Helpdesk Research Report: Gender Equality in the Occupied Palestinian Territories
Date: 15.05.09

Query: Please provide a summary of gender equality analyses carried out in the Occupied Palestinian Territories. What is the most recent analytical work focused on issues of gender equality in the OPTs. What are the priorities identified by this work? Does there appear to be a consensus among agencies about the causes, consequences and impacts of gender inequalities?

Enquirer: DFID Middle East and North Africa Department

1. Overview
2. General
3. Women’s Health and Access to Healthcare
4. Gender-Based Violence
5. Further Resources
6. Additional Information

1. Overview

This research report includes literature from 2006 to present in order to identify what are considered to be the most current issues around gender equality in the Occupied Palestinian Territories. There are many issues: poverty and strongly gendered social roles have increased the burden of women’s household responsibilities; after the deaths or imprisonment of their male relatives, women have been obliged to take on additional roles as heads of households; women’s rates of participation in politics and in the labour market remain very low, despite their extremely high levels of education. However, the results of a review of the most recent literature seem fairly unequivocal – the two key issues receiving the most attention are women’s access to healthcare; and gender-based violence.

Women’s health and access to healthcare
Since the mid 1990s, access to health facilities in the Occupied Palestinian Territory has become increasingly unpredictable, due to increasing mobility restrictions, including checkpoints and the separation wall. These mobility restrictions have reduced access to health facilities for both staff and patients in a significant way. For pregnant women, this had resulted in decreased access to antenatal and post-natal care and an increasing number of home deliveries, induced deliveries and deliveries at military checkpoints. A study of maternal deaths (see Adili 2006) finds that a number of these resulted from delays at military checkpoints or from the refusal of military personnel to let severely ill Palestinian women pass through. Poor quality medical and obstetric care, inferior hospital equipment, and inefficient blood banking were also key factors. This study argues that the majority of maternal deaths in the OPTs are avoidable.

Fertility rates in the OPTs also remain among the highest in the world. It is argued that the combination of political conflict, marriage at a young age, and restricted opportunities for participation in the labour force might explain these extraordinarily high rates, especially in the Gaza Strip, despite women being highly educated. One author (see Bosmans 2008) also
argues that for both Israelis and Palestinians, population and population growth have become crucial instruments in the conflict, with each party aiming to outnumber the other to gain control over land. This has resulted in women’s contribution to the Palestinian cause being understood mainly in terms of their reproductive role.

Gender-based violence
Most commentators agree that Palestinian women in the West Bank and Gaza Strip face a triple challenge to establishing their rights: as Palestinians living under Israeli military occupation which controls every aspect of their lives; as women living in a society governed by patriarchal customs; and as unequal members of a society subject to discriminatory laws. One aspect of this situation is that women are subject to violence committed by the Israeli state or its agents, as well as to violence within the family.

It is widely recognised that Israel’s destruction of much of the Palestinian Authority’s (PA) security infrastructure and institutions have greatly weakened institutional protection mechanisms. In the absence of functioning law enforcement institutions, armed groups and traditional and tribal structures have gained greater authority in Palestinian society. This has strengthened existing gender inequality and pressures on women to conform to certain interpretations of traditional or religious norms in order to protect the ‘honour’ of their families. The effect of the Israeli occupation on men is also a key issue: increasing restrictions on the movement of men has forced many women out of their domestic spaces to seek employment while their unemployed husbands stay at home. This sudden reversal of gender roles disrupts the family dynamic leaving men feeling insecure about their status in the family and frustrated by feelings of helplessness and powerlessness. A 2005 Amnesty International report (see below) also highlights a reported correlation between the increased levels of violence which Palestinians were subjected to by the Israeli army and an increase in violence against women within Palestinian society and in the home.

The types of gender-based violence that Palestinian women are subject to include physical abuse such as beating, hitting, and murder, sexual abuse including rape, assault, and incest, and psychological abuse such as verbal assaults and insults, the intentional tarnishing of a woman’s reputation through the spread of rumours and gossip, and the reinforcement of negative gender stereotypes. Palestinian women and girls also rarely report violence to the authorities. This under-reporting is attributed to a variety of factors, including: the perceived futility of seeking justice; societal stigma associated with reporting family violence to the authorities; potentially life-threatening consequences of reporting the abuse; and the fact that the perpetrator is often the only breadwinner in the family. Public opinion polls have also revealed that Palestinian society largely condones violence against women and discourages women from reporting abuse.

In addition, the existing laws in the OPTs offer women limited protection from gender-based violence. These laws can be extremely broad and subject to varying degrees of interpretation by legal institutions and law enforcement officials. They also require evidence of extreme violence and impose a high evidentiary burden on the victims. Neither the Jordanian nor the Egyptian penal codes in force in the OPTs recognise sexual violence committed within marriage. In addition, there is a lack of specialised expertise among police and medical staff to handle family violence, and insufficient protective mechanisms to shelter victims.

This report argues that in times of war and violence, women can be devastated the most as they are the protectors and the providers of care, they provide emotional and moral support and they have to cope with the losses of homes, land, and loss of members of family and relatives, and displacement. Another threat to women's empowerment is high fertility and early marriage. During wars and conflict, some households choose the practice of early marriage as a coping strategy for the harsh economic conditions as it can decrease the economic burdens of a family and lessen the bride price. Part III of the report outlines some further issues of concern:

- **Political participation**: In the wake of the Oslo Accords, women's formal political representation and participation declined significantly. In the Palestinian Legislative Council elections of 2006, 41.93% of the voters were females and 58.7% males. Only 15 women were nominated as candidates in the electoral districts, and no women were elected. In the electoral lists, 70 candidates were nominated and only 17 women won seats. The recently adopted quota system was one of the main tools that helped the women win these seats.

- **Labour and economy**: Women's share in the labour force is very low, and stood at around 12.7% in first quarter of 2006. Most women, therefore, fall outside the labour force, leaving them highly dependent on men who are out of work themselves. The author argues these low rates are primarily due to the structural limitations of the economy rather than ideological or cultural constraints. Palestinian labour markets are highly gender segregated, offering women access to a very limited number of sectors. Moreover, these few sectors are in non-growth areas of the economy and are unable to absorb new female labour market entrants. The result is a persistently high rate of female unemployment.

- **Poverty**: A significant proportion of Palestinian households are headed by females, and despite the fact that this group is one of the highest recipients of public assistance, the poverty of the poor households maintained by women are worse than those maintained by men. About 73% of female-headed households suffer from deep poverty, unable to meet the minimum requirements for food, clothing and housing compared to about 63% of the male-headed households.

- **Education**: Girls are catching up or even doing better than boys in terms of enrolment rates in secondary and tertiary education, as well as academic performance. Women are also gaining ground in higher education: the tertiary enrolment rate of females in relation to males has increased from 77% in 1996 to 90% in 2001. The statistically larger increase in women's enrolment rates may reflect a change in the social awareness of the value of education for women. In addition, the difficult economic conditions, and the resulting financial hardships suffered by many families have forced many male high school graduates to abandon their education to join the workforce.

- **Domestic violence**: The report notes a study which found a negative correlation of violence to educational attainment and labour force participation. Women with elementary education were found to be more likely to be subjected to violence than women who finished secondary or higher education. That is, 12% of women educated to elementary level were subjected to sexual violence, compared with 8.5% of women educated to secondary level. For physical violence, these figures are 25.8% and 19% respectively.

### 3. Women's health and access to healthcare


This paper is the result of a policy support research project on sexual and reproductive health and the rights of refugee women. The project found that women had been greatly affected by the worsening humanitarian crisis since the start of the second intifada. Severe restrictions on mobility had reduced access to health facilities for both staff and patients in a significant way. For pregnant women, this had resulted in decreased access to antenatal and post-natal care and an increasing number of home deliveries, induced deliveries and deliveries at military checkpoints. From September 2000 through April 2005, there was a ten-fold increase in the number of home deliveries and a five-fold decrease in the number of mothers receiving antenatal care. When Israel decided to build the Separation Fence (the Wall) in and around the West Bank, over 100,000 Palestinians in the West Bank who depended on health facilities in East Jerusalem were prohibited from entering East Jerusalem.

The authors also highlight that while reports and articles about the impact of the crisis on the Palestinian health system have tended to focus on the impact of restrictions on mobility on access to health facilities, the impact of the conflict on the promotion and protection of women’s sexual and reproductive health needs and rights is hardly mentioned. They argue: “Reduced accessibility of childbirth services as a result of ongoing closures and curfews and cases of women having to deliver at checkpoints are dealt with as a violation of the right to movement rather than a violation of women’s right to a protected place of birth. Forcing pregnant women to deliver at checkpoints constitutes a threat not only to their health and rights but also that of their babies, as well as a form of gender-based violence.” (p. 108-109)

These are also only the most visible aspects of the impact of the conflict on women. Less visible is the increase in social, cultural, legal and political obstacles to the recognition of women’s rights more broadly. The authors argue that the ongoing has resulted in women’s contribution to national development and survival being understood mainly in terms of their reproductive role. Persistent gender inequalities therefore prevent her from using contraception. The authors point out: “One of the characteristics of the Israeli occupation of the West Bank, East Jerusalem and, until recently, Gaza is the containment of the Palestinian population within restricted areas and the systematic movement of Jewish settlers onto Palestinian land. As a result, population and population growth have become crucial instruments for both the occupying and the occupied parties, each of whom attempts to outnumber the other to gain control over the land. In such a context, promotion of reproductive rights becomes a highly political issue, as it constitutes a potential influence on demographic growth.” (p. 109)

Lack of donor interest and the withdrawal of donor support from the Palestinian Authority (PA) in 2006 are also considered to have hampered the implementation of the National Reproductive Health Guidelines, and the sustainability and quality of existing sexual and reproductive health services. The international financial boycott of the PA has resulted in a further exacerbation of the quality of basic care services, staff shortages, lack of supplies and adequate supervision at maternity hospitals. “A failure of the international community to explicitly address the violations of women’s sexual and reproductive health needs and rights, caused by the military occupation and a regime of severe restrictions on mobility, may contribute to the false perception that such violations are inevitable, and thus politically, socially and culturally acceptable.” (p. 109)

Rahim, H. et al., 2009, 'Maternal and Child Health in the Occupied Palestinian Territory', The Lancet, Volume 373, Issue 9667, pp. 967-977
http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(09)60108-2/abstract

This report finds that since the mid 1990s, access to maternity facilities in the Occupied Palestinian Territory has become increasingly unpredictable. This is especially problematic in a context in which most Palestinian women marry at a young age and begin childbearing shortly thereafter, despite the reported harmful health consequences of teenage pregnancies.
for mothers and their newborn babies. In 2006, the median age at first marriage for ever-married women (aged 20–54 years) was 18 years. About 9% of women aged 15–19 years were married, and 6% were either mothers or pregnant for the first time. Birth spacing was short, even by regional standards (table 1), with 27% of women (aged 15–49 years) in 2006 reporting birth intervals shorter than 18 months.

The authors argue that the combination of political conflict, marriage at a young age, and restricted opportunities for participation in the labour force might explain the extraordinarily high fertility rates, especially in the Gaza Strip, despite women being highly educated. Despite reductions, the fertility rate of women in the occupied Palestinian territory remains among the highest in the world. In 2006, the total fertility rate stood at 4.5 births per woman (4.1 births per woman in the West Bank and 5.3 births per woman in the Gaza Strip), which is much higher than in Israel (2.8 births per woman) and most Arab countries. In fact, among the latter, the total fertility rate is higher only in Yemen (6.2 births per woman). Fertility rates are high, at least in part, because that is what seems to be the norm. In 2006, the mean family size considered ideal by Palestinian women was around five children.

The authors also find that the access of women in labour to maternity facilities has been affected by the increasing mobility restrictions, including checkpoints and the separation wall. Between 2000 and 2006, the Ministry of Health reported 69 cases of Palestinian women giving birth at Israeli checkpoints. 10% of pregnant women in labour were delayed for 2 to 4 hours on the road to the maternity facility, whereas the average time without roadblocks to reach health facilities was 15–30 minutes. These numbers do not reveal women’s anxiety throughout the pregnancy about reaching a place of birth and returning home safely.

http://www.sciencedirect.com/science?ob=ArticleURL&udi=B6T7M4JFGFJP-1&user=122868&rdoc=1&fmt=&orig=search&sort=d&docanchor=&view=c&searchStrId=943792085&rerunOrigin=google&acct=C000010083&version=1&urlVersion=0&userid=122868&md5=65c0c77590295cf155b39aa745ef5384

This article reports on a study which aimed to assess maternal mortality and determine the most common causes of maternal death amongst Palestinian women aged 15 to 49 years in the 10 districts in the West Bank. The study found that maternal mortality ratios for 2000 and 2001 were 29.2 and 36.5 per 100,000 live births, respectively. Cardiovascular diseases and haemorrhage were the most common causes of death. Misclassification was found in 38% of the deaths. A tentative analysis indicated that 69% of maternal deaths could be classified as avoidable. The authors also argue that substandard classification of maternal deaths is also hampering efforts to reduce maternal mortality.

They state: “The prevailing political instability and severe mobility restrictions have adversely affected emergency obstetric care. A number of the deaths reported on in this study resulted from delays at military checkpoints or from the refusal of military personnel to let severely ill Palestinian women pass through the checkpoints. Further, substandard medical and obstetric care are reflective of the inferior hospital equipment, inefficient blood banking, and questionable staff knowledge. During the study period, 8 maternal deaths occurred following cesarean sections, and some of these cesarean sections might have been unnecessary. Other direct causes of deaths observed during the study period were untreated pre-eclampsia/eclampsia and hemorrhage during postoperative care. These potentially avoidable deaths are important lessons toward the improvement of quality of care in the settings studied.” (p. 169)
In addition, in many cases, notifications of maternal death were delayed, notification sheets were incomplete or inconclusive, autopsies were not performed, and the monitoring and auditing of maternal deaths were inadequate.

Al-Adili, N., 2008, 'Deaths Among Young, Single Women in 2000-2001 in the West Bank, Palestinian Occupied Territories', Reproductive Health Matters, Volume 16, Number 31, pp. 112-121
http://download.journals.elsevierhealth.com/pdfs/journals/0968-8080/PIIS0968808008313408.pdf

This article reports on a 2000-2001 study on the causes of death of women of reproductive age (15-49) in the West Bank, Palestinian Occupied Territories, which found that 154 of the 411 deceased women aged 15-49 with known marital status were single. The authors found important differences in the age at death and causes of death among single and married women. 41% of the deceased single women were under 25 years of age at death compared to 8% of the married women. They argue that this can be attributed to the disadvantaged social status of single women in Palestinian society, which is further exacerbated by the current unstable political situation. The proportion of violent deaths and suicides among the single women was almost twice as high as among the married women, mainly in those below age 25. The single women were also more likely to die from medical conditions which indicated that they faced barriers to accessing health care.

The authors state: "In Palestinian society, if a woman passes her late 20s without getting married she is labelled A’nes, meaning that she is usually considered to have moved beyond marriageable age and is seen to be of less worth in the eyes of the community, especially in rural communities. Furthermore, a single woman in these conservative communities is constrained in her daily activities and her social interactions and relationships. In a report on the living conditions of Palestinians, marital status was emphasised as a factor of profound importance in assessing women’s situation. Married women usually fared better than unmarried women of all ages in terms of having independent economic resources and the ability to move around." (p. 113)

In conclusion, the observed differences in causes of death between the deceased single and married women highlight critical issues regarding the status and condition of women in general and of single women in particular in Palestinian society. Certain direct medical causes of death among the single women, like urinary tract and respiratory infections, may indicate restricted access to health services. The health care-seeking patterns of single women should be further explored and attention paid to barriers to appropriate reproductive and other health care. The higher proportion of violent deaths and suicide among the deceased single women is a serious indication of their vulnerability, particularly given the societal stress prevailing in Palestine at present.

The authors also highlights that the fieldwork was conducted at the height of the Intifada and the Israeli military response, with heavy restrictions on mobility, limiting the possibility of probing deeper into the circumstances surrounding sensitive deaths. More research into the socio-cultural context of single women in Palestine society is needed as a basis for intervention.

4. Gender-Based Violence

This report deals with the impact of violence against women in the Occupied Territories in the context of conflict: violence committed by the Israeli state or its agents; the collapse of the rule of law within the Occupied Territories leading to a lack of implementation of existing laws; and the worsening effects of existing discrimination in both law and practice. The report highlights the gender related impact of violations committed by the Israeli forces in the context of conflict. It then looks at gender-based violence within the family and the impact of the militarization of the conflict by both sides on Palestinian women living in the West Bank and Gaza Strip. It argues that Palestinian women in the West Bank and Gaza Strip have faced a triple challenge to establish their rights: as Palestinians living under Israeli military occupation which controls every aspect of their lives; as women living in a society governed by patriarchal customs, and as unequal members of society subject to discriminatory laws.

The increased militarization of the conflict has resulted in a dramatic deterioration of the human rights situation in the West Bank and Gaza Strip, with unprecedented levels of poverty, unemployment, and health problems. Palestinian women have been at the receiving end of increased pressures and violence in the family and in society. “They have faced increased demands as care-givers and providers while at the same time their freedom of movement and action has been curtailed, and they have borne the brunt of the anger and frustration of male relatives who feel humiliated because they cannot fulfill their traditional role as providers.” (p. 4)

The report finds that while the deterioration of the situation has increased societal pressures and violence against women in the family, institutional protection mechanisms have been further weakened by Israel’s destruction of much of the Palestinian Authority (PA)’s security infrastructure and institutions. In the absence of functioning PA law enforcement institutions, armed groups and traditional and tribal structures have gained greater authority in Palestinian society, strengthening existing gender inequality and pressures on women to conform with certain interpretations of traditional or religious norms in order to preserve the family honour. The report highlights the risk women face from violence within the family. Women who challenge or transgress traditional norms may be killed by their relatives for having tarnished the family’s reputation. The weakening of protection mechanisms combined with the blockades and restrictions on movement imposed by the Israeli army have made it more difficult and often impossible for women and girls who are at risk of being killed or harmed by family members to escape to safety. In most cases men who commit “honour” crimes benefit from impunity, as the PA has been both unable and unwilling to confront and address such issues.

The wives and mothers of thousands of Palestinians who have been killed or who are detained in Israeli prisons also face difficulties. In the absence of a social security system in the Occupied Territories, they are forced to depend on relatives and charity organisations for survival. In the current situation of widespread poverty and unemployment, such dependence leaves these women particularly vulnerable to pressures and control by the male relatives on whom they depend for their survival and the survival of their children.


This report highlights that women and girls in the Occupied Palestinian Territories (OPT) are at increasing risk of violence perpetrated by family members and intimate partners. There is also evidence that as the level of violence is getting worse, remedies available to victims are being further eroded. This report aims to assess the factors contributing to the worsening
situation for women, and to examine the reasons for the Palestinian Authority’s (PA) continuing failure to respond effectively to such violence.

The authors find that Palestinian women and girls rarely report violence to the authorities. This is a symptom of the significant social and legal obstacles to meaningful gender-based violence prevention and response in the OPT. Women’s NGOs attribute the underreporting of violence to a variety of factors, including: the perceived futility of seeking justice; societal stigma associated with reporting family violence to the authorities; potentially life-threatening consequences of reporting the abuse; and the fact that the perpetrator is often the only breadwinner in the family. Public opinion polls also reveal that Palestinian society largely condones violence against women and discourages women from reporting abuse. A 2002 poll of Palestinian women found that 53.7 percent of those polled thought that it was inappropriate for the police to interfere when a man assaults his wife; 55.5 percent felt that a wife beaten by her husband should not talk about it to anyone except her parents. When those who experienced violence were asked why they did not leave their abusive marriages, more than 70 percent reported that they refused to leave home because of fear of losing custody of their children. Almost 50 percent felt that divorce was too stigmatising, and 21.9 percent reported that they would have no place to go if they left their homes.

The report finds that there are two primary obstacles to the enhanced protection against domestic violence:

- discriminatory laws that condone and perpetuate violence against women and girls;
- the lack of institutionalised policies to prevent violence, assist victims, and hold perpetrators accountable.

Part III of the report outlines the situation for women with regard to spousal abuse; child abuse; sexual violence; and ‘honour’ killings. On domestic violence, the report states that Palestinian women in violent or life-threatening marriages have two legal options available to them: pressing charges for spousal abuse or initiating a divorce on the basis of physical harm. Both require evidence of extreme violence and impose a high evidentiary burden on the victim. Neither the Jordanian nor the Egyptian penal codes in force in the OPT recognize sexual violence committed within marriage.

Part IV of the report discusses further the factors contributing to continued deficiencies in the justice system. These include a lack of specialised expertise among police and medical staff to handle family violence; insufficient protective mechanisms to shelter victims; constraints imposed by the Israeli occupation; and the recent suspension of tax revenues to the Hamas government.

For a critique of this report, please see:
http://cdy.sagepub.com/cgi/content/abstract/20/2/119

This article aims to address the question of how international human rights frameworks function in addressing violence against women in situations of prolonged political violence and colonial conflict. The author explores this question in relation to the Human Rights Watch report above, which she regards as “problematic”. The author questions the relevance of international frameworks in a situation "where the indigenous political authority is transitional, non-sovereign, fragmented and under attack, and where other states also exercise power and thus have obligations. Who applies these frameworks and in whose interest? How useful, adequate, and appropriate are international human rights instruments in addressing such
violence? How do other voices, generated locally, take on, contest, or interact with, these frameworks?” (p. 121)

Peltz, A., 2006, ‘Gender-Based Violence in Palestine: A Case Study’, Miftah, Jerusalem
http://www.miftah.org/Publications/Books/Gender_Based_Violence_in_Palestine.pdf

This report aims to provide information and analysis of gender-based violence in Palestinian society, the types of services available to victims of gender-based violence, and the status of networking and coordination among service providers. It also includes recommendations to policymakers and advocates at the national, regional, and international level.

The authors argue that Palestinian women's political, social, legal, and economic rights are greatly influenced by the Israeli occupation and the patriarchal culture of Palestinian society. Gender-based violence therefore is the product of two distinct but interrelated types of violence: the violence perpetuated by the Israeli occupation, and the violence of a patriarchal, conservative society that is suffering from lawlessness. “Many Palestinian women’s rights activists have asserted that Palestinian women live under a double occupation: Israeli occupation, and the occupation of a conservative and patriarchal society. The result of the military measures by Israeli forces intersecting with a conservative, patriarchal Palestinian society has contributed to an integrated system of violence against women. The relationship between the occupation, patriarchy, and gender-based violence is clear: rising poverty and unstable living conditions have placed a tremendous strain on families and extended families, further exacerbating social tensions. Women have been deeply affected by the widespread political violence and the subsequent socio-economic pressures placed on the family. As a result of the pressure within the household in general and women in particular, women have often found themselves to be the target of angry male relatives who feel frustrated that their ability to be a traditional provider for the family has been eroded.” (p. 8)

The types of gender-based violence that are prevalent within Palestinian society include physical abuse such as beating, hitting, and murder, sexual abuse including rape, assault, and incest, and psychological abuse such as verbal assaults and insults, the intentional tarnishing of a woman's reputation through the spread of rumours and gossip, and the reinforcement of negative gender stereotypes. There has been growing anecdotal evidence, and to a lesser extent quantitative data, that the incidences of gender-based violence in Palestine have been steadily increasing during the past five years.

In addition, the existing laws in Palestine do not give women sufficient protection from gender-based violence. The laws are extremely broad and subject to varying degrees of interpretation by legal institutions and law enforcement officials. Compounding this problem, the existing laws are often not enforced or institutionalized.

Ouis, P. and Myhrman, T., 2007, ‘Gender-Based Sexual Violence Against Teenage Girls in the Middle East: A Comparative Situation Analysis of Honour Violence, Early Marriages and Sexual Abuse in Lebanon, the Occupied Palestinian Territories and Yemen’, Save the Children Sweden
http://www.crin.org/docs/Gender_based_sexual_Violence.pdf

This paper presents an analysis of gender-based sexual violence against teenage girls in Lebanon, the Occupied Palestinian Territories and Yemen. Chapter Three of the report aims to map out gender based sexual violence against Palestinian teenage girls, looking into their perceptions and own experiences of sexual abuse, early marriage, and honour related crimes.
The report uses a four-level ecological model for its discussion. The levels are: individual-level influences; interpersonal relationship-level influences; community-level influences; and societal-level influences.

For example, social support for violence manifests in its high tolerance in Palestinian society, as typified in the "obedience" expected from a child to his parents and from a woman to her husband. Societal attitudes towards the crime of rape are also characterised by culture of silence, blaming the victim, and silencing voices against perpetrators. The authors argue: "(T)he political upheaval and economic hardship of the Palestinian life bear heavily on the psycho-social integrity of the individuals (children, and adults) who experience aggression themselves and or witness violence committed systematically and continually against their loved ones and or strangers. Alongside, there are the occupational policies of sieges and separation boosting violence even more. The tightening restrictions on the movement of men forced many women out of their domestic spaces to seek employment to sustain their families while their unemployed husbands stay at home. This sudden reversal of gender roles disrupts the family dynamics and overturns the stability of inter-family relationships. Men feeling insecure about their status in the family and frustrated by feeling helpless and powerless become violent to assert control over the family and regain power. This places both males and females in alarmingly charged situations and gives rise to all forms of violence within society including sexual violence of which women are the prime victims." (p. 72)

http://www.jstor.org/pss/3874340

This paper focuses on representations by and deployments of the four Palestinian women who, in 2002, killed themselves in organised attacks against Israeli military personnel or civilians in the Occupied Palestinian Territories or Israel.

The author argues: “The 2002 Palestinian women bombers inserted themselves into the political sphere in a gender-conservative period with few challenges to Arab male dominance in formal politics and militant activity. They situated their bodies and explained their actions in ways that both reproduced and undermined gender-sexual norms with respect to violence, politics, and community - corporeally and discursively destabilizing dominant notions of moral order and duty with respect to gender. Not surprisingly, their bodies, actions, and narratives became grist for various stories told by Arabs in the region about their own gender-sexual subjectivities. The discursive responses to these attacks give some indication of the fissures, contradictions, and sources of conflict within Arab societies. The manner in which the women situated their acts and many of the regional responses to their violence also speaks to the masculinities of state leaders in the region, whose economic, political, and military dependence on the United States, repressiveness and lack of accountability, and commitment to maintaining political power at almost any cost make them particularly vulnerable to gendered honour challenges from men and women.” (p. 44)

http://www.journals.uchicago.edu/doi/abs/10.1086/512623
This paper argues that although the Palestinian women’s sector is now represented by a number of strong non-governmental organisations (NGOs), the women’s sector as a whole, especially the non-Islamist movement, is characterised by fragmentation and alienation from the grassroots. Although the women’s sector may be able to promote the short-term goals associated with a human security agenda, it is more limited in its ability to promote the longer-term objectives which require stronger connections to grassroots constituencies.

The author highlights that there has been a substantial increase in the number of professionalised women’s NGOs which are particularly skilled at international lobbying, and bringing international attention to Israel’s human rights abuses, as well as its use of disproportionate force. However, this has also been accompanied by, and perhaps resulted in, a decreased capacity among women’s groups to engage and promote grassroots participation. The newly established professionalised NGOs can certainly contribute to promoting the short-term goals associated with human security. However, constraints include:

- They have been less successful at promoting longer term human security objectives such as facilitating social inclusion and increasing opportunities to participate in decision-making processes.
- Given the increased fragmentation and alienation from the grassroots bases, they are less able to forge horizontal linkages with grassroots constituencies.
- In recent years, there appears to be increased grassroots political organising among Islamist groups. The extent to which these groups are able to promote longer term human security objectives requires further investigation.

This paper aims to present the ways in which Palestinian women view and interpret the concepts of women’s rights and women’s roles. The paper is based on ethnographic research with several women from the Ramallah district. The author considers various issues, including: rights and family relations; women's work and rights; women's education and rights; women, nationalism and the Palestinian authority; and women's rights and the occupation.

The author finds that most women view the family as the factor which is most important for their opportunity to access rights, while views on the role of the state are less developed. For example, some of the interviewees indicated that families decided whether a woman has the right to work at all. “Most Palestinian women, whose lives are lived a long way from the corridors of power at PA headquarters Muqata’a in Ramallah, have difficulty in perceiving the state as a support or a threat to their rights. Their main recourse to support and constraint is still the family. It seems clear that, at present, poverty and insecurity are the main challenges most Palestinians have to fight every day, and that battle is in many ways led by the women. Throughout the decades that Palestinians have fought for independence, women have been taking on more than their traditional share of responsibility for the upkeep of the family because men have been injured, imprisoned, in hiding, in exile or dead. Recently, however,
this has become more difficult due to the dire economic situation and the increase in violence brought about by the al-Aqsa Intifada. Although women in general have more options to choose from with regard to education and work, their actual scope for agency is restricted by poverty and insecurity. My informants’ statements show that whether a woman sees her opportunities as “rights” depends to a great extent on the actual level of choice she experiences.” (p. 13)

6. Additional information

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Websites visited
Amnesty International, Chr Michelsen Institute, Eldis, Freedom House, Google, Google Scholar, Human Rights Watch, Palestine Center for Policy and Survey Research, iknowpolitics.org, UNIFEM, Women’s Center for Legal Aid and Counselling, Oxfam, Ingenta and other journals

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