

4 Priority Actions

for Gender Responsive Humanitarian Action in the Gaza Strip

The Regional Gender in Humanitarian Action Working Group for Arab States/Middle East and North Africa (RGiHA-AS/MENA) is committed to ensuring that gender equality is at the core of humanitarian responses in the region.ⁱ

This Advocacy Note recommends four Priority Actions to address the urgent humanitarian needs in the Gaza Strip arising from the escalation of hostilities with Israel since 7 October 2023. The priority actions are guided by the <u>Policy on Gender Equality and the Empowerment of Women</u> and Girls of the IASC Reference Group on Gender and Humanitarian Action (2017).^{II}

Humanitarian conditions across the Gaza Strip were already dire prior to the recent escalation. Approximately 80 per cent of the 2.2 million Palestinians in the Gaza Strip depended on international aid.^{III} Furthermore, the **2023 Humanitarian Needs Overview Occupied Palestinian Territory** estimated that 650,000 women and girls were in urgent need of humanitarian assistance. Humanitarian crisis in the Gaza Strip had been deepening prior to the October escalation, exacerbated by the ongoing Israeli occupation, 16-year blockade and recurrent Israeli bombardment of the Gaza Strip, and severe restrictions on the movements of Palestinians, and hostilities between Israeli security forces and Palestinian armed groups.

Call for an immediate humanitarian ceasefire and for the protection of civilians, civilian infrastructure, and humanitarian workers in accordance with International Humanitarian Law

As of 5 November 2023, the entire population in the Gaza Strip is besieged and under attack. Sustained Israeli attacks on residential neighborhoods, schools, places of worship, hospitals, bakeries and supermarkets has led to the horrific killing of an estimated 9,770 people, of whom 4,008 are children and 2,550 women (67 per cent).^{iv} Furthermore, around 45 per cent of housing units, 258 schools and 39 health care facilities in the Gaza Strip have been reported destroyed or damaged, with thousands of people reported missing and presumed to be trapped or dead under the rubble of collapsed buildings, awaiting rescue or recovery.^v

An estimated 1.1 million women and girls in the Gaza Strip remain in dire need of humanitarian assistance. Furthermore, an estimated 1.5 million people are internally displaced,^{vi} including

an estimated 744,430 women and girls.^{vii} Due to the increased flow of internally displaced persons, UNRWA designated emergency shelters are severely overcrowded, resulting in gender specific risks. In order to enable women and children to be inside the shelters, a considerable portion of the displaced population, mostly male, have opted to sleep in the open air, increasing their vulnerability to disease and further aerial attacks. Simultaneously, women and children are more likely to be trapped collapsed buildings.

Recommendations:

» Urgently address the deepening humanitarian crisis through an immediate humanitarian ceasefire to prevent further loss of lives. The protection of all civilians – men, women and children - humanitarian workers, and civilian infrastructure, including health care facilities, shelters and schools, must be guaranteed in accordance with international humanitarian and human rights law.

2

Call for unrestricted and sustained humanitarian access to the Gaza Strip, to ensure the provision of life-saving aid, including food, water, fuel, and health supplies, and the restoration of communication infrastructure

Despite the escalating and acute humanitarian needs and depleting of essential supplies, access to life-saving aid, including water, food, electricity and health supplies, has been cut off for the 2.2 million people in the Gaza Strip. The limited entry of fuel is of key concern, as fuel is essential for operating generators in shelters, health care and desalination facilities. Furthermore, dignified living conditions have become impossible in overcrowded shelters which are facing extreme shortages of basic life-saving supplies. These compounding factors have brought humanitarian service provision in the Gaza Strip to the brink of collapse. Service providers are overwhelmed and unable to address the specific needs of the population and in particular most vulnerable groups, such as female-headed households, pregnant and lactating women, adolescent girls, people with disabilities, children, the elderly, and people with chronic diseases. More aid – food, water, medicine and fuel – must enter Gaza safely, swiftly and at the scale needed, and must reach people in need, especially women and children, wherever they are.^{viii}

Furthermore, the immense psychological toll of the crisis on the population is of serious concern. Prior to the recent escalation, depression levels among women and men alike were extremely high, and 54 per cent of men in the Gaza Strip showed signs of anxiety and depression, the highest numbers across the region.^{ix} More than 543,000 children were identified in need of mental health and psychosocial support following six rounds of armed conflict since 2008.^x Suicide rates in the Gaza Strip have been rising over the past 10 years, particularly affecting young men who constitute 75 per cent of all suicide deaths.^{xi}

As shown by global learning, humanitarian crisis has gendered impacts. Women and girls often face pre-existing inequalities before the emergencies, which is exacerbated by humanitarian crisis. Gendered protection risks are also of key concern, including for adolescent boys and men, who have assumed additional roles such as distribution of available relief items, increasing their exposure and placing them at higher risk of attacks. Women and girls often deprioritise themselves in crisis situations, reducing consumption when families become food insecure, which has severe impacts particularly for lactating women and young women. Gaps in access to basic services affect women disproportionately as they are more likely to be the primary care giver, taking the responsibility for the functioning and maintenance of the household, and looking after of the children, sick and elderly.

- » Ensure the entry of unrestricted humanitarian aid at scale, including food, water, fuel, solar batteries and health supplies, to urgently address the rapidly deteriorating humanitarian situation on the ground.
- » Prioritize the provision of immediate and ongoing mental health and psychosocial support services in response to the enormous psychological toll of the current crisis on thousands of people, especially children.
- » Ensure the restoration of sustained communication infrastructure and internet connectivity as an essential service, in order to address the psychological and practical needs for communicating with loved ones within the Gaza Strip and the Occupied Palestinian Territory (OPT), and beyond.
- » Ensure that the delivery of humanitarian aid considers the specific needs of 1.1 million affected women and girls, including gender-based violence (GBV) risk mitigation.

Ensure that women and girls have access to lifesaving gender-specific items, services and gender-responsive humanitarian cash transfers

Displaced women and girls have unique and urgent needs and vulnerabilities that must be identified and addressed. The declining availability of water and hygiene supplies in local markets in the Gaza Strip coupled with inadequate access to toilets and private sanitation facilities within shelters exposes women and girls to the risk of diseases and infections, while also compromising their dignity. An estimated 575,000 women and adolescent girls of reproductive age in the Gaza Strip are facing critical gaps in their access to health services, including GBV response services and comprehensive sexual and reproductive health services, care for chronic conditions and new-born care. This is particularly problematic for the estimated 155,000 pregnant and lactating women and adolescent girls in the Gaza Strip^{xii} and the 5,522 women and girls due to give birth in the next month. Simultaneously the crisis is increasing the risk of premature births, posing limitations to breastfeeding and causing severe limitations to sanitation for both mothers and children. Due to limited access to health services and medication, women of all ages are facing increased health risks, particularly elderly women, people with disabilities and those with chronic diseases. The overcrowded shelters; shortages of non-food items, such as dignity kits, mattresses and blankets; poor sanitation conditions; and limited privacy also raise serious protection concerns for women and girls.

Recommendations:

- » Ensure women and girl's urgent access to life-saving non-food items: this requires prioritizing and pre-positioning critical and life-saving supplies at border locations, such as hygiene and dignity kits and commodities needed to provide the Minimum Initial Service Package for sexual and reproductive health.
- » Urgently address, to the greatest extent possible, women's and girls' access to shelter and temporary safe spaces along with segregated water, sanitation and hygiene facilities.
- » Urgently provide psychological support to women and girls who may be exposed to different types of violence, including gender-based violence.
- » Prioritize access to health, including access to community-based health systems and adolescent responsive health care.
- » Ensure the delivery of humanitarian cash transfers to female-headed households.

» Ensure collection and dissemination of sex, age, and disability disaggregated data, and integration of gender analysis in the multi-cluster and cluster specific assessments. Emergency response plans, and monitoring and evaluation frameworks need to have gender, age, disability disaggregated indicators.

<u>4</u>

Support women's, youth and girl-centered organizations to engage and lead in the humanitarian response to the crisis

Women and girls' voices and perspectives are crucial to effectively address the diverse needs of the civilian population. Women's organizations are best placed to consult women and adolescent girls to inform the design of humanitarian program and monitoring mechanisms to uphold the joint principle of accountability to affected populations in a humanitarian intervention. Women's organizations, youth groups and girl-centered organizations, with deep rooted connection and trust within marginalized communities, are well equipped to identify the hardest-to-reach populations in need of essential gender-tailored humanitarian aid. These organizations play a central role in the delivery of immediate and longer-term humanitarian response, providing essential and lifesaving services to the most vulnerable groups.

Recommendations:

- » Support local women's, youth and girl-centered organizations in the Gaza Strip and the OPT to actively participate in the planning, coordination and delivery of the humanitarian response, through participating in cluster coordination mechanism, inter-agency needs assessments, development of joint strategies and work plans, the delivery of the aid, as well as monitoring and evaluation to ensure that the humanitarian response to the crisis is tailored to prioritize the needs of these specific groups.
- » Commit adequate funds, including emergency funds, to support women's and girl-centered organizations operating in the Gaza Strip to ensure their participation in humanitarian response, including through fully funding the <u>Women, Peace, and Humanitarian Fund</u> (WPHF) Emergency Appeal for Palestine.

Resources

UNRWA, Rapid Gender Analysis: Gendered Impacts of The October 2023 Escalation in Gaza

UN Women, <u>UN Women Rapid Assessment and Humanitarian Response in The Occupied Palestinian</u> <u>Territory</u>

Gender Based Violence Area of Responsibility, <u>Gaza Crisis: Gender Based Violence Concerns and</u> <u>Priorities Information & Advocacy Note: 20 October 2023</u>

UNICEF, Escalation Humanitarian Situation Report No. 4

¹ The Regional Gender in Humanitarian Action Working Group in the Arab States/Middle East and North Africa (RGiHA-AS/MENA) serves as the coordination, knowledge management, and advocacy platform on the integration of gender into humanitarian action in the Arab States region. The RGiHA-AS/MENA core group consists of representatives of regional IASC member agencies, including UNDP, UNFPA, UNICEF, UNRWA, WFP, WHO, and other relevant regional organizations, including Oxfam, and VOICE. The RGiHA-AS/MENA is co-chaired by UN Women and OCHA.

ⁱⁱ The Policy is accompanied with the <u>IASC Gender Handbook for Humanitarian Action</u>, the <u>IASC Gender with Age Marker (GAM)</u> and an <u>Accountability Framework</u> that elevates the accountability of the Humanitarian Country Team and sector leads in ensuring implementation of the Policy, by demonstrating leadership on women's empowerment in all aspects of the planning and programming of humanitarian action.

[&]quot; UNCTAD, Report on UNCTAD assistance to the Palestinian people

^{iv} <u>OCHA, Hostilities in the Gaza Strip and Israel - reported impact</u> | Day 30, 5 November 2023

^{*} OCHA, Hostilities in the Gaza Strip and Israel - reported impact | Day 30, 5 November 2023

^{vi} <u>OCHA, Hostilities in the Gaza Strip and Israel - reported impact</u> | Day 30, 5 November 2023

vii UN Women estimate as of 6 November 2023

viii Statement by Principals of the Inter-Agency Standing Committee, on the situation in Israel and the Occupied Palestinian Territory, 5 November

 $^{^{\}mbox{\tiny ix}}$ UN Women, International Men and Gender Equality Survey (IMAGES) Palestine, 2018

^{*} UNICEF, Escalation Humanitarian Situation Report No. 4, 2 November 2023

xⁱ UNRWA, <u>Rapid Gender Analysis: Gendered Impacts of The October 2023 Escalation in Gaza</u>

xⁱⁱ UNICEF, <u>Escalation Humanitarian Situation Report No. 4</u>, 2 November 2023