

Muslim Women's Health and Reproductive Health Concerns Due to the 2023-24 War on Gaza

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Abstract

Women's reproductive health and well-being were and are being severely destroyed prior to and throughout the 2023-24 War on Gaza. With an overwhelming majority of the Gazan population being Muslim, this paper explores the specific issues and problems Muslim women in Gaza are facing during this on-going war. Access to essential resources including medical supplies, water, and electricity has been restricted by the Israeli government. As such, their ritual purification and structured hygienic practices have been greatly impeded. While the vast majority of the casualties and injuries are women and children, the violations towards the reproductive health and well-being of Gaza's women and girls have also increased. Beyond the physical well-being of Gazan women, their spiritual sanctity has also been endangered as a direct result of the war. Mothers are greatly revered in Islam, and it is reported that gendered violence during war is a deliberate attempt to humiliate women and girls. The entire reproductive cycle has been terribly disrupted, from pregnancy and child delivery to breastfeeding and neonatal care. To address the protected group of women, girls, and children, we must work together as an academic community to continue to document such atrocities and, first and foremost, advocate for an immediate and permanent ceasefire, to end the occupation and allow sufficient and unimpeded humanitarian aid and resources into Gaza today.

Introduction

The colonial violence and settler apartheid which has intensified into the on-going 2023-24 War on Gaza has been classified as a genocide.^{1,2,3} The occupation of Palestine since 1948 has caused destruction and devastation that disrupts every Palestinian and Gazan's health and human rights.^{2,4,5} Since women's reproductive health and well-being are being severely destroyed, the war on Gaza is a feminist issue.⁵ With the overwhelming majority of the Gazan population being

Muslim, this paper explores the specific issues and problems Muslim women in Gaza are facing, as well as their needs during this on-going war.

Muslim women have long been marginalised in medicine, beyond what is currently taking place in Gaza and Palestine. The first image to come to mind when a non-Muslim person thinks of a Muslim woman is a female being oppressed and restricted by the scarf on her head.⁶ Khan et al. commented that such a generalised and reductive perception of Muslim women has relegated

them to the peripheries of healthcare, by disproportionately discriminating against them as healthcare providers in healthcare settings.⁶ Khan et al. criticised this stereotype of Muslim women and stated that it results in depleting them of adequate and comprehensive healthcare as female patients and impeding them from delivering safe care as female Muslim physicians and healthcare providers.⁶

Such conditions are further intensified in the apartheid against Palestinian women and children. Access to essential resources including medical supplies, water, and electricity has been restricted by the Israeli government.^{4,5} With no supply of reproductive and menstrual care, the prevalence of infections increases every day.⁷ At the same time, the spiritual sanctity of Gazan women has been endangered as a direct result of this war beyond physical well-being.

Cleanliness is a hallmark of Islam, with physical cleanliness signifying religious purification.⁸ Reduced access to water and sanitation supplies prevents the passage of ablution, which is required for several religious practices and is central to a Muslim's state of being. This essay highlights how the physical and spiritual well-being of Muslim women in Gaza is being threatened, making this war a feminist issue that must be urgently addressed.

Muslim Women's General Hygienic Lifestyle and Needs

Ritual purification, or *tahara* in Arabic, dictates physical and spiritual cleansing practices for Muslims.^{8,9,10} Muslims can attain religious renewal by performing such acts of worship to Allah. For example, Islamic practice involves purifying oneself through ablution, or *wudu* in Arabic, before the five daily prayers.^{9,10} Ablution involves using water to wash one's hands, arms, feet, and face. Ablution becomes invalid after defecation, urination, sleeping, flatulence, and more. Practising Muslims are habitually in a state of cleanliness.

Full ablution, or *ghusl*, which involves the washing the entire body from head to toe, is required after sexual relations. Muslim women must also perform full ablution after the completion of their menses and postpartum bleeding.¹⁰ Muslims may perform dry ablution, or *tayammum* (purification using dry soil) if clean water is unavailable or in insufficient supply.¹¹ By performing ablutions and maintaining cleanliness, Muslims seek to get rid of physical impurities. They also serve as spiritual

purifications, as Muslims strive to attain a state of inner devotion and closeness to Allah.

The structured hygienic practices outlined in Islam benefit both the individual and their community. Such practices can be linked to decreased disease transmission during the Covid-19 pandemic.⁹ The religious beliefs that dictate physical cleanliness have also instilled resilience and hope within believers as they combat difficulties such as living through a pandemic.

The Impact of War on Muslim Women's Health and Well-being

As Muslim women navigate purity through religious norms, it becomes essential to evaluate the impact of conflict and war on resources and religious identities.¹² For instance, many Muslim women in India have found solace through routine religious practices, including performing daily ablution and prayers, when a rise in Islamophobia has threatened the livelihood of their Muslim communities. They have worked towards maintaining an inner connection with Allah through cleanliness and physical piety in a time when an outward one might endanger them. Similarly, religious practices have been impeded in Gaza's on-going war when a scarcity of clean water prevents women from performing ritual ablutions.¹³

Another example is the health and safety of female Syrian refugees who were threatened during the ongoing Syrian war conflict since March 2011.¹⁴ Syria is a Muslim-majority country with 92.8% Muslim.¹⁵ In this case, women were displaced from their homes and into new environments, resulting in isolation and anxiety.¹⁴ The study of Al-Natour, Morris, and Al-Ostaz observed that the emotional and physical well-being of these women worsened as access to medication and healthcare services became scarce—all of which became a testament of the will of refugee women working to keep the family unit together through culture and religion.¹⁴ Muslim women in Gaza face the same challenges as the result of the on-going war. As of March 2024, more than one million Gazan females have been displaced due to the current war.^{13,16,17}

The Impact of the 2023-24 War on Gaza on Muslim Women's Health and Well-being

The violation of women's health and human rights by the Israeli occupation did not start on October 7, 2023; such violation was present before June 2007 when the siege

and closure policy was first enforced by Israel.^{1,16} The violations became more dire after October 7, 2023 when 67% of all casualties were observed to be women and children within the first month of the war.⁷ As of March 2024, the War on Gaza has taken the lives of more than 10,000 women,¹³ and more than 19,000 women have been injured. More than 3,000 women may have become widows and more than 10,000 children may have lost their fathers, thereby making more women the heads of their household. Thirty-seven mothers are killed in Gaza every day.^{16,17}

There are many verses in the Qur'an that emphasise the importances of parents and specifically mothers in Islam. Most significantly, verse 46:15 states that 'And We have enjoined upon man, to his parents, good treatment. His mother carried him with hardship and gave birth to him with hardship, and his gestation and weaning [period] is thirty months'.¹⁸ This Qur'anic verse acknowledges the difficulties mothers experience during pregnancy, childbirth, nursing, and weaning a child. As such, Muslim children are commanded to respect and treat their mothers with care. The verse continues to explain that when a Muslim reaches adulthood, if they repent and remain grateful for all their blessings, then they too would ask to bear righteous Muslims as their children. Therefore, the reproductive life cycle and the roles women play in their families are known and revered by practising Muslims.

Awadallah's criticisms included the statement that gendered violence during war is a deliberate attempt to humiliate women and girls.¹⁶ Al-Halabi holds similar opinions stating that the current war prevents women from giving birth and nurturing their newborns in a safe, secure, and healthy environment because women's freedom to carry a child to full-term with proper nutrition has been impeded.¹ Additionally, Al-Halabi criticised how pregnant women in Gaza are projected by the occupiers to be an enemy because they are carrying future Palestinian generations and their resistance figure to keep the family together.¹ The author further explained that this reframing of Gazan women as the enemy by the occupiers distorts the traditional view of Gaza's society of child-bearing and nurturing Muslim mothers, exploiting women's identity and gender. Since the family unit is the foundation of Gaza and Palestinian society, the War disrupts Gazan women's national identity and dismantles the social structure that enables them to display their resilience in retaining and reforming their family. Inhibiting women from giving birth to the next generation of Gazans deteriorates Gaza's traditions, culture, and existence.¹

Gaza has been denied water, sanitation, and hygiene (WASH) services long before the current war began.¹³ However, the severity of the restrictions has increased dramatically with the war. For example, 70% of Gaza's civilian infrastructure (such as homes, hospitals, schools, and WASH facilities) has been destroyed or severely damaged.¹⁹ This leads to additional loss of daily essentials like hot water, food, electricity, and medical supplies.^{4,5,16} Without access to sanitary resources and clean water, women are at risk for health complications related to dehydration, urinary infections, menstrual hygiene, and pregnancy.¹³ With no supply of reproductive and menstrual care, the prevalence of infections increases every day.⁷ Not surprisingly, this has placed immense psychological stress on women and families in Gaza (Sabet et al. 2024).²⁰

According to estimates from the UN Population Fund (UNFPA), since October 7, 155,000 women in Gaza are pregnant or breastfeeding, with 5,500 expected to deliver in every month.¹⁷ UNFPA further reported that Gazan women and girls did not have adequate access to reproductive health care services.¹⁶ As of February 29, 2024, many of the 17,000 women who gave birth during the war underwent caesarean sections without anaesthesia.^{16,20} A 300% increase of miscarriages was reported due to the war, and anyone undergoing the process of in vitro fertilisation was halted mid-treatment.²⁰ Muslim women patients prefer and are more comfortable to be treated by female physicians and healthcare workers, specifically during obstetrics and gynaecology care, when possible.²¹ However, this war leaves women with no such option and forces them to give birth in public areas, such as birthing in the corridor of a hospital, with no privacy and care at all.¹ It is apparent that all forms of reproductive health, from childbearing to child rearing, have been severely violated during this war on Gaza. Women and mothers bear the highly unfortunate burden of knowing that the United Nations called Gaza during this 2023-24 War the "most dangerous place to be a child".¹⁷

Conclusion

There are numerous medical interventions and practices that must be outlined to specifically address women and girls' health problems in Gaza. Therefore, we urge the greater feminist and humanitarian aid community to further explore and document such research and recommendations. Our goal in this essay is to shed light on the many issues and show the War on Gaza is a feminist issue, from an Islamic perspective for Muslim-majority Gaza. Areas needing academic attention include

but are not limited to the War on Gaza and prenatal and postnatal care of Muslims. It is essential to document the various ways Gazan Muslim women handle their menses and postnatal bleeding despite not having sufficient supplies of water or laundry, and document how Gaza women handle menopause which also leads into geriatric care. To address the protected group of women, girls, and children, we must work together as an academic community to continue to document such atrocities and, first and foremost, advocate for an immediate and permanent ceasefire, to end the occupation and to allow sufficient and unimpeded humanitarian aid and resources into Gaza today.

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