Israel’s Measures Intended to Prevent Births within Gaza Strip
The International Humanitarian Law (IHL) provides general protection to women like all civilians in times of conflict, including the right to humane treatment at all times and right to protection from hostilities. IHL also takes into account the fact that women are mothers and may be particularly vulnerable to certain forms of violence, so they are in need of special protection as codified in Article (16) of the Fourth Geneva Convention: “The wounded and sick, as well as the infirm, and expectant mothers, shall be the object of particular protection and respect.”

Since the Israeli military aggression started on 07 October 2023, all women in the Gaza Strip have faced multiple grave violations of their rights as civilians. The Palestinian Centre for Human Rights (PCHR) has monitored IOF’s commission of a genocidal act, which is to prevent births in the Gaza Strip.

This report sheds light on the Israeli measures intended to prevent births amid lack of protection from military attacks, poor health services and unsafe access to healthcare, restricted access to adequate food and dire living conditions elevating risks during pregnancy. All these violations have increased miscarriages among pregnant women, preterm labors and stillbirths while many of them fear maternal mortality or stillbirth due to lack of healthcare and ignoring their special needs.

PCHR notes with deep concern the catastrophic conditions of pregnant women in the Gaza Strip. This category is the most vulnerable and in need of lifesaving preventive and curative nutrition interventions.

According to the Ministry of Health in Gaza and United Nations Population Fund (UNPF) in the occupied Palestinian Territory (oPt), there are an estimated 50,000 pregnant women in shelters with no access to adequate food and proper healthcare. Around 5,000 women are due to give birth in the next month with more than 180 giving birth every day. Fifteen percent of them are likely to experience pregnancy or birth-related complications and need additional medical care that is not available.

Reem al-Salem, United Nations Special Rapporteur on violence against women and girls its causes and consequences, explicitly warned, “the reproductive violence inflicted by Israel on Palestinian women, newborn babies, infants, and children could be qualified ... as acts of genocide under Article 2 of the Convention on the Prevention of Genocide...” including “imposing measures intended to prevent births within a group.” “States must prevent and punish such acts in accordance with their responsibilities under the Genocide Convention,” she emphasized.

Israel’s measures intended to prevent births within the Gaza Strip:

Since their aggression launched on 07 October 2023, IOF committed grave and blatant violations of their international obligations against women in the Gaza Strip, in clear contravention of IHL rules under which Israel as the occupying power has duties codified in the 1949 Fourth Geneva Convention and International Customary Law, including the 1907 Hague Regulations that afford protection of civilians, including women, in armed conflicts and in occupied territory.

These violations double the suffering of pregnant women in particular, making them feel in a race against death. They suffer from lack of protection from the military attacks, poor health services and insecure access to healthcare, limited access to adequate food and dire living conditions leading to increased complications during pregnancy.

1. Lack of protection from the Israeli military attacks:

Pregnant women in the Gaza Strip are exposed to Israeli various military attacks without enjoying any particular protection and respect. They are under direct attacks, resulting in killings, injuries, toxic gas inhalations and causing serious psychological and physical harm amid heightened feelings of fear and anxiety and denying them special protection. All of this combined will lead to preventing births and have serious consequences on reproductive health, including a rise in pregnancy pains, miscarriages, stillbirths and premature births. Dina Hani ‘Eleiwa (26) told PCHR:

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“After being exposed to white phosphorus fired by IOF on al-Wehdah Street in Gaza, I suffered from severe suffocation and was 8-month pregnant. I fled to al-Remal Preparatory School and after two weeks, it was my due date so I went to the Patient’s Friends Clinic to check on my baby. The doctor told me that the baby was not moving and died. I was totally shocked and did not want to believe at first because I was 9-month pregnant and could feel the baby’ moving every day. I did another checkup with another doctor on the same day, but he confirmed what the first doctor said, “you lost your baby.” He asked me if I was exposed to white phosphorus and I said yes. He told me it was the reason behind my miscarriage as many women like me lost their babies for the same reason. There was a woman beside me who lost her baby in the same circumstances. I was so sad and worn out mentally as the due date of my baby marked his death.”

Ruwaida Waleed al-Nazli (29) said: “At around 00:50 on 08 October, IOF targeted without any warning al-Mukhabarat (2) Tower, where I lived. I rushed downstairs from the seventh floor while being 6-month pregnant and the tower was collapsing. As soon as I had reached the entrance, the tower completely collapsed behind me. I was scared to death and quickly ran towards the Al-Mashtal Hotel to take refuge. I underwent a c-section 2 years ago when I delivered my first child, and out of fear, the c-section incision opened and started to bleed. I could not go to the hospital due to the relentless bombardment. We stayed that night at the hotel and I took strong painkillers to bear the pain.

In the morning, IOF called the hotel’s administration ordering them to evacuate immediately. I walked while bleeding for 2 hours until I reached al-Shifa Hospital. I arrived at the hospital to find it overwhelmed by people killed and injured, most of them were on the floor due to the large number of casualties. I went to the emergency department, where they only applied a medical tape on the incision. I told them that I needed a checkup and a fetal lung maturity injection which I take in my pregnancy. They told me there was no time for such healthcare as they are busy dealing with large number of injuries in need of lifesaving interventions. In two months, I had no access to proper healthcare due to the relentless bombardment and hospitals forced out of service. My incision was opening up more and more, so I went to al-Sahabah clinic, where doctors decided an instant preterm delivery.

The incision got infected, and fear and running affected my fetus. On 10 January 2024, I had a c-section and gave birth to my baby boy, Waleed. I was so happy to finally meet him, but his lung was not fully developed. My husband took him to the neonatal intensive care unit (NICU) at Kamal ‘Odwan Hospital in northern Gaza as al-Shifa Hospital was out of service. Three days later, the hospital informed us that my baby died after the electricity was cut off due to the heavy bombardment around the hospital and thereby cutting off the NICU’s oxygen supply. On 18 January 2024, I lost my baby and cannot describe how I feel, it was a traumatic experience. All what I think about right now is not giving birth again and having more kids. I do not want to repeat this misery."
Bodour Hani al-Sousi (22) said: “on 11 December 2023, I was displaced in al-Karamah School in al-Sha’af neighborhood that was under heavy bombardment. Suddenly while sleeping on a mattress on the floor, a shrapnel penetrated the classroom’s window and hit the right side of my abdomen. I was so scared fearing that my first baby may get hurt. Thank god there was a nurse with us at the school, so he cleaned and sterilized my wound and calmed me down saying the wound was away from the baby.”

Israa Kamal Mahmoud Abu Nahel (34), a mother of a boy and a girl from al-Sheikh Redwan in Gaza, had a health problem after giving birth to her children 9 years ago, preventing her from having more babies. She said to PCHR’s fieldworkers: “I gave birth to a boy and a girl 9 years ago and since then I could not have more babies due to a health a problem. When I knew I was pregnant, I cried a lot out of joy, but the war came and killed my happiness.

On 21 November 2023, bombardment intensified on al-Saftawi and Abu Iskandar areas and IOF’s tanks were heavily firing shells and smoke grenades. As a result, my uncle was wounded and we decided to evacuate to the south. We started running in the street until we found a car that drove us to Dolah intersection. It dropped us there and we walked towards the checkpoint. While walking, I felt extremely tired and was not able to go on. I threw my bag and belongings on the ground and my husband and other people helped me carry them.

Whenever an Israeli SUV travelled by, my children and I got scared and cried. I kept telling my children to look down so they would not see the soldiers; however, there were a lot of dead bodies on the ground and a car bombed with an amputated arm dangling from its window. We kept walking for hours until we reached al-Nussairat. I was 3-month pregnant and had a bleeding since 13 October 2023 out of fear due to the heavy fire belts that hit our area. I could not do a checkup as there were no doctors around and for not being able to reach any health center due to the dangerous situation. One day after arriving to the south, particularly on 22 November 2023, I went for a checkup, but the doctor told me that I had miscarried due to intense fear and fatigue as while evacuating, I carried 2 heavy bags: one on my back and the other on my chest as my children were too young to help me. I cried a lot as I waited so long to get pregnant.”

In times of armed conflict, women are entitled to the guarantees granted by IHL to all protected civilians, including the right to humane treatment at all times and to protection from all acts of violence or threats thereof. IHL gives pregnant women special protection, so the occupying power has an obligation to provide pregnant women particular protection and respect. (Fourth Geneva Convention, Article 61) the occupying power must also endeavor to evacuate from besieged or encircled areas the maternity cases to safe areas. (Fourth Geneva Convention, Article 71)

2. Poor health services and pregnant women with limited access

Pregnant women require uninterrupted and safe access to healthcare services in large part due to the risk of death and complications of pregnancy or childbirth. They need full and immediate access to antenatal and postnatal care, together with medical assistance during childbirth. IHL ensures this special care as the Fourth Geneva Convention stipulates that pregnant women shall be the object of particular protection and respect. Pregnant women come under the category of “the sick and wounded” and hence enjoy the same rights to which the wounded and sick are entitled under IHL.
Since October 7th, IOF have raided hospitals and healthcare centers, targeted their medical personnel and systematically attacked Gaza’s health system, forcing at least 31 hospitals and 53 primary healthcare clinics to go out of service.8

Meanwhile, pregnant women have limited access to health services, particularly in emergencies, as IOF target ambulance crews and destroy their vehicles while evacuating the injured to hospitals. Moreover, the ambulance service is critically affected by acute shortages of fuel for transfer as well as recurrent damages to communications cables due to the relentless bombardment near the ambulance stations.

All these blatant violations force a lot of pregnant women to give birth in houses or shelters, worsening the birth-related complications, increasing their suffering and leaving them with unprecedented levels of stress. An estimated 5,500 of approximately 52,000 pregnant Palestinian women in Gaza giving birth each month are doing so in unsafe conditions, often with no clean water and much less medical assistance.9

Moreover, pregnant women unable to have safe access to health services are facing a double nightmare as if they need healthcare, they have to walk for a long distance or sometimes feel reluctant to ask for adequate healthcare. And when pregnant women have access to a functioning hospital, they have to undergo c-sections without anesthesia.10 Due to no access to vital medical supplies, including blood supplies, doctors have to perform unnecessary hysterectomies to improve the chances of saving the lives of women, rendering

the later unable to have more children. Meanwhile, Dr. Mai al-Kaileh, the Palestinian Minister of Health, emphasized that Palestinian women in Gaza facing postpartum bleeding were left with no choice but to undergo hysterectomies to save their lives.11

On 03 November 2023, the World Health Organization (WHO) warned, “Maternal deaths are expected to increase given the lack of access to adequate care. The psychological toll of the hostilities also has direct – and sometimes deadly – consequences on reproductive health, including a rise in stress-induced miscarriages, stillbirths and premature births.”12

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8 Gaza Government Media Office’s estimates on day 140 of the genocide
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Nesmah Osamah Hamo (19) says, “after the temporary truce ended on 02 December 2023, I received a warning phone call ordering us to evacuate the area. I was scared to death and had to walk so long for around half an hour to al-Naser neighborhood. In the afternoon, heavy bombardment hit the area I fled to and my heart nearly stopped from fear. At around midnight, I started having labor pains that lasted for 2 hours amid everyone trying to calm my fears and convincing me it was not labor yet so I could wait until the morning. However, I could not wait as I knew I was in labor although it was two weeks before my due date. We tried several times to call an ambulance, but we could not reach one due to the communications blackout. Feeling excited to meet my first baby in good health encouraged me to deliver, and I gave birth to my baby in the house’s bathroom. The baby fell on the ground and the umbilical cord sealed off by itself. I had mixed feelings but the worst was feeling lonely for not having my mother beside me as she had evacuated to the south. Delivering my baby like that has caused him a head trauma for a long time, making me feel anxious about his safety for not having doctors around to check on his health.”

Meanwhile, Raghdah Sa’dallah Ahel (34) says, “on 13 January 2024, I went into labor at around 23:00 at the school shelter. I tried to hold on until the morning given difficult access to ambulances due to communications blackout and fears to be transferred at night because ambulances are usually targeted and it is not even safe to walk at night. At around 01:30, labor pains got worse that I could not bear so I had to take the risk and walk in the middle of the night with my husband raising a white flag. We walked for around half an hour but it felt like hours. I was feeling pain for having to walk for so long and severe labor that increased amid fears of being targeted. Thank god we safely made it to al-Sahabah Clinic and within only 5 minutes I delivered my baby. I cannot even think how I might have given birth to my baby girl on the street and I still have nightmares about it.”

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12 Interview with Dr. Mai Al-Kaileh (Palestinian Minister of Health) on Al Arabiya, 27 December 2023
https://www.instagram.com/reel/C1W2OFCymM8/?igshid=Ynl1NjRzndnJH5.

13 WHO, Women and newborns bearing the brunt of the conflict in Gaza, UN agencies warn 3 November 2023,

14 PCHR received the testimony on 19 January 2024 in the area near al-Shifa Hospital in Gaza City.

15 PCHR received the testimony on 03 February 2024 in Fehmi al-Jerjawi School shelter in al-Sahabah neighborhood in Gaza City.
Islam Majed al-Mobayed (29) says, “I was 3-month pregnant and due to the relentless bombardment on al-Shija’iyah neighborhood, I had severe bleeding, ascertaining to my husband and mother-in-law that I lost my baby. However, my belly was getting bigger day by day so I knew I was still pregnant but could not go to hospital. It was too difficult to walk with my children for so long to reach the hospital, fearing we might get shot at any moment as everything was possible. I am also afraid to go to hospital without them, fearing that a nearby bombing might occur while I am not around or not be able to come back.”

These crimes committed by IOF against the medical units and their medical personnel are blatant violations of IHL rules binding the occupying power not to render civilian hospitals organized to give care to the wounded and sick, the infirm and maternity cases, in no circumstances the object of attack, but shall at all times be respected and protected. (Fourth Geneva Convention Articles 61, 41, 65 and 75.) Moreover, convoys of vehicles shall be respected and protected in the same manner as civilian hospitals so they are not be the object of attack amid all feasible precautions taken to ensure their safety.” (Fourth Geneva Convention, Article 12; Additional Protoco I Articles 12 and 21.)

3. Limited access to adequate food

Since the beginning of their ongoing aggression, IOF have used the collective punishment policy against the people of the Gaza Strip, who are currently facing high levels of starvation and dehydration. Therefore, civilians are facing unprecedented levels of acute food insecurity after running out of food supplies and having most of their livelihoods devastated. Moreover, the bakeries were bombed while shops have become empty amid skyrocketing prices of commodities, leaving families unable to get food.

Meanwhile, IOF tightly restrict entry of foodstuffs that are indispensable to civilians’ survival. Israel also continues to cut off water supplies to the Gaza Strip, destroy water wells, tanks and networks as well as banning the import of fuel necessary for operating these wells, marking an unparalleled crisis of starvation and dehydration in northern Gaza Strip.

PCHR received the testimony on 06 February 2024 in Fehmi al—Jerewi School shelter in al—Sahabah neighborhood in Gaza City.
Widespread malnutrition and severe hunger among pregnant women increase women's suffering while being constantly worried about their babies' survival and development. Given the limited access to necessary food supplies, pregnant women are enduring the worst levels of famine in favor of their children's food. Hadil Isma'il Sbeihat (27) says, “I am 8-month-pregnant and struggling severe hunger and malnutrition, for my children and I have one meal a day, which is always a plate of rice. Moreover, milk's price is very high in the market, so I prefer giving it to my children instead of drinking it as I feel bad if I deny them milk. Not being able to feed my children, who used to have 3 meals a day, has made me feel very depressed.”

Meanwhile, Islam ‘Abdulatif Shamali (32) says, “I am 4-month pregnant and live with intense fear of losing my baby due to malnutrition. After 4 months of not being able to do my routine checkups, I went to a doctor who told me to take care of my nutrition and rest otherwise I will risk my baby's life that have worsened my fears. However, how can I take care of my health amid lack of vegetables, meat and other healthy food. We are facing real famine in northern Gaza as for a while my children and I were having one meal of rice a day but now we cannot find it. And if we find something to eat, I prefer to give it to my children as it breaks my heart to see them hungry while feeling helpless that I cannot provide them more.”

Israel's systematic policy of starving civilians in the Gaza Strip that has also affected pregnant women and maternity cases is a grave violation of the special care granted to this category by IHL. IOF shall allow the free passage of necessary aid, essential foodstuffs and tonics intended for expectant mothers and maternity cases. (Fourth Geneva Convention, Article 32.)

4. Dire living conditions causing increased health risks in pregnancy:

Since October 7th, the Israeli aggression has dramatically affected women's life and forced them to change their roles in their families and take on new ones. Women's vulnerability varies with the circumstances; therefore, pregnant women are usually the most vulnerable, becoming the caretaker of their families because their husbands were killed, injured, arrested or etc. Women thereby have greater responsibilities towards their children and families, causing increased health risks and worsening pains in pregnancy or after birth.

Basant ‘Abdel Qader Abu Sa'dah (38), says, “I am a mother of 4 and was pregnant when I was displaced from north Gaza to the south on 19 November 2023. While crossing the checkpoint, which separate the south from the north, IOF arrested my husband so I had to carry my 3-year-old child while being 7-month pregnant and walked for a long distance but felt like forever. I spent that period evacuating from one place to another searching for a shelter until we reached the UNRWA-run warehouses in Tal al-Sultan in Rafah. I spend my day searching for firewood to cook, standing in lines to get water for daily use and going back home with a gallon full of water and other duties that my husband used to do as well as taking care of my children. These new exhausting tasks have caused me to bleed, fearing I might lose my baby. I went into early labor just 2 weeks before my due date amid extreme fatigue, constant fear for my baby's life and feeling scared to give birth to him without having my husband beside me whom I thought was dead. I safely delivered my baby, but I struggled in my postpartum period due to lack of privacy in the bathroom as there is only one bathroom for all the displaced in the warehouses.”

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17 PCHR took this testimony on 24 January 2024 in al-Shifa Hospital as a shelter in Gaza City.
18 PCHR took this testimony on 23 February 2024 in al-Shifa Hospital as a shelter in Gaza City.
19 PCHR received the testimony on 10 February 2024 in UNRWA tents in Tal al-Sultan in Rafah.
Meanwhile, the ongoing Israeli aggression has led to forced mass displacement of civilians in light of the outbreak of epidemics and dire living conditions in shelters along with lack of electricity and water supplies. All of this combined has increased pregnant and postpartum women's suffering. In this regard, Bodour Hani al-Sousi (22) says, “I had chickenpox while I was 8-month pregnant and I do not know how I was infected, but I am sure this is due to being in an overcrowded shelter where various epidemics spread. At the time, I did not take any medicine as all pharmacies near the school were closed. I could not sleep from fever for 3 days enduring the worst pain and fearing for my first baby.”

Fairouz Shadi al-Yazji (18) says, “I am 8-month pregnant and was forcibly displaced from North Gaza to the south, particularly in Masqat School shelter in Rafah.” She adds, “I have no mattress to sleep on as I sleep on the floor, causing me severe neck and back spasms and pains.”

PCHR received the testimony on 02 February 2024 in UNRWA tents in Tal al-Sultan in Rafah.

PCHR received the testimony on 20 January 2024 in UNRWA tents in Tal al-Sultan in Rafah.
IOF have committed serious human rights violations against pregnant women amounting to genocidal acts, in particular imposing measures intended to prevent births within the group. Thus, all efforts shall be exerted to stop these genocidal acts and mitigate the arising consequences. In light of the above, the Palestinian Centre for Human Rights calls on the international community to exert pressure on Israel to:

- Cease all genocidal acts, including imposing measures intended to prevent births within the Gaza Strip;

- Comply with the legally-binding provisional measures order lately issued by the International Court of Justice by “taking all measures within its power to prevent all acts of genocide,” and “enable the provision of urgently needed basic services and humanitarian assistance”

- Stop attacks on medical units and their personnel, which exacerbate the crime of birth prevention and increase health risks in pregnancy and after birth; and

- Fulfill its obligations as an occupying power in terms of its duty to transfer pregnant women to safe areas and provide them the necessary aid as well as allowing the free passage of essential foodstuffs and tonics intended for expectant mothers and maternity cases. (Fourth Geneva Convention, Articles 23 and 17.)