



Report on the Violence Against Women and Girls during COVID-19 in the State of Palestine

Submitted to: The United Nations Special Rapporteur on Violence against Women

By: The Civic and Women Coalition for the Implementation of CEDAW in the occupied State of Palestine in response to the United Nations Special Rapporteur call on violence against women, to monitor the reality of violence in this period worldwide

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Introduction of the Civic and Women Coalition for the Implementation of CEDAW in the Occupied State of Palestine:

The Civic and Women Coalition for the Implementation of CEDAW in the Occupied State of Palestine was formed in 2018, for the purpose of preparing and following up on the shadow report submitted to the CEDAW Committee, on the State of Palestine Initial Report. The coalition is led by the General Union of Palestinian Women and is comprised of (56) human rights and women's organizations, trade unions, women's frameworks and women rights activists, working on advocating, protecting and empowering women at the local and national levels in the West Bank and the Gaza Strip.

List of coalition member organizations¹:

1.	General Union for Palestinian Women -West Bank and Gaza Strip	30 .	Palestinian Federation of Women's Action Committees
2.	Union of Palestinian Women Committee	31 .	Palestinian Women's Action Union
3.	Federation of Women's Struggle Committees	32 .	Union of Palestinian Women's Struggle Committees
4.	Women Sector in the Palestinian National Initiative	33 .	The Social Help Association <i>Annajda</i>
5.	Union of Palestinian Women Committee	34 .	General Federation of Independent Trade Unions-Palestine
6.	Association of Women Committees for Social Work	35 .	Palestinian Working Women Society for Development
7.	Women Media and Development TAM	36 .	Rural Women's Development Society
8.	Palestinian Maintenance Fund	37 .	Roles for Social Change Association-ADWAR
9.	Women's Affairs Technical Committee – West Bank and Gaza Strip	38 .	Women's Struggle Bloc

¹ * Please note: As some of the aforementioned member organizations have office branches located in both the West Bank and the Gaza Strip, if considered separately, the number of member organizations will then total seventy-six (76).

10.	Palestinian Women's Liberation Bloc	39	Health Work Committee
11.	Women's Center for Legal Aid and Counselling	40	Businesswomen Forum
12.	QADER for Community Development	41	Juzoor for Health and Social Development
13.	Anti-Violence Forum	42	Samia al-Wazeer – an activist
14.	The Independent Commission for Human Rights	43	Jerusalem Center for Women
15.	The Palestinian Initiative for the Promotion of Global Dialogue and Democracy (MIFTAH)	44	Luna Saadeh-activists
16.	Palestinian Medical Relief Society	45	Psycho-Social Counseling Center for Women
17.	Teacher Creativity Center	46	Women's Action Society for Women's and Children's Rehabilitation – West Bank and Gaza Strip
18.	Mother's School Society	47	Bedouins without Borders
19.	Sawa Organization	48	Advisory Forum of Local Authorities' Female Members -TAKAMOL-
20.	The Women Coalition for Justice and Equality (ERADA)	49	Women's Studies Center
21.	Areej al-Khaleeli -an activist-	50	Al-Marsad
22.	Federation of Young Women's Christian Associations	51	Palestinian General Federation of Trade Unions
23.	Hiwar Center for Youth and Women Empowerment	52	Aisha Association for Women and Child Protection-Gaza
24.	Community Media Center-Gaza	53	Palestinian Wefaq Association-Gaza
25.	Al Najd Development Forum-Gaza	54	Center for Women's Legal Research & Counseling and Protection - Gaza
26.	Women's Affairs Center – Gaza	55	Women's Health Center, Jabalia - Red Crescent Society-Gaza
27	Association for the Advancement of the Palestinian Family -Gaza	56	Association of Female University Graduates in Gaza Strip
28	Palestinian Centre for Human Rights-Gaza	57	Palestinian Development Women's Studies Association
29	Culture and Free Thought Association-Gaza		

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Executive Summary

The report addresses the issue of violence against women and girls in Palestine during the COVID-19 pandemic. It was prepared in response to the call of the United Nations Special Rapporteur on violence against women, to monitor the reality of violence in this period worldwide. The process of preparing the report is based on a participatory approach among members of the Civic and Women Coalition for the Implementation of CEDAW in the Occupied State of Palestine.

The issue of violence against women and girls in Palestine is a complicated issue. It is interrelated with the complexity of social, political, economic and cultural factors that lead to violence. Moreover, the colonial occupation and the patriarchal system that predominate the political, social, economic and legal structures in the Palestinian society, reinforce gender inequality

Prior to the pandemic, the Government of the State of Palestine took many measures against violence against women. However, the national survey on Violence in the Palestinian Society 2019 conducted by the Palestinian Central Bureau of Statistics (PCBS) shows that domestic violence continued to be practiced against women and girls. Despite the efforts of women's organizations to make the issue of domestic violence a public issue, and with the significant progress of these interventions, the societal orientation continues to consider violence against women and girls in particular, a private issue that must be addressed within the family. This culture has been reinforced by the legal and legislative system prevailing in Palestine and reflected on the extent to which women participate in public life, which has remained low and limited compared to men in the Palestinian society.

In light of the continued Israeli colonial occupation of Palestine, which denies the legitimate national rights of the Palestinian people and continues to impose control over the Palestinian territories and its economy, which remains dependent on the Israeli economy, women and girls have suffered multiple violence both directly and indirectly. This was represented through house demolitions, arrests, physical and economic abuse, restriction of movement, the establishment of isolated places, and blockades. The Palestinian society resorts to the imposition of double family and community restrictions on the movement and lives of women for fear of being subjected to violations by the occupation army and settlers. In this reality, the realization of the State of Palestine of the Agenda for Sustainable Development 2030, which the majority of countries, including the State of Palestine, have committed to, become almost impossible.

With the outbreak of the COVID-19 pandemic, the government of the State of Palestine declared a state of emergency for 30 days on March 4, 2020, and have further announced the extension of the state of emergency twice in a row to a 90-day emergency period. These decisions along with the subsequent government actions, focused entirely on preventing the spread of the virus, the most important of which was the policy of lockdown and quarantine, whereby women and girls became more vulnerable to domestic violence.

The report addresses a number of detailed issues on the actions taken by the government and their impact on women and girls, victims of domestic violence, as well as the obstacles in achieving safety and protection for them. Below are some of the most prominent issues:

- The home quarantine has led to an increase in the number of women and girls subjected to violence by a family member and an increase in the frequency of violence against women and girls as a result of the remaining of perpetrators at home. Women and girls with disabilities have also experienced a double increase in the rate of violence against them.
- Due to the policy of restrictions on movement, lockdown and home quarantine, all organizations, whether governmental or non-governmental in the West Bank, have resorted to the policy of working from home. These measures have contributed to reducing direct interventions with women and girls victims of violence and replacing them with safety/support lines, except in cases that were necessary and requiring direct intervention by specialists. According to women's organizations' data, safety/support lines have become watched by the husband and the dominant parties in the family, especially among families living in a narrow residential area. This has reduced women's access to means of available protection. This problem is increasing among older and disabled women.
- The restrictions placed on the protection centers/shelters of the Ministry of Social Development and the closure of the protection/shelter center in the Gaza Strip, in addition to the instructions of the Minister of Social Development to the protection centers/shelters in the West Bank not to admit any new cases unless they have been quarantined for 14 days, reduced the availability and accessibility of protection opportunities for women victims of violence. Adding to that, the lack of the preparedness of the protection centers/shelters to set up quarantine facilities.
- With regard to the right to access healthcare, by a decision of the Palestinian Ministry of Health, the Ministry's work was directed to limiting the spread of the virus and to provide diagnostic and treatment services. The Ministry of Health has not taken into account the special needs of women and girls in general or the women and girls victims of violence in particular. With the onset of the state of emergency, all primary healthcare centers, which include the care of pregnant women, were closed, without taking into account the health effects that women at all ages may have as a result of lack of access to healthcare, especially women and girls victims of violence. Women's access to health services, especially those suffering from chronic diseases or those who need to travel or leave the Gaza Strip to receive treatment, such as cancer patients, has also been affected.
- Women's access to justice during the COVID-19 pandemic was made more difficult by the closure of all regular, sharia and ecclesiastical courts in the first period from the announcement of the state of emergency by the government until May 10, 2020. Therefore, so many cases are still pending and unresolved. This has contributed to the length of litigation and the consequent problems in women's daily lives. On the other hand, the closure of the courts has resulted in impunity for the aggressor due to the lack of the right to litigate, which has given a spur for the perpetrators of violence to continue to practice due to the absence of an effective judiciary in the period of the pandemic.
- The escalation of economic violence against women, especially those working in the private sector and the informal economy. Many workers in private establishments were not

paid or a small part was paid. Women working in the informal sector lost their source of income altogether. On the other hand, many women have been subjected to great family pressures and violence in order to provide money for their husbands or children, which indicates a weakness and legal deficiency in protecting the rights of workers in emergency and disaster periods, especially the labor law.

- The occupation has been a major source of violence against Palestinian women, both by discriminating in the provision of health services and conducting necessary medical examinations, especially in Jerusalem, and preventing Palestinian health institutions from providing services, arresting activists and officials who carry them out, as well as preventing visits to prisoners in occupation prisons and preventing prisoners from communicating with lawyers, which has exacerbated the suffering of prisoners, and the families of prisoners in general. In addition, the occupation continued the policy of demolishing houses during the pandemic, whether in Jerusalem or other areas of the region of the West Bank. These policies have resulted in forced displacement of families and the consequences for women and girls.

In general, despite numerous efforts by women's and donor organizations to integrate gender into the trends of the Government of the State of Palestine, the period of the pandemic showed that the commitment to integration remained at the official level rather than at the executive level. The emergency plans did not take into consideration the impact on men and women, which is an indication of the importance of mobilizing efforts to develop mechanisms to ensure a real change in the patriarchal culture, which continues to control government trends and marginalize women's rights from the principle of ensuring gender equality. The pandemic showed the exploitation of the occupation for this period in order to implement its policies and complete its plans at the expense of the Palestinian people. Racism manifested itself clearly in the entirety of the occupation's performance.

Introduction

The world is living under the weight of the outbreak of COVID-19 pandemic, which has affected and continues to affect all walks of life, with the subsequent government measures based on isolation between countries and regions, restrictions on movement, quarantine, lockdown of public facilities and health consequences that have negatively affected citizens. Under this pandemic, women were the most affected by the gender blind measures taken by the Palestinian government. “COVID-19 pandemic affects everyone, everywhere. But it affects different groups of people differently, deepening existing inequalities,” the UN Secretary-General said.

In fact, the Palestinian situation, which distinguishes it from other states, is that the danger is not limited to the epidemiological but political aspect of the continuation of the Israeli occupation and its oppressive policies that continued during the pandemic. In May, the Israeli occupation government announced annexation policy² that includes part of areas C³. The decision of the occupation government to annex some of the West Bank territories culminates its policies that are contrary to United Nations resolutions relating to the rights of the Palestinian people, violate international humanitarian law, and reveal the failure of the occupying state to respect the United Nations Secretary-General's call for world peace and to stop conflicts in all parts of the world to cope with the COVID-19 pandemic. Gaza Strip suffered double isolation during the pandemic period. Gaza Strip has been closed and under total Israeli siege since 2006, isolated from the West Bank and the world because of the policy of isolation imposed by the Israeli occupation. In addition, successive Israeli military incursions into Gaza Strip by the Israeli occupation have led to the destruction of infrastructure, increased isolation, worsening economic and health conditions and an increase in community violence, particularly violence against women and girls.

In this reality, women and girls in the Palestinian society, before and during the COVID-19 pandemic, suffer from complex and multi-level violence, including Israeli violence, social violence resulting from patriarchal system and structures that make the balance of power in favor of men, and are reinforced by the discriminatory laws and legislation that are legacy of previous historical periods, which promote the stereotypical roles of women and contributes to their marginalization and violence towards them.

This is contrary to the State of Palestine's international commitments against inequality, whether in the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), the 2030 Agenda for Sustainable Development or the Nairobi Population and Development Summit. According to the UN Human Development Report 2019, the State of Palestine obtained

² The annexation policy is to annex the Jordan Valley and the northern Dead Sea, which accounts for 29 percent of the West Bank and currently some 65,000 Palestinians live in it and makes up 90 percent of Area C, according to the 2003 Oslo Accords, to the occupation authority. It is a major source of groundwater and one of the most fertile agricultural areas in Palestine. For more information on the division of Palestinian territories into A, B, and C areas, see the Negotiations Affairs Department page at <https://www.nad.ps>.

³

119 out of 189 when measuring development indicators, which are considered to be low in terms of human development. This is due to gender-based inequality, which has been seen as a key element in measuring the extent to which the 2030 Agenda for Sustainable Development is achieved, which calls for “no one will be left behind”.

In the context of gender inequality, and with the spread of the COVID-19, women and girls in the Palestinian society were most affected by government gender blind action and policies which was announced by declaring the state of emergency by the government.. A series of precautionary measures to contain the virus were taken, but the government did not intend to expand the prospects for intervention to include other issues related to societal realities, the most important of which is gender-based violence. Despite the continuing appeal by women's organizations to the need to enact Palestinian laws and legislation based on gender equality, including the Law on Protecting the Family from Violence, the Government of the State of Palestine still does not take into account the importance of eliminating violence against women and girls, and therefore has not considered this as a policy priority in the COVID-19 period.

The report was prepared in response to the call of the United Nations Special Rapporteur on violence against women. The statistical and qualitative data used in developing the report is based on the data provided by women's organizations that are members of the CEDAW coalition, in addition to the pilot study issued by the Ministry of Women Affairs⁴ during the epidemic period. Furthermore, a literature review was conducted on violence against women and girls in the pandemic period in Palestine. It should be noted that there are no official statistics from the Palestinian Central Bureau of Statistics on gender-based violence during the epidemic.

1. Violence against Women and Girls in Palestine before the Pandemic

- Women and girls are exposed to various types of violence at two levels; the first is the Israeli occupation and the second is the local violence, starting at the family level and extending to the society. Domestic violence is the most common in Palestine, where according to the findings of the National Survey on Violence in the Palestinian society, 2019, data show that women account for the highest incidence of domestic violence in its various forms. 29% of currently married women or ever married have experienced violence (psychological, physical, sexual, social, economic) at least once by their husbands. 39.3% of women, aged 18-68 who have never been married have experienced psychological violence by a family member, 13.9% of them have experienced physical violence, 0.6% have experienced sexual violence, 3.2% have experienced economic violence and 8.1% have experienced social violence.

- Despite the measures taken by the State of Palestine to eliminate violence against Palestinian women and girls, such as the adoption of the National Plan against Violence against Women in Palestine 2012-2019, the adoption of the National Referral System for Women and Girls Victims of Violence in 2018, the adoption of the resolution to adopt a gender-responsive budget in 2012, the development of status management protocols and

⁴ The pilot study is not published, but it is approved by the Minister of Women’s Affairs to use the data.

the follow-up of shelters, but community and domestic violence continues to be practiced on women and girls in Palestine.

- The main factors that lead to violence are due to the gender gap in the legal system based on gender inequality. The guarantee of women's rights and non-discrimination are enshrined in the Convention on the Elimination of all Forms of Discrimination Against Women and the International Covenant on Economic, Social and Cultural Rights and the International Covenant on Civil and Political Rights. The culture, customs and patriarchal traditions that entrench and allow discrimination against women and girls are based on “preserving the honor of the family” by controlling and determining women's lives by strengthening their stereotypical roles in the private space. And focusing primarily on the reproductive role and the roles of care for all family members, especially children, the elderly, the sick and persons with disabilities, and establishing these roles as a key factor in the continuity of the family. The measures taken by the government to eliminate violence were not sufficient to deter violence and provide protection, human dignity and the right to self-determination for women and girls. The rights of women and girls in private and public spaces remain incomplete and unprotected by the State of Palestine based on the principle of due diligence, which obliges the state in accordance with customary law and its legal and international obligations to take all measures to ensure and protect the rights of women and girls and to reduce gender-based violence.
- With technological development, the multiplicity of social media, and the use of it by many women, young women, young men and children, cyber violence has emerged as another form of violence that women and girls are facing. Women and girls are threatened, blackmailed, humiliated and harassed. According to the National Survey on Violence in the Palestinian Society 2019, 8% of married or ever women aged (18-64) have experienced one form of cyber violence by others on social media and 10% of female children have been subjected to cyber violence.
- Femicide still occurs in Palestine. Police statistics document primarily honor killing and murder in the context of family quarrels. Women's organizations consider that female deaths recorded under the cause of suicide, death in mysterious circumstances, death due to family quarrels or falling from a height all point to criminal suspicion, and that death occurred as a result of domestic violence against females and killing them. Based on women organizations reports, most of femicide are related to the claim of females of their rights in inheritance or as a result of being raped by a family member or due to a suspicion of a relationship with an unwanted person. These cases are closed at the community level, and the perpetrators are protected from criminal accountability. The number of femicide in 2019 was 24 and in 2020 the number has so far reached 17. This indicates a marked rise in female homicides during the first half of this year. The Ministry of Social Development report also notes that between January and April 2020, the Ministry of Social Development recorded 20 cases of suicide attempts due to difficult social and family circumstances, resulting in death⁵.

⁵ Data from the Women's Centre for Legal Aid and Counselling.

2. Violence against Women and Girls, Particularly Domestic Violence in the Context of the COVID-19 Pandemic Lockdown

- During the period of the pandemic and after the announcement of the state of emergency in Palestine, coinciding with the preventive measures taken by the State of Palestine, including the policy of home quarantine, and the closure of shops, a large number of workers in industrial and commercial establishments were reduced or laid off, resulting in a decrease in the per capita income rate and the loss of many workers' jobs, including women. The lockdown has also had a significant impact on women's employment in the informal and seasonal sector, as women's employment is concentrated in domestic farming, domestic work, nurseries and kindergartens. This economic reality during the pandemic has further marginalized women and made them more vulnerable to destitution and poverty, especially since the women who head their families make up 10% of the women in Palestine. The closure of educational institutions at all stages has increased the burden on women and girls, who are expected to carry out household chores and unpaid care roles for the whole family. Under the pandemic, women are taking on multiple roles, including domestic work, home schooling, child recreation, healthcare, increasing time in domestic work and food production for domestic use, and increasing the burden for older people, patients and family members with disabilities, which requires greater effort to provide them with home care.
- The impact on women and girls is not limited to the reproductive and productive roles, but also the psychological situation and stress and pressure on them due to the circumstances surrounding the pandemic. The pilot study on the Impact of COVID-19 on GBV in the State of Palestine during the Quarantine 2020⁶, which was consistent with the data of women's organizations, showed that 50% of females fear losing their jobs, and 47% said they did not have access to food for the next three months⁷, which is a psychological burden for them. Some institutions in the Gaza Strip have also indicated that during the pandemic period, some women who came to the health clinic suffer from menstrual disorders as a result of their mental state. Some institutions have also reported that some women are subjected to unwanted pregnancies because of the policy of home quarantine and unwanted wedlock sexual relations.
- The pilot study indicates that psychological violence is the highest since 55% of women said they had been exposed to it, followed by economic violence at 54%, mainly due to the interruption of work for a period, especially in the private sector where women are already discriminated against, and the interruption of the financial and purchasing movement of many sectors (economic activity), followed by social violence at 27%. All of these women had to stay at home during the period of home quarantine and they were unable to communicate with relatives, parents, and children during the quarantine period. The

⁶ Survey Sample consist of 5095 family and was conducted in April 14-25/2020

⁷ Ministry of Women's Affairs, 2020, *Pilot Study on the Impact of the COVID-19 Pandemic on Gender-Based Violence in the State of Palestine* (April 14-24, 2020-) Basic Findings, Summary of Findings, Ramallah, Palestine, p.15

parents are considered in the Palestinian society to provide protection for women and girls. 47% of women came to their families to seek protection during the pandemic period. In general, however, when married women are subjected to violence, they turn to parents primarily for protection. On the other hand, as a result of the home quarantine policy, older women have suffered double violence as a result of the separation of children who support them in terms of providing daily basic needs.

- 24% of women were subjected to verbal violence. 15% of women suffered significantly from physical violence. Although physical violence is the lowest percentage, it remains the most serious due to the fact that violent men took advantage of the closing of courts, movement restrictions, and difficulty of accessing reporting centers⁸. 11% of women were subjected to sexual harassment, 35% were subjected to bullying, 21% were subjected to extortion and blackmail, and 7% were subjected to cyber blackmail⁹. In the period of the pandemic and because of the home quarantine, the rate of cyber violence may be higher because girls use social media to spend time¹⁰.
- With regard to violence against children, the same study indicates that 270,000 children¹¹ had experienced various types of psychological, physical and verbal violence. This is an indication that the psychological pressure of the home quarantine policy, and lack of alternatives, have contributed to the continuing cycle of domestic violence. Violence increases when violence between spouses prevails and impacts children.
- The same study indicates that 88%¹² of women with disabilities experienced different types of economic, social, physical, psychological, and verbal violence. Increasing the burden on women, who are the first and only source of unpaid family care, contributes to the neglect and marginalization of individuals with disabilities in the family. In the absence of government social support measures, violations against persons with disabilities are on the rise.
- It is worth noting that violence against women and girls, both before and after the pandemic, in Gaza Strip is higher than in the West Bank. This is due to the political closure imposed on Gaza Strip by the occupation¹³, the subsequent destruction of infrastructure and the rise in unemployment due to low employment opportunities and the lack of available resources. These factors have multiplied in severity and impact on citizens in Gaza Strip during the period of the COVID-19 pandemic, and violence against women and girls has been compounded by the measures taken, the most important of which is the home quarantine in Gaza Strip in the period of the pandemic. For example, 22.7% of children

⁸ Ibid, p. 13

⁹ Ibid, p. 13

¹⁰ Ibid, p. 13

¹¹ Ibid, p. 17

¹² Ibid, p. 17

¹³ OCHA, 2020. Supporting women in Gaza facing COVID, Violence and Poverty. At:

<https://reliefweb.int/report/occupied-palestinian-territory/supporting-women-gaza-facing-covid-violence-and-poverty>

were subjected to violence during the pandemic in Gaza Strip compared to 9.3% in the West Bank¹⁴.

The table below shows data from some women's organizations, including but not limited to the number of cases received during the pandemic period, to give a picture of the number of cases that have resorted in a short period of time as of the beginning of the declaration of the state of emergency on March 4 to the end of April 2020. That is just one month.

Table (1) Data of Violence against Women and Girls from a number of Women's Organizations in both the West Bank and Gaza Strip, as of the Declaration of the State of Emergency from March 4 until May 20, 2020¹⁵:

Organization name	Type of service provided	Number of women and girls who have been subjected to violence and have resorted to the organization
Women's Centre for Legal Aid and Counselling		
	Long-term consultation and intervention services	594
	One-time consultation	399
	Support and protection for women whose lives are at risk	21
	Referral to shelters	4
Center for Women's Legal Research & Counseling and Protection – Gaza		
	Legal aid	299
	Psychosocial and social support	377
	Psychological counseling, whether inside the Center or over the phone	736
	Reception in shelters	14
	Family mediation	86
	Children's status management sessions within the Center	20

¹⁴ Ibid, Ministry of Women's Affairs, 2020, *Pilot Study on the Impact of the COVID-19 Pandemic on Gender-Based Violence in the State of Palestine* (April 14-24, 2020-) Basic Findings, Summary of Findings, Ramallah, Palestine p.

¹⁵ Because of the varying violence types measure variables among institutions, it was not possible to make approximate ratios to facilitate the reading.

Stars of Hope Association for the Empowerment of Women with Disabilities		
	Monitoring of cases of psychological and physical violence in the West Bank and Gaza Strip	36
Red Crescent Society of Gaza Strip		
	Legal counselling	108
	Psychological counselling	164
	Social counselling	181
Family Defense Society		
	Support for women who have experienced psychological, physical, sexual and cyber violence	150
Palestinian Working Women Society for Development		
	Social advice	1743
	Advice over the phone	719
	Legal advice	77
Palestinian Family Planning and Protection Association		
	Social and legal advice for people who experience physical, economic and psychological violence	1302
Health Work Committee		
	Consultation - psychological and social and health counselling, sexual harassment counselling	56

- It should be noted that women who have been subjected to violence and have sought help in the pre-pandemic period, or who have been silent about violence by a family member, are at risk of an increased incidence of violence against them because they are constantly present with perpetrator of violence. There are new cases, as revealed by the working institutions, who have reached out by telephone to receive advice and counselling.

3. Available Government and Civil Society Support/help Lines

- As a result of the measures adopted by the Government of Palestine - restrictions on movement and the application of the policy of home quarantine, all institutions in the West Bank resorted to the policy of working from home based on the decision of the Council of Ministers on safety measures during the period of the pandemic while the majority of women's institutions continued to operate through their offices in Gaza Strip. These measures have contributed to reducing direct interventions with women and girls victims of violence. The direct interventions were replaced by safety/help lines. Table 1 above refers to the number of consultations, admissions and legal and social counselling for women and girls victims of violence during the pandemic period. The institutions explained that they have resorted to increasing the number of safe lines in order to provide more women with access to the required assistance. The majority of the non-governmental organizations have indicated that the rates of social, psychological and legal counselling provided to women and girls, both directly and over the telephone, have increased nearly threefold from those provided prior to the COVID-19 pandemic.
- At the government level, the Ministry of Health has taken one measure regarding GBV, which deemed important to women, namely, the announcement of free support/ help lines for the response to the COVID-19 pandemic. However, the lines are often not adequately responsive to cover and follow up on the concerns and health conditions of women under the pandemic. The lines have not covered all areas and have not been responsive at all times at the same pace since the first state of emergency was declared on March 5, 2020. The lines were not intended to receive cases of violence, and medical staff were not originally equipped to deal with and refer cases. On April 16, 2020, the Family Protection Unit of the police department, opened a safety line to respond to cases of gender-based violence, but we do not have official statistics on the number of cases.
- Despite the increase in the number of legal, social and psychological consultations over the telephone, internet and various social media, women's institutions indicated that the number of women and girls victims of violence may be more, but the fear of women victims of violence of seeking help because of the presence of the permanent aggressor in the private space led directly or indirectly to the reluctance of women victims of violence to seek help for fear of the reaction of the aggressor if they were discovered, especially in families living in a narrow living space. Both help/support and social media have become watched by their husbands and family members for staying at home during the home quarantine period¹⁶, which has been deemed a disruption in women and girls' access to alternative means - the help/support line, and social media - to seek help.
- In general, the majority of services to provide protection and support to women and girls victims of violence are provided through the safety line except in cases that necessarily require direct intervention by specialists. Nevertheless, the policy of lockdown and home quarantine and inter-regional lockdown has affected the process of provision of protection for women, particularly for older women and women with disabilities who lack any access to protection in the absence of measures and procedures that facilitated their access to

¹⁶ Women's Centre for Legal Aid and Counselling

information and resources in the pre-pandemic situation. Thus, during the pandemic period, the degree of denial of access to available protections, including support lines, has increased. Moreover, the extent to which they know these lines becomes increasingly questionable.

4. The Impact of the Restrictive Measures of Home Quarantine on Women Victims of Domestic Violence

- The Government has not announced any exemptions for the restrictive measures for women victims of violence to go out and seek help, and it has not been easy to come out to seek help for several considerations, including the presence of the aggressor almost permanently at home, the presence of multiple barriers, whether security or emergency committees in the areas asking for the reason for leaving home. It will not be easy for women to engage others in their community with the circumstances of their departure from home to seek help, especially since the majority of committee members are known to women in their communities.
- In addition, the economic crisis, which was compounded by restrictions on movement and the closure of industrial and commercial establishments, resulting in the dismissal of a number of workers and suspension of wages during the period, resulted in the loss of the majority of job and living security, resulting in increased psychological stress and frustration, thereby taking this out on women and girls through violence, especially verbal violence. Many women have also lost their jobs, which has increased their dependency on men, which has rendered them more financially dependent and more vulnerable to violence.
- Women have expressed the psychological stress and frustration they experienced in the light of the increased domestic burdens in addition to the violence perpetrated against them by a family member; often the husband. The psychological pressure among pregnant women is increased by the closure of healthcare centers in the West Bank and limited access to healthcare centers in Gaza Strip. This causes them to be very stressed, which has a negative impact on the health of the mother and the fetus. The lack of family planning methods for the majority, which depends on the services of the Ministry of Health, has contributed to increased psychological pressure on women and their impact on their health status.

5. The Reality of Shelters during the Period of COVID-19 Pandemic

At the beginning of the declaration of the state of emergency, restrictions were placed on the protection/shelter homes of the Ministry of Social Development¹⁷ and the closure of the protection/shelter center in Gaza Strip. However, the protection and shelter centers of women's organizations¹⁸ continued to provide service and admit cases during the pandemic period.

¹⁷ Mehwar Center in Beit Sahour and the Safe Home in Nablus, which is run by the Family Defense Society.

¹⁸ Hayat Center for Protection of Women and Families run by the Center for Women's Legal Research & Counseling and Protection in Gaza Strip and the Emergency Center run by the Women's Center for Legal Aid and Counselling in Jericho.

Restrictions on movement and the obligation of home quarantine and the instructions of the Minister of Social Development to the shelters in the West Bank not to admit any new cases unless they were subjected to quarantine for 14 days imposed a challenge on the protection/shelter centers that had not been equipped to include quarantine facilities¹⁹. This includes protection/shelter centers for women at risk. This created a challenge for partners in referring women victims of violence to safe home services and having to shelter women victims of violence in detention rooms and policewomen rooms until the crisis is resolved, according to the Family Protection Unit. And as the urgent need to provide protection to women who are subjected to domestic violence exacerbated.

The Government of the State of Palestine responded to this need. The Council of Ministers endorsed procedures for referring women victims of violence to shelters during COVID-19 pandemic at its meeting on May 4, 2020 following the recommendations of the Ministry of Social Development and the intervention of women's organizations that had protection centers. This was due to the need to take decisions and actions on measures to refer women victims of violence under the state of emergency of the coronavirus pandemic.

Below are the procedures for referring women to shelters:²⁰

- The Ministry of Health shall conduct a coronavirus test for all women and their children who are victims of violence who will be referred to protection centers, and the Family Protection Units of the police cooperate with the Ministry of Health by keeping the beneficiaries in their safe places while waiting for the test, or for other periods if necessary.
- The Ministry of Health shall give full approval to refer beneficiaries to the protection centers after the issuance of the test and after studying the disease map of the beneficiary depending on the area of residence and movement and whether she has been with people infected with the coronavirus or not... etc. This is to ensure that no beneficiary can be a carrier of the disease. This is conducted in coordination with the Ministry of Social Development (Women's Development Counsellors) and the Family Protection Units of the Palestinian Police.
- The number of officers of the Family Protection Units and Women's Development Counsellors shall be fully dedicated and increased and given all they need to work with women victims of violence to maintain the speed and quality of service provided, out of respect for the privacy and confidentiality of cases.
- The three protection centers²¹ located in Palestine shall be equipped with an isolation room for new cases that have had the coronavirus test (with a negative result) in order to isolate cases for a period of 14 days as instructed by the Ministry of Health before they join other beneficiaries who are in the centers.
- The coronavirus test shall be conducted again based on the instructions of the Ministry of Health if necessary, after 14 days before they join other beneficiaries.

¹⁹ United Nations Office for the Coordination of Humanitarian Affairs, 2020, Crisis in the Midst of a Crisis: Combating Gender-Based Violence during the Coronavirus Crisis (COVID-19) at <https://www.ochaopt.org/ar/content/crisis-within-crisis-fighting-gender-based-violence-gbv-during-covid-19-0>

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²¹ The procedures should be applied in the three shelters in Gaza and West Bank

- If the coronavirus test is positive for women victims of violence or their children, the Ministry of Health shall promptly refer them to the approved quarantine in each area, provided a dedicated and separate place in the quarantine place and away from other quarantined people in order to preserve confidentiality and privacy, and to provide them with special protection by the Family Protection Units for their own life preservation. If there are any relatives of the beneficiary in the quarantine, they will be referred to another governorate in arrangement and coordination with the police and the women's counsellors from the Ministry of Social Development and the Governorate.
- After the beneficiary has fully and definitively recovered (if infected) and based on the instructions of the Ministry of Health, she is referred to the protection centers and placed in isolation there again. This is followed up and coordinated with the Ministry of Health.
- All partners in all sectors, especially the Ministry of Health and the Ministry of Social Development, the police, governorates and protection centers shall always cooperate and coordinate work and effort to admit beneficiaries and provide them with the necessary services.
- The names and numbers of the Focal Persons should be circulated and distributed by the various parties to follow up on this topic and facilitate all matters in addition to the numbers of service providers in all regions to facilitate constant communication and speed of service delivery.
- Civil society organizations, especially those responsible for protection centers and other organizations that can provide psychosocial support to women victims of violence, shall cooperate. Support shall be given to protection centers in any service or support provided at all stages of protection of women victims of violence, whether in quarantine or in protection centers.
- The competent governmental and non-governmental authorities shall train the staff of the protection centers on how to deal with coronavirus disease, especially during quarantine or isolation of women inside the centers, and all the measures and precautions to be taken during isolation.
- All potential, disinfectants, masks and gloves shall be provided all the time to the police protection centers and family protection units in accordance with the instructions of the Ministry of Health in order to ensure that the disease does not spread.

6. Circulation of Decisions on the Protection of Women and Girls from Violence in the Context of the COVID-19 Pandemic

- Social media and the webpages of ministries during the pandemic were the most commonly used to communicate information and decisions on protecting women and girls from violence. When the procedures for the shelters were issued, they were circulated on the social media as well as emailed to partner organizations. The same applies to the telephone numbers of support/help lines, which were published through various means, including video on local television stations, as well as social media pages and the website of each ministry.

7. The Effects of Decisions in the Context of COVID-19 on Women's Access to Justice

- All regular, sharia and ecclesiastical courts were closed from the beginning of the pandemic until May; hence, so many cases are still pending. Usually, personal status lawsuits are brought to court in sharia and ecclesiastical courts. This has contributed to the length of litigation and the consequent problems in women's daily lives, especially since family legal cases took lengthy periods of processing at courts before the outbreak of the pandemic. Consequently, the period of the pandemic has contributed to delaying the decision on family issues and keeping women under the oppression of the husbands, fathers or brothers. For example, 210 legal cases filed by lawyers²² before lockdown was announced were disrupted. In Gaza Strip, sharia courts have been partially closed and lawsuits have been disrupted, including 100 lawsuits before the courts, 45 cases pending and the suspension of sentences for some 30 cases²³, most of which may be concerning alimony for wives or children, divorce cases, custody cases or visiting young children. These cases are mostly alimony payments for wives or children, divorce cases, children custody cases, and children visits cases. At the beginning of May, sharia courts were opened to handle administrative matters and emergency legal cases only and no new cases were filed.
- Additionally, the closure of the courts contributed to perpetrators' escape from justice due to the lack of the right to litigate. This gave an incentive to perpetrators of violence to continue the practice due to the absence of an effective judiciary during the period of the pandemic.
- With regard to the police (executive branch), data by women's organizations in both the West Bank and Gaza Strip indicate that the police continue to deal with urgent violence cases when needed. However, women's organizations reported that cases of violence against women and girls were not a police priority and their role was not adequately activated to protect them. The data indicate that police stations were not prepared to receive cases during the pandemic period and with the closure of shelters. There were no alternatives for the police to refer cases that reached them, despite the small number of women who had come to the police for help during the pandemic. In this regard, the recourse of women victims of violence to the police – the women who were able to communicate and request police service – found such service available at the police- family protection department. According to the reports of women's organizations, services were provided to this group and cases were referred to the prosecution to take legal action. However, there was some confusion regarding the health situation and the mechanism for dealing with women who have been victims of domestic violence and require advanced protection until the Council of Ministers approved, on May 4, a decree of the procedures and measures for referring women victims of violence to shelters (stated in the arrangements of the Ministry of Social Development).
- What has also contributed to the reluctance of women victims of violence to resort to the police (those who resorted to the police during the pandemic were those who had been

²² Based on a report by the Women's Centre for Legal Aid and Counselling

²³ Based on a study by the Center for Women's Legal Research & Counseling and Protection.

subjected to severe violence by their husbands) was that perpetrators of violence were not arrested under the state of emergency and precautionary decisions to prevent the virus.²⁴.

- In light of the pandemic and with the closure of all courts starting March 24, 2020 to May18, 2020 , in addition to the focus of the security agencies on maintaining civil peace and applying the decisions of the Government of Palestine on declaring a state of emergency, domestic violence cases were resolved by the family. This is basically contradicting with the women organizations policies who have been working on strengthening the rule of law in such cases. Thus, such measures have negative effects on women's rights, mostly because the solutions adopted by the family will not be in the interest of women due to the patriarchal ideology that controls this mechanism of protection.

8. Effects of Current Restrictive Measures and Lockdown on Women and Girls' Access to Health Services

- Based on a decision of the Palestinian Ministry of Health, the Ministry's work during the pandemic period was directed at identifying the virus and providing diagnostic and treatment services. The Ministry of Health has not taken into account the special needs of women and girls in general or women and girls victims of violence in particular. With the start of the state of emergency, all primary healthcare centers, which include prenatal and children healthcare, were closed, without taking into account the health effects that women at all ages may have as a result of lack of healthcare, especially women and girls victims of violence.
- Women during pre-pandemic, especially in areas classified as C²⁵, which are under the full control of the occupation, faced many problems due to the Israeli occupation and the consequent closures of the areas, In addition most of Area C has been allocated for the benefit of Israeli settlements or the Israeli military, at the expense of Palestinian communities. This impedes the development of adequate housing, infrastructure and livelihoods in Palestinian communities, and has significant consequences for the entire West Bank population. Structures built without permits are regularly served with demolition orders, creating chronic uncertainty and threat, and encouraging people to leave. Where the orders are implemented, they have resulted in displacement and disruption of livelihoods, the entrenchment of poverty and increased aid dependency²⁶. The barriers before the pandemic existed in the first place and increased during the pandemic period as a result of the increased policy of isolation by the Government of the State of

²⁴ The report of the Women's Centre for Legal Aid and Counselling indicates that by following up on the cases at risk and referring them to the Police Protection Units, women filed complaints of severe violence. However, perpetrators of violence were not detained. The rule was to accept requests for release, which forced the women victims of violence not to seek protection or seek alternatives to protection.

²⁵ Area C is the largest administrative division of the West Bank as designated by the Oslo II Accord, comprising 63.9% of the West Bank area. For more information see for example: UNDP.2016, Building Resilience in Area C: Challenges and Opportunities. At: file:///C:/Users/LENOVO/Downloads/UNDP-papp-research-PRC_Building%20Resilience%20in%20Area%20C.pdf

²⁶ Occupied Palestinian Territory (OCHA), (No date). Area C. At: <https://www.ochaopt.org/location/area-c>

Palestine to prevent the spread of the virus. After the declaration of a state of emergency, government care centers were suspended and the Ministry did not take any alternative measures in dealing with primary healthcare centers and reproductive health services, thus depriving women of access to reproductive services during the pandemic period. The pilot study issued by the Ministry of Women's Affairs' indicate that 26%²⁷ of women do not have access to health services due to the lockdown policy²⁸. This has a significant post-pandemic impact in terms of increasing anemia for pregnant women, child malnutrition, sexual diseases, and unsafe abortion. In addition, women and girls are subjected to rape or sexual abuse within the family and the health consequences that may need to be treated at healthcare centers, which are the first address of victims of violence of women and girls.

- Health services provided by the UNRWA and directed only to refugee women and girls continued to provide special services in reproductive and sexual health, albeit in part. With regard to non-governmental organizations, they continued to provide direct health services to women such as the Health Work Committees, the Medical Relief Committees and the Red Crescent, in addition to private sector health facilities, which have imposed special restrictions on their work for several periods, except that many women have not been able to afford the financial burden of treatment, but women's visits to these centers were less than usual because due to the lockdown policy. Alternatively, government healthcare centers are the most popular among women because of their low cost compared to others.
- Access to health services for women and girls with disabilities has become more difficult during the pandemic period. The Government of the State of Palestine has not taken the necessary measures to facilitate their access to health services. After the suspension of field medical services for villages and cities' suburbs during the pandemic period, as well as the inability of medical personnel to reach many areas, this has deprived women and girls with disabilities of the right to healthcare. With regard to health services related to rehabilitation services for persons with disabilities, they were suspended; hence, women and girls with disabilities had no access to them. These services are as important as any other type of health service²⁹.
- As far as older women are concerned, based on the National Survey on Violence in the Palestinian Society 2019, they suffer from health neglect violence; therefore, in the pandemic period they are expected to be the most marginalized in access to healthcare under the lockdown policy in light of the closure of primary healthcare centers. The situation is worse in areas C where health centers are basically lacking to meet the needs of all individuals and all ages.

²⁷ Ministry of Women's Affairs, 2020, *Pilot Study on the Impact of the COVID-19 Pandemic on Gender-Based Violence in the State of Palestine* (April 14-24, 2020-) Basic Findings, Summary of Findings, Ramallah, Palestine, p.16

²⁸ Ibid, p. 16

²⁹ Qader for Community Development

9. The Implications of Government Decisions in the COVID-19 Period on Women in the Labor Sector:

- The majority of women are in the informal sector³⁰ and therefore have lost their jobs because of the actions taken in the absence of alternatives to compensation and management. According to a report released by CARE, the majority of females who own small businesses have had to reallocate the money they were devoting to their business, to spend on family needs³¹. A survey by UN Women³² notes that the sectors most affected by the pandemic among women's projects are food products at 26%, followed by embroidery at 20% and nurseries at 11%. The decline has affected the sustainability of women in access to income and financial autonomy. 42% of women who participated in the UN Women survey³³ reported that they had seen a decrease in demand for their products, due to two factors based on the same survey: 9% reported that restrictions on movement and travel affected their projects and the second factor, 7% reported that the increased burden of childcare prevented them from completing their work on their projects³⁴. According to statistics, 1,000 women working within the Green Line and settlements face a double risk of being suspended from work or being in the area of risk due to the COVID-19 pandemic, which would expand the segment of women affected by the state of emergency³⁵.
- With regard to the employment of women in the private sector, given the participation rate of women in private sector employment, the sector has 83,600 workers in the West Bank and 25,300 in the Gaza Strip, distributed across several sectors. According to the same statistics, 35% of female workers in the private sector are paid less than the Palestinian minimum of 1,450 shekels under normal circumstances. Statistics from the Palestinian Central Bureau of Statistics indicate that poverty rates are steadily higher among households whose income depends on the private sector³⁶. Hence, the economic downturn resulting from precautionary

³⁰ Although PCBS, UNSCO, FAFO have in the past decade filled a lot of the data gaps periodically on the Palestinian economy, through time-use data, labor force, household and sectoral surveys, (health, education, agriculture, etc.) and population census from 1997, on the informal employment level, there is still no nationally representative survey that has been conducted. Even in the labor force surveys informal employment is not incorporated as a category. See more in: Esim, Simel & Kuttab, Eileen, 2019. Women's Informal Employment in Palestine: Securing A Livelihood Against All Odds. Working Paper 0213.

³¹ A Summary of Early Gender Impacts of the COVID-19 Pandemic. CARE Palestine WBG COVID-19 Rapid Gender Assessment-March 2020. Assessment targeted a sample of beneficiaries of CARE Palestine WBG projects by gender and age, to assess their risks and vulnerability during the crisis. Camps or communities were selected to gather information from women, men, and youth at different locations through CARE staff in the WB and Gaza who conducted structured interviews from April 9-12, 2020 with 51 respondents. .

³² UN Women conducted a small survey on The impact of the new Coronavirus COVID-19 on small, micro and medium enterprises run by women in Palestine, the sample consisted of 301 women. Despite the fact, the sample was small but it gives an indicator on the impact of the government procedures in facing COVID-19.

³³ UN Women. (2020). The impact of the new Coronavirus COVID-19 on small, micro and medium enterprises run by women in Palestine: <https://www2.unwomen.org/-/media/field%20office%20palestine/attachments/publications/2020/4/impact%20of%20covid19%20on%20womenled%20msmes%20in%20palestine%20arabic.pdf?la=en&vs=5707>

³⁴ Ibid

³⁵ Palestinian Working Women Society for Development

³⁶ Palestinian Central Bureau of Statistics(PCBS),2019.The Current status of the Palestinian Labour force. On the occasion of the international Worker's Day. Press release.30/4/2019

measures to stop the spread of COVID-19 threatens the income of a large segment of women working in the private sector.

10. Obstacles/Hindrance Encountered to Prevent and Combat Domestic Violence during COVID-19 lockdown

All parties, whether governmental, non-governmental, and private sector, have contributed by taking multiple measures to address the COVID-19 pandemic. The majority of interventions have been geared towards reducing and preventing the virus without giving importance to gender as a key component of the planning and situation management process, due to several reasons, including,

- The Government of the State of Palestine and civil society are not prepared to respond with the health-related state of emergency. The Palestinian society has become accustomed to preparing for political crises because of the nature of the political situation in Palestine, which is represented by the Israeli occupation and the destruction it has left in all sectors of the Palestinian society. In the period of the pandemic, the community culture reflected by the measures taken, showed that the psychological panic was due to the spread of the virus. This has resulted in a focus on prevention.
Looking at the nature of the measures provided, the humanitarian nature of food and medical assistance provision was the first measure that has dominated the quality of services from both national and international partners. The common factor in the process of managing the political and pandemic crisis is that gender has remained marginalized and confined to organizations that work with women. This fact has led to the lack of a unified contingency plan, clear procedures and gender-based risk management plans, the preparation of service providers to work responsive to the exceptional conditions women are going through under the pandemic, and delays in referral to protection/shelter centers during the first period of the state of emergency. It can be said that the lack of readiness has marginalized domestic violence issues in national policies in the emergency period.
- The lack of public transport to enable women to leave the home to seek help, especially in villages and marginalized areas, and the existence of many barriers have made women reluctant to leave the locality where they lived and because they were unable to disclose the reason for their departure³⁷.
- Closing regular and sharia courts, which hindered the course of justice and prevented the provision of legal rights to women victims of violence³⁸.
- Failure to provide alternatives to detention orders and prevent convicts from evading their financial obligations to their families in alimony cases. The refusal of some husbands sentenced to see their children from returning children to the foster mother during the period of the pandemic, and mothers' inability to pursue such husbands through the police for lack of detention orders during this period³⁹.

³⁷ Women's Centre for Legal Aid and Counselling

³⁸ The Non-Governmental Women Coalition for the Implementation of CEDAW in the Occupied State of Palestine

³⁹ The Non-Governmental Women Coalition for the Implementation of CEDAW in the Occupied State of Palestine

- Women make up a large proportion of service providers, especially health services (60% of health staff). This places on them dual responsibilities towards their work tasks on the one hand and their family responsibilities on the other. In this complex reality, which women service providers are supposed to be at the top of their work, they have not had the training and qualification to deal with the pandemic, and to balance between preventive measures and their willingness to provide services and commitment to their families. In shelter and protection services, we see that the staff at the protection centers have not received specialized training to deal with this crisis, both socially and psychologically, or in terms of health and preventive measures that help protect themselves, their families and target groups.
- According to a study by CARE International, quarantine centers in Gaza Strip do not take into account gender-based needs⁴⁰. More than 45% of women in quarantine centers are women. However, all members of the medical and security staff are men. This is difficult for women who feel that their needs and issues are not being focused on or addressed⁴¹.
- Under-representation of women in decision-making positions and regional emergency committee selections. The omission of the role of women in the composition of regional emergency committees has had a significant impact on the opportunities for women in remote areas to seek assistance in the event of violence.
- The weakness of the official media in terms of disseminating information about support lines, numbers, support institutions, quality of service for women and girls victims of violence and raising awareness of violence against women and girls during the pandemic. As for the media for women's organizations, all visual, audio and social media have been used to reach women and communicate information about the support lines and services provided by them to ensure that women and girls receive protection and support during the pandemic.
- With regard to persons with disabilities, the closure of the protection/shelter centers that provide services to persons with disabilities regardless of gender, especially people with mental disabilities and their return to their homes, and the inability of parents to deal with their children, because of the specific services provided to them, which stopped suddenly and totally, and the full responsibility of the families of persons with disabilities, led to making them more vulnerable to violence against them. The lack of rehabilitation services for the staff of the Ministry of Social Development to deal with the families of people with disabilities before the pandemic contributed to putting parents during the pandemic under pressure because they were unaware of how to deal with the many behavioral patterns, difficulties and challenges that emerged during the pandemic. In particular, measures to prevent social distancing, personal hygiene and others require parents to provide them to people with disabilities⁴².
- Funding: The Palestinian economy is under occupation. The economy is dependent on humanitarian and development aid from donor countries. The emergence of the global economic crisis, due to the spread of the pandemic, affected the budget of the State of

⁴⁰ Care. (April 2020). Gendered Impact of COVID-19-In Palestine West Bank/Gaza

⁴¹ Care. (April 2020). Gendered Impact of COVID-19-In Palestine West Bank/Gaza.

⁴² Qader for Community Development

Palestine. The declaration of a state of emergency, and in order to face the spread of COVID-19, an emergency budget was allocated by the Government of the State of Palestine to both the health and security sectors at the expense of the rights of marginalized groups.

- Poor health sector budget, including sustainable health services for women, girls, mothers, pregnant women and menopause. Poor coverage of expenditures on major programs for women's health and development, which fails to enable the Ministry to cover the deficit and indebtedness, which is evident in the subject of medical referrals, which has resulted in a continuing shortage of medicines for chronically ill women, children and the elderly⁴³, and lack of assistive devices for persons with disabilities.
- The political divide between the West Bank and Gaza Strip has affected the difficulty of prosecuting the perpetrators of violence against women and girls. The lack of coordination has made it difficult to expose them and punish them and to protect women and girls from extortion.

11. Good practices to prevent and combat violence against women and girls and domestic violence and combat other discriminatory gender-related issues in the COVID-19 period by governments

Below are some of the Good practices taken by the government as follows:

- The Ministry of Social Development announced on April 16, 2020 a list of the names and telephone numbers of social workers available to provide protection and support to women.
- The Council of Minister' decision on May 4, 2020 on the procedures for working in shelters, protection for women victims of violence and protection under the pandemic.
- Providing safe and free lines by the Police' Family Protection Unit and the Ministry of Health to provide general advice on the pandemic.
- The Ministry of Women's Affairs to urge the Council of Ministers to integrate women into emergency committees so that the composition of these committees becomes more gender-sensitive, and a Council of Ministers' decision to integrate women into decision-making positions related to pandemic response and its consequences⁴⁴
- Intensive cooperation and coordination with relevant ministries and partners, especially the Ministry of Women's Affairs and the Ministry of Social Development, to work diligently to find alternative mechanisms to protect and support women.
- Loan facilities for women's SMEs launched by Palestine Monetary Authority.⁴⁵
- Putting the Family Protection Law on the agenda of the Council of Ministers. The relevant ministries have been asked to review the law and make observations on it in order to approve it in the first reading.

⁴³ Health Work Committee

⁴⁴ Noting that women were not part of emergency committees and decision making spaces naturally, which created the need to call for engage women

12. Good Practices to Prevent and Combat Violence against Women and Girls and Domestic Violence and to Combat other Gender-Related Effects during the Pandemic by NGOs, National Human Rights Institutions or those Working on Equality

The women's organizations that participated in the preparation of this report unanimously agreed that the most important good practices by non-governmental organizations and civil society were:

Services

- Increase the number of free 24-hour helplines to provide support and guidance to women victims of violence and advertise them through the media and social media platforms. Although knowledge of the existence of helplines did not reach all women and despite the obstacles in women's use, some institutions used different media to advertise them.
- Equipping the West Bank Emergency Centre and the Hayat Centre in the Gaza Strip with preventive measures for COVID-19. Specialized staff have also been set up to receive women victims of life-threatening violence and provide rooms for quarantine.
- Since the beginning of the declaration of a state of emergency, the Health Committee of the civic society organizations contributed by distributing parcels and disinfectants in various West Bank governorates, with a special focus on the populations of marginalized areas, villages and towns adjacent to the annexation wall, as well as a series of protection measures consistent with WHO recommendations in health centers that provide services to vulnerable groups of women
- Providing humanitarian assistance to women victims of domestic violence, such as food, in-kind and medicine, in partnership with various coalitions and forums.

Networking and coordination

- Coordination and follow-up with the Ministry of Women's Affairs and the Ministry of Social Development on the adoption of the Family Protection Against Violence Law. The law has been submitted by the Ministry of Social Development and with the support of the Ministry of Women's Affairs to the Council of Ministers for approval.
- Activating the role of protection networks for women victims of violence among women's institutions working on violence issues and related government agencies and international institutions working on cases of violence against women and girls.
- Directing volunteer groups of women's organizations to lead initiatives in their communities that support women and respond to their needs during the pandemic.
- Cooperation with various UN organizations, particularly UNFPA and UN Women, and civil society organizations to move collectively through joint awareness campaigns and through platforms of discussion and debating of experiences of inter-institutional movements.
- Cooperation with the Association of Social Workers and Psychologists to help women and girls victims of domestic violence and participation in the emergency committees they have formed.
- Support women and girls in local councils to participate in emergency committees to provide support and support to women and girls, especially in marginalized areas.

Research and reports

- Providing periodic data and reports on women victims of violence who have gone to seek assistance from the center and to put national and international bodies in the picture of updates on the provision of support and protection services to women victims of violence.
- Provide analysis papers and awareness bulletins diagnosing the reality of women victims of violence and making recommendations to decision makers to bridge the gap and work to correct the situation in the interests of women

Level of Training and Capacity-Building

- Continue to hold virtual-training courses on the development of the capacity of staff and other institutions on the concepts of women's rights and their impact on the period of the COVID-19 pandemic
- A series of training and learning counselling to be held among the health sector teams. The teams participated in emergency intervention training workshops and the mechanisms of providing psychological support and first aid for women victims of violence.

Community awareness of violence during the pandemic

- Issuing a range of educational and awareness materials and providing a set of instructions and mechanisms on ways to deal with persons with disabilities to prevent violence.
- Forming teams of women's health and community doctors, health educators, and mental health service mentors. A rapid response was made by announcing telephone lines and support and counselling mechanisms for women at risk of violence and women with health difficulties.

13. Violations of the Israeli Occupation of Women and Girls in Palestine

- Palestinian communities in particular in areas C, which are under security and administrative control of the Israeli occupying power, suffered double marginalization during the pandemic period. These communities, numbering more than 100, are particularly vulnerable to COVID-19 infection due to the lack of adequate community infrastructure, water and sanitation facilities and limited access to healthcare services (often in the form of mobile clinics). The risks to these communities are greatly exacerbated by the continued destruction of property by the Israeli authorities. This situation contributes to increasing the burden on women and girls in order to provide the basic needs of the family under the implementation of the policy of home quarantine and, on the other hand, isolation by the occupation authorities.
- Under lockdown and lack of access to Palestinian human rights and women's organizations with development and humanitarian programmes in these areas, women have become more vulnerable to domestic violence in the absence of protection. Due to the absence of follow up and monitoring of cases of violence in areas C during the pandemic period, no data are available on the subject.

- Despite the pandemic and its global spread, including the territories of 1948, the Israeli government continued its occupation related repressive practice and violated the rules of international humanitarian law.
- During the pandemic period, the Women's Centre for Legal Aid and Counselling monitored 37 violations in the West Bank, Gaza Strip and Jerusalem, and these violations were represented in the following patterns⁴⁶:
 - Continued detention of Palestinian women. The number of women prisoners in Israeli prisons reached 41, including 16 mothers, and 170 children (Girls and boys) were detained. Despite international appeals for the release of women, children and the chronically ill, the occupation authorities did not respond to those appeals. In addition, the prevention and protection against COVID-19 were not provided, especially with the infection of a number of jailors and prisoners, which raises the level of fear for the safety of female prisoners and children⁴⁷.
 - Night break-ins: Night break-ins became more severe during the precautionary lockdown. Troops purposefully broke into homes wearing boots thus ignoring the health and disease prevention rules. In this context, the Occupied Palestinian Territories had 100 night raids between March 1 and April 3.
 - Detention of children and minors: The detention of children and minors continues even as the outbreak of COVID-19. They are detained in overcrowded prisons that lack the minimum health and safety measures, even under normal circumstances, making them more vulnerable to infection in overcrowded prisons. It should be noted that 70% of the detained minors have been held in prisons within the state of the occupation, contrary to Article 76 of the Fourth Geneva Convention. The arrest is often carried out without informing parents of the nature of the actions of their sons and daughters, in a humiliating manner that lacks the minimum safety conditions in the light of the COVID-19 outbreak. In this regard, 16 minors were arrested between March 1 and April 3, 2020.
 - Settler attacks: Settler attacks on Palestinians and their property accelerated during the period of the precautionary lockdown. Forty-six settler attacks were documented against Palestinians living near the settlements between March 1 and April 3, 2020.
 - Growing repercussions of the annexation and expansion wall: Since the construction of the annexation and expansion wall in 2002, Palestinians have been unable to access their land, which has become on the other side of the wall, without obtaining the necessary permits and permissions from the occupation authorities. In this context, the occupation used precautionary measures as a pretext to prevent

⁴⁶ For more information, visit Women's Center for Legal Aid and Counselling at https://www.wclac.org/News/312/WCLAC_infographic_on_Israeli_Violations_of_International_Humanitarian_Law_during_COVID19

⁴⁷ Health Work Committee

men and women from accessing their farmland. The risk of this measure is increased in cases where the work on these agricultural lands is the only source of income for the family, particularly during the pandemic, especially; during the pandemic, high unemployment and loss of livelihood were priorities that worried both men and women⁴⁸.

- Spraying agricultural crops with harmful chemicals: The occupation continues to pursue a policy of spraying agricultural crops on agricultural land on the eastern and south eastern borders of the occupation state even in the light of the outbreak of COVID-19. This spraying process involves the complete destruction of crops and the deterioration of the health and economic status of farmers. It is worth noting that 46% of Gaza's agricultural workers are women⁴⁹.
- Obstruction of access to healthcare services: The Israeli occupation has placed many obstacles for patients traveling for treatment within Palestinian areas and for women traveling from the West Bank to get the specialized treatments they need at Jerusalem hospitals. The occupation state places very complex restrictions on the movement of citizens to receive these services under the pretext of security bans, which also affects traveling abroad. Palestinian health workers working to counter COVID-19 are also prevented from responding to the epicentre of the infection in Jerusalem neighbourhoods, resulting in the subsequent detection of a large number of cases, as well as obstacles to the movement of health workers in areas classified as C or areas adjacent to the wall⁵⁰.
- With regard to Gaza Strip, the blockade has severely affected the health infrastructure of Gaza Strip and made it impossible to refer some difficult medical cases from Gaza Strip to the West Bank or to the occupation state. In this context, the occupation authorities obstructed the permissions granted to patients under the pretext of precautionary measures. The issuance of these permits and permissions is reduced by 85% between March 1 and April 3.
- Environmental violations and access to water sources continue to escalate: The Israeli authorities continue to pollute drinking water in Gaza Strip, with 97% of the water in the Gaza Strip becoming undrinkable⁵¹. The continuation of this policy in

⁴⁸ Juzoor for Health and Social Development

⁴⁹ Agricultural Development Association, 2018. Palestinian Women Empowerment in Rural Areas; 35 years of achievements long way side by side PARC and rural women. at: <http://www.pal-arc.org/uploads/Palestinian%20Women%20Empowerment%20in%20Rural%20Areas;%2035%20years%20of%20achievements%20long%20way%20side%20by%20side%20PARC%20and%20rural%20women.pdf>

⁵⁰ Health Work Committee

⁵¹ According to OCHA report on "Water sanitation crisis in Gaza may Cause disease outbreak and possible epidemic, it stated that: The main causes of the water and sanitation crisis are the depletion and poor quality of Gaza's single coastal aquifer, which is the source of 95 per cent of all water in Gaza. Until the 1990s the aquifer provided Gaza Strip inhabitants with drinkable tap water. Today 97 per cent of this water is unfit for human consumption based on World Health Organization (WHO) standards. The primary driver of contamination of the aquifer is the longstanding over-extraction of almost three times more water than is naturally replenished by rainfall. This practice results in increasing intrusion of seawater. The sea also flushes back to the shores of Gaza large amounts of untreated or insufficiently

the light of the COVID-19 outbreak will do great harm to the Gazans in general and to women in particular, especially since a large segment of the Gazan women work in agriculture. Women are also responsible for doing household chores.

- Escalating house demolitions: 73 houses were demolished, displacing 34 Palestinians, during the precautionary lockdown caused by the outbreak of COVID-19 pandemic and amid growing official calls for commitment to stay at home to prevent infection and the spread of the disease. House demolitions increase the burden on women to provide protection for their families during the fight against the epidemic, especially with the main measures taken by the government in terms of the home quarantine. Women and girls also suffer from a feeling of insecurity and privacy as a result of losing their homes

14. Conclusion

Violence against women and girls remains an issue that is not considered a priority by the government of the State of Palestine. During the pandemic period, preventive measures taken to limit the spread of the Covid-19 virus, such as quarantine, had a negative impact on women and girls, despite their importance, where these measures have led to a high level of domestic violence against them, as they are not gender-sensitive. The Palestinian government neglects the importance of integrating gender in their emergency plans specifically domestic violence, which is still considered as a private matter in the Palestinian society.

The interventions to provide protection for women from violence were minimal and limited to the procedures for shelters by the government and providing a small number of help-lines. Non-governmental women's organizations conducted the majority of such interventions, which contributed to provide protection for women from domestic violence. Despite the restrictions imposed through the government's emergency plans, these interventions were the only opportunity for these women to seek protection.

treated sewage that is dumped into the sea, mainly due to the energy crisis. Open sewage runoff and agrichemicals also seep into the aquifer. For more information see at: <https://www.ochaopt.org/content/study-warns-water-sanitation-crisis-gaza-may-cause-disease-outbreak-and-possible-epidemic>