



A SITUATION AND POLICY BRIEF

OBSTETRIC, REPRODUCTIVE & MATERNAL VIOLENCE IN GAZA

LIST OF ABBREVIATIONS

WPS	Women, Peace and Security Agenda
ICJ	International Court of Justice
WHO	World Health Organisation
UNFPA	United Nations Population Fund
MHPSS	Mental health and psychosocial support

KVINNA TILL KVINNA

The Kvinna till Kvinna Foundation has defended women's rights since 1993. For every woman and girl's right to be safe and to be heard.

Today, we are one of the world's leading feminist women's rights organisations, working directly in areas affected by war and conflict to strengthen the influence and power of all women. We work closely together with more than 100 partner organisations in 20 countries to defend women's rights, achieve gender equality and justice, and reach lasting feminist peace.

EXECUTIVE SUMMARY

Amidst the ongoing crisis in Gaza, a silent yet devastating form of violence afflicts women: obstetric violence. This brief describes how pregnant, postpartum and breastfeeding women in Gaza are facing obstetric violence as a result of the hostilities.

An estimated 10,000 women have lost their lives to violence perpetrated by Israeli forces. Against this backdrop, approximately 180 women navigate the challenges of childbirth every day, amidst a landscape marked by destruction and despair. The heinous intersection of reproductive rights violations and armed conflict, ravages the lives of women in Gaza. From increased rates of miscarriage to the scarcity of essential prenatal care and nutrition, the impact on maternal health is staggering. Attacks on healthcare facilities have left expectant mothers grappling with limited resources and inadequate medical support, exacerbating an already dire humanitarian crisis.

What is necessary right now is an immediate and permanent ceasefire, cessation of arms transfers to Israel, and compliance with international humanitarian law to facilitate the safe delivery of aid and essential reproductive health services.

BACKGROUND

Over 10,000 women are estimated to have been killed in Gaza by ground operations and airstrikes conducted by Israel¹. With this rate of death, 63 women will continue to die each day that the war continues². On top of this, according to the United Nations Population Fund, there are 180 women giving birth every day in Gaza³. The London School of Hygiene and Tropical Medicine and the Johns Hopkins Center for Humanitarian Health have further estimated projections of deaths based on the likely scenarios to emerge. Their projections indicate that a decade's progress in preventing maternal and neonatal death rates will be undone as a result of Israel's war on Gaza⁴.

As feminists working to implement the Women, Peace and Security Agenda and towards a world with feminist peace, we have to stress the disproportionate levels of violence against women, in all its forms, that has occurred since 7 October. Although outside the scope of this paper, current reporting says that sexual violence has occurred to both Palestinian and Israeli women and we support further investigation of these crimes. Human rights experts and organisations have already stated that Israel has committed war crimes in Gaza and there are ongoing investigations by ICJ, including on acts of genocide, and by the ICC. For the international humanitarian law to be trusted it is vital that all violations are investigated, and people held to account.

WHAT IS OBSTETRIC VIOLENCE?

Obstetric violence is described as a form of reproductive violence. According to Alio et. al it is "violence at the intersection of institutional/structural violence and gender-based violence. Obstetric violence encompasses all forms of harm and maltreatment during

¹ [gender-alert-gender-analysis-of-the-impact-of-the-war-in-gaza-on-vital-services-essential-to-womens-and-girls-health-safety-en.pdf](#)

² [Press release: 9,000 women have been killed in Gaza since early October | UN Women – Headquarters](#)

³ [Women and newborns bearing the brunt of the conflict in Gaza, UN agencies warn \(who.int\)](#)

⁴ [Report projects excess deaths due to Gaza crisis | LSHTM](#)

pregnancy, delivery, and the postpartum period.”⁵ This type of violence is also sometimes named as reproductive violence.

WHY WHAT IS HAPPENING IN GAZA CONSTITUTES AS OBSTETRIC VIOLENCE

Women in Gaza have been displaced because of the war, many of them multiple times. All menstruating women face a shortage of hygiene products⁶. Testimonies we have received say that the scarcity has led to high prices on these products, leading many women not able to afford buying sanitary pads. This has led to unsanitary solutions and an increase in reproductive and urinary infections, which is further compounded by a lack of privacy and clean water due to displacement⁷. This exacerbates an already dire situation since health supplies were already scarce before 7 October because of Israel’s blockade on Gaza. Pregnant women have experienced high increases in miscarriage, which some reports claim have increased by 300%⁸. WHO has called the psychological toll of the fighting as having a “direct – and sometimes deadly – consequence” leading to miscarriages, stillbirths and premature births⁹. Medical research has reported the links between armed conflict and devastating pregnancy outcomes, such as miscarriage, stillbirth and other complications.¹⁰ A lack of access to prenatal vitamins, food and clean water further impacts the pregnancies of women in Gaza. Testimonies received by our partner organisation, the Women’s Affairs Center, from pregnant women paint a devastating picture, with one describing the situation as “hell” and another explaining:

⁵ [‘Giving birth is like going to war’: Obstetric violence in public maternity centers in Niger | medRxiv](#)

⁶ [UNFPA Palestine Situation Report #7 - 6 April, 2024](#)

⁷ [Impossible choices in Gaza: “Women are giving birth prematurely because of terror” \(unfpa.org\)](#)

⁸ [Miscarriages in Gaza Have Increased 300% Under Israeli Bombing \(jezebel.com\)](#)

⁹ [Women and newborns bearing the brunt of the conflict in Gaza, UN agencies warn \(who.int\)](#)

[Adverse effects of exposure to armed conflict on pregnancy: a systematic review | BMJ Global Health](#) & [Pregnant women in Gaza require urgent protection - The Lancet](#)

"I delivered during the war by caesarean section and my situation was difficult. I was not anaesthetised during the birth, and I was in a lot of pain from the needles and stitches. Where are women's rights? Where are human rights? I got sick after giving birth and was admitted to the hospital again. I also sell the canned food that I receive as aid to buy dippers and milk for my child."

As the above quote explains, for women giving birth, direct attacks on hospitals and clinics have led to decreased availability and capacity. The WHO reports 84% of all health care facilities have been destroyed¹¹, and only two hospitals are providing maternity services.¹² This is not adequate for the 5,522 women in Gaza who are expecting within the next month according to UNFPA as of 6 April 2024¹³. For those who manage to access these hospitals, they deliver in buildings that are still vulnerable to attacks and lack of electricity, with health workers who are working at overcapacity and with their own trauma. Due to a lack of resources, pain relief is scarce, supplies are reused, and women are forced out of hospital beds right after birth to give room to the next woman¹⁴. Despite all of this, our partner organisations report that many women face even worse outcomes with no access to medical facilities, forced to give birth in unclean and unsafe environments.

Breastfeeding women and mothers struggle to provide for their children, with a lack of diapers, clothes, warm spaces, vaccinations, medicines and baby formula. Breastfeeding women, who require increased amounts of food to lactate properly, are reporting that they sell any aid food items they are provided to be able to buy diapers and other essentials for their newborns. Many women have stopped breastfeeding because of malnutrition, which is rampant, despite being nearly at zero before the war even with the blockade conditions¹⁵. The effects of this malnutrition are extremely serious - Human Rights Watch has accused the Israeli government of using starvation of civilians as a

¹¹ [Sitrep - issue 27.pdf](#)

¹² ["Gaza is at breaking point": Health workers and patients describe an unfolding catastrophe in Rafah \(unfpa.org\)](#)

¹³ [UNFPA oPt SitRep7 2024.04.pdf](#)

¹⁴ ['Worse than hell': the perils of pregnancy in war-torn Gaza \(france24.com\)](#)

¹⁵ [Famine in Gaza is imminent, with immediate and long-term health consequences \(who.int\)](#)

method of warfare, which is a war crime¹⁶. The director of the U.S. Agency for International Development, Samantha Power, has said that there is a credible assessment that famine has started in Gaza¹⁷. This is happening despite the International Court of Justice (ICJ) ordering Israel in January 2024 to “take immediate and effective measures to enable the provision of urgently needed basic services and humanitarian aid”¹⁸.

At least two UN Special Rapporteurs have expressed the current situation of pregnant, menstruating, breastfeeding and mothers in Gaza as acts of violence¹⁹. This is on top of an already existing ongoing continuum of violence experienced by Palestinian women, which has now intensified in severity and deliberateness.

As the former UN Special Rapporteur on the promotion and protection of human rights and fundamental freedoms while countering terrorism Fionnuala D. Ní Aoláin has argued, it is “an indictment of the selectiveness of the WPS agenda that while rape in armed conflict makes headlines obstetric violence against women and girls generally does not”²⁰. She argues that ignoring these types of violence against women makes the Women, Peace and Security Agenda further irrelevant and is in stark contrast to the commitments set by governments with feminist foreign policies. For Kvinna till Kvinna and our partner organisations, the erosion of the Women, Peace and Security Agenda destroys the decades of hard work of local implementation by women human rights defenders across the world.

Feminists often highlight during war and armed conflict how women must be seen beyond images of motherhood, as this negatively impacts women’s agency and plays into discriminatory norms. However, it is worth raising women’s unique role as child bearers in this conflict, given some of the rhetoric from Israeli officials that has been described as “discernibly genocidal and dehumanising rhetoric coming from senior

¹⁶ [Israel: Starvation Used as Weapon of War in Gaza | Human Rights Watch \(hrw.org\)](https://www.hrw.org/news/2024/01/24/israel-starvation-used-as-weapon-of-war-in-gaza)

¹⁷ [Daily Press Briefing by the Office of the Spokesperson for the Secretary-General | Meetings Coverage and Press Releases \(un.org\)](https://www.un.org/press/en/2024/01/24240101.htm)

¹⁸ [Summary of the Order of 26 January 2024 | INTERNATIONAL COURT OF JUSTICE \(icj-cij.org\)](https://www.icj-cij.org/press/2024/01/24240101.htm)

¹⁹ [Women bearing the brunt of Israel-Gaza conflict: UN expert | OHCHR, A Zone of Silence: Obstetric Violence in Gaza and Beyond \(justsecurity.org\)](https://www.justsecurity.org/2024/01/24/women-bearing-the-brunt-of-israel-gaza-conflict-un-expert-ohchr-a-zone-of-silence-obstetric-violence-in-gaza-and-beyond/)

²⁰ [A Zone of Silence: Obstetric Violence in Gaza and Beyond \(justsecurity.org\)](https://www.justsecurity.org/2024/01/24/a-zone-of-silence-obstetric-violence-in-gaza-and-beyond/)

Israel government officials²¹ by 37 UN experts. The response and rhetoric by Israel led to the International Court of Justice noting that Israel must, in accordance with its obligations under the Genocide Convention, desist from imposing measures intended to prevent births within the group as this act falls under the Convention “when they are committed with the intent to destroy in whole or in part a group as such”²². As UN Special Rapporteur on the Occupied Palestinian Territories Francesca Albanese has stated the war is “destroying a population from its roots”²³. The consequences of bombing maternity care centres, contributing to miscarriages, malnutrition and other negative health consequences, whilst also wiping out the civic registry, undoubtedly risks leading to this result. There will be long-standing generational impacts of these months of violence, not least on the population level, education, social, psychological wellbeing and family structures.

²¹ [Gaza: UN experts call on international community to prevent genocide against the Palestinian people | OHCHR](#)

²² [Summary of the Order of 26 January 2024 | INTERNATIONAL COURT OF JUSTICE \(icj-cij.org\)](#)

²³ [Israel killed more children in Gaza in last 5 months than all conflicts worldwide for last 4 years: UN rapporteur \(aa.com.tr\)](#)

RESPONSES FROM LOCAL WOMEN'S ORGANISATIONS

Like before the war, women in Gaza and the West Bank have been filling in capacity and resource gaps and taking on necessary care and support roles. The Women's Affairs Center in Gaza distributes women and children kits in maternity hospitals. This includes warm blankets, diapers and sanitary pads. They also provide mental health and psychosocial support (MHPSS) to women and children. Aisha Association for Women and Child Protection, another organisation based in Gaza, has continued working for the protection of women and children, supporting with MHPSS and cooking for internally displaced people in Rafah.

In addition, women's organisations are cooking for displaced people, providing spaces of shelter and support, as well as psychosocial support. These women, as well as individual women, find alternatives to lack of supplies by resorting to traditional methods of cooking and preparing bread, and reusing cloth and other resources.

KVINNA TILL KVINNA'S POSITION

It is essential that we protect the gains of implementing the Women, Peace and Security Agenda by naming the ongoing violations in Gaza—the maltreatment during pregnancy, delivery, and the postpartum period—as violence and it should get the same attention as other forms of gender-based violence. We will continue to push discussions in the Women, Peace and Security Agenda towards a greater understanding of the different ways that women are affected by war and violence, including obstetric violence.

RECOMMENDATIONS

- All actors must work towards an immediate and permanent ceasefire, ensure the release of the hostages and unlawfully detained Palestinians.
- The Women, Peace and Security Agenda must be fully implemented. UN Member States have commitments under the WPS Agenda to protect women in times of war, including from obstetric violence.
- Any transfer of weapons or ammunition to Israel must cease immediately, in accordance with commitments as part of the Arms Trade Treaty. States that are importing military equipment from Israel should also cease these imports. We call on governments who publicly espouse a feminist foreign policy to evaluate how their commitments under this policy match their arms trading policy vis-à-vis Israel.
- The government of Israel must ensure the access of humanitarian aid across Gaza in accordance with the ICJ's provisions. This includes safe and unimpeded delivery of sexual health and reproductive supplies, as well as increased access to these services.
- The government of Israel must comply with the ICJ's ruling, including taking the necessary measures to refrain from acts under the Genocide Convention.
- Donors and the international community must commit to long term funding on sexual health and reproductive rights for Gaza. This must include financial support to women's rights organisations already operating in Gaza.
- Organisations and activists advocating for the WPS Agenda should work towards a comprehensive understanding and full implementation of the WPS Agenda that does not only focus on the protection of women from sexual violence.

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