



مركز شؤون المرأة - غزة
Women's Affairs Center - Gaza



**Research Paper on:
War of 2023-2024 on Gaza: Reality of Injured
Women and Girls**



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2024

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War of 2023-2024 on Gaza: Reality of Injured Women and Girls

Introduction:

The ongoing genocide in the Gaza Strip has precipitated a catastrophic reality affecting all walks of life, with no demographic group spared. Among the most severely impacted are women and girls, who have become increasingly marginalized and vulnerable; their protection has been significantly compromised by the persistent conflict and state of emergency, exposing them to heightened risks of death, detention, injury, repeated displacement, and pervasive suffering. Specifically, injured women and girls are subject to elevated challenges as a result of the war, having sustained injuries due to targeted airstrikes, sniper fire, and arbitrary inhumane detention conditions. Consequently, injured women and girls may become part of a growing population of people with disabilities (PWDs), potentially enduring lifelong physical, psychological, social, and economic ramifications due to their newly acquired permanent disabilities. This will impose substantial challenges and ongoing suffering on this already vulnerable population dictated by the nature and severity of their injuries.

The circumstances resulting from injuries sustained by women and girls in this war have been extremely grave and complex as multiple factors intertwine to amplify the impact of these injuries. Injured women and girls have encountered significant barriers to accessing constant medical and healthcare services in light of the near-total collapse of the healthcare system in the Gaza Strip.

This collapse is the result of the systematic and deliberate destruction of the health sector, compounded by recurrent displacements and overwhelming strains on healthcare services caused by the massive influx of injured persons in the aftermath of the almost daily massacres. Consequently, death tolls have increased, especially given that triage protocols, which prioritize treatment based on the severity of injuries, have become an unavoidable and grim necessity. Several reports and field studies underscore the disproportionate suffering of women and girls in the Gaza Strip, particularly their heightened vulnerability to death and injuries during times of war, compared to other population groups. For instance, a study on the effects of the Israeli war of 2021 on Gaza carried out by Jumaa (2021) indicates that girls are impacted by bombardment, with many losing their lives alongside their relatives, and those who survive often endure severe physical injuries that may lead to disabilities, thereby impairing their ability to perform daily activities. Additionally, they experience substantial psychological trauma, compounding the challenges they face in their everyday lives. Furthermore, Ismail (2014) points out that women and girls are particularly susceptible to assaults, crimes, and systemic violations that have persisted for decades, leading to hundreds of victims among the Palestinian population and women and children in particular.

The nature of these violations emphasizes the critical need for effective protection measures to safeguard women and girls from violence and the ongoing violations of their rights, regardless of their location, be it in the West Bank, Gaza Strip, or abroad. In the same regard, Al-Halabi (2024) highlights that the impacts of this war disproportionately affect women and other marginalized groups, based on the premise that women suffer from the effects of colonialism more acutely than men. Statistical evidence indicates that the consequences of the ongoing genocide predominantly affect women, who bear the responsibility of nurturing future generations and play a fundamental role in the Palestinian cause and resistance. Al-Samak (2021) further points out that the recurrent aggressions on the Gaza Strip in recent years have precipitated adverse repercussions across all facets of life, including social, psychological, and economic aspects. Women and girls with disabilities (WGWDs) and those injured face a spectrum of violations in both public and private spheres. These violations infringe fundamental rights, such as the right to life, the right to safety and protection, the right to shelter, as well as the right to specialized healthcare services for WGWDs and injured women and girls.

Paper Objectives:

- 1- To examine the reality of Palestinian women and girls who sustained injuries during the war on the Gaza Strip.¹
- 2- To evaluate the appropriateness and adequacy of services provided to women and girls injured during the war on the Gaza Strip.
- 3- To identify the existing and proposed protection mechanisms for women and girls injured during the war on the Gaza Strip and evaluate their effectiveness in meeting the specific needs of this population.

Study Scope:

This study was conducted in July 2024 and involved a sample of (111) women and girls who sustained injuries during the war on the Gaza Strip (2023–2024). The participants are residents in displacement camps and shelters located in Khan Younis and the Central Governorates.

Methodology:

The researcher employed a mixed-methods approach, integrating descriptive, analytical, and inductive methodologies, which included both quantitative and qualitative techniques. To collect quantitative data, a questionnaire consisting of 48 items categorized into four primary domains was developed. In addition, (10) individual in-depth interviews were conducted with persons working in relevant organizations.

This study focuses exclusively on women and girls who sustained injuries during the war on the Gaza Strip (2023–2024) and are currently residing in the Strip.

1. These are the women and girls who sustained injuries of varying degrees as a result of the war on the Gaza Strip during the period from October 7, 2023, until today

2. The war on the Gaza Strip 2023–2024: This refers to Israel's official declaration of war on the Gaza Strip, launched on October 7, 2023, and has continued until the present day in August 2024.

Recent statistics indicate that there are (92,589) injured persons, with women and children accounting for (64,000) or 70% of this total. A purposive sampling technique was employed to select a sample of (111) women and girls living in both formal (organized) and informal (random) displacement camps and shelters in Khan Younis and Central Governorates. The same sampling technique was employed to select participants for the in-depth interviews.

Findings:

Characteristics of the Research Sample:

The study sample consisted of (111) injured women and girls (see Tables 1 and 2 - Appendix No. 1). The findings indicate that 42.3% of the participants are married, 31.5% are receiving formal education, and 35.1% are between the ages of 19 and 25. Also, 40.5% were injured between October 2023 and December 2023, with 32.4% of their injuries being caused by bombardment, gunfire, and flying shrapnel during attempts to escape bombings. Moreover, 28.8% of injured women and girls have been displaced five times, and 30.6% have sustained permanent mobility disabilities due to their injuries.

In terms of livelihood, 36.0% of respondents rely on humanitarian aid and 32.4% depend on community assistance to meet their basic needs, with a substantial percentage of 73.9% reporting earning less than 1,000 shekels per month.

Regarding incidence rates of violence, 31.5% of respondents have reported experiencing violence, with verbal abuse being the most prevalent form at 34.3%. Husbands have been identified as the primary perpetrators in 48.6% of the cases. Moreover, 51.4% of injured women and girls are receiving various services, with health services being the most prominent at 59.6%.

Health, Social, Economic, and Psychological Implications of the War on Injured Women and Girls:

The findings of this paper indicate that the situation for women and girls injured during the 2023–2024 war on the Gaza Strip has been particularly acute. A field survey examining the conditions of Palestinian women and girls affected by the genocidal war reveals that the injuries they sustained, whether classified as moderate, severe, or resulting in permanent disabilities, are expected to have excruciatingly painful and long-lasting repercussions. These impacts are likely to affect their physical health, socioeconomic conditions, and psychological well-being for years to come.

Injured women and girls have already endured extreme hardship and trauma throughout the war. They represent 75% of the total injured population and 70% of those reported missing. The war has exaggerated their suffering, with direct attacks on their lives resulting in injuries that, in many cases, lead to permanent disabilities. They have also suffered from displacement, water shortages, and malnutrition. The compounded impact of these conditions, along with a critical shortage of healthcare services, constitutes a violation of the fundamental rights of injured women and girls and has further exacerbated their physical and mental health challenges. The significant psychological toll of the war, in conjunction with the loss of any sense of security, has profoundly hindered their ability to recover and live with dignity.

Health Implications:

Health conditions of injured women and girls in the Gaza Strip have significantly deteriorated during the 2023-2024 war, whereas the findings reveal a marked decline in overall health, with health levels dropping to 55.13% (Table 1). Approximately one-third of surveyed injured women and girls have sustained wounds from sniper fire, flying shrapnel, and bombing during abrupt displacements amid intense bombardment and airstrikes as they attempted to flee and save their families. Consequently, 30.6% of them are suffering from permanent mobility disabilities. Results also indicate that one-third of the injured women and girls now depend on others to manage their daily affairs.

The provision of first aid services to these injured women and girls has been inadequate, as medical teams have failed to meet the established standards of care and many respondents have reported not receiving regular medical care or having access to free medications. They have also faced significant barriers in obtaining follow-up medical care and psychological support. Furthermore, findings underline a shortage of specialized female medical staff, further compounding the challenges faced by these women and girls under the severe conditions of war.

In reflection on their health struggles, an injured woman stated, "I now require constant medical care and regular health follow-ups, but the ongoing war continues to impede our access to medication and proper healthcare services."

Needs of Injured Women and Girls:

The results indicate that the most significant unmet need for injured women and girls within the health sector is the lack of female medical staff to provide care to them, as reported by 39.3% of respondents. Wounded women and girls have endured painful and harsh circumstances, grappling with the severe consequences of their injuries while confronting multifaceted challenges due to the absence of security and protection measures, which exacerbates their vulnerability amidst the protracted war.

The ongoing war has led to a total collapse of women's daily life-sustaining resources, negatively impacting all aspects of their lives, owing to repeated displacements, forcible transfers, separation of families, the breakdown of safety and protection networks, and shifts in traditional gender roles. These factors have placed additional burdens on injured women and girls.

The feedback from injured women and girls reflects a decline in their circumstances, particularly noted to be minimal in the specific areas where their conditions were systematically monitored in the field.

The findings of this paper also identify significant gaps in humanitarian aid and services, particularly in health, economic empowerment, and psychosocial support areas. These gaps have exacerbated the suffering of injured women and girls, who are now forced to assume new roles and bear additional burdens due to their injuries.

Health Services Provided to Injured Women and Girls:

The paper reveals that the services offered to respondents were inadequate and failed to meet expectations across the four domains examined in the field research. Among the (111) participating women and girls, only about half (51.4%) have reported receiving services from various organizations after sustaining their injuries. Even among those who did receive services, there was notable dissatisfaction regarding both the nature and quality of the services. Many respondents have expressed frustrations with the limited access to services, which failed to meet their established quality standards. Such inadequacy in service provision can primarily be attributed to the complete collapse of all sectors due to the genocide being perpetrated against the Gaza Strip.

The physical injuries women and girls have sustained from the bombing of residential areas, gunfire exchange during armed conflicts, and flying shrapnel from intense airstrikes have caused severe suffering for them and, in some cases, have led to amputations and injuries to vital organs. Their suffering is further exacerbated by inadequate healthcare services and limited medical resources. The deliberate targeting of hospitals further hinders their access to necessary treatment.

The dire living conditions injured women and girls have been undergoing, including overcrowding and malnutrition, deepen their plight and contribute to the spread of diseases. Survey results indicate that the overall health status of injured women and girls is critically low. Specifically, 55.1% of respondents have reported health problems, with one-third suffering from mobility disabilities due to shrapnel-related injuries.

Many of these women and girls have not received essential medical care, including first aid and psychological support, and they have faced significant barriers in accessing medications. Consequently, these women and girls are confronted with a painful reality marked by increased vulnerabilities and the collapse of life-sustaining resources, compelling them to bear new burdens and assume new roles within their communities.

Table No. (2) Items of the First Domain Health Services for Injured Women and Girls

No	Items	Total	Percentage
1	I received appropriate first aid and emergency services	194	58.33%
2	Healthcare and medical staff treated me with dignity and respect	161	48.33%
3	I have access to routine medical care and follow-up services	157	47.00%
4	I receive my medications at no cost	182	54.67%
5	I attend regular follow-up appointments for my injury	144	43.33%
6	I received healthcare aid as part of the healthcare services I received as an injured woman/girl	215	64.67%
7	Specialized teams provided me with psychosocial support services	144	43.33%
8	Mental health services contributed to my resilience and psychological recovery	228	68.33%
9	I received the necessary supportive supplies and tools as an injured woman/girl	190	57.00%
10	Ambulance services ensured my safe transportation when needed	243	73.00%
11	Female staff members are available to assist us as injured women and girls	131	39.33%
12	Accessing healthcare services during and after my injury was easy	167	50.00%
13	I was able to access medical referrals as an injured woman/girl easily	230	69.00%

The results presented in the table above and insights collected from in-depth interviews indicate that injured women and girls have been undergoing significant distress due to inadequate healthcare services and essential resources, such as clean water and medicine. They have been also grappling with extreme poverty, which is further exacerbated by the high costs of medical treatment and transportation. In addition, the lack of comprehensive post-injury care has intensified their hardship as they seek treatment.

The unpreparedness of community organizations to provide necessary support to these women and girls during the ongoing genocide has compounded their struggles. Food and medicine insecurity has also had detrimental effects on their health and recovery process. Frequent displacement has aggravated the pain associated with their injuries, as the constant movement and reliance on primitive forms of transportation have led to further health complications.

Thus, many of these individuals have become part of the growing population of PWDs. Their health conditions are further compromised by several factors, including inadequate responsiveness of service providers, frequent displacements and closures or relocation of organizations and centers, as well as the near-total collapse of multi-sectoral services, which have been severely disrupted by the unprecedented conditions of the war. This has led to the suspension of protection, security, and aid programs, as well as other essential services, thereby depriving injured women and girls of access to integrated multi-sectoral care.

Moreover, the substantial lack of accessible data on injured women and girls has hindered the ability of relevant organizations to effectively reach them and has weakened the linkage between injured women and girls and service providers, limiting their ability to benefit from the minimal available multi-sectoral services. Experts and specialists also have pinpointed the significant challenges civil society organizations and women's organizations, in particular, face in delivering aid and assistance to injured women and girls, arising from the closure of border crossings, restrictions on aid entry, and incidents of looting and theft of aid supplies, all of which heighten the suffering of this vulnerable population. Service providers have also reported that injured women and girls continue to endure severe health challenges as they are in continuous need of proper medical care. This care has become increasingly unavailable or inadequate owing to the deterioration of the healthcare sector, the impact of the Israeli siege, and restrictions on the entry of medical supplies.

Social Implications:

On the social level, insights from in-depth interviews indicate that injured women and girls would experience social isolation, a condition they may inadvertently prefer, and a reluctance to accept their newly imposed circumstances. One respondent corroborated this, stating, "I cannot believe what has happened to me. I escaped imminent death. I constantly feel distressed and I have lost trust in everything."

Survey findings reveal that 49.4% of respondents (see Table 1) have reported experiencing alarming social conditions, with difficulty in adapting to their post-injury circumstances as the predominant negative emotion, reported by 39.3%. Additionally, family dynamics were adversely affected, with 64% of injured married women indicating that their husbands had discussed the possibility of divorce following their injuries. Two-thirds of injured women and girls have reported experiencing harassment, and 55.67% indicated a lack of empathy from their communities. Additionally, they have faced barriers to accessing care and protection services and were deprived of adequate humanitarian shelter in displacement camps. The social conditions for injured women and girls have significantly deteriorated during the 2023–2024 war in the Gaza Strip as displacement and the severing of family ties have led to an erosion of social relationships. The absence of community support has significantly hindered the ability of injured women and girls to cope with their new circumstances, intensifying their feelings of helplessness. Reports indicate a rise in domestic violence rates, including both physical and psychological abuse, which has adversely impacted their recovery process.

Findings indicate that approximately 49.4% of injured women and girls are living in dire social conditions, 32.4% rely on aid, and one-third experience violence, with verbal abuse identified as the most common form. Husbands have often been identified as the primary perpetrators of this violence.

The constant distress, social isolation, and loss of familial support experienced by these women and girls have compounded their hardships in displacement camps and shelters.

Table No. (3) Items of the Second Domain Social Reality of Injured Women and Girls

No	Items	Total	Percentage
1	I consistently experience a sense of distress following my injury	144	43.33%
2	I am deprived of the emotional support and familial assistance I need following my injury	139	41.67%
3	I have encountered difficulties in communicating and interacting with people since my injury	143	43.00%
4	I perceive my living conditions in displacement centers as unsuitable	160	48.00%
5	I suffer from a persistent feeling of isolation following the injury	140	42.00%
6	I perceive a significant lack of protection, safety, and security for me as an injured woman/girl	156	47.00%
7	I lack adequate shelter as an injured woman/girl	180	54.00%
8	I feel unable to adapt to my circumstances and surroundings after the injury	131	39.33%
9	I experience difficulty in maintaining effective communication with my family	178	53.33%
10	I experience various forms of harassment	215	64.67%
11	I experience a pervasive sense of helplessness as a result of my injury	165	49.67%
12	I lack feelings of compassion and empathy from the community toward me as an injured woman/girl	185	55.67%
13	There is a critical gap in humanitarian support services that address the specific needs of injured women residing in displacement camps and shelters	156	47.00%
14	My husband has discussed the possibility of divorce multiple times since my injury	213	64.00%

Injured women and girls have endured significant vulnerabilities due to inadequate protection and security measures, which have been further worsened by the lack of adequate shelter. This situation has left them both physically and emotionally incapacitated, impeding their ability to adapt to their new circumstances. They have suffered from substantial communication barriers with their own families and immense societal harassment, leading to a profound sense of yearning for compassion and empathy. Injured married women have reported receiving threats of divorce from their husbands following their injuries. In addition, they have expressed feelings of compromised privacy and security due to the ongoing war, having witnessed violent military attacks in close proximity to their homes or designated so-called safe areas. Around 78% of these women and girls have lost their homes; among them, 55.6% are now residing in public shelters, 25.2% in tents, 15.8% with neighbors or family members, and 1.4% are homeless, living on the streets. Furthermore, 75.9% have encountered challenges in meal preparation, underscoring the broader implications of their injuries.

Protection and Privacy of Injured Women and Girls:

The weight of the war on the protection and privacy of injured women and girls was underlined in the discussions with key informants, who have emphasized that Palestinian women and girls injured during the war now constitute one of the most vulnerable groups who need continuous protection.

These women have faced significant challenges in maintaining privacy, particularly in displacement areas that lack the basic infrastructural requirements to ensure privacy.

Injured women and girls have voiced these concerns, noting, "Even before sustaining our injuries, our privacy was compromised due to the living conditions in tents and shelters. But, after being injured, the situation became even more complex as the facilities are not adapted to meet our specific needs."

The results indicate that the services provided to injured women and girls were both scarce and inadequate. Of the (111) surveyed women and girls, 51.4% have reported receiving some form of services; however, the overall level of satisfaction with these services was low, as their quality has failed to meet expectations. This gap can be largely attributed to the extensive collapse of all sectors caused by the ongoing war. Additionally, findings reveal that the social conditions of injured women and girls were rated at 49.4%, slightly higher than the economic conditions, rated at 48.3%. These figures underline the substantial challenges concerning the delivery of essential services to this vulnerable population.

The following conclusions can be drawn based on the findings discussed above regarding the impact of war on injured women and girls, as well as their suffering during the genocide:

1- The ongoing war has triggered profound shifts in the structure of Palestinian families, disproportionately increasing the burdens endured by injured women and girls.

2- These women and girls have not received adequate medical care and rehabilitation services, leading many to become confined to their homes without the required support systems.

3- The absence of safe spaces within shelters has intensified the psychological distress experienced by injured women and girls.

4- The influx of displaced persons has further violated the privacy of injured women and girls and compromised their sense of security.

5- These women and girls have endured a heightened sense of insecurity as they have witnessed relentless bombardment in close proximity to their homes or so-called safe areas

6- Community organizations were not prepared to address the unprecedented scale of the humanitarian crisis arising from the ongoing genocide, which has adversely undermined their capacity to respond to the specific needs of injured women and girls.

7- The services offered to these women and girls have proven to be inadequate and limited in comparison to their extensive needs, hindering their access to essential care and exposing them to increased humiliation and exploitation.

8- There has been a notable rise in violence directed towards injured women and girls during the war.

9- These women and girls have struggled to adapt to their new reality as injured persons and victims, mainly given the absence of familial support as their families have struggled to meet even basic needs.

Economic Implications:

The war has had profound economic repercussions for injured women and girls; interviewed key informants noted that these injuries have deeply worsened the financial hardships faced by this vulnerable population. Post-injury circumstances have entailed increased expenses related to addressing the multifaceted costs associated with their care and recovery.

Voicing their situation, injured women and girls stated, "Our injuries have increased our financial needs and further diminished our ability to provide for ourselves. Before these injuries, we were the primary breadwinners for our families; however, we are now unable to work."

The war has exacerbated poverty and unemployment rates among injured women, whereas their injuries have further restricted their access to employment opportunities and subjected them to discrimination. Findings from this study indicate that 73.9% of respondents earn less than 1,000 shekels per month, and 32.4% depend on community aid, which underscores their economic vulnerability. Injured women have also faced additional financial burdens and challenges in accessing medications and essential services due to their limited financial resources and soaring living costs. Many have reported experiencing discrimination when seeking assistance, often compelling them to borrow money from others to meet their basic needs, further entrenching their poverty and heightening their economic vulnerability.

Economic Services Provided to Injured Women and Girls:

Findings indicate that the services provided to injured women and girls were weak and inadequate; among the (111) surveyed women and girls, 51.4% have reported receiving some form of services. However, their satisfaction levels with these services were low, mainly due to their poor quality. The economic situation of injured women and girls was the worst compared to the other four assessed domains: psychological, health, and social realities.

Moreover, around 56% of respondents have not received adequate financial support, further compounding their ability to manage their needs in light of rising costs and shortages of medications. Also, injured women and girls have experienced severe shortages of basic needs such as food, water, and clothing, particularly in shelters, which lacked the most fundamental living conditions. About 48.3% of respondents have reported facing substantial financial strains in affording essential medications.

Table No. (4) Items of the Third Domain Economic Reality of Injured Women and Girls

No	Items	Total	Percentage
1	I am unable to meet my needs as an injured woman	148	44.67%
2	I require a significant amount of financial support to afford my medication expenses	118	35.33%
3	I encounter challenges in accessing services due to insufficient financial resources	155	46.67%
4	Our financial resources have been exhausted as a result of my injury	129	38.67%
5	The cash assistance I receive is insufficient to meet my needs	186	56.00%
6	I perceive a lack of adequate financial support services tailored for me as an injured woman/girl	161	48.33%
7	I face discrimination in the distribution of financial assistance allocated for us as injured women/girls	198	58.33%
8	I have had to borrow money to meet my financial obligations arising from my injury	172	51.67%
9	I struggle to access food distribution programs	149	44.67%
10	My injury has increased our household expenses, adversely affecting the family's overall needs	193	58.00%

Conclusions Related to the Economic Reality of Injured Women and Girls

The conclusions presented herein are drawn from discussions with various stakeholders, emphasizing the core insights of the analytical paper. A qualitative data collection methodology served as a supportive phase for subsequent quantitative research. To this end, (10) individual in-depth interviews were conducted with experts and specialists, leading to the following key findings:

1- **Access to Medical Facilities:** Injured women and girls have encountered significant challenges in accessing hospitals and clinics for follow-up care due to the limited availability of transportation. This situation has forced them to move between governorates and bear the soaring transportation costs due to the disruption of ambulance services.

2- **Discrimination in Aid Distribution:** Aid recipients have reported experiencing discrimination in the allocation and distribution of assistance. The failure to prioritize aid for injured women and girls has compelled many to borrow money or sell personal belongings, such as jewelry, to cover their immediate and critical needs and medical expenses.

Psychological Implications:

The war has had a profound impact on the psychological well-being of injured women and girls, who are grappling with, and are likely to continue grappling with, feelings of frustration, self-blame, and despair.

One injured woman reflected on her psychological state, noting, "I am living in a state of profound shock and cannot fathom the permanent disability I will have to endure for the rest of my life; I will never overcome this feeling of psychological oppression."

Injured women and girls have faced vast challenges stemming from inadequate access to healthcare services, which not only constitutes a violation of their rights but adversely worsens their mental and physical health conditions. Approximately 51% of respondents have reported a deteriorating psychological state, with 34.3% experiencing persistent feelings of fear and hypervigilance. These findings underscore their ongoing suffering and psychological vulnerability, which are further aggravated by financial burdens, intensifying their mental distress. Additionally, these women have experienced compounded feelings of anxiety, distress, guilt, and stigma, rendering their future prospects daunting. Despite these severe psychological challenges, they have not received support from the designated psychological support units within the displacement centers.

Psychological Services Provided to Injured Women and Girls:

Analysis of responses from women and girls injured and affected by the 2023–2024 war in the Gaza Strip reveals that the psychological support services provided to them were inadequate and have failed to meet the established quality standards. Furthermore, these women and girls have not received an adequate number of psychological support sessions or training to help them cope with the physical and emotional challenges associated with their injuries.

The psychological distress experienced by injured women and girls was worsened by their exposure to violence, which has significantly impacted their mental health. This distress has manifested through a wide range of symptoms, including persistent emotional and psychological tension, heightened hypervigilance, panic, terror, and an overarching sense of fear.

Table No. (5) Items of the Fourth Domain Psychological Reality of Injured Women and Girls

No	Items	Total	Percentage
1	I consistently experience feelings of distress and psychological tension following my injury	183	55.00%
2	I have a persistent sense of self-blame and guilt	178	53.33%
3	I endure a persistent sense of anxiety due to my condition as an injured woman/girl	126	38.00%
4	I live in a constant state of hypervigilance and intense fear	114	34.33%
5	I always feel exhausted and worn out	168	50.33%
6	I experience irrational thoughts associated with my status as an injured woman/girl	167	50.00%
7	I dwell in a state of sadness and grief over my situation after the injury	201	60.33%
8	I feel stigmatized as a result of being labeled as injured	219	65.67%
9	I become tense and react impulsively because of my health condition	165	49.67%
10	I find the future to be particularly daunting following my injury	167	50.00%
11	The psychological support unit conducted a follow-up visit with me at the displacement camp	182	54.67%

Despite the extensive prior experiences of organizations in the Gaza Strip in managing crises and emergencies, the current war, being unprecedented in its intensity, scale, severity, and duration, has pinpointed significant weaknesses in the emergency committees' response plans and strategies. These organizations were inadequately prepared to address a scenario involving a genocidal war, which has systematically deprived injured women and girls of their right to access essential services and have their needs met as stipulated by law.

Conclusions Related to the Psychological Reality of Injured Women and Girls

The following key conclusions were drawn from discussions with relevant stakeholders, qualitative data analysis, and insights obtained from in-depth interviews with key informants:

1- **Inadequacy of Psychological Interventions:** Psychological support interventions, like psychological first aid, psychosocial support, as well as psychological well-being, integrated security, self-care, and emotional support training, have failed to take the specific needs and unique conditions of injured women and girls into account.

2- **Psychological Bearings:** Injured women have reported experiencing a pervasive sense of hypervigilance, acute fear, chronic anxiety, heightened tension, impulsive emotional reactions, and susceptibility to irrational thoughts regarding their health conditions.

3- **Challenges Facing Injured Women and Girls:** Experts and service providers have indicated that injured women and girls face a challenging and multifaceted future, characterized by substantial obstacles at both health and psychological levels. It is anticipated that their feelings of stress and depression will intensify as poverty and limited access to healthcare continue to persist.

Essential Short-Term and Long-Term Interventions for Protecting Women and Girls Injured and Affected by the 2023-2024 War in the Gaza Strip:

To enhance the conditions of injured women and girls and promote their rights within society, it is imperative for all stakeholders, expressly relevant organizations, to undertake comprehensive efforts. This objective can be achieved through mobilizing resources, fostering networks, and advocating for the rights of injured women and girls to ensure their full access to all their rights and opportunities that promote recovery and resilience. Key interventions include:

1- Establishing safe spaces for injured women and girls to engage in hobbies and express their needs freely.

2- Providing essential health services including personal hygiene products and monthly dignity kits.

3- Ensuring adequate shelter conditions within displacement camps and shelters in addition to providing essential support services to injured women and girls.

4- Activating multi-sectoral services to ensure that women and girls have unrestricted access to necessary services.

5- Allocating fixed monthly financial assistance for injured women and girls through the Ministry of Finance.

6- Establishing a safety network involving various relevant ministries and organizations to ensure effective provision of aid.

7- Developing national protocols for the medical, psychological, and social rehabilitation of injured women and girls.

8- Enhancing economic empowerment for women through providing financial support and facilitating the establishment of small businesses.

9- Facilitating overseas medical referrals to guarantee specialized treatment for this population.

10- Raising community awareness to combat gender-based violence by implementing targeted initiatives.



Recommendations:

1- There is an urgent need to establish a linkage system with service providers to ensure comprehensive multi-sectoral support for women and girls injured and affected by the 2023-2024 war on the Gaza Strip.

2- It is essential to develop urgent responsive interventions that address the newly imposed health, social, economic, and psychological challenges faced by injured women and girls.

3- It is critical to ensure the protection of both the physical and psychological safety of injured women and girls to maintain their dignity during emergencies, crises, and wartime by providing safe shelters and spaces.

4- Relevant organizations must prioritize supporting community resilience, economic empowerment, psychological well-being, and integrated care for injured women and girls through professional responsiveness that facilitates their recovery and adaptation.

5- There is a need to design a systematic approach for conducting field home visits and family counseling sessions for injured women and girls. This approach should incorporate the expertise of medical teams, psychologists, and rehabilitation specialists to ensure the provision of comprehensive care.

6- The Ministries of Health and Social Development, as the official responsible entities, must fulfill their obligation to support injured women and girls. This includes directing resources toward their aid and implementing programs designed to ensure their protection and well-being.

Appendixes:

Appendix 1

Table No. (1) Characteristics of Study Sample Classified by Categorical Variables

Marital Status	Number	Percentage	Educational Level	Number	Percentage	Age Group	Number	Percentage	Injury Period	Number	Percentage
Married	47	47.3%	Illiterate	20	18.0%	15-18	28	25.2%	October - December	45	40.5%
Single	41	38.9%	School Education	35	31.5%	19-25	39	35.1%	January - March	33	29.7%
Divorced	11	9.9%	Diploma	34	30.6%	26-50	31	27.9%	April - June	33	29.7%
Widow	12	10.8%	University Degree or Higher	22	19.8%	50+	13	11.7%	Total	111	100%
Total	111	100%	Total	111	100%	Total	111	100%			

Reason of Injury	Number	Percentage	Original Place of Residence	Number	Percentage	Current Place of Displacement	Number	Percentage	Number of Displacements	Number	Percentage
Gunfire	27	24.3%	North of Gaza	24	21.6%	Khan Younis	70	63.1%	1 Time	4	3.6%
Airstrike	30	27.0%	Gaza	36	32.7%	Middle Area	41	36.9%	2 Times	9	8.1%
House Demolition	18	16.2%	Middle Area	18	14.4%	Total	111	100%	3 Times	11	9.9%
Flying Shrapnel	36	32.4%	Khan Younis	19	17.1%	Source of Income			4 Times	18	16.2%
Total	111	100%	Rafah	14	12.6%	Employee Salary aid	7	6.3%	5 Times	32	28.8%
Did the injury result in a disability			Total	111	100%		40	36.0%	6 Times	25	22.5%
Yes	34	30.6%	Type of Disability	Number	Percentage	Private Business	8	7.2%	7 Times	12	10.8%
Yes	77	69.4%	Mobility Disability	34	30.6%	Family Support	20	18.0%	8 Times		0.0%
Total	111	100%	Psychological Disability	-		Community aid	36	32.4%	9 Times		0.0%
						Total	111	100%	10 Times		0.0%
									Total	111	100%

Table No. (2) Characteristics of Study Sample Classified by Categorical Variables

Income Level	Number	Percentage	Have You experienced violence during the injury period?	Number	Percentage	Form of experienced violence	Number	Percentage	Source of experienced violence	Number	Percentage
Less Than 1000 ILS	82	73.9%	Yes	35	31.5%	Physical	5	14.3%	Husband	17	48.6%
1000-1500	26	23.4%	No	76	68.5%	Psychological	8	22.9%	Father	0	0.0%
1600-2000	1	9%	Total	111	100%	Verbal	12	34.3%	Siblings	8	22.9%
More Than 2000	2	1.8%	Source of experienced violence	Number	Percentage	Sexual	0	0.0%	In-laws	4	11.4%
Total	111	100%	Do you receive services?	Number	Percentage	Extortion and Harassment	2	5.7%	Strangers	5	14.3%
			Yes	57	51.4%	Social	7	20.0%	Representative of the Displacement Center	1	2.9%
			No	54	48.8%	Economic	1	2.9%	Total	35	100%
			Total	111	100%	Total	111	100%			
Type of Services	Health	Legal	Financial	Psychological Support	In-kind Assistance	Total					
Number	34	3	3	10	7	57					
Percentage	59.6%	5.3%	5.3%	17.5%	12.3%	100%					

Appendix 2

Table of Names of Specialists and Experts for Individual In-depth Interviews

#	Name	Title	Organization
1	Sahar Taysir Yaghi	Executive Director	The Palestinian Development Women Studies Association
2	Khalid Muhammad Abu Shuayb	President of Deir Al-Balah Association for Rehabilitation Society	Deir Al-Balah Association for Rehabilitation Society
3	Ismail Abdul Jawad Al-Sheikh	Psychologist (working with injured persons)	Ministry of Health
4	Dr. Abdul Kareem Shaheen	Consulting Rehabilitation Expert (working with PWDs and injured persons)	The Sheikh Hamad Hospital
5	Dr. Mahmoud Al-Hallaq	Physical Therapy Specialist for War Injuries	Sawa Intervention Team
6	Feryal Thabet	Director of the Al-Breij Health Center	Al-Breij Health Center
7	Muhannad Hamdan	Psychologist	Ministry of Health
8	Ramadan Barakah	-	-
9	Mahmoud Abu Mur	Chairperson of the Board of Directors	Alasdiqaa Association for People of Special Needs

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