from witnessing distressing events of Israeli bombing attacks, including the subsequent death of family members or neighbors.
- Hopelessness, as a negative expectation of the future. This is a consequence of long-term exposure to trauma and includes the loss of hope for a secure life, stability, and the future. Many of the women who had survived bombing raids expressed their hopelessness that they would survive future military assaults.

- Emotional blunting and feelings of numbness. This is a central feature of post-traumatic stress and an unconscious attempt by those who experienced trauma to distance themselves from the events and the feelings they bring up.
- Psychosomatic symptoms, with psychological stress manifesting as bodily problems and impaired motor function.
- Anxiety, including constant irritation, is a central feature of post-traumatic stress disorder. Many participants noted the impact of their constant nervousness on their social relationships, including with their children.

Localized and individual solutions and interventions, while important, cannot resolve the distress detailed in the findings of this study. The far-reaching repercussions of Israeli human rights violations — demonstrated by the psychological and physical harm caused to the women interviewed in the study — reveal the need for urgent international action to end Israeli human rights violations, to bring Israeli policies in line with UN Resolution 1325, and to protect the health and well-being of Palestinians, including Palestinian women. This call has been echoed by The Committee on the Elimination of Discrimination against Women (CEDAW).

Palestinian women in the Gaza Strip have experienced violations of their right to life due to the ongoing attacks and military occupation by Israel. As a result, they have felt threatened, experienced the loss of physical integrity, and lost family members. For Palestinians in Gaza, the violation of the right to life is constant and never-ending. The incident in which Israeli forces physically abused a pregnant woman is a clear example of the grave human rights breaches that Palestinian women face. Such abuse endangered her own life and put her fetus at risk of death. Crucially, the violations faced by Palestinian women are not isolated incidents but rather part of broader systemic patterns. As such, women living in the Gaza Strip experience persistent and long-term trauma that manifests throughout their lives. Though they utilize various coping mechanisms amid their violent reality, life under blockade and military assault remains a constant struggle with severe short and long-term physical and mental health impacts.