

**GENDER ALERT: NEEDS OF WOMEN,
GIRLS, BOYS AND MEN IN
HUMANITARIAN ACTION IN
PALESTINE**

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Introduction: Rationale and Background

In the oPt and around the world, there is an increasing recognition amongst humanitarian actors of the urgency to ensure that the different needs of women, girls, men and boys are taken into account and included in all humanitarian assistance (design, planning, implementation and monitoring). Failure to do so hampers an effective humanitarian response and may put beneficiaries' lives at risk¹. According to IASC Gender Handbook for Humanitarian Action², integrating gender equality also reinforces a human rights-based approach to humanitarian action which improves programming by respecting and protecting the universally recognized rights and dignities of every individual as a human being. Incorporating gender equality in humanitarian action therefore enhances the impact of humanitarian strategies and interventions.

In the oPt, this has additional dimensions. The fluid political situation, the shifting vulnerabilities, the protracted occupation with its limitations on development and humanitarian action, all create additional layers of potential discrimination at all levels, in addition to social, cultural and economic factors. The Gaza Strip remains in a protracted and deep humanitarian crisis inflicted by the Israeli blockade and successive rounds of destructive conflict. By 2020, the UN projects that Gaza will be "unlivable."³ Of a total population of 1.9 million people, 1.6 million or 64 per cent are estimated to be in need.⁴ The territory is facing a crisis of hyper-unemployment⁵, food insecurity, electricity blackouts, sanitation disasters, and a failing medical sector. Cuts to the budget of the United Nations Relief and Works Agency (UNRWA), which serves 1.36 million refugees in Gaza, by the American administration and the cuts in the salaries of civil servants by the Palestinian Authority (PA) have further deepened the vulnerability of households.⁶ A total of 39 per cent of Palestinians in Gaza are living below the poverty line, more than double those in the West Bank (18 per cent).⁷ Only 10 per cent of households have "direct access to safe drinking water" and in December 2017, received only an average of 4-5 hours of electricity per day.⁸ These stresses have been linked to increased incidence of gender-based violence (GBV), including early marriage, while shelters and other service providers struggle to meet the needs with increasingly limited resources.⁹

In the West Bank, 13.9 per cent of residents are living in poverty, including 5.8 per cent who are living in "deep poverty"¹⁰.¹¹ The burden of poverty falls hardest on several vulnerable groups, including: women-headed households, youth and children, people with disabilities, refugees, Bedouin, displaced persons, Area C, H2, East Jerusalem and the Seam Zone.¹² In East Jerusalem, 75.4 per cent of families live below the Israeli poverty line, while as many as 33 per cent of Palestinian schoolchildren "do not complete 12 years of education."¹³ In the West Bank, Palestinians are exposed to settler violence on a regular basis. Few areas, including classrooms, homes or hospitals are safe and Palestinians find themselves harassed, detained, and arrested by Israeli forces. In 2018, the Israeli military demolished 460 Palestinian structures, across the West Bank and East Jerusalem, and conducted an average of 172 search and arrest operations every two weeks.¹⁴ Israel controls all ground and surface water, allocating Palestinians a daily average 84.3 litres of water (in some cases, as low as 20), well below the 100 litre minimum recommended by the World Health Organization (WHO).¹⁵ In Area C, Palestinians are prohibited from building cisterns or other water retaining/collecting infrastructure without permits. Though the vast majority of the Palestinian population (95.0 per cent) is connected to an energy grid, Palestine is energy-insecure. The provision and control of Israel remains dependent on Israel, due to restrictions on building plants within the West Bank.¹⁶

Gender Analysis: Vulnerable Groups

The collective nature of the occupation and closure creates conditions that are conducive to protracted crisis facing all Palestinian women, men, girls and boys. After nearly 50 years of occupation every Palestinian living in the occupied Palestinian territory (oPt) is vulnerable to some degree¹⁷. The

impact, however, is varied as per a large number of socio-economic and political factors including region, type of residence, proximity to border and closed areas, exposure to occupation-related risk, family size, household composition, type of family -- nuclear, extended; single-member, large family; head of household, marital status, GBV, overall protection threats including violence against children and women, level and type of education, skills, gender, age, work and employment, connectivity to institutions and services, connectivity with expats, sources of assistance and social support networks, dependency rates, ownership of assets, housing and house conditions, access to water, electricity and other services, and discrimination based on partisan politics. Pervasive violence, which causes physical harm and limits daily options in the oPt, is a key driver of vulnerability. For 18 of the 20 disadvantaged groups analyzed, both political violence and social violence constrain possibilities and potential¹⁸.

In the following section we include an analysis of some of the most vulnerable groups that face gender-based vulnerabilities in the context of oPt protracted humanitarian crisis; including:

- Women and girls with disabilities
- Women cancer survivors
- Women in the Seam Zone and the ARA
- Households in Area C and H2
- Child Marriage
- Adolescent Boys and Girls
- Women and girls affected by the Great March of Return (GMR)
- Women heads of households and unemployed female graduates

Women and Girls with Disabilities

In 2017, the Palestinian Central Bureau of Statistics estimated that there were at least 92,710 Palestinians with at least one disability. Among female Palestinians, approximately 5.4 per cent were estimated to have at least one disability.¹⁹ In 2017, 24 per cent of females with disabilities between the ages of 6 and 17, as well as 30 per cent of males, were not enrolled in education and 33 per cent of those 10 years and older were illiterate, compared to only 11 per cent of males.²⁰ Reflecting entrenched social norms and absent resources on the household and state level, women and girls with disabilities “are denied the opportunity to make decisions, participate in society, find an employment or enjoy their right to inheritance.”²¹ In one instance, a pregnant woman with physical disabilities was denied assistance under the Ministry of Social Development’s Poverty Reduction Programme because her husband refused to divorce her. Women who are able to find work encounter exploitation, underpayment, and relegation to menial functions beneath their ability, while those who attempt to contest their discrimination under the law may find themselves denied because of antedated definitions of legal capacity. Schools and other buildings in society, and even homes, are often unequipped to accommodate persons with disabilities of any gender.²²

Among the most dangerous threats that women and girls with disabilities face is gender-based violence (GBV), crimes that these individuals are comparatively more vulnerable to than other groups in society. GBV includes “all practices involving any form of discrimination, exploitation, marginalization and deprivation of rights, in addition to denying access to information, services and public facilities, deprivation of resources and opportunities in any form and denial of the right to make decisions such as the right to self-determination, employment, marriage, pregnancy, childbearing and other reproductive rights.”²³ Facing stigma and a weak protection system, women and girls with disabilities have limited access to justice and, instead, may face confinement and suppression by families anxious to hide the act. Even among those who can seek services or justice, these options are insufficient. Among the four shelters that exist across the West Bank and Gaza none admit women and girls with disabilities, health facilities (limited largely to urban areas) do not have the specialized

equipment, and legal and counseling services are offered only by specialized NGOs, and even those have limited understanding of disability.²⁴

Women Cancer Survivors

From 2011 to 2016, a total of 8,515 cancer cases were registered in the Gaza Strip, 55 per cent (4,705) of which were observed in females. Among males and females breast cancer was the most common type, accounting for 32.2 per cent of cases in women. Among girls, brain cancer was the most common. These women and girls face serious threats to their health and lives as a result of the inadequacies of medical care in Gaza. Those who are able to pursue treatment in Gaza must contend with an insufficient number of medical facilities, including beds and wards within facilities, as well as absent psychosocial support. Particularly threatening are the shortages in essential medicines, with approximately 96 per cent of female adult cancer patients indicating they faced trouble in securing sufficient medication in a timely manner. However, many women and girls seeking treatment must travel outside Gaza, requiring a permit from the Israeli authorities. In 2017, 35 per cent of female applicants and 39 per cent of male applicants were denied permits, forcing them to stay in Gaza, where their health deteriorated, while others faced long delays in approval. Among girls with cancer, while Israel may approve their permits to travel, their immediate caregivers, often mothers, are denied, forcing children to travel with elderly relatives and others who may not be familiar with how to provide care. Women may also face GBV at the hands of family members, including abandonment by husbands. In addition to the political threats to these women and girls' welfare, the economic and social challenges created by the Occupation are also threatening. Families in poverty, a common occurrence in Gaza, may not be able to afford the specific dietary and nutrition needs of family members with cancer.²⁵

Women in the Seam Zone and Access Restricted Area

Since Israel's unilateral disengagement from the Gaza Strip in 2005, Israel has designated all territory 300 meters within the fence separating Gaza from Israel as a "no-go area" and territory within 1,000 meters or more as "high risk."²⁶ This territory, which includes privately owned farmland, has become almost totally inaccessible and the portion that is accessible has little economic potential, as a result of pesticide spraying and military operations. Gazans who operated poultry or vegetable farms have experienced a sharp diminution in their livelihoods; by 2009, 55 per cent of landowners stated they could not reach their land and 74 per cent that they faced obstacles in working it.²⁷

In 2002, the Israeli government began construction of a wall in the West Bank on the ostensible purpose of "preventing terrorists from entering Israel proper". Despite the avowed security motive, the Wall was not built, or its construction planned, along the Green Line, the border between Israel and the West Bank. Rather, more than 80 per cent of the Wall is located inside the West Bank, trapping Palestinian land, houses, and people behind the structure. Palestinians have accused the Wall as serving as an undeclared annexation and a 2004 ruling by the International Court of Justice declared the Wall to be illegal, and called for the immediate cessation of construction.²⁸ It is estimated that approximately 11,000 Palestinians currently live within this "Seam Zone," estimated to rise to 25,000 once the Wall is completed. The entire area behind the Wall is designated as a closed military zone, requiring permits to enter or exit, the longest of which are issued for only two years. Entry and exit are only possible through 66 gates within the Wall, each of which are open only for limited times, preventing long-term planning. Reflecting these circumstances, economic activity is heavily constrained, as are health, education, and related social services.²⁹

In ARA in the Gaza Strip, the mean household family size is 8.5 – larger than the average of 5.6 in Gaza and 4.8 in the West Bank in 2017³⁰. The share of women headed families in the area is 13.0 per cent – also higher than the average of 9.1 in Gaza 2016³¹. The area is characterised by particularly high poverty levels, chronic malnutrition in a context of marked food insecurity (more than 96.5 per cent and 97.8 per cent of ARA households in Rafah and Khan Younis, respectively), low levels of education of women, poor access to clean water and poor sanitation, and limited access to quality health services³². Violence against boys and girls is of great concern, as well as early marriage, violence against women and the prevalence of explosive remnants of war (ERWs) in the area³³.

Women who live in the Seam Zone report that they avoid leaving their houses because of delays in the checkpoints and the harassments of soldiers and private guards. Palestinian girls and women, especially women in the Seam Zone, experience the surveillance and control of the occupation in an embodied way. They are weary of sexual harassment at the checkpoints and in the investigations, where Israeli security forces – whether privatized or not – also use sexual violence, including threatening these women with damaging their reputation through rumors, disclosing personal information, etc. Moreover, Palestinian girls grow up learning that their own communities are limited in their capacity to protect them from this violence.³⁴

Households in Area C and H2

Approximately 40,000 Palestinians live in H2, threatened by 850 settlers and an Israeli military presence of over 4,000 soldiers. Palestinian residents of H2 are surrounded by “over 120 physical obstacles, including 18 permanently staffed checkpoints” that separate from the rest of Hebron.³⁵ In H2, the Occupation has led to a near-total cessation of economic activity and health, education, social, and other services are severely constrained. Palestinians living in H2 face heightened risk of violence, displacement, and need. By 2007, 1,014 housing units (42 per cent of the total) had been evacuated and the abandoned units need of restoration. Poverty is widespread and deep in H2; in 2009, “86 per cent of families live[d] in relative poverty on only US\$ 97 per person per month for food, clothes and all other living expenses.”³⁶ These circumstances are especially hard for mothers and other women who are expected to maintain the household in conservative circumstances.³⁷ Some children in H2 must cross a military checkpoint and/or are exposed to harassment by Israeli settlers on their way to school.³⁸ In H2, approximately “4,200 pupils, boys and girls, have their journey to school obstructed by checkpoints every day, frequently facing harassment, intimidation and delays that result in lost school time.”³⁹ Children are not safe even at school as Occupation forces use tear gas in and around buildings causing “physical injuries and spread[ing] panic among pupils and teachers.”⁴⁰ In previous years, Palestinians in H2 could rely on the Temporary International Presence in Hebron (TIPH), a UN-mandated operation, responsible for documenting violence and human rights abuses committed by soldiers and settlers. However, in 2019, the Israeli government expelled TIPH observers, denying Palestinians the opportunity to document the violations and threats and inform domestic and international audiences.⁴¹

Both male and female labor force participants in Area C are much less likely to have stable full employment than their counterparts across the West Bank. Sixty-nine percent of males 15 years and above in Area C, compared to 62% of males across the West Bank, were in some form of employment. But they were four times as likely to be only partially employed (28%), in comparison to males across the West Bank (at 7%)⁴².

In Area C and East Jerusalem, there are 10,000 people across 63 communities “at heightened risk of forcible transfer.”⁴³ Home demolitions, evictions, and other forms of displacement, fall especially heavy on women who, reflecting conservative socioeconomic norms, feel the loss of the domestic space as wives and the failure to protect their children as mothers.⁴⁴ More than one-third of Area C

communities “lack primary schools and girls are forced to travel long distances, sometimes on foot, to reach the nearest school, often crossing one or two checkpoints. In response to these threats, families may adopt “negative coping mechanisms,” such as taking children out of school to limit their exposure to Israeli violence and harassment, a practice more common among girls than boys.⁴⁵ Dropping out of school is further linked to “early marriage, early pregnancy and sexual assault.”⁴⁶ According to a recent OXFAM research (2019), employment opportunities for women in Area C are characterized by unwaged/low waged work (most likely in herding/agricultural activities, including in Israeli settlements), while employment opportunities for the highly educated are far more limited than is the case for women in areas A and B. Women in the surveyed communities have heavy productive work burdens along with domestic ones, yet few of them earn any direct income. While 22% of women had some level of employment, only 7% said they worked for pay. the majority work under the category of “unpaid family labor⁴⁷.”

Some women are reported to work in settlements, where they face pronounced threats of exploitation and sexual assault.⁴⁸ In circumstances of poverty, women often have the least access to capital, collateral and other facilitators of economic activity, entrenching poverty and leading to negative psychosocial outcomes. Women in the Jordan Valley, who were the most economically active women by region in Area C, had the least decision-making power in terms of choosing to work outside the home (with only 9% having the final say on this decision versus 22% for all women). Greater decision-making power on daily issues increased with women’s age – especially among women over 50⁴⁹. With regards to women’s freedom of movement it is dramatically more restricted for those living in hamlet/ encampments compared to that among women in urban and village communities in Area C. Women in the Jordan Valley exhibit the most restricted freedom of movement⁵⁰. The permit regime enforced by the Occupation makes it virtually impossible to develop health infrastructure and among Palestinians living in Area C, H2, and the Seam Zone “approximately 220,000 lack permanent clinics and face critical challenges in accessing basic health services.”⁵¹ Restrictions on movement enforced by the permit regime also serve to confine women in their immediate environments.

Child Marriage

Palestinian law, an amalgam of penal codes, legal frameworks, legislation, and executive decrees, speaks in contradictory voices about child marriage. The Palestinian Child Law No. 7 of 2004 sets the legal age of marriage at 18 years old; however, the Palestinian Personal Status Law and the Jordanian and Egyptian penal codes, respectively operable in the West Bank and Gaza Strip, permit underage marriage.⁵² PCBS figures from 2014 indicate that “two out of every ten women aged 20-49 were married before the age of 18 in the West Bank,” as well as “three out of ten women for the Gaza Strip.”⁵³ The true rates may be even higher as some girls who marry below the legal age may not register or may delay formal registration until they reach the legal age.⁵⁴ Early marriage is driven by a range of factors including economic need and adherence to customary values. In some instances, early marriage is turned to as a “negative coping mechanism” as families opt to marry children “to protect them from poverty, sexual harassment and assault from living in overcrowded places.”⁵⁵

Child marriage is a “violation of human rights,” and has “devastating long-term effects on children’s psychological, reproductive and sexual health as well as their social wellbeing, education and future prospects.”⁵⁶ Early marriage is a leading cause of girls dropping out of school, leaving work, or abandoning aspirations, contributing to social isolation and stunted emotional and personal development. Early marriage is also correlated with increased rates of gender-based violence and early pregnancy. Occurrence of the latter is especially dangerous, as pregnancy-related deaths “are known to be leading cause of mortality of both married and unmarried girls between the ages of 15 and 19.”⁵⁷ Child brides are often expected to leave the homes of their parents and live in the home of their husband, which often includes members of his family, as well. In these quarters, tensions between wives and husbands and their families are common, especially at the hands of disapproving mothers-in-law. In these environments, child wives find themselves unable to return to their families,

owing to the stigma associated with leaving a husband's home, and must remain in a hostile and harmful environment. All of these factors contribute to a diminished quality of life, the consequences of which can manifest in psychosocial disorders and, in the most extreme cases, self-harm.⁵⁸

Adolescent Boys and Girls

Adolescents (aged 10-19 years), especially girls, have limited control over their lives in the Palestinian home. Parents regularly dictate the character and activities of their children's lives and future. This includes allocating spending money, time and people allowed for socializing, and, in the most extreme cases, when and who a child will marry and whether he or she will attend school.⁵⁹ Parents also choose the discipline that children will face for disobedience, which in the Palestinian context can include physical violence. Even in the absence of physical violence, children may face verbal and psychological maltreatment and may experience trouble in "expressing and managing their emotions...as they transition from childhood into puberty into early adulthood."⁶⁰

Young people in Palestine face unique threats to their lives and development. Poverty is chief among these challenges, with approximately one-third of Palestinian families living beneath the poverty line. Poverty imposes some of the harshest obstacles to the realization of youth potential; youth in poverty are observed as having lower access to quality services (such as education or health), be at increased risk of negative health outcomes (such as disease or hunger), be at increased risk of violence in their immediate environments, among others. For boys and girls, school drop-out rates are higher among those from poorer households, while boys face higher rates of child labor and girls' higher rates of child marriage.

Looming over all Palestinian lives and sources of vulnerability is the Israeli Occupation. The Occupation and its total control over exploitation of resources and pursuit of commercial activities, movement of Palestinians in their own land, unity or separation of families, provision and access to services, and unchecked ability to use violence against people and places is a contributor to all forms of vulnerability affecting adolescents.

Adolescent girls are particularly vulnerable. It is estimated that there are 530,000 adolescent Palestinian girls, projected to rise to 720,000 in 2030.⁶¹ These girls face a series of overlapping vulnerabilities linked to poverty, social norms, and low access to services. In households living in poverty, adolescent girls are often the first to experience the sting of chastened financial resources. To save financial resources or devote them to male siblings, adolescent girls may be pulled out of education or married off as child brides. Boys also face hardships in impoverished households, which often include going to work to support family incomes. PCBS (2019) indicates that child labour reached 3 per cent among children 10-17⁶². Females, particularly those in poorer households, also face diminished health outcomes, which can manifest as early as childhood and adolescence. In 2014, as a result of food insecurity, an estimated 72 per cent of adolescent females in Gaza were estimated to have a Vitamin D deficiency, while 64 per cent were estimated to have a Vitamin A deficiency.⁶³

Women and Girls Affected by the Great March of Return

Beginning on March 30, 2018, Palestinians in Gaza began a series of weekly demonstrations at the perimeter fence between the Gaza Strip and Israel. Called the Great March of Return (GMR), these weekly demonstrations were organized to assert the inviolability of the Palestinian right of return and protest the siege of Gaza. The March has been defined by heightened violence. By March 2019, 195 Palestinians had been killed and approximately 29,000 had been injured, many of the latter sustaining

permanent disabilities.⁶⁴ The March and its effects on broader life in Gaza have distinct implications for different groups in Palestinian society:

- Boys and girls: By March 2019, 41 children had been killed by Israel and approximately 3,000 were hospitalized for injuries, including 21 who received amputations.⁶⁵ By the same data, UNRWA health facilities had treated 533 children who had suffered injuries, 95 per cent of whom were boys.⁶⁶ Recovering from injury, children may miss school for extended periods of time. Children may also develop psychosocial disorders, such as depression or anxiety, after enduring violence or the experience of a family member or friend being killed, maimed, or wounded. Threats to children have a distinctly gendered character. For boys, being wounded or maimed may limit their ability to marry and become, in their eyes, a full member of society. Others, coming from households where wage-earners have been killed or wounded, may be forced to enter the workforce to provide for household needs. Girls, on the other hand, may face the prospect of forced or early marriage, especially in families looking to relieve the desperate financial circumstances caused by an incapacitated wage earner. These same circumstances may also encourage close-kin marriage as fellow family members may agree to waive “dowry”. Other girls may find themselves become caregivers for family members who have endured injuries or disabilities, requiring them to drop out of school. Further, girls who have been injured or disabled may be considered unmarriageable by their families, which may cause families to perceive them as posing an additional financial burden and suffering a social stigma.⁶⁷
- Women: Women have been represented across all segments of the Great March of Return and have borne the full brunt of the repression and its violence. On 1 June 2018, Razan al Najjar, a paramedic assisting the wounded, was shot to death by Israeli forces, despite being clearly identifiable as a medical worker and approaching the fence with her hands raised.⁶⁸ Over a hundred other women have been injured. According to a recent study⁶⁹ published in 2019, women injured due to the GMR have different needs. Their top priority needs include food security (67,5 per cent), safety and security (60%), adequate housing (55 per cent), adequate health care (55 per cent), and removing logistical restrictions (40 per cent). 12,5 per cent of all injured women used to work before injury and all of them could not return to work after injury due to not finding jobs that are adequate for their lives after injury (25 per cent) and due to bad health conditions (75 per cent). 45 per cent of all injured women suffered from physical abuse and (2.5 per cent) from sexual abuse. While only (35 per cent) received psychosocial support, (65 per cent) did not. Overall, 66.7 per cent of those who received assistance were dissatisfied because it was insufficient and did not fully address their needs. Those deeply affected include
 - ✓ Mothers of injured or killed children: In traditional Palestinian households, childrearing is considered the domain of mothers. Women whose children have been killed or injured by Israel report being blamed by husbands and other figures for “allowing” their children to participate,” leading to psychological and sometimes physical violence. Beyond this, these mothers must assume the task of caring for wounded children.⁷⁰
 - ✓ Wives of the Dead or Injured: The high rate of injuries and death endured by Palestinian men has a dramatic effect on spouses. In households where husbands have been injured, women who were not previously working may be forced to take up income-generating activities to provide for household income. For those who have been widowed, the challenges can be even more difficult. Reflecting the fact that the average age of the dead is 18-39 years, widows are comparatively young and are often expected to remarry. Besides being a traumatizing and unwanted decision, remarried women face disadvantages in the Palestinian legal system. First, upon remarriage, the

new husband will assume control of her property. Second, a widowed woman who remarries may lose custody of her children from the previous marriage.⁷¹

Female-Headed Households and Unemployed Female Graduates

By June 2019, the PCBS Labour Force Survey indicates that approximately 11 per cent of households in Palestine are headed by females, 12 per cent in the West Bank and 9 per cent in the Gaza Strip.⁷² Poverty rates among individuals living in female-headed households stood at 30.6 percent compared to 29.2 percent between those living in male-headed households. About 20 percent of the individuals living in female-headed households suffer from deep poverty, unable to fulfill the minimum required for food, clothing and housing, compared to about 17 percent of the male-headed households⁷³. Among female-headed households in Area C, 36 per cent were designated as distressed, compared to only 22 per cent of households headed by males.⁷⁴ In the face of limited incomes and assets, female-headed households are often forced to adopt negative coping strategies, including taking out “high cost loans or cutting down on vital family activities/practices.”⁷⁵

Labour force participation among males reaches 7 out of ten, while it reaches 2 out of 10 among females. Female participation in the labour force was 20 per cent in the Gaza Strip compared with 18% in the West Bank. Unemployment among females (44 per cent) is double that of males (22 per cent). Unemployment among females in Gaza is higher than any other group reaching 68 per cent, compared to 26 per cent among females in the West Bank. Youth face the highest levels of unemployment (42 percent for the 20-24 cohort; 36 percent for the 25-29 cohort; and 26 per cent for the 30-34 cohort). Youth in Gaza are at much higher risk of unemployment than their West Bank counterparts (69 percent in Gaza and 26 percent in the West Bank for the 20-24 cohort; and 60 per cent in Gaza and 19 per cent in the West Bank for the 25-29 cohort)⁷⁶. In general, the rate of unemployment among graduates (15-29 years) holding intermediate diploma degree or higher was 55.8% during 2017 (37.8% for males and 72.0% for females) compared to 41.5% in 2007 (31.7% for males and 52.5% for females). Graduates of the educational sciences and teacher training specialization in 2017 recorded the highest unemployment rate at 69.6% (47.5% for males and 76.2% for females). Graduates of the law specialization recorded the lowest unemployment rate at 25.7% (25.5% for males and 26% for females)⁷⁷.

Unemployed female graduates also face unique challenges and threats. Though females outnumber males among graduates of secondary and tertiary educational institutions, they face uneven outcomes.⁷⁸ One reason for this is the pressures females face from family members and educational institutions to pursue traditionally female fields, such as health care, teaching, or the arts, as opposed to engineering or chemistry. Of particular concern is the possibility that education may not be correlated with improved professional outcomes. PCBS (2019) data indicates that labour force participation among females with 13 years of education or more reaches 44 per cent, while approximately 50 per cent of them are unemployed, compared to only 11 per cent of those with elementary schooling and 19 percent of males with the same level of education.⁷⁹ These figures may reflect the limited number of professional jobs available and the preferences of employers for male hires. These heightened rates of unemployment may prompt women to accept marriage and the possibility of abandoning professional aspirations and adopting more domestic responsibilities.

Women in Cyberspace

Internet use is increasing among Palestinians across all sections of society. The growing number of men and women, boys and girls using the Internet and social media, in particular, presents a variety of opportunities and threats. The former includes the ability of the virtual world to obliterate distance, allowing those Palestinians facing mobility restrictions to engage with the world beyond Israeli

barriers. However, the increasing presence of Palestinians on cyberspace is accompanied by distinct threats, for which police, legal frameworks, and society at large are underprepared.

Palestinian women and girls face distinct risks when interacting with cyberspace. On one level, these threats are not unique and, rather than being a realm governed by unique norms and values, “gender-based violence in virtual space mirrors the violence in public space.”⁸⁰ Women and girls find their virtual experience circumscribed by parental supervision, oversight that enforces stringent social norms. This is heightened by the presence of relatives and extended family members, who function in a similar supervisory role, in effect constituting “a ‘surveillance tower’ to watch their actions and moves in the virtual life.”⁸¹ Women and girls report deliberately excluding their parents and other family figures from their social media accounts or assuming pseudonyms for their profiles. Even then, women and girls remain wary of interacting with a member of their immediate community who can identify them.

The most dangerous threat posed to women and girls is cybercrime, the incidence of which has been increasing in recent years. In 2015, there were 1,020 reported instances of cybercrime in the Hebron governorate alone, the majority of which were “sexual extortion or blackmail of women.”⁸² These crimes often include the publication of compromising images or extortion through the threat of publication and are committed by romantic partners (current or former), community acquaintances, and strangers. Other criminal behaviors, such as “sexual harassment, sexual assault, defamation...and persistent or even violent courtship” are also perpetrated against women and girls.⁸³ The threats posed by these activities are compounded by the perception of powerlessness and isolation when confronting them. Women remain skeptical of the capacity of the police to address these crimes and report turning to family members as an alternative. In 2017, the Palestinian Authority (PA) adopted its first Cybercrime Law, legislation that was denounced for both its content and the manner in which it was adopted. Leading civil society organizations accused the Law as being a thinly veiled mechanism for suppressing free speech and curbing dissent, as opposed to a genuine attempt to address a serious problem in society.⁸⁴

Gender Analysis: Focus Sectors

The following section presents a gendered analysis by sector, which brings to light additional dimensions of approaching gender variance in crisis and humanitarian situations in the oPt.

Health and Nutrition

The health sector of Gaza is facing tremendous stress, a strain that has been magnified in the aftermath of the violent reaction to the Great March of Return. Between 2010 and 2017, the number of doctors, nurses, and hospital beds has declined precipitously and, reflecting the energy crisis caused by the blockade, “the functioning of 70 primary health-care facilities have been severely impacted: at least 30 hospitals face risk of partial closure and over 300 pieces of essential lifesaving medical equipment in public hospitals have stopped functioning.”⁸⁵ The permit regime enforced by the Occupation is especially threatening to patients who need advanced medical care unavailable in Gaza. These permits have been “delayed or denied without explanation” and the approval process can include “intrusive and aggressive questioning of female patients, even when medically weak or vulnerable.”⁸⁶ The ability of women to access reproductive services is a special constraint facing Palestinian women, and, in some cases, girls. In Gaza, it is estimated that 150,000 women, out of a total of 500,000, are “acutely vulnerable due to critical challenges in delivering health care.”⁸⁷ A 2019 study concluded that 68 per cent of Gaza school children living near the perimeter fence have “clear indications of psychosocial distress.”⁸⁸ The omnipresent violence and threat of violence, as well as the

deliberate humanitarian crisis has “left an entire generation emotionally damaged.”⁸⁹ Moreover, there are high rates of anxiety and depression among women especially in Gaza.⁹⁰

In areas such as H2, the Seam Zone, and Area C health services, if available, are of poor quality and often limited to basic care.⁹¹ For all facilities in the West Bank outside of East Jerusalem there is a critical shortage of “certain treatment and diagnostic options” and patients in need of advanced care are thus “dependent on referrals to East Jerusalem or Israel and therefore require security permits from Israeli authorities.”⁹² A recent research by OXFAM has revealed that when women were asked if anyone in the household had experienced a medical emergency in the previous year and needed urgent treatment; about a third (32%) replied “yes”. Of the households who did have a medical emergency, when asked to cite the array of obstacles they encountered (if any) in accessing medical services, 72% of them cited the high costs of treatment; 65% cited the distance to health care services; 56% said they faced a lack of transportation; and 39% said they experienced difficulties due to the Israeli military or settlers (including checkpoints).⁹³ For pregnant women, requiring regular prenatal and postnatal care, the lack of facilities poses serious health risks increasing threats to health of mother and child.

WASH

In 2018, around 1.8 million Palestinians needed humanitarian water, sanitation and hygiene assistance. WASH needs are especially acute in Gaza, where “most households receive piped water for only 6-8 hours once every four days.”⁹⁴ Recurrent military operations, the long-standing blockade and the ongoing power crisis have disrupted the delivery of water and sanitation services and affected the already precarious living conditions in Gaza. The power crisis has further exposed Gazans to a range of diseases, contaminating soil and sea water, and restricting access to potable water. Limited access to water has contributed to diminished water consumption and hygiene standards. Water insecurity falls hardest on women and girls, who are responsible for housekeeping and related domestic responsibilities, activities that require a regular supply of water. Insufficient access to water has been linked to increased burdens on women and girls, as well as an increased prevalence of GBV. The inability to operate washing machines forces women and girls to perform manual washing and can lead to conflict with male figures. Women and girls are the most common household members tasked with obtaining water from the few operable desalination facilities.⁹⁵ Among those living in shelters, as a result of the conflict, female IDPs report shortages of feminine hygiene products, the dearth of which has led to use of unsanitary alternatives.

In East Jerusalem, 40 per cent of households are not “legally connected” to a water network, resulting in “substandard water and sewage connections.”⁹⁶ In the neighborhoods adjacent to the Shu’afat Refugee Camp, Israeli authorities “have not approved a single outline plan for the neighborhoods,” and “the existing water lines are sufficient for only 10 per cent of the total population.”⁹⁷ In the West Bank, the average Palestinian consumes only 79 liters per day, beneath the minimum 100 liters per day per person recommended by the World Health Organization (WHO).⁹⁸ Approximately 20,000 Palestinians in Bedouin and herding communities located in Area C “are not connected to a water network,” and “have access to only about 30 litres per day, at a cost ten times higher than through the network.”⁹⁹ Education facilities are not sufficiently equipped for to meet the WASH needs of students. In the West Bank, there is only 1 toilet for every 42 students, and in Gaza, there is only one toilet for 71. There is a similar shortage of hand-washing facilities and drinking water points.¹⁰⁰

Protection

Virtually all Palestinians, in territories occupied by Israel, face protection risks, caused principally by “violations of international humanitarian and human rights law.”¹⁰¹ Out of these 4.95 million

Palestinians facing protection risks, 1.9 million (38 per cent) are considered the most in need.¹⁰² An estimated 320,439 children are “in need of protection programmes, including psychosocial support,” the vast majority of them in Gaza (295,193), while 17,916 are in need of “specialized case management support.”¹⁰³ Further, approximately, one-quarter of children between the ages of 1 and 14 “have experienced violent child discipline,” including 71 per cent of those in the West Bank.¹⁰⁴ Gaza faces some of the most acute protection challenges in all of Palestine. In November 2018, there remained 14,000 IDPs in Gaza, 53 per cent of whom were “in need of temporary shelter cash assistance.”¹⁰⁵ The adverse circumstances created by the blockade and successive rounds of conflict further contribute to increased incidence of gender-based violence against women within the territory. According to 2011 figures, over 148,000 women had been exposed to GBV, including 40 per cent who were exposed to psychological abuse, 25 per cent to physical abuse, 18 per cent to resource denial and among women who were currently or were previously married, 15 per cent have been exposed to sexual abuse. Women in Gaza believe the effects of the blockade have an exacerbating effect on the incidence of GBV, notably the power cuts and financial strain.¹⁰⁶ Research further suggests that the effects of the Israeli blockade and military operations, principally expand to the impoverishment of households, destruction of economic potential, and wounding and killing of family and community members, contribute to GBV.¹⁰⁷

In the West Bank, an average of 310 children “were in Israeli military detention” including “five held in administrative detention.”¹⁰⁸ In 2018, an average of 271 children were detained each month¹⁰⁹, of whom 4 were girls¹¹⁰. In Area C, living in the shadow of Israeli settlements, whether in the West Bank or East Jerusalem, an estimated 70,000 Palestinians are at heightened threat of attacks by Israeli settlers and soldiers. Whether traveling through checkpoints or accessing farmland or grazing land, Palestinians have been regularly assaulted, through attacks that, almost without exception, go without investigation by the Israeli military.¹¹¹ One of the most insidious threats faced by Palestinian families are night raids conducted by the Israeli military. These assaults are designed to inflict terror on all residents of the house and the neighborhood and have a particularly acute effect on young children. Night raids often have a traumatizing effect on residents of the invaded houses, and have led to the development of psychosocial disorders, such as insomnia and depression.¹¹² Women in Area C households reported lower incidents of domestic violence compared to prevalence rates across the West Bank. However, findings do indicate links between higher levels of household exposure to military violence, and domestic violence in Area C. Women in hamlets/encampments are more likely to suffer abuse, with 46% of them suffering any instance of domestic abuse, compared to 34% of women in urban and 34% village communities¹¹³.

Food Security

In 2018, approximately one-third (32.7 per cent) of households in Palestine were assessed to be food insecure. Assessing these circumstances on a regional level reveals stark divergences. In the West Bank, only 12 per cent of households are food insecure, declining from 19 per cent in 2013; however, in Gaza, 69 per cent of households are food insecure, increasing from 61 per cent in 2013. Further, among these households in Gaza, 47 per cent are classified as severely food insecure.¹¹⁴ Vulnerable groups face heightened food insecurity. Among female-headed households, the rate of food insecurity is 15 points higher than in male-headed households (36 per cent v. 21 per cent), despite the fact that poverty rates are nearly equal among both groups. Further, though the rate of food insecurity among households in the West bank is 13 per cent, it is 61 per cent among Bedouin families in Area C.¹¹⁵ Limited economic access to food is the primary determinant in food insecurity, a restriction that has deepened as the economic slowdown in the West Bank and economic crisis in Gaza has accelerated in the past year. The findings of the Gaza Strip Nutrition Multi-sectoral Assessment¹¹⁶ showed that 23 percent of the households in Gaza having a poor food consumption score. The assessment also revealed a high risk of iron deficiency “anemia” among households due to not consuming “iron rich

food". The coping strategies of 71% of assessment respondents (population) focus on the reduction of meals and variety of foods. As for the nutritional status of pregnant and lactating women, 18 percent of pregnant women and 14 percent of lactating mothers found malnourished. With regard to children 6-59 months age, 4 percent were found acutely malnourished which is still below the emergency thresholds of WHO¹¹⁷. Further, the "chronic energy deficit" has raised production costs for food producers and "made it difficult for households to refrigerate food items and caused increased expenditure and work for women."¹¹⁸ Further, the Palestinian diet is assessed to be of limited nutritional value. As Palestinian households increasingly opt for refined flour of Western diets, the Palestinian pantry is increasingly stocked with "empty calorie[s]" contributing to obesity. Female Palestinians traditionally live lives that are more sedentary and involve less physical activity, leaving them more vulnerable to the negative effects of a diet with inadequate nutrition.¹¹⁹

Shelter and NFI

Between 2006 and 30 June 2019, "at least 1,440 Palestinian residential units in the West Bank" were demolished by the Israeli Occupation, "causing 6,336 people – including at least 3,189 minors – to lose their homes." Further, "from January 2016 through 30 June 2019, [Israel] demolished 698 non-residential structures (such as fences, cisterns, roads, storerooms, farming buildings, businesses and public buildings) in the West Bank."¹²⁰ As of June 2019, 3,630 shelters in Area C, 950 in H2 and 350 in East Jerusalem "require rehabilitation or consolidation to ensure adequate protection and reduce displacement."¹²¹ Demolition of homes has a pronounced effect on children for whom the experience can lead to psychosocial disorders. Home demolitions have distinct gendered impacts, reflecting social norms and division of family roles. For Palestinian women, who, reflecting prevailing gender roles, are commonly expected to keep the house and raise children, home demolitions deal a double blow to their identity as (1) wives and as (2) mothers. For many women, "their identity as an individual and status as wives and mothers is wrapped up in their domestic life," and "when their homes are demolished, women often become disoriented, unable to function without that organizing domestic sphere."¹²² Further, in the aftermath of home demolitions, women often find themselves forced to move into the homes of relatives, in which they have little influence over the domestic sphere. Jerusalemites are at particular risk of home demolitions. Currently, there are an estimated 20,000 'unplanned' housing units in East Jerusalem, a figure reflecting that the Municipality of Jerusalem has not "advanced even a single outline plan in the Palestinians neighborhoods...for over a decade."¹²³ In the Gaza Strip, one of the most densely packed territories in the world, destruction of housing, impoverishment of families and other factors have contributed to overcrowding among and between families. Women attribute the increased crowding, "often citing living in extended-family households of their spouses as compounding their abuse."¹²⁴

Inhabitants of Area C face some of the greatest threat of eviction and home demolition, especially Bedouin communities. Villages and communities in this territory face the omnipresent threat of home demolitions by the Israeli Occupation on the pretext of being 'unplanned,' meaning they do not have a Master Plan approved by the Israeli Defense Ministry. In practice, these plans are never approved, leaving Palestinian communities in a state of perpetual vulnerability. Emblematic of these circumstances is the fate of Khan al Ahmar – Abu al Hilu. Khan al Ahmar is a Bedouin community of 40 families located within the Jerusalem governorate. The Israeli military has refused to zone the land on which the village is built as residential, allowing demolition orders to be issued against all structures. Though the community has faced demolitions in the previous decades, the most recent plan envisages the forced eviction of all residents to an alternative location, so as to facilitate the annexation of the land by the nearby Kfar Adumim settlement. Residents, men and women, of Khan al Ahmar contested the demolition order, itself prompted by litigious settlers, in the Israeli court system in a battle that stretched for a decade. However, in May 2018, the Israeli Supreme Court issued its final ruling, refusing to prevent the demolitions, leaving the village slated for destruction and its residents to

forced eviction. The ruling has raised further concerns about the fate of the other 2,000 Bedouin living in 18 communities across the territorial significant E1 area.¹²⁵

Education

Palestinian law mandates compulsory education, beginning at age 6. Overall, Palestinians have high rates of literacy and attendance of higher education institutions. However, high rates of matriculation at the tertiary level can disguise a wide gulf that exists between educated and uneducated Palestinians. School drop-out rates, driven largely by economic need of households, remain high; by age 15 5.4 per cent of Palestinian girls were out of school, while among boys of the same age, a “staggering” 22 per cent were not attending school.¹²⁶ Drop-out rates are strongly correlated with economic circumstances; among 16-17-year-olds in the poorest quintile of households, 34 per cent are out of school, compared to 14 per cent in the richest quintile. Among 16-17-year-old boys in these households, 45 per cent are out of school, along with 24 per cent of girls.¹²⁷ Leaving school is influenced by a series of factors including low academic achievement, economic vulnerability or related needs of families, the prohibitive cost of education or its related expenses, and administrative policies by the Occupation or Palestinian administrations. Further, certain children are at particular risk of not completing school and, in certain cases, not attending to begin with. These include those from households experiencing “deep poverty and unstable household composition” and “children with disabilities.”¹²⁸ In the 2011 Disability Survey by the PCBS, the majority (52 per cent) of girls with multiple disabilities had never enrolled in school, along with 42 per cent of boys.¹²⁹ Threats and violence by the Occupation and settlers pose a sustained threat to education. In 2018, there were 111 verified “interferences to education” in the West Bank, which impacted 19,196 children. The majority of these incidents “involved live ammunition, tear gas, and stun grenades fired into or near schools.”¹³⁰ Schools are not exempt from house demolition by the Occupation; in January 2019, there were demolition orders for 50 schools in the West Bank and East Jerusalem and, in 2018, five West Bank schools were “demolished or seized by Israeli authorities.”¹³¹ Physical violence as a means of enforcing discipline is ubiquitous in Palestinian classrooms, with 61 per cent of students witnessing physical violence.¹³²

In Gaza, 60 per cent of students attend schools run by UNRWA, compared to 8 per cent in the West Bank. In Gaza, the average student/class ratio is 37.3 for basic education. Among the children enrolled in 1st to 10th grades in public schools, “90.2 per cent are enrolled in double-shift schools.”¹³³ Reflecting the devastation inflicted by the Occupation and the state of deprivation created by the blockade, 86 new school buildings are needed, along with 1,081 new classrooms.¹³⁴ As a result of these circumstances, “two-thirds of schools in the Gaza Strip operate on double or triple shifts,” which has shortened learning hours to a mere “4.5 hours a day.”¹³⁵

Education for Palestinians in East Jerusalem faces unique and powerful stresses. Living within the city of Jerusalem and its environs, education for Palestinian children is the responsibility of the Israeli Ministry of Education and the Municipality of Jerusalem. Like all services in Jerusalem, Palestinians face deliberate discrimination by Israeli administrators and must make do with pronounced shortfalls in funding and resources. In 2017, 109,481 Palestinian children in Jerusalem attended 264 schools, 97 of which (37 per cent) were recognized but “unofficial,” meaning they only receive partial funding from the Ministry.¹³⁶ In the same year, the Municipality estimated that Palestinian schools faced a shortage of 2,000 classrooms; of the 1,815 classrooms across official schools, 857 (47 per cent) were deemed sub-standard. Shortages of school counselors, psychologists, and attendance officers further hamstring the Jerusalem education system.¹³⁷

Recommendations

A gender-based perspective to crisis and humanitarian action is necessary, as crises affect women, girls, boys and men differently. Such a perspective requires humanitarian actors to design, plan, implement and monitor their actions taking into consideration the following key elements: existing power inequalities between women and men exacerbate during crisis; women, girls, men and boys have different needs and different coping mechanisms; women, girls, men and boys have different opportunities to benefit from support; and women and girls are an important resource in designing and delivering humanitarian assistance.

A gender equality perspective is also about assistance being designed and delivered based on the “do no harm” approach, in a way that does not trigger armed conflict, exacerbate tensions between population groups or expose people to violence and other forms of abuse such as GBV. Programmes that lack a gender perspective risk being off-target, not reaching the most excluded, providing support in an inadequate manner or even inadvertently causing harm¹³⁸.

Such a perspective entails an increasing attention to the various and evolving marginalized groups including adolescent girls; women exposed to gender-based violence (GBV); food insecure households headed by women; children facing obstacles in accessing schools; children in the labor force; children subject to violence; out-of-school children; youth; the elderly; communities in Area C; Bedouins and herder communities living in Area C; Gaza residents without access to clean water or sanitation; Hebron H2 residents; persons living in the Seam Zone; persons with disabilities; individuals in need of urgent medical referrals; refugees living in abject poverty; refugees residing in camps; small-scale farmers, non-Bedouin herders, fisher folk; and the working poor¹³⁹.

Humanitarian actors should continue to collect Sex- and age-disaggregated data (SADD) which is a core component of any gender analysis and essential for planning, monitoring and measuring outcomes. To be effective, SADD must be both collected and analysed to inform programming. Sectors should determine the age groupings that are relevant to their programming. In addition, depending on the context, it can be important to disaggregate the data based on such other diversity factors as ability, ethnicity, and level of income or education¹⁴⁰.

Sector should also ensure that a Gender Analysis is in place to look at the relationships between women, girls, men and boys and considers their respective roles, access to and control of resources and the constraints each group faces relative to others. A gender analysis should be integrated into the humanitarian needs assessment and into all sector assessments or situational analyses and throughout the Humanitarian Programme Cycle. Sector should also be equipped to conduct a rapid gender analysis which is a tool to conduct gender analysis quickly during an emergency response. A simple four-step process, it can be used throughout the HPC and adapted for different sectors using the relevant guidance on needs analysis. Rapid gender analysis can easily be incorporated into existing assessment tools and strengthens the accuracy and comprehensiveness of findings and recommendations¹⁴¹.

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