





A catastrophic health reality threatens the lives of Palestinian women amid the ongoing crime of genocide.













### Introduction

This year's International Women's Health Day comes amidst an unprecedented and compounded humanitarian and health crisis faced by Palestinian women due to the crime of genocide perpetrated by the Israeli occupation in Gaza, the West Bank, and Jerusalem. Since the Nakba of 1948, the health sector in Palestine has never faced such systematic targeting through military attacks and brutal assaults as it has from October 7, 2023, until now—spanning 600 days. This has led to the complete disruption of the healthcare system, with lasting impacts on Palestinian women and society as a whole.

The suffering of women in Gaza has been compounded compared to those in the West Bank and Jerusalem, as they have been deprived of their most basic health rights, particularly in reproductive care and essential medical services. Healthcare facilities in Gaza have been subjected to airstrikes, artillery shelling, raids, and vandalism, resulting in a near-total collapse of the healthcare system, which continues unabated. Hospitals and medical teams have been overwhelmed by the vast number of martyrs and injured individuals. The severe shortage of medical supplies and immense pressure on hospitals have led to the worsening of many injuries and the deaths of some individuals, as the healthcare system is unable to meet even their basic treatment needs. All of this constitutes a blatant violation of international humanitarian law and agreements related to human rights.

The health sector in the West Bank and Jerusalem has not been spared from these crimes. Women face strict restrictions in accessing healthcare facilities amid the clear targeting of healthcare infrastructure due to Israeli occupation policies. Patients' access to hospitals has become increasingly difficult due to medicine and











medical supply shortages, restrictions on movement, blockades, and the proliferation of military checkpoints. Combined, these conditions have led to a deterioration in healthcare services and increased pressure on medical staff, negatively impacting the healthcare system's ability to adequately meet the needs of the population

On this day, the Ministry of Women's Affairs reaffirms its commitment to the vision set forth by the 19th Palestinian government concerning the health sector. This vision prioritizes immediate and urgent relief for Gaza, the West Bank, and Jerusalem, the provision of the best essential services to citizens, social care support, and the strengthening of citizens' resilience. This vision aligns fundamentally with all the ministry's plans, strategies, and orientations. Additionally, it complements the programs and projects aimed at protecting women's rights, monitoring violence, enacting protective laws and regulations such as the National Referral System, and preparing international reports to hold the occupation accountable for its crimes. These efforts coincide with the legislative frameworks set by international and UN bodies to protect women's health rights, in line with sustainable development goals, the Beijing Platform for Action, and international human rights laws.

In this context, the Ministry of Women's Affairs, alongside the Ministry of Health, governmental institutions, civil society organizations, international and UN institutions, and UN agencies, leads efforts to protect the health rights of Palestinian women and society as a whole. These efforts persist despite the piracy of Palestinian funds by the Israeli occupation and the lack of financial resources.

This paper is part of the Ministry of Women's Affairs' ongoing efforts to create a robust health infrastructure and policies capable of protecting women amidst the genocide. It seeks to expose the extent of the real suffering endured by women











within Palestinian society, including the rising rates of disability and amputations among women and children, the increasing prevalence of cancer among women due to the excessive use of bombs and explosives in Gaza, and the threats to the health of fetuses and pregnant women. The ministry remains dedicated to ensuring that women receive the health services and care they rightfully deserve.

Mona Al-Khalili

Minister of Women's Affairs













### **Executive Summary**

This paper addresses the health conditions of women in Gaza, the West Bank, and Jerusalem.

In Gaza, the healthcare system is on the brink of collapse due to 697 attacks on medical facilities, including bombings, raids, and destruction. Over 94% of hospitals have been completely or partially damaged, leaving only 13 hospitals providing limited services. More than 53,000 people have been martyred, and 128,000 injured—70% of them women and children—while hospitals struggle to respond. It is estimated that around 890 medical beds may be lost within a month if the genocide continues. Additionally, more than 1,400 healthcare workers have been martyred.

The paper also highlights the plight of individuals with disabilities, with approximately 15,000 cases of permanent disability and 15,000 amputations— 48% involving women and 20% children. People with disabilities face dire conditions due to difficulties accessing services, displacement, and lack of basic humanitarian needs. This has further burdened women as primary caregivers.

The suffering of **pregnant women** in Gaza is also detailed. Around 60,000 pregnant women are enduring famine, acute malnutrition, and a lack of nutritional supplements and vitamins. Over 300 cases of miscarriage and instances of malformed births have been recorded due to the use of internationally banned chemical weapons. Inadequate medical care, combined with rising rates of anemia and malnutrition, has exacerbated the crisis.

Furthermore, the paper points to the plight of over 350,000 chronic disease patients who have been affected by the shutdown of specialized facilities. Among them are 12,500 cancer patients, including 2,000 children,













whose lives are at risk due to non-functional hospitals and medicine shortages. The destruction of the Rafah crossing has also impeded travel for treatment.

In the **West Bank**, women face severe restrictions on accessing healthcare due to military checkpoints, raids, and the denial of treatment permits, particularly for chronic and emergency cases. Over 930 martyrs, including 187 children, have been recorded in the West Bank. Psychological needs are rising due to displacement and invasions.

In **Jerusalem**, Palestinians endure a discriminatory and fragmented healthcare system with severe service shortages, especially for women. Only 12.4% of Palestine's hospital beds are located in East Jerusalem hospitals, which face strict restrictions, including denying entry to patients from the West Bank. Mental health services remain weak, while financial hardships and political barriers further hinder access to healthcare.

## **Destruction of the Healthcare System in Gaza:**

The suffering in Gaza has been exponentially worse compared to the West Bank and Jerusalem, where women have been deprived of their most basic health rights, particularly in reproductive care and essential medical services. According to the World Health Organization, healthcare facilities in Gaza have been subjected to 697 documented attacks, including airstrikes, artillery shelling, hospital invasions, and the destruction of facilities, leading to their complete devastation.

These attacks have caused a near-total collapse of the healthcare system, which continues to deteriorate. Hospitals and medical teams are unable to accommodate the massive numbers of martyrs, exceeding 54,000, in addition to countless missing persons and over 129,000 injured. In many cases, emergency









response teams have been unable to reach the wounded due to ongoing and indiscriminate shelling and destruction, resulting in a further increase in casualties.

The severe shortage of medical supplies and overwhelming pressure on hospitals has worsened the condition of many injured individuals, with some succumbing to their wounds later. The healthcare system has failed to meet even the most basic treatment needs, constituting a flagrant violation of international humanitarian law and human rights agreements.

Gaza's healthcare sector is witnessing a complete collapse amid escalating genocide in Gaza, the West Bank, and Jerusalem, compounded by the blockade and denial of aid entry. These circumstances have drastically worsened the humanitarian situation and deprived women of their most basic health rights, particularly in reproductive care and essential medical services.

According to the World Health Organization, 94% of Gaza's hospitals have been partially or fully damaged. Only 19 out of 36 hospitals remain partially operational, with just 13 providing limited services, while the rest are restricted to primary and emergency care. Recently, four major hospitals have gone out of service due to their proximity to besieged areas, frequent evacuation orders, and direct bombing. All these hospitals and medical centers are suffering from severe shortages of medicine and medical supplies.<sup>1</sup>

Hospital bed capacity, which ranged between 3,500 and 4,000 before the war, has plummeted to less than 2,000 beds, a number insufficient to meet the needs of over 2.25 million people. This figure is further threatened by the potential loss of an additional 40 beds daily, and could escalate to 890 lost beds within a month if the siege

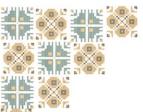
<sup>&</sup>lt;sup>1</sup> Report titled 'World Health: 94% of All Hospitals in Gaza Strip Destroyed or Damaged (May 23, 2025), Quds Press News Agency'"











persists, exacerbating the health crisis in Gaza<sup>2</sup>. The healthcare system also suffers from a significant reduction in medical staff, with 1,411 medical personnel martyred and 362 arrested. Among those arrested, three doctors were executed under torture. Furthermore, the occupation has targeted 144 ambulances, rendering them inoperable amidst increasing security risks and a continuous rise in the number of injured and sick.<sup>3</sup>

> Civilians, particularly women and children, face tragic health conditions due to widespread mass displacement and severe shortages in healthcare, medicine, food, water, and fuel. This is compounded by a lack of safe and habitable shelters that meet minimum human living standards.

Health services in northern Gaza have become almost nonexistent. Al-Awda Hospital, operating at very limited capacity, faces the risk of closure due to difficult access, insecurity, and a lack of essential medical supplies. The hospital has suffered direct attacks, causing severe damage to its facilities, injuries among its staff, the burning of medical triage tents, damage to supplies, and destruction of ambulances.

**Escalating Suffering for People with Disabilities and a Rise in Amputations** in Gaza Amidst Severe Hardship

<sup>&</sup>lt;sup>3</sup> Reports issued by the Government Media Office – Gaza

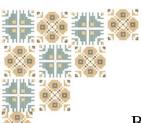


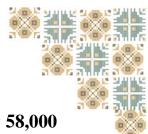






<sup>&</sup>lt;sup>2</sup> Report titled 'Health Facilities Threatened by Escalating Hostilities and Evacuation Orders, 15 Aid Trucks Looted, May 23, 2025, United Nations Entity'"





Before the outbreak of the war in October 2023, approximately **58,000** people with disabilities lived in the Gaza Strip. They already faced chronic difficulties accessing healthcare, social services, inclusive education, and employment, compounded by a long-standing siege and social discrimination imposed since 2006. Their conditions were characterized by isolation and marginalization, with a severe shortage of assistive devices, inadequate facilities, and a fragile healthcare system.<sup>4</sup>

The crime of genocide in Gaza, the West Bank, and Jerusalem has exacerbated this suffering to an unprecedented degree. Over **128,000 women** and children have been injured, and it is estimated that more than **15,000 of** them have sustained permanent disabilities, including brain injuries, spinal cord injuries, and limb loss, in addition to thousands who require rehabilitation services. These numbers are expected to worsen as the aggression continues and humanitarian conditions deteriorate.<sup>5</sup>

People with disabilities find themselves at the forefront of those affected, as they struggle to move during shelling or repeated displacement, and are deprived of life-saving warnings or information. Those who cannot move easily, or rely on assistive devices, are often left without a means to escape. As for those with sensory disabilities, such as the deaf and blind, they are often unable to receive warnings or determine directions during evacuation.<sup>6</sup>

These challenges do not fall on individuals alone; entire families bear the burden, especially women, who care for their children with disabilities under inhumane conditions. Many mothers have been forced to flee with their









<sup>&</sup>lt;sup>4</sup> Report titled "The Unspoken Suffering: The Quest for Survival and Dignity of Persons with Disabilities in Gaza" issued by Medical Aid for Palestinians on December 3, 2024

<sup>&</sup>lt;sup>5</sup> Ibid

<sup>&</sup>lt;sup>6</sup> Ibid

children without adequate provisions, losing essential medical devices or medications during shelling or escape. Some have found themselves alone in shelters without medical or psychological support, forced to bear the burden of daily care in the complete absence of a suitable health environment or a qualified medical team.<sup>7</sup>

The suffering intensifies when a mother is responsible for more than one child, or when she is separated from her spouse due to displacement or direct targeting. The psychological and physical burden borne by women in such circumstances cannot be separated, as providing the simplest necessities of life for their children with disabilities becomes a daily battle.

The Gaza Strip is also witnessing an alarming rise in amputations due to the ongoing Israeli aggression since October 7, 2023, coupled with a severe shortage of medical equipment and tools necessary for manufacturing prosthetics due to the continuous closure of crossings. Approximately **15,000 permanent amputation cases** have been recorded across various governorates of the Gaza Strip, amidst a sharp increase in numbers due to the extensive use of explosive weapons and direct targeting of civilians. This exacerbates the suffering of the population and deepens the humanitarian crisis with limited availability of healthcare for them, whether for limb fitting or physical therapy.<sup>8</sup>

"The continuation of the genocide crime will lead to a catastrophic increase in cases, especially since 48% of new amputation cases are women and 20% are children, which severely exacerbates the humanitarian situation."

<sup>&</sup>lt;sup>8</sup> Report titled 'Continued Suffering of Amputees in Gaza,' issued by WAFA Agency on March 3, 2025."



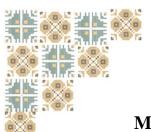








<sup>7</sup> Ibid





## Malnutrition, and Severe Lack of Medical Care Amid Healthcare **System Collapse**

The suffering of pregnant women in Gaza no longer only involves the usual challenges of pregnancy and childbirth but has worsened significantly under the ongoing genocide. They face the constant threat of hunger and malnutrition, along with psychological stress and fear of lacking medical care during delivery — like the rest of the civilians enduring a comprehensive humanitarian disaster.

Pregnant women in Gaza suffer from a severe shortage of essential vitamins and nutritional supplements such as iron and folic acid, which have been completely banned from entering the Strip. This deficiency, which also affects basic food supplies like flour, has deepened the population's hardship under a policy of systematic starvation.

The effects of this crisis are becoming increasingly evident as malnutrition rates rise amid ongoing aggression that has created catastrophic humanitarian conditions for over twenty months.

## A Pregnant Woman in Gaza:

"Hunger has reached every home in Gaza, and as a pregnant woman, I have not eaten bread for more than two weeks. I have been completely deprived of any food rich in iron or calcium, both of which are essential for my health and my baby's health. I live every day in fear that this severe deficiency will affect my baby's growth or even threaten their life before birth. I feel extreme fatigue and joint pain due to the severe lack of nutrition—I haven't eaten nutritious food for a long time. I fear that my baby is feeding off my exhausted body. There is no relief amid the war, the tents, and the daily suffering.











Pregnant Women in Gaza Face the Brutal Crime of Starvation Under the World's Silent Watch. Pregnant women in Gaza are subjected to one of the harshest crimes of starvation, unmatched anywhere else in the world, all happening under the eyes of the international community that remains silent and inactive. Some have not had a piece of bread for two or three weeks amid the complete halt of all food supplies since the start of the genocide war, caused by the closure of crossings and the occupation's prevention of any goods entering the Strip. As a result, these women suffer from malnutrition, pregnancy pains, premature births, miscarriages, anemia, and fetal deformities — all caused by the lack of essential nutritional supplements, vitamins, and minerals blocked by the occupation.

There have been recorded cases of babies born without brains in the northern Gaza Governorate, due to a deficiency in folic acid, as well as in other cities. Mothers also suffer from malnutrition. All residents of Gaza face acute food insecurity: 47,000 people live in phase five of the food crisis (catastrophe), 1.15 million are in phase four (emergency), and 500,000 in phase three (crisis).

The number of people facing the risk of famine in phase five has doubled since October 2024, increasing from 244,000 to 470,000. Around 60,000 pregnant women in Gaza live under extremely harsh humanitarian conditions because of the siege, the ban on aid, and the denial of medical care since early March. This policy constitutes a form of "forced birth prevention," classified as a genocide crime under the 1948 Convention.

## Chronic Disease and Cancer Patients in Gaza Face Slow Death Amid Lack of **Treatment and Care**

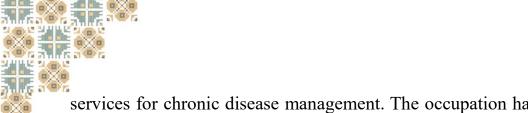
More than 350,000 people with chronic illnesses in Gaza face severe difficulties accessing hospitals and receiving necessary medical care, especially after hospitals were destroyed either completely or partially, and stopped providing

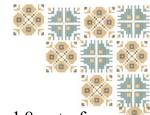












services for chronic disease management. The occupation has destroyed 8 out of 14 primary care centers specializing in chronic disease treatment<sup>9</sup>.

Kidney failure patients, especially women, endure harsh daily suffering amid the continuous collapse of the healthcare system. The destruction of Al-Shifa Hospital has deprived many patients of vital dialysis sessions, putting their lives at immediate risk. These patients require regular, non-deferrable treatment sessions. Many have been forced to relocate to other governorates searching for medical centers still providing this treatment, but overcrowding and lack of equipment and medical supplies make it difficult for hospitals to meet everyone's needs. Hospitals like Martyrs of Al-Aqsa have had to reduce the number of dialysis sessions per patient to accommodate as many cases as possible.

Many patients have ended up living outdoors or inside temporary shelters near hospitals. Living conditions are extremely harsh. Their suffering is worsened by hunger and the lack of available food. Even when food is available, it is in very small quantities, unhealthy, and unsuitable for their medical conditions, potentially leading to serious complications<sup>10</sup>.

The same applies to patients with other chronic diseases such as heart disease and diabetes, who suffer from a lack of medication and face a major dilemma: their treatment depends on specific diets, which are impossible to maintain due to the complete ban on any food imports into the Gaza Strip<sup>11</sup>.

Regarding cancer patients in the Gaza Strip, numbering approximately 12,500, including 200 children, Israeli airstrikes have caused the Gaza European Hospital—the last center providing cancer care in the Strip—to go out of service, following the earlier destruction of Al-Sadaqa Hospital. This has led to the





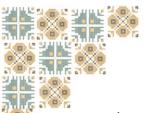


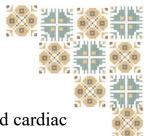


<sup>&</sup>lt;sup>9</sup> "Tragic Reality of Chronic Disease Patients in Gaza Strip" — Report issued by Al Jazeera (15-1-2025)

<sup>10</sup> Ibid

<sup>11</sup> Ibid





cessation of vital services such as oncology treatment, neurosurgery, and cardiac care, according to the Ministry of Health and the World Health Organization.

Thousands of patients are now left without care amid severe shortages of medications, difficulty obtaining painkillers and chemotherapy, and the absence of adequate alternatives in other hospitals such as Nasser Medical Complex, which lacks the necessary equipment for cancer treatment.

Furthermore, the ongoing war crime committed by the Israeli occupation in Gaza has imposed strict Israeli restrictions on travel for treatment abroad and the closure of Rafah crossing after the invasion of Rafah city and the destruction of the crossing linking Gaza with Egypt. This has exacerbated patient suffering, with more than 25,000 patients and injured people facing an uncertain fate while on waiting lists. Health officials have noted a significant rise in cancer patient deaths recently due to drug shortages and difficulty accessing hospitals, especially in northern Gaza.

This deteriorating health situation places cancer patients at daily risk of death amid a collapsed health system, a tight siege, and direct targeting of medical infrastructure in Gaza.

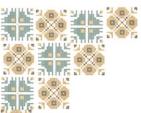
# Health Situation of Women in the West Bank: Reality and Challenges

Since October 2023, the West Bank has witnessed extensive Israeli military escalation, including airstrikes and repeated raids on camps and cities, accompanied by widespread destruction of civilian infrastructure. These operations have resulted in severe humanitarian and medical damages and strict restrictions on access to health services, particularly hindering ambulance operations. Tens of thousands of displaced people in the West Bank now live in tragic conditions without adequate shelter, basic services, or healthcare. Israeli









major

occupation forces have intensified forced displacement, especially in major camps within West Bank cities, worsening the population's suffering and exposing them to serious health and security risks<sup>12</sup>.

More than 930 Palestinians, including 187 children, have been killed according to the World Health Organization. Access to healthcare has been severely obstructed, as confirmed by Médecins Sans Frontières (Doctors Without Borders) teams on the ground, who have witnessed Israel's systematic repression against healthcare workers and patients.

Restrictions on Palestinians' movement—due to the genocide war in Gaza, the West Bank, and Jerusalem, including military checkpoints and roadblocks—remain one of the primary barriers to accessing health services in the West Bank.

Since October 2023, these restrictions have notably increased in number and scope, directly impacting patients' ability, especially those needing specialized care, to reach medical facilities.<sup>13</sup>

These restrictions have significantly impacted patients in need, particularly women, in accessing specialized care, especially for chronic and emergency cases. Ambulances and patients have been forced to take longer and less safe alternative routes, resulting in treatment delays and putting patients' lives at risk. Furthermore, checkpoints and sudden roadblocks have heightened the difficulty of reaching hospitals, especially in areas like northern West Bank.<sup>14</sup>

A large percentage of patient requests for specialized treatment outside the West Bank—whether in East Jerusalem or healthcare facilities within the 1948 occupied territories—have been denied, with many applications remaining unanswered. This has particularly affected pregnant women and patients with





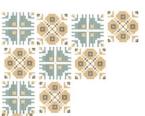




<sup>&</sup>lt;sup>12</sup> Inflicting Harm and Denial of Healthcare", Médecins Sans Frontières (Doctors Without Borders) February 6, 2025

<sup>&</sup>lt;sup>13</sup> Ibid

<sup>14</sup> Ibid



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chronic illnesses such as kidney failure and cancer, putting their lives at significant risk.<sup>15</sup>

The movement restrictions imposed on Palestinians in the West Bank and Jerusalem, especially in remote areas such as the Jordan Valley, have become a major obstacle to accessing healthcare services and psychological and social support. Key checkpoints, such as those in the Jordan Valley (Hamra and Tayasir), disrupt regular access to medical facilities and hinder the provision of sustained support to Bedouin communities, further exacerbating their fragile health and social conditions.<sup>16</sup>

Patients also face significant difficulties in accessing hospitals, particularly for emergency care, maternal and childbirth services, vaccinations, and preventive and chronic care. Healthcare workers face severe challenges in reaching these areas to deliver essential medical services due to the tight movement restrictions, directly affecting the continuity and quality of healthcare.

Many patients are also suffering from psychological disorders, such as anxiety and depression, as a result of violence and forced displacement from their homes. These conditions have resulted in massive losses and a profound sense of insecurity and instability, exacerbated by the suddenness of military incursions and displacement, where "people do not know what has happened to their homes and have suffered devastating losses, including a deep sense of existential despair."<sup>17</sup>











<sup>15</sup> Ibid

<sup>16</sup> Ibid

<sup>&</sup>lt;sup>17</sup> Ibid





#### **Health Conditions of Women in Jerusalem**

Palestinians in East Jerusalem face a fragmented healthcare system and endure discriminatory policies imposed by the Israeli occupation, which maintains a dual system segregating Palestinians and Jews. Palestinians are subjected to strict movement restrictions due to checkpoints and the separation wall, particularly those living outside the wall. Primary healthcare for Palestinians is provided by Palestinian state-run centers, with additional services offered by UNRWA and private sectors.

In contrast, Jewish settler neighborhoods enjoy superior healthcare services and a greater number of medical facilities. Palestinian neighborhoods, especially those for women, suffer from severe shortages in healthcare resources, exacerbating disparities and further marginalizing the Palestinian population compared to Jewish residents in occupied Jerusalem.

East Jerusalem's healthcare sector faces chronic crises that have worsened over the years due to Israel's discriminatory policies, isolating the city from other West Bank areas and widening the gap in medical services.

Even before the onset of the genocide in Gaza, the West Bank, and Jerusalem, the healthcare system suffered from chronic underfunding, persistent shortages of medical supplies, and deteriorating infrastructure, resulting in a decline in service quality compared to the western part of Jerusalem occupied since 1948. Palestinian medical facilities are overcrowded and lack modern equipment, as noted in a 2024 report by the MAS Institute on healthcare in Jerusalem.

East Jerusalem's six hospitals are pivotal to the Palestinian healthcare system, with about 624 beds (12.4% of Palestine's total) and specialized services, including oncology, cardiac surgery, neurology, intensive care, and dialysis.











However, these hospitals face severe Israeli restrictions, impeding the movement of patients and medical staff. Palestinian vehicles are barred from entry, forcing patients to walk or wait for hours at checkpoints, exacerbating the suffering of critical cases and individuals with disabilities. Over the past three months, military orders have prohibited West Bank residents from accessing these hospitals or scheduling appointments (e.g., at Al-Makassed Hospital).

Data from the MAS Institute (2024) indicates a rise in patient referrals from the Palestinian Ministry of Health to East Jerusalem hospitals, from 26% in 2016 to about 50% recently, with over 19,000 cases referred annually. However, Israeli restrictions severely limit patient access, undermining service continuity and quality.

Healthcare workers face exhausting conditions, including resource shortages and constant security threats, which take a toll on their mental health, especially given their daily interactions with war victims, including women and children. Conversely, mental health services in Jerusalem remain limited and inadequate for the growing needs in this volatile context.

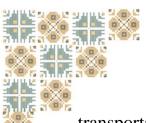
A 2022 study by the Miftah Foundation, in collaboration with the Roots Center for Health Development, highlighted the challenges faced by Palestinian women and girls in accessing healthcare in occupied Jerusalem. Based on a sample of 106 Jerusalemites, the study revealed significant structural and political barriers restricting their right to health.

The study found that over 60% of participants experienced the impact of military checkpoints and the separation wall, which limited their mobility and access to medical facilities. Around 55% reported difficulties in scheduling specialist appointments, while 49% cited financial burdens, including











transportation costs and medical referral expenses, as major obstacles to receiving treatment.

Regarding health information access, nearly half of the participants reported difficulties, and 47% indicated that language barriers and lack of privacy in Israeli health institutions posed additional challenges.

As for mental health, the data indicates a significant lack of available services. Only 10% of respondents reported the presence of effective mental health services, while nearly half of the participants stated they were unaware of the existence of psychological counselors altogether. Additionally, 12% reported experiencing some form of discrimination while receiving treatment in Israeli healthcare institutions, exacerbating their feelings of marginalization and insecurity.











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