



Water as a Weapon

**ISRAEL'S DESTRUCTION AND DEPRIVATION
OF WATER AND SANITATION IN GAZA**



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Executive Summary

This report documents how access to water, sanitation and hygiene (WASH) for the people of the Gaza Strip has been weaponised and severely undermined by the Israeli authorities since October 2023. Drawing on Médecins Sans Frontières (MSF) operational data and medical evidence gathered between January 2024 and December 2025 and first-hand testimonies collected in the last months of 2025, it concludes that the deprivation of WASH services is not incidental but the result of policies and actions by Israeli authorities. These measures are causing destructive and inhumane living conditions for Gaza's 2.1 million residents, with grave consequences for their health, dignity and safety.

Palestinians in Gaza face engineered **waterscarcity**. Even with MSF as the largest non-governmental water producer in Gaza – distributing or producing over 4.7 million litres of water daily as of January 2026 – needs far exceed supply. Between May and November 2025, one in every five of MSF's water distributions ran dry while people were still waiting. Families often prioritise drinking over cooking or washing, limit personal hygiene, and rely on unsafe or saline sources when humanitarian deliveries are interrupted. Between October 2023 and January 2026, prices for water produced by private providers have increased by up to 500 per cent, placing it beyond the reach of most households that have lost their livelihoods.

People in Gaza also endure entirely preventable and dire **sanitation and hygiene conditions**. Sanitation systems have effectively collapsed. In displacement camps, families dig makeshift latrines in their tents or have to share one with many others; they fill up quickly and are often too close to boreholes, contaminating groundwater. Heavy rains flood these rudimentary facilities, spreading waste and faecal bacteria. Solid waste accumulates in living areas due to halted collection systems and fuel shortages. Hygiene items such as soap, disinfectant, diapers and menstrual products have been unavailable or scarce, and remain prohibitively expensive.

Depriving people in Gaza of access to WASH services directly harms their health, dignity, and safety.

MSF staff treat many more **health** issues related to the lack of water, sanitation and hygiene than they had before October 2023, due to the sudden degradation of living conditions. According to an MSF survey, almost 1 in every 4 people interviewed between May and August 2025 had suffered from diarrhoea in the preceding month. In MSF primary healthcare centres, the majority of affected patients are children under 15 years old. Diarrhoea also has severe impacts on pregnant women and puts their pregnancies at risk. Those diseases, linked to insufficient clean water and soap, also make patients more vulnerable to malnutrition.

Furthermore, the lack of water and hygiene, coupled with life in overcrowded tents and makeshift shelter, leads to skin diseases. They comprised nearly 18 per cent of MSF primary healthcare consultations in 2025. Scabies and lice spread to whole families, wounds get infected and sometimes infested with insects, and patients treated by MSF are forced to return to unsanitary living conditions, only to need healthcare again.

People's mental health is profoundly impacted by the lack of access to water and sanitation. MSF's mental health professionals observe high levels of distress linked to the constant struggle to find enough water and hygiene items, with children in particular carrying heavy responsibilities and stress.

People are living in **undignified** conditions, with little privacy to shower – if they can shower at all – and forced to share overcrowded, makeshift latrines with strangers. The inability to maintain hygiene has become a source of distress and undermined people's sense of dignity, particularly for women, the elderly and people with disabilities.

High levels of need, limited water supply, and the destruction of water distribution systems force people to gather to receive water, which in turn creates additional **safety** risks during water distributions. Many families, overwhelmed with tasks required to survive, are left with no choice but to send their children. As they fetch water, some children get scared, lost, injured, or even killed.



The report bears witness to the weaponisation of WASH access, endangering the whole population of Gaza, through three main mechanisms: the destruction of and attack on infrastructure; the obstruction of humanitarian access within Gaza through forced displacement and denial of movement; and the systematic blocking or delay of essential supplies.

Israeli military operations have caused widespread **destruction of infrastructure**. Nearly 90 per cent of WASH infrastructure has been damaged or destroyed. Desalination plants, boreholes, pipelines and sewage systems have been rendered inoperable or inaccessible. MSF has documented several incidents of shooting at or destruction of our own clearly identified water trucks and boreholes, often during water distributions to the population, causing danger and injuries to Palestinians and aid workers, and damaging equipment.

Israeli authorities have imposed conditions that severely **restrict access to essential services within the Strip**. Displacement orders and the interdiction by the Israeli military for Palestinians to enter parts of Gaza has at times covered more than 80 per cent of the Strip. At the time of writing, Palestinians cannot access 58 per cent of the territory. The Israeli authorities have repeatedly forced MSF to suspend water distribution. MSF has lost critical water production assets and has been forced to relocate drinking water production units, reducing water availability for hundreds of thousands of people.

Meanwhile, Israeli authorities severely **hinder the entry of essentials** into Gaza. Since October 2023, electricity and fuel – critical to water treatment and distribution – have been cut or tightly restricted. Requests for authorisation to

bring in critical supplies have been rejected or left unanswered, including water desalination units, pumps, chlorine and other chemicals to treat water, water tanks, insect repellent, and latrines. Even when approved, shipments have been turned away at crossings, leaving lifesaving equipment stranded for months. Israeli authorities are using aid as a tap, closing or opening slightly to allow only drops thereof to enter the Strip. Since 1 January 2026, all MSF requests for the entry of any supplies through the dedicated system, where approval is determined by the Israeli authorities, were denied. These supply blockages severely undermine people's access to water and prevent the recovery of damaged infrastructure.

The effect of these policies and actions by the Israeli authorities is the **collective punishment of Gaza's population through the deprivation of services and supplies indispensable to civilian survival**. Israel is obligated under international humanitarian law, as an occupying power, to ensure the basic needs of the population are met and to protect civilian infrastructure such as water and sanitation systems. Instead, the report finds that the extensive destruction of civilian infrastructure, imposed access and movement limitations for WASH actors within Gaza, repeated forcible population displacement, and the blocking of WASH supplies have created conditions incompatible with human dignity and survival.



Urgent action is required to ensure people access water and sanitation, which is indispensable to survival and a fundamental aspect of human dignity, in accordance with the legal obligations of Israeli authorities and Third States.

MSF calls on Israeli authorities to immediately end access restrictions to and within the Gaza Strip; stop obstructing the entry of WASH supplies; respect the protected status of civilian infrastructure and services; uphold the protection of civilians and humanitarian workers; and stop the forced displacement of Palestinians.

MSF calls on UN Member States to uphold international law and use all forms of available economic, security and legal leverage to ensure that access to water, sanitation and hygiene is restored and protected for the people of Gaza; demand a rapid, unhindered increase of principled humanitarian WASH assistance across Gaza through established United Nations (UN) and International Non-Governmental Organisations (INGOs) mechanisms; and increase flexible, sustained funding for both immediate WASH needs and longer-term recovery and reconstruction.

Access to clean water, safe sanitation and basic hygiene is fundamental to life. The continued denial of these essentials has inflicted preventable suffering on an entire population. This takes place in a historical context of the Israeli occupation, colonisation, siege and forced displacement of the Palestinian people; ethnic cleansing in the West Bank; and a documented genocide on the population of Gaza. Immediate, sustained action is required to ensure the population in Gaza have water, sanitation and hygiene and not let Palestinians be dehumanised any longer.



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Introduction

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/// We need water. It does not make sense. It's like we are asking the world for the essential of life. ///

It is November 2025, and Ali is standing amid a sea of tents in the camp where he has been displaced in Deir al-Balah, Gaza Strip. Like the 2.1 million Palestinians in the occupied territory, he has spent the last two years trying to survive the genocidal campaign conducted by the Israeli authorities. After decades of repression and conflict and an Israel-imposed blockade 2007, Hamas and other Palestinian armed groups attacked Israel on a large scale on 7 October 2023, leaving 1,200 dead and taking over 250 hostages, according to Israeli sources¹. In response, Israel launched massive attacks on Gaza. Since then, the Israeli authorities have been committing a genocide enabled by the inaction of the international community.

Since 7 October 2023 and as of 23 February 2026, at least 72,073 Palestinians have been directly killed and 171,756 injured from the attacks, according to Gaza's Ministry of Health², with uncounted deaths, additional ones of people missing, and others indirectly

caused by the disruption of healthcare and other essential services. Moreover, the Israeli authorities are using another form of violence against the population of Gaza: the purposeful and systematic creation of destructive life conditions through extensive damage to civilian infrastructure such as houses and water systems; forced displacement; and the severe and sustained limitation of the entry of essential supplies. This has severely hindered people's access to medical care and food. It has also obstructed their access to safe drinking water and sanitation, including safe management of sewage, dignified waste disposal and even access to the most basic forms of toilets – collectively referred to as “WASH³” in the humanitarian sector.

MSF has been working in Palestine since 1988. In Gaza, we have scaled up our activities since the end of 2023, providing medical care, mental health support, water and latrines to the population.

¹ According to Israeli media citing official sources, and republished by UN OCHA's Reported Impact Snapshot of 21 January 2026, the 07 October 2023 and immediate aftermath caused over 1,200 fatalities and around 5,400 injuries; and 471 Israeli soldiers were killed and 2,995 injured since the start of the ground operation. See United Nations Office for the Coordination of Humanitarian Affairs, Reported impact snapshot, Gaza Strip (21 January 2026), <https://www.ochaopt.org/content/reported-impact-snapshot-gaza-strip-21-january-2026>. This was corroborated by Amnesty International, note 70, <https://www.amnesty.org/en/documents/mde15/0282/2025/en/>.

² Health Cluster's Health Dashboard taking figures from the Ministry of Health, <https://app.powerbi.com/view?r=eyJrIjoiODAxNTYzMDYtMjQ3YS00OTM-zLTkxMWQ0OTU1NWEmZmE5NTMwIiwidCI6ImY2MTBjMGI3LWJkMjQ0NGZlOS04MTBjLTNkYzI4MGFmYjU5MCIslmMiOjIh9>. Those figures have been found to be under representative of the real death toll. A study of traumatic injury mortality published in the Lancet, covering the period of 7 October 2023 to 30 June 2024, estimated Palestinian MoH under-reported mortality by 41% (Jamaluddine, Zeina et al., “Traumatic injury mortality in the Gaza Strip from Oct 7, 2023, to June 30, 2024: a capture-recapture analysis”, The Lancet, Volume 405, Issue 10477, 469 – 477, 8 February 2025, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)02678-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)02678-3/fulltext)).

A more recent study estimated 75,200 violent deaths between 7 October 2023 and 5 January 2025, representing approximately 3.4% of the Gaza Strip's pre-conflict population. Women, children and older people comprised 56.2% of violent deaths. It also estimates non-violent deaths, with 8,540 excess deaths above pre-conflict projections. The MoH figure for this period is 34.7% below the study's estimate. (Michael Spagat et al., “Violent and non-violent death tolls for the Gaza conflict: new primary evidence from a population-representative field survey”, 18 February 2026, [https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(25\)00522-4/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(25)00522-4/fulltext)).

An investigation also found that the deaths included an extremely high civilian toll: 83% as of May 2025, according to a joint investigation by the Guardian, the Israeli-Palestinian publication +972 Magazine and the Hebrew-language outlet Local Call (<https://www.theguardian.com/world/ng-interactive/2025/aug/21/revealed-israeli-militarys-own-data-indicates-civilian-death-rate-of-83-in-gaza-war>).

³ Water, Sanitation and Hygiene

We have witnessed how access to WASH has become an instrument to collectively punish the Palestinian population in Gaza. As early as October 2023, statements by the Israeli authorities announced their intent to deprive Palestinians in Gaza of access to basic services, in violation of the prohibition of collective punishment under international humanitarian law. On October 9, 2023, the then Israeli Defense Minister Yoav Gallant announced a "complete siege" of the Gaza Strip and that there "will be no electricity, no food, no water, no fuel, everything is closed."⁴ Israeli Defence Forces (IDF) Major General Ghassan Alian, head of the Coordination of Government Activities in the Territories (COGAT), said: "Human animals must be treated as such. There will be no electricity and no water [in Gaza], there will only be destruction. You wanted hell, you will get hell"⁵.

The deprivation of access to WASH is not an isolated act but part of a recurrent pattern of denial and delay — systematic and cumulative — that, together with

- the overwhelming direct killings of civilians;
- the devastation of health facilities and of their human and material resources, causing more deaths and disease; and
- the destruction of homes, which has forced displacement and inflicted dire psychological harm

constitutes the deliberate infliction of destructive and inhumane conditions of life on the Palestinian population in Gaza.

This prolonged denial of life-sustaining infrastructure represents death by attrition: the incremental dismantling of the material preconditions for survival, which the International Court of Justice [implicitly] recognised when it found a real and imminent risk of irreparable harm arising from the deprivation of potable water, food, electricity and essential services, and which it sought to address by ordering Israel to ensure their unimpeded provision in full cooperation with the United Nations⁶.

This report aims to present an overview of the grave restrictions the population of Gaza has been facing with regards to WASH over the last two years. People's struggles in accessing water, sanitation and hygiene services have been caused by the extensive destruction of infrastructure, access limitations Israel has imposed on WASH

actors to enter and move within Gaza, repeated forcible population displacement and the blocking of supplies. This has caused Gazans to face an engineered water scarcity and endure entirely preventable, dire sanitation and hygiene conditions, which directly harm their health, dignity and safety.

These grave deprivations take place in a context of the Israeli occupation, colonisation, siege and forced displacement of Palestinian people. For decades, MSF has witnessed the suffering, death, and unbearable conditions of life for Palestinians wrought by Israeli government policies.

Urgent action is required to ensure people access water and sanitation, which is indispensable to survival and a fundamental aspect of human dignity, in accordance with the legal obligations of Israeli authorities and Third States.

- MSF calls on the Israeli authorities to immediately **stop restricting humanitarian access** within and to the Gaza Strip; and **stop obstructing** the entry and distribution of WASH supplies. Respect the **protected status** of water, sanitation and hygiene infrastructure and services, and other civilian objects; to uphold the protection of **civilians** who try to access WASH and other humanitarian services and humanitarians who provide them; and **stop the forced displacement** of Palestinians.
- MSF calls on all other UN Member States to fulfill their obligation to uphold international law and use all necessary economic, security and legal measures to ensure **that Israel stops weaponising water against Palestinians in Gaza**; demand a rapid, unhindered **increase of principled WASH humanitarian assistance** across Gaza through established United Nations (UN) and International Non-Governmental Organisations (INGOs) mechanisms; and increase flexible, sustained **funding** for both immediate WASH needs and longer-term recovery and reconstruction.

4 Emanuel Fabian, "Defense minister announces 'complete siege' of Gaza: No power, food or fuel", The Times of Israel, 9 October 2023, https://www.timesofisrael.com/liveblog_entry/defense-minister-announces-complete-siege-of-gaza-no-power-food-or-fuel/

5 Gianluca Pacchiani, "COGAT chief addresses Gazans: 'You wanted hell, you will get hell'", The Times of Israel, 10 October 2023, https://www.timesofisrael.com/liveblog_entry/cogat-chief-addresses-gazans-you-wanted-hell-you-will-get-hell/

6 Application of the Convention on the Prevention and Punishment of the Crime of Genocide in the Gaza Strip (South Africa v. Israel), ICJ, Order of 28 March 2024, <https://www.icj-cij.org/node/203847>. Operative Clause ordering Israel to "take all necessary and effective measures to ensure, without delay, in full co-operation with the United Nations, the unhindered provision at scale (...) of urgently needed basic services and humanitarian assistance, including food, water, electricity, fuel, shelter, clothing, hygiene and sanitation requirements, as well as medical supplies and medical care to Palestinians throughout Gaza."



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Methodology

This report is based on medical data collected by MSF in primary healthcare centres in Khan Younis governorate, MSF supply data, and MSF security incident data, all from January 2024 to December 2025; and data from MSF water production and distribution points (location and quantity) from 2025.

It also relies on interviews with key national and international MSF staff in core medical, water and sanitation, supply, and operations functions inside Gaza, conducted between September and December 2025.

This report is also based on 15 interviews and focus group discussions with 41 patients and caretakers in MSF and MSF-supported healthcare centres and in tented settlements around them. They were conducted in the last months of 2025 throughout the Gaza Strip.

How the obstruction of access to water, sanitation and hygiene causes destructive conditions of life for Palestinians in Gaza

As a result of the Israeli authorities' destruction and attacks on WASH infrastructure, obstruction of access for aid actors, forcible displacement of people and blockage of WASH supplies, people in Gaza lack access to the most basic services and live in inhumane conditions, with clear consequences for their health, dignity and safety. MSF's report [Life in a Death Trap](#), published in December 2024, already documented the devastating effects of the lack of access to WASH for the population of Gaza; over a year later, people's suffering continues.

1. Lack of access to water

Not enough water to cover needs

Palestinians in Gaza have spent the last two years struggling to get enough water. In August 2025, the United Nations (UN) found that half of households did not access enough drinking water to meet the minimum, and over a quarter of them did not have enough domestic water, directly affecting hygiene⁷. From May to November 2025, 21 per cent of MSF's water distributions ended with the water truck emptied and people still waiting in the hopes of receiving water. The needs are simply higher than the quantity that reaches people.

Saber is a 28-year-old patient at an MSF hospital in Deir al-Balah. He explained his tent was struck by an Israeli rocket, killing his daughter and causing him to lose the use of both his legs. He remembers the struggles he faced to get water:

“ Water trucks came to the camp. Before I was struck by the rocket, I had gone to fill water. Water was delivered to the camp, but it was not enough. We filled small containers and waited for other trucks to come. We needed at least four water trucks daily to fulfill the needs of the entire camp and neighboring tents. When we did not have enough water, drinking became the absolute priority. The most important was my daughters, because they needed water. Some families would deprive themselves of food to provide water for their children. ”

People limit their daily activities to save what they have. Our patients say hygiene is often the first thing to be halted; Ziyad, hospitalised after he was shot by someone he identified as an Israeli forces sniper, told MSF:

“ We stop washing the dishes, we limit water for cooking, we stop washing clothes and household items in the tent. ”



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7 WASH Cluster Palestine. Joint WASH Assessment Round 3, August 2025, <https://drive.google.com/file/d/11O8jWxGoWdusAp5u-Mi-7ipWG8nGCspO/view>, p.21



People struggle to access the available water

Finding water has become a crucial and time-consuming part of everyday life. People get their water from water trucks brought by international non-governmental organisations (NGOs), municipalities supported by the humanitarian sector, or private companies, which extract water from boreholes to be desalinated and treated. When the trucked water is insufficient or does not arrive due to Israeli security forces' so-called "evacuation" orders and/or insecurity, people are forced to rely on water from the remaining damaged pipelines or boreholes which can be contaminated by seawater and sewage. Getting water takes time and energy – significant barriers to sufficient access.

- 1. The first challenge is the location of water access points.** Water trucks which reach shelters or camps sometimes fill community water tanks. However, there are too few water tanks available and this method requires organisation, which is often not possible as people are not displaced with their communities. Due to Israeli restrictions, there are also not enough pipes available to create distribution networks. Therefore, WASH actors set their distribution points in the street, where there is simply enough space. Those points are not necessarily close to where displaced people are living.
- 2. The second challenge is the infrequency of water access.** For many people, it is crucial to not to miss the moment water trucks pass by to fill their containers. This is too often what wakes people up in the morning, and what conditions their day or their week.
- 3. The third challenge is the time** it takes to reach a water distribution point, wait for the truck, fill their water containers and walk back to their tent or shelter. It takes people anywhere from 15 minutes to an hour – often around 30 minutes, and sometimes much longer⁸. The more time it takes to reach water, the less likely it is that people will be able to go often enough and bring back enough in quantity to meet their needs. The distance to water distribution points, the time spent waiting for the trucks (people try to arrive early as to not miss their turn), and the time filling containers, often in crowded settings, can make it take even longer to access water.

⁸ According to the WHO/UNICEF's JMP Water Ladder, if safe drinking water is not available on premises and when needed, it is not a safely managed drinking water service. If a round trip to collect water takes 30 minutes or less, it is classified as a basic drinking water service; if it takes over 30 minutes, it is categorised as a limited service. (See <https://washdata.org/topics/drinking-water>). According to the WASH Cluster, in August 2025, 28% of households relied on a limited service, with a trip taking over 30 minutes (<https://drive.google.com/file/d/1108jWxGoWdusAp5u-Mi-7ipWG8nGCspO/view>, p. 28).

- 4. The fourth difficulty is carrying heavy containers** back to tents or shelters. This is physically taxing, and particularly for people who are injured, sick, or have disabilities, and those who are very young, frail or old. Families often prefer to send their healthy men to fetch water, but these men are often already charged with finding income, food and firewood. This forces more vulnerable people to go instead, or cope with less water.
- 5. Another barrier to accessing enough clean water is storage capacity.** There are not enough jerrycans and water tanks, so people reuse old water or oil bottles, or any container they can find. This limits the quantity they can retrieve at a time and use in between moments of access. There are many areas that water trucks have not been able to reach daily: For instance, in November 2025, MSF patients from Gaza City explained that their

entire neighborhood relied on one borehole, so each family only would only get access to water for half an hour every 8-10 days, and that due to the Israeli ground incursion from September to October, the departure of WASH actors and destruction limited their water access to once or twice a week.

- 6. Some people must buy water** – but it has become unaffordable. Whereas before October 2023, people paid private providers 25 shekels to get a 1,000-L tank of drinking water filled in their homes, they now have to pay at least 150 shekels (48 USD or 41 EUR) [as of end of January 2026] if they do not have a free public or humanitarian provider nearby. This is a 500% increase, which is inaccessible as most people lost their livelihoods and savings. Ahmed, 35 years old, sustained a leg injury after a truck collided with his shop as people desperately tried to surround it.

“ Drinking water is not always accessible, says Ahmed, “sometimes we need to buy it. We also struggle to have sufficient water for bathing children, washing dishes and doing laundry. We feel frustrated because we need to meet our daily needs. [Because of my injury], I can’t work anymore, so I need to buy it with my savings. ”



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2. Lack of decent sanitation conditions

MSF teams directly witness how the Israeli campaign of destruction of infrastructure, blocking of sanitation equipment, and mass forced displacement has created dire sanitary conditions. There is almost nothing left of toilets and sewage systems, and solid waste is accumulating.

Going to the toilet

In a clinic installed in a camp for displaced people in Al Qarara, Khan Younis, at the end of October 2025, a group of women discussed how even functions as basic as going to the toilet have changed since 7 October 2023.

- “We are seven in our tent, and we have our bathroom in it”, explained Kholoud. “We dug a hole in the sand. It is normal to have a bathroom, one that is clean. Now, we have a hole in the ground and there is no disinfectant available. We have this hole next to the borehole for water, next to our mattresses... That’s why we come to MSF all the time – children get sick all the time.”
- Aseel continued: “If you are in a tent, you are lucky if you have a family bathroom; otherwise, you have to wait in long lines to get to the toilet. And that is if you are healthy enough; what about elderly people”
- “Winter is coming ...”, Shireen emphasised. “I live in a camp and they made a toilet in a tent. I need to walk a long time to get to it. As an old woman, I have trouble reaching it. When it rains, it will be even more difficult: There is no roof, and it will flood.”

People use makeshift latrines – holes dug in the ground that are made more comfortable with what they can find and afford: a slab or pieces of wood to squat on, or more rarely, a chair or chair-like structure to sit on. It is then surrounded with material like plastic sheets or blankets for a semblance of privacy. Although some latrines have been provided by humanitarian organisations, the needs are far greater than what is available.

Families who have not managed to find an apartment or a collective shelter either make a latrine in or around their tent or share one between neighbors. They are forced to live with the smell, discomfort and constant maintenance. Once a hole is full, they need to dig another one.

Rain is weakening makeshift sanitation infrastructure

In Gaza, with the winter comes rain. The lack of proper shelter and sanitation solutions means cesspits **overflow**. In November 2025, for the third year in a row, heavy rains flooded the tents of displaced Gazans, turning sand into mud and spreading bacteria from latrines into homes and boreholes in the area.

Since most healthcare facilities have been destroyed or are inaccessible, MSF installed temporary facilities in tents, which were also flooded – including our field hospital in Deir al-Balah, our primary healthcare centres in Al-Attar and Al-Mawasi (Khan Younis governorate), and an extension to the pediatric ward at Nasser Hospital. If there had been functional infrastructure to evacuate water, this would never have happened.

Solid waste

The destruction of infrastructure, lack of functioning trucks and fuel, displacement of people to new areas and loss of access to waste management spaces have led to the accumulation of solid waste. This waste attracts and worsens the proliferation of **pests and rodents**, while pest and rodent control products are not available.

People search the waste for food or material to burn, at the risk of being exposed to bacteria and dangerous objects. This problem is too big for humanitarian NGOs alone to solve – it requires strengthening local waste collection and management capacity, which is not possible due to the lack and blockage of functioning equipment, spare parts and fuel.



3. Lack of access to proper hygiene

Amidst the ruins of Gaza, people are doing their best to maintain the illusion of a normal life — maintaining personal hygiene, cleaning clothes and keeping their living spaces as clean as they can. A colleague's friend jokingly asked whether she was finished cleaning and tidying up, so that when the next missile comes, it will know she's a "proper housewife." This dark humor reveals the resilience of Gazan women in the face of the extraordinary challenge of maintaining proper hygiene in these conditions.

Soap has often been a luxury item in Gaza, as Israel's blockade has gravely limited its entry on the market and for humanitarian distribution. In periods of total siege, such as from 2 March to 18 May 2025, when the Israeli authorities did not allow anything to enter Gaza, no soap, shampoo or detergent were available and people had to rely on homemade solutions, other products like toothpaste, or, for the most part, on nothing at all. When some hygiene supplies were later allowed in, the flow was too infrequent and quantities too low to cover needs. Humanitarian organisations were unable to distribute enough to fill the gap, and prices on the commercial market skyrocketed: "At some point, it reached 40 shekels [\$12 USD] for a piece," said Ahmed, a 35-year-old MSF patient, in November 2025. Even with prices that have decreased since the worst moments in the war, soap remains out of reach for many people. "We do not have soap, we just wash with water," said Faisal, a 26-year-old MSF patient, in November 2025. "Because there is no money, no jobs. A bar of soap now costs 10 shekels [\$3 USD] – before the war, it was 1 shekel [\$0.32 USD]."

The lack of soap, combined with the lack of water, makes staying clean a challenge: "When water is more accessible, we have **showers** every other day. When it is difficult, we shower once a week", Faisal regretted.

People in Gaza have also been deprived of other hygiene items for over two years. The absence of basic necessities like **diapers** can transform a

normal daily task into a distressing undertaking and worsen the burden of care that often rests on the shoulders of **women**. Our colleague Rana, who is in her fifties and takes care of an elderly family member, expressed shock that so little was available: "People need diapers for children and adults with disabilities." Having to fabricate diapers every day is exhausting. Amal, a 34-year-old whose child is hospitalised in an MSF-supported facility, had to do the same for her baby: "We used to cut our own shirts and plastic bags to make diapers for our children. It gives them rashes. Baby necessities are so expensive – diapers are 400 shekels [\$123 USD]."

As of 4 December 2025, prices have decreased to about 40-60 shekels [\$12-19 USD] for formula and 20-30 shekels [\$6-9 USD] for diapers – an improvement, but one that **would not have been needed if supplies were not restricted**.

On top of the difficulties people face in accessing enough clean water, it is a struggle to keep that water clean. Before the war, people had proper storage tanks, access to hygiene materials, and the means to replace containers regularly. Now, people rely on **jerry cans and reused containers** to store and transport water. Most are old and damaged, and reused repeatedly for drinking water, domestic use or even for diesel or chemicals. Sun exposure worsens the issue, as containers are often left outside tents, exposed to the heat which causes plastic degradation and releases harmful chemicals into the water. The water should also contain some residual chlorine to keep it clean, but prolonged contact can degrade non-reusable plastic, making the water kept in those containers unsafe to drink. At the same time, **chlorine**, which is essential for sterilising water and containers, has been difficult to find as it is often blocked by Israeli authorities. Without chlorine or cleaning materials, people cannot properly disinfect containers, dishes, and utensils. Some families use sand to clean cooking tools, without soap or sufficient water.

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4. How Palestinians in Gaza are affected by the deprivation of access to water, sanitation and hygiene



Impacts on health

MSF has witnessed how the deprivation of sufficient clean water and poor sanitation and hygiene conditions have had a clear impact on people's health in Gaza. In 2024 and 2025, in MSF's primary healthcare clinics, the main diseases teams see among patients are respiratory infections, skin diseases, and diarrhoeal diseases. MSF staff treat much more of those health issues than they had before 2023, due to the sudden degradation of living conditions.

A survey conducted amongst 1,073 households of MSF staff and their extended families' found that, in the month prior to the interview, gastrointestinal diseases had affected almost 1 in every 4 people (23 per cent) surveyed between May and August 2025. These diseases affected much less of the cohort in the survey conducted from the end of January to the end of March 2025 – a period coinciding with the January-March ceasefire, during which more supplies, including for hygiene, were allowed into Gaza by Israel. Skin problems affected 3 per cent of households in the same period, and 8 to 9 per cent between May and August 2025. Upper respiratory tract infections affected 21-22 per cent of households between May and August 2025, and 27 per cent from the end of January to March 2025.

Diarrhoeal diseases are notably linked to the lack of water and soap, as people are forced to consume and use contaminated water, and to wash their hands and belongings less frequently and without the right products. In MSF's Al-Attar and Al-Mawasi primary healthcare centres, diarrhoea and other digestive diseases were the reason for over 8 per cent of consultations in 2025. MSF has seen more people get sick in areas and moments of displacement to small areas, such as in September and October 2025, when the population of Gaza City was ordered to leave and displaced to already-dense informal settlements in Khan Younis and Deir al-Balah. In October 2025 alone, MSF treated 1,077 cases of non-bloody diarrhoea and 44 cases of bloody diarrhoea only in those two clinics, which are both located in the south of Khan Younis governorate – a small fraction of the cases in the Strip. The forced displacement increased the demand for water, and water trucks could not respond accordingly, so people were forced to use other sources of water that were not potable. "Everyone gets sick, especially kids," said Omar, a patient who became ill with diarrhoea from drinking water from a well.

Sanitation and hygiene are also key in the spread of disease: “For instance, I have seen people search through waste, including medical waste, risking needle injuries or skin infections,” said Mo’men, MSF medical manager for primary healthcare. “People also get exposed to human feces because they search in waste, with direct contact, or because they can’t wash their hands with soap after going to the toilet and then use their hands to eat, making contact with bacteria indirectly. This causes diarrhoea or gastroenteritis.” The only reason Gaza has not yet faced a cholera epidemic is that the bacteria has not been brought into the Strip. If the bacteria enters Gaza, all health experts agree: the fast-killing disease would spread extremely quickly under the Strip’s collapsed water and sanitation systems, and the health system would struggle to respond. It would be a catastrophe.

Children, and women who are pregnant or breastfeeding, are particularly vulnerable to the impacts of diarrhoea. Water, hygiene and malnutrition are interrelated issues, which MSF has been witnessing directly for the past two years in Gaza. In our two main primary healthcare clinics, over 60 per cent of diarrhoea cases in 2025 were in children under 15. Pregnant women come to MSF with acute watery diarrhoea because of the lack of clean water and hygiene. Diarrhoea makes these patients more vulnerable to malnutrition, and malnutrition makes them prone to diarrhoea. The resulting weight loss affects their pregnancy and can lead to premature births. Women then go back to living in the same conditions and get sick again: The nutrient loss from dehydration, making them unable to sufficiently



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breastfeed, causing their babies to become malnourished. Baby formula also requires proper sanitary conditions, including clean water to mix it and boiled water to sterilise bottles, which requires people to find wood to burn for fire.

The **skin issues** MSF is seeing include infected wounds, impetigo (a bacterial infection that is highly contagious, especially in crowded settings with limited access to hygiene products), scabies and lice. In 2025, skin conditions were the cause of almost 18 per cent of MSF’s primary healthcare consultations in Khan Younis. The environment created by Israel’s genocidal campaign has made these skin issues much more common than before October 2023, and children are particularly vulnerable to them. Wounds and skin conditions can easily become infected as people lack the means to keep them clean – clean water, soap, basic supplies to disinfect and cover the area and gauze are often either unavailable or economically out of reach. Access to items like gauze remains difficult, even for healthcare facilities.



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Living conditions worsen the sanitary situation, especially in tents and in overcrowded spaces exposed to heat, cold and humidity. “Children, often without shoes because they are too expensive, play in the sand and the dirt,” explained an MSF doctor.

“// People live in tents on the ground, and dirt gets into the wound. Sometimes, we find insects or larvae in them. People also get rashes from the environment and general lack of hygiene. And scabies and lice transmit very fast – our last carton of lice treatment lasted us three days! We disinfect and treat people, and they go back to their tents only to come back to us with the same conditions. //”

Winter temperatures also affect hygiene, as people tend to bathe and wash clothes and sheets less often, to avoid exposure to the cold.

In an assessment of sexual and reproductive health conducted at the end of 2024, MSF found that **women who gave birth via cesarean section** reported issues including infections, wound inflammation and delays in healing, notably due to the limited ability to maintain hygiene because of the lack of clean water and high costs of hygiene products.

The living conditions imposed on Palestinians in Gaza also contribute to the high numbers of **respiratory tract infections** treated by MSF, which were the reason for almost 17 per cent of visits to our Khan Younis primary health clinics in 2025. Living in extreme proximity without access to proper hygiene means viruses circulate

quickly, and the smoke from fires people make for cooking and staying warm irritate respiratory systems. That smoke can be particularly problematic for health; as there is no cooking gas and a lack of fuel, people burn wood when they can afford it, while some resort to burning waste.

The lack of water, sanitation and hygiene in Gaza is also heavily impacting people’s **mental health**. Saber, who lost his 10-year-old daughter when their family tent was struck in a displacement camp, recalled that despite her young age, she was thinking about water all the time:

“// When the water truck was coming, she used to take the containers to bring water and tell me, ‘There is the water truck, let’s fill them.’ She would think about filling the salty water too. Usually, children think about toys or playing. But she was worried about this. //”

Dina, an MSF staff member in her thirties, confided:

“// My family and I were displaced 12 times and we could not access water to wash ourselves for almost two months. We do not have enough water to drink and to do the most basic things; we cannot even dream of a real shower. We get skin infections, scabies and lice; it has a huge emotional impact. //”

Her words are consistent with the testimonies of MSF’s mental health team, who see a significant level of distress – even suicidal ideation – linked to the deprivation of decent WASH conditions.

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Impacts on dignity

The concept of dignity comes up often in conversations with Gazans about water and sanitation. The shock of suddenly going from living in a house to a tent or shelter with thousands of other displaced people in poor conditions is clearly affecting people's well-being.

Privacy is a key concern. Bisan, 22 years old, explained that "women get anxious about using the makeshift shower" in the improvised tented settlement where she now lives, as "the plastic sheeting does not fully hide [their] bodies". In a camp where MSF provides healthcare, a man told us: "It is not safe for women to live this way; there is no space where they can be separate from men, no space to remove clothes, no privacy and the bathroom is not dignified."

The lack of sufficient personal **hygiene affects people's sense of dignity, especially in social contexts**. MSF has had patients who delayed seeking care for scabies, lice and skin infections for fear being judged.

Something as simple as going to the **toilet** has become distressing. MSF patients describe feeling discomfort as they have to wait over an hour for a shared toilet in a collective shelter or share a makeshift latrine with strangers, and experience stress as lines form around camp latrines and people become agitated.

The situation is even worse for elderly **people and people with disabilities**, including MSF patients with injuries that limit mobility. Many are unable to use the toilet alone. Hamza, who is blind, explained that:

/// Before the war, we [people with disabilities] used to suffer. Living in a tent is another layer of suffering. For people who have limited mobility, everything is an obstacle: The ground has holes, rubbish, sewage; you cannot move further, especially if you're blind. We need help from others all the time - to get the jerrycans of water ... and we don't have toilets for people with disabilities. It multiplies suffering by 10. ///

Islam, 26, explained to MSF that he cannot go get water for his family anymore since he lost his legs in a strike on his tent. He needs to find another place to live because he cannot use the makeshift toilet in his family's tent.

A blow to women's sense of dignity: Menstrual and postnatal hygiene

Showering during and after menstruation is difficult, so some women resort to bathing in the sea despite Israeli forces forbidding access to it and regularly shooting at people. Others are forced to forego washing, like Rana: "In our religion, at the end of your period, you need to shower. There is no water for drinking and basic things — how can I get a shower? With my displaced family, we couldn't access water for hygiene for 50 days."

Access to menstrual pads has become a normal topic of conversation. With restrictions imposed by the Israeli authorities on aid and private trucks, the accessibility of menstrual pads oscillates between difficult and impossible. They are currently easier to find on the local market, but prices are too high for many families. They sometimes get distributed by humanitarian organisations, but quantities donated are too limited. In late 2025, many women told MSF they often had to use and reuse any cloth they could find. Without access to proper care, this has increased the risk of perineum and urinary tract infections, with some resorting to using salt and water to try to treat them. Rachel, a women's representative for her camp, explained that without enough pads and showers, "the odor would become so strong that people sitting around us could not stand it" (November 2025).

Women's sense of dignity is also affected **after giving birth**. An MSF colleague recalled women refusing to leave the hospital after delivering their babies because there was no private space for breastfeeding nor the ability to shower in their tents.

The levels of indignity women in Gaza now endure were unthinkable just a few years ago, yet are now a daily affront to Palestinian women. Civilian infrastructure and humanitarian supplies should be protected — not weaponised to harm the population.

Impacts on safety

The restricted access to water which people have faced for over two years has forced most to walk to fetch water from trucks. With high needs, limited water supply, and people being forced to gather to receive water due to the destruction of water distribution systems, people at water distribution points can become agitated, at times leading to fighting. These risks would be mitigated by producing more water, installing more community water tanks (which would help people avoid rushing and walking long distances for access) and repairing water infrastructure – but all of this is blocked by aid entry restrictions.

This creates safety risks, particularly for people with disabilities or injuries, elderly people, women, and children, who have less social space and/or physical capacity to defend themselves from intimidation and physical violence. Women have told MSF that they cannot go to fetch water because they are pregnant or they feel unsafe going, but some have no choice as their husband was killed or injured. Many people explain that they send children because they have no one else. From May to November 2025, MSF found that 60 per cent of water distributions received a roughly even number of children, women and men seeking water; at 26 per cent, recipients were a mix of men and children. Men made up the majority at only 13 per cent.

Dangers children face when fetching water:

- **Fear and intimidation.** A 12-year-old girl explained to MSF that when she grabs the pipes from the water truck to fill her jerrycan, older men scream at her. She and her 15-year-old sister have been left to fetch water because their father was killed.
- **Getting lost.** With the widespread destruction and displacement from their home areas, children may not recognise their surroundings and not be able to find their way back to their families. “We look for them all night,” said Wafa, a 46-year-old interviewed at an MSF hospital.
- **Physical injury.** Some children have told MSF they feel physical strain on their backs and necks from carrying heavy jerrycans; others have described having their clothes torn and being injured at distributions.



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Moreover, civilians and civilian services like water have been **attacked** in Gaza. In August 2025, a young girl was shot in the ribs and a man was shot in the hand during an MSF water distribution. In a pediatric ward supported by MSF in Gaza City, Hanan broke down in tears as she told us her grandson's story:

/// It was in Nuseirat, in July [2025]. He went to get some drinking water. He was standing in line with other kids and [Israeli forces] killed him. He was 10 years old. Other people died with him. It was in the news. To make up for this, they [the Israeli forces] apologised; they said it was a mistake. The apology won't bring him back. Getting water is not supposed to be dangerous. ///

Indeed, getting water should not be dangerous. A population should not be deprived of clean water, toilets, soap, or menstrual pads. People should not be made sick, feel stripped of their dignity, or put at risk, with their basic needs under attack. Under international humanitarian law, and as per Israel's legal obligation as an occupying power, creating or maintaining conditions where civilians cannot obtain sufficient water and sanitation safely is prohibited.

For over two years, MSF has been witnessing the dire and destructive consequences of the deprivation of access to water, sanitation and hygiene for Gaza's Palestinians. MSF has also witnessed how this deprivation has been directly and systematically caused by Israeli authorities and armed forces, who have been destroying and damaging WASH infrastructure, severely hindering the capacity of humanitarian actors to reach people with services, forcibly displacing many Palestinians, and blocking the entry of lifesaving supplies.



How access to water, sanitation and hygiene has been weaponised by the Israeli authorities

1. Destruction and damage to infrastructure and key equipment

Israeli military operations have destroyed or made inaccessible most water and sanitation infrastructure – civilian objects that are necessary for survival. MSF’s own clearly identified water trucks and boreholes have also been shot at, putting people at risk and limiting our capacity to provide water. This conduct endangers the whole population of Gaza.

Water sources in Gaza

In the Gaza Strip, there is no naturally occurring freshwater – no rivers or lakes. There is only groundwater, which can be accessed by digging boreholes, and the sea.



Seawater is unsuitable for both drinking and domestic use. It is also increasingly contaminated by wastewater discharge, as wastewater treatment facilities have been put out of service due to destruction by Israeli forces. To make salty water drinkable, it needs to be desalinated through a process called reverse osmosis (RO). For sea water, this has to be done in one of the three specialised plants managed by local authorities. These plants need specific equipment, the supply of which is impeded. The northern desalination plant was destroyed by the Israeli military.



Borehole water is unsuitable for direct drinking and potentially for domestic use due to its high salinity and/or contamination. Water therefore needs to be extracted and treated. It is then commonly used for domestic purposes (cleaning, bathing) and for drinking and cooking. Before October 2023, many smaller RO plants and treatment facilities desalinated the water and made it safe for consumption.

The Israeli state-owned company Mekorot has three main lines⁹ bringing in water to Gaza. They are regularly cut off, with long delays before their repair.

Before October 2023, drinking and domestic water were then distributed through an underground water network, while private company trucks filled houses’ drinking water tanks. Similarly, **wastewater**, including sewage, circulated through underground networks and was treated in appropriate facilities.

Main water sources pre-October 2023, with functionality as of beginning of March 2026



● Destroyed ● Damaged ● Operational
● Capacity reduced

⁹ Since August 2025, a pipeline funded by the United Arab Emirates also brings some water from Egypt to the southern part of the Strip.

Two years of destruction

Israel's genocidal campaign against Gaza has caused **widespread and severe damage** to water and sanitation infrastructure. According to the World Bank, the European Union and the UN, 89% of WASH sector assets have been either destroyed or damaged¹⁰.

Large portions of the **water supply and treatment network**, including boreholes and desalination assets, have been destroyed or rendered inaccessible. Many distribution networks have been destroyed or damaged to the point that the resulting water loss make them unusable. Others are infiltrated by raw sewage via damaged sections, contaminating any water that is pumped into it. This has resulted in large sections of Gaza being reliant on water trucks. Some damage to the water networks is not allowed to be repaired as they are in areas still controlled by the Israeli forces; others can, but it could take weeks or months before permission is given to access them by the Israeli military. Salinity and contamination of water has become a major issue: The groundwater is overexploited, forcing it to fill with the closest water source – the sea – which makes the extracted water too salty, especially in central areas and zones closer to the coast, which happen to be the areas where most people have now been displaced. As **sanitation** systems have effectively collapsed, makeshift latrines also lead to the infiltration human waste including feces in groundwater, rendering borehole water in the area unsafe. With most wastewater infrastructure nonfunctional, raw sewage now seeps into streets and flows untreated into the sea.

Gaza's water production and repair capacity has been heavily undermined. Before the war, Gaza had a well-developed industry capable of manufacturing water tanks and assembling components needed for RO systems. However, many private companies' warehouses holding water-system components have been bombed, sharply reducing the supply of repair materials and replacement units. For municipalities, most essential machinery and supplies required to service or rebuild water and sewage networks have been destroyed. UNICEF reported in June 2025 that of the 196 desalination plants that are publicly- and NGO-run, over 60 per cent are damaged.¹¹

MSF observations suggest that much of the damage results from broad, indiscriminate bombing of entire areas containing boreholes, water pipelines and plants. MSF's water infrastructure has also been directly targeted.



¹⁰ World Bank, European Union and United Nations. Initial Rapid Damage and Needs Assessment (IRDNA), February 2025, <https://thedocs.worldbank.org/en/doc/133c3304e29086819c1119fe8e85366b-0280012025/original/Gaza-RDNA-final-med.pdf>, p. 37.

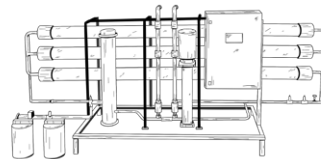
¹¹ WASH Cluster Palestine. Desalinated Drinking Water Production in Gaza Strip and the Impact of the Ongoing Conflict, June 2025, https://drive.google.com/file/d/1mSr2fZ561MfXuudpDuDa_IJZ48nmalzvO/view?usp=sharing

Forced reliance on humanitarian actors

Civilian infrastructure, including water and sanitation infrastructure, is protected by international humanitarian law – but this has not been respected in Gaza. The **widespread destruction of key water and sanitation infrastructure and equipment by the Israeli military** has compelled MSF to keep increasing the scale of its water provision as much as it can. MSF's efforts join those of local authorities and the humanitarian organisations who are still able to support the 2.1 million people of Gaza, whose lives, health and dignity is directly connected to the loss of this key infrastructure.

MSF is the second largest producer of drinking water in the Gaza Strip after local authorities, and the largest non-governmental producer. As of January 2026, through gradual improvements despite the extremely restricted conditions, MSF produced or distributed over 4.7 million litres of water in Gaza each day, and provided enough to meet the minimum needs of over 390,000 people – **more than one in six** inhabitants of the Strip¹².

MSF water production and distribution in Gaza as of January 2026:



- **Production of 1.3 million litres of drinking water daily** through desalination and cleaning, the equivalent of the basic needs of over 220,000 people¹³. MSF uses desalination equipment called reverse osmosis units (ROs) – most of which we had to improvise by combining new parts and parts salvaged from old or damaged units that were already in Gaza, as MSF has been blocked from importing large new units.
- **Distribution over 1.9 million litres of drinking water and over 1.4 million litres of domestic (non-potable) water daily**, the equivalent of the minimum needs of 325,000 people for drinking water and 163,000 people for domestic water. MSF uses trucks to distribute drinking water and supports partner organisations boreholes for domestic water.
- **Distribution of about 1,800 litres** of fuel per week to run boreholes in 50 locations.

¹² The estimated number of people whose basic needs would be covered by MSF is not simply the sum of numbers below, as some activities serve the same individuals – some water produced by MSF is also distributed by MSF.

¹³ The bare minimum international standard in an emergency is 15 litres per person per day. In the current situation in Gaza, the minimum established by the WASH Cluster is 6 litres of drinking water and 9 litres of domestic water per person per day.

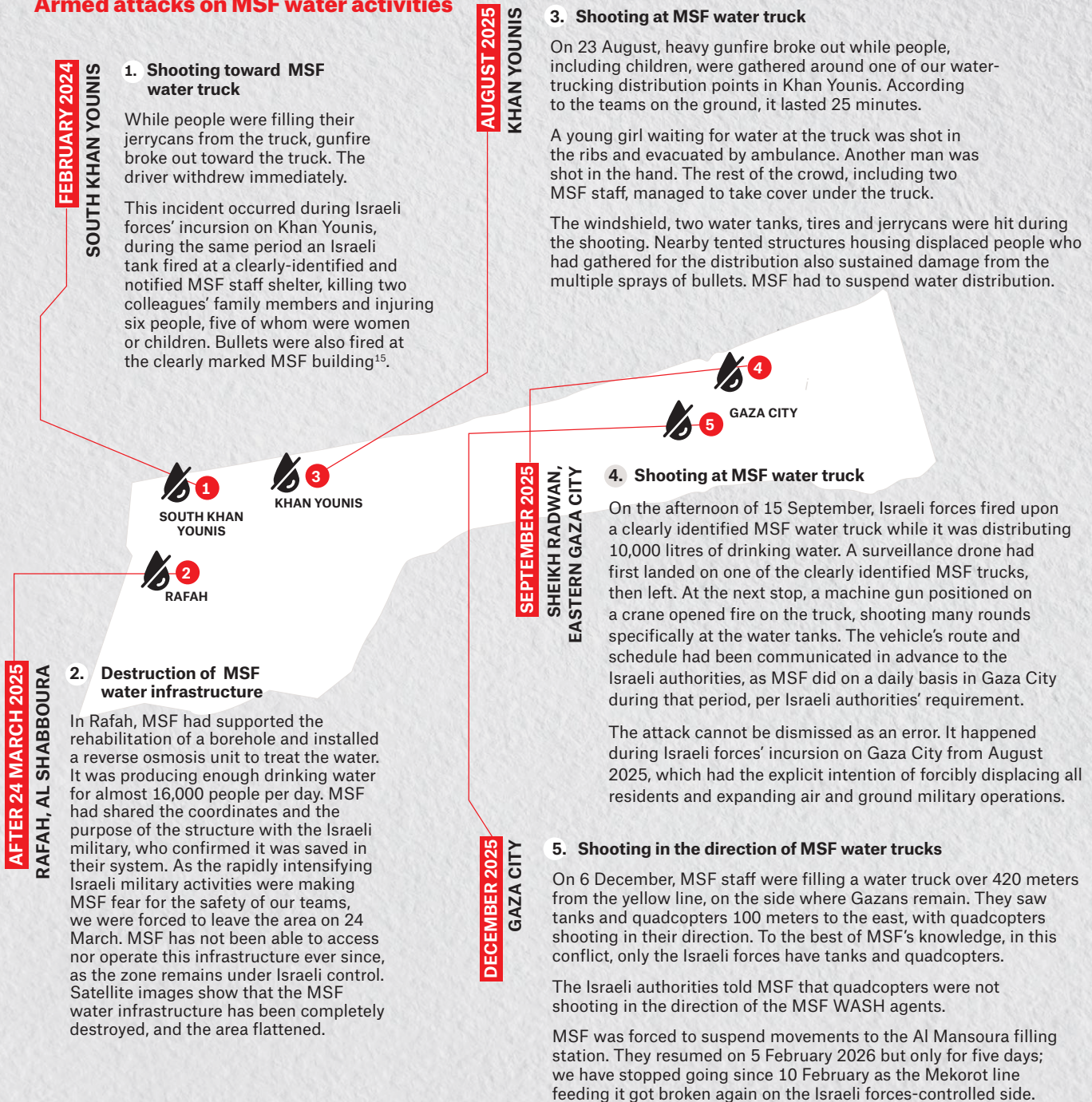
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Attacks on MSF's water assets

Over the past two years, MSF's own clearly identified water trucks and boreholes have also come under fire, often during water distributions to the population, endangering and injuring people seeking water and aid workers, and damaging equipment. The assets are always clearly identified with the MSF logo. In some cases, it was clear that Israeli forces were responsible; in two cases, circumstances are less clear. What remains certain is that these events took place in the context of repeated Israeli attacks on, and lack of protection of, water infrastructure and MSF activities, convoys, and shelters¹⁴. Humanitarian aid must be protected by all parties.

Armed attacks on MSF water activities



¹⁴ For instance, incidents of 18, 20 and 24 November 2023: [MSF convoy attacked in Gaza: all elements point to Israeli army responsibility](#); and incident of 8 January 2024: [Gaza: MSF condemns strike killing staff member's five-year-old daughter](#).
¹⁵ "MSF strongly condemns Israeli attack on MSF shelter in Al-Mawasi which kills two and injures six", 21 February 2024, <https://www.msf.org/msf-strongly-condemns-deadly-israeli-attack-msf-shelter-gaza>

2. Access impediments for aid and people: Militarisation of space and forced displacement

In addition to direct destruction and blatant lack of protection of essential water, sanitation and hygiene infrastructure and equipment, the Israeli authorities have drastically limited the possibility for people and WASH services to access each other. Attacks, “evacuation” orders, and expanding Israeli military control have forced WASH actors to suspend operations, lose assets, and reduce water availability where people need it. As services moved away from them and people were repeatedly forced to displace into overcrowded areas without infrastructure, hundreds of thousands were left without reliable water and compelled to choose between risking their safety to fetch it, deprivation, or further displacement.

Access impediments for WASH actors

Since October 2023, the frequency and the severity of attacks on civilians and civilian infrastructure led MSF to **repeatedly modify or suspend** water distribution and other WASH activities in so-called “green” or “humanitarian” zones due to airstrikes and attacks on those areas.

“Evacuation” orders and Israeli military control

The issuing by Israeli authorities of “evacuation” orders, which would often last weeks, months, or never be revoked, impeded access even further for WASH actors, to both public infrastructure and humanitarian assets. Those orders, which are effectively forced displacement orders, cover a large portion of the Gaza Strip – for instance, on 30 July 2025, 87 per cent of the territory was under “evacuation” order or Israeli military control. The overwhelming majority of the time, infrastructure for water extraction, treatment and distribution, sewage, and waste treatment in those zones could not be accessed or repaired. As of March 2026, Israeli forces still control and forbid access to the population and humanitarians to about 58 per cent of the Strip. In February 2026, the Cluster of WASH humanitarian actors assessed that 43 per cent of WASH facilities (whether functional or not) were still neither accessible to the population nor to humanitarians. These facilities are on the Israeli-controlled side of the “yellow line” that divides the Strip. An additional 10 per cent are only accessible to WASH actors if they obtain permission from the Israeli authorities¹⁶.



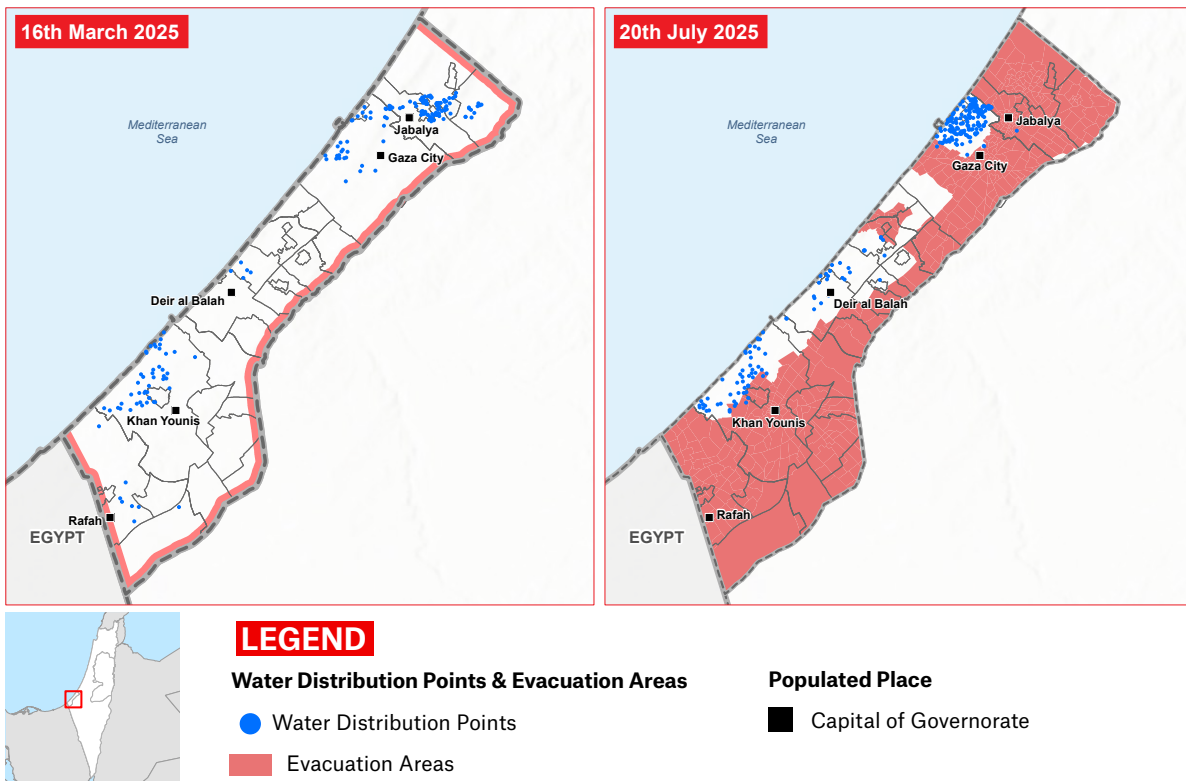
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¹⁶ WASH Cluster Palestine. WASH Facilities Accessible Snapshot, 21 October 2025 updated 09 February 2026, <https://drive.google.com/file/d/1rZoyx-MQ-DmbXOqDNIRi5Xm14ig2CzLgR/view?usp=sharing>

Assets lost | For MSF, the sudden imposition of “evacuation” orders led to the loss of critical water production assets. For instance, at the end of March 2025, after the collapse of the first ceasefire, an order was issued for the whole Rafah governorate; as of March 2026, the area is still inaccessible to the population and WASH actors. MSF had installed its first medium-sized RO unit to desalinate and treat water, and was distributing water to the population at multiple access points. MSF was not given the time to retrieve its equipment. Now, when one drives through Rafah to enter or leave the Strip, one only sees a flattened desert of rubble, and satellite image shows that MSF’s installation was completely destroyed.

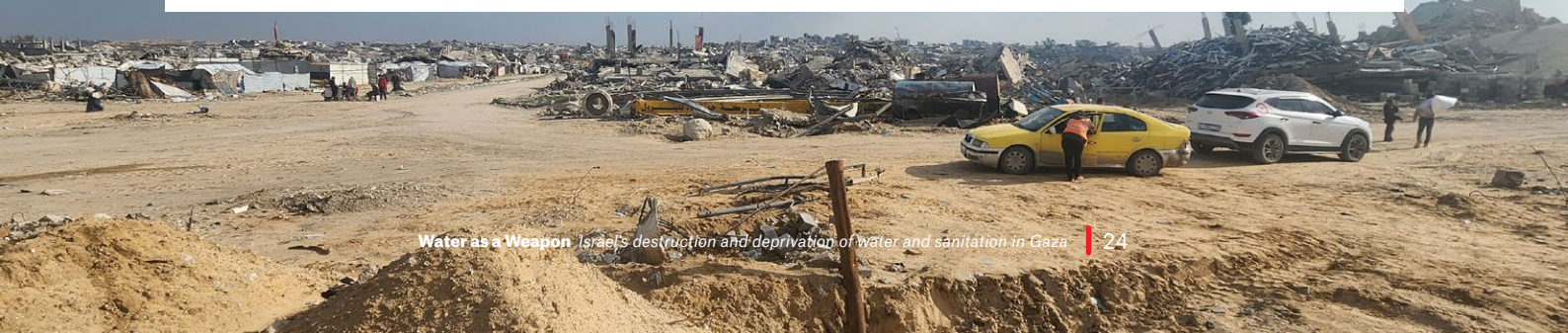


Change in MSF water distribution points from 16 March 2025 (during two-month ceasefire) to 20 July 2025, as MSF lost access to many areas, including Rafah and North Gaza governorates

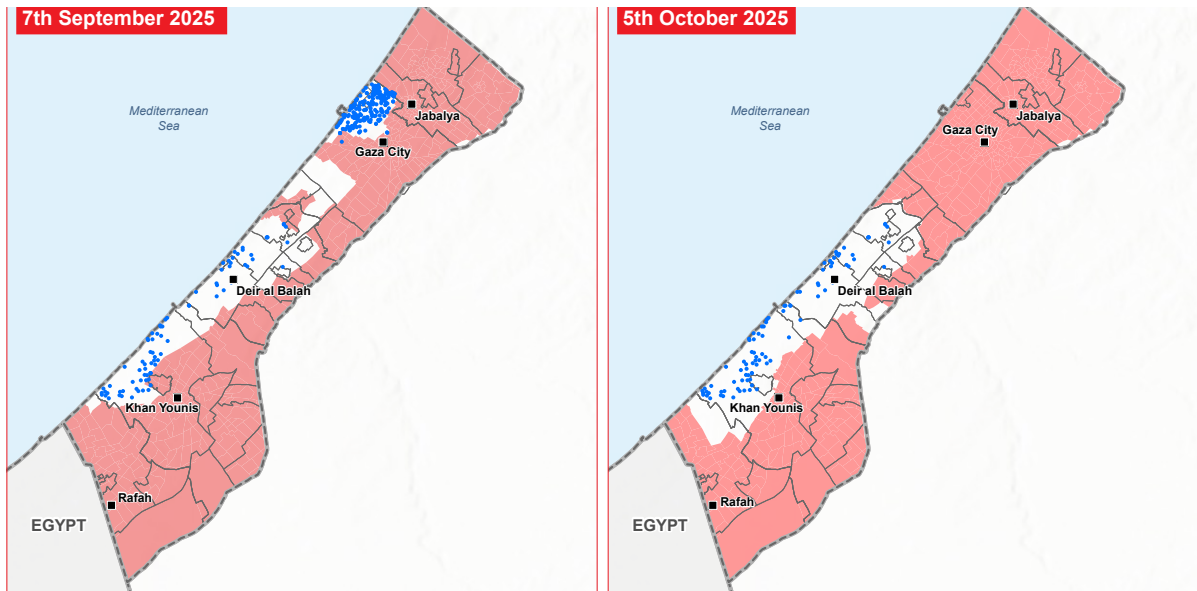


This map is for information purposes only and has no political significance. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by MSF.

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Change in MSF water distribution points from 7 September 2025 to 5 October 2025, after the “evacuation” order on the whole of Gaza City



LEGEND

Water Distribution Points & Evacuation Areas

- Water Distribution Points
- Evacuation Areas

Populated Place

- Capital of Governorate



Reconstruction of Atatra Borehole. It provides 140m³/hr /140.000 liters of domestic water per hour to the surrounding community.

In the same period, in the north, MSF was planning to repair a damaged borehole in Beit Lahia, install RO units and truck water in the area. However, “evacuation” orders were issued for the north as well, significantly reducing access, and attacks intensified. The borehole structure was destroyed before work could start.

Activities stopped | Beyond losing equipment, sudden and large-scale “evacuation” orders meant MSF could no longer keep supporting key infrastructure. MSF supports access to water by providing fuel for generators that allow water to be extracted from boreholes. Mid-March 2025, as orders multiplied for the north, MSF started losing contact with our focal points for fuel distribution, and could no longer access those generators.



Water distribution point along the coastal road. The truck distributes 15,000 liters of water per trip, doing 2-3 trips a day. 15,000 liters gives about 2,500 people emergency levels of 6 liters of drinking water per person.

©Craig Kempster/MSF

Forced service relocation | Despite the specific prohibition under international humanitarian law to attack, destroy, remove or render useless objects indispensable to the survival of the civilian population, including water installations and supplies, it became evident that the risk of attack was even higher in areas under Israeli displacement orders than in the rest of the Strip – meaning that critical WASH equipment risked being destroyed. MSF has been faced with a terrible dilemma: Relocating equipment to protect it often means depriving people of their only source of water.

For instance, when the Israeli incursion on Gaza City started in August 2025, MSF was managing five RO units producing together 70 m³ of drinking water per hour – which covers the minimum needs of over 11,600 people per hour. As Israeli forces intensified their strikes and ground operations, more NGOs and private water providers left, while an estimated 700-800,000 people remained in Gaza City¹⁷. On 17 September, as the security situation worsened, MSF made the decision to relocate three ROs to the south, while two were left to serve those who remained in Gaza City, dividing our drinking water production in Gaza City by three.

Water trucking made impossible | During the Gaza City incursion, MSF had to reorganise its water trucking activities to try to compensate for the lack of services for those remaining within the city, but this was made extremely difficult by the lack of protection by Israeli forces. On 10 September 2025, the Israeli military made it mandatory to coordinate humanitarian movements in Gaza City with them. MSF communicated movements every day from 10 to 23 September, until it was forced to leave. While some MSF movements were validated by the Israeli forces, **100 per cent of our 27 requests for water trucking movements were denied during those 14 days** – making MSF even more concerned for the protection of staff and local partners. On 15 September, Israeli forces fired upon a clearly identified MSF water truck. Every day, MSF was forced to tell people that we were not sure whether we would be able to provide them water the next day, compounding their fears and undermining their ability to stay in their homes.

For MSF, these events appear to be deliberate attempts to both forcibly displace civilians and deprive of water those who could not leave the area – particularly affecting the poorest, the sick and the most vulnerable.

¹⁷ On 10 September 2025, the UN estimated the population of Gaza City to be around 1 million people (United Nations Office for the Coordination of Humanitarian Affairs, Gaza Strip Humanitarian Situation Update #321, <https://www.ochaopt.org/content/humanitarian-situation-update-321-gaza-strip>). On 17 September 2025, around 198,000 displacement movements have been recorded since 14 August 2025 from the north to the south of the Strip, though the real number of people displaced is likely higher (Site Management Cluster, Gaza Population Movement Monitoring Flash Update 28 (14 - 17 September, 2025), <https://reliefweb.int/report/occupied-palestinian-territory/gaza-population-movement-monitoring-flash-update-28-14-17-september-2025>). On 23 September, that number had gone up to almost 340,000 movements to the south. (<https://reliefweb.int/report/occupied-palestinian-territory/gaza-population-movement-monitoring-flash-update-20-23-september-2025>)

Access impediments for people

Services being displaced away from people:

Gazans lose access to water because providers are forced to stop or move

Many people in Gaza lost access to water when water suppliers were forced to leave entire zones. Losing water structures also takes an emotional toll on all, everyone including of MSF's team. MSF's water and sanitation manager Kareem said the hardest are the dilemmas he faces to keep serving people while protecting his teams.

“When the ceasefire collapsed [18 March 2025], they [Israeli forces] issued an evacuation order for all of Rafah governorate. We suspended our water trucking activities immediately for security reasons. Every community representative, from each of the 14 distribution points, was calling me and asking where the water was, saying, ‘We are still here, why are you stopping the water? By doing this, you are encouraging us to leave the area, as the Israeli forces wanted.’ For me, having this kind of phone call was super, super hard. At some point, honestly, I broke, I cried so much. It’s very depressing, but we are trying to stay as long as we can; we are trying to help people.”

Other orders came gradually, affecting MSF's water distribution points every time. **For people whose water point is moved**, the impact is dire. “When distribution points move even 50 meters, people with disabilities, the many who are injured, and women who have lost their husbands face greater difficulty accessing water”, Kareem explained. “It’s heartbreaking for us, but we cannot do anything about it. Now imagine if it’s 200, 300 meters.”

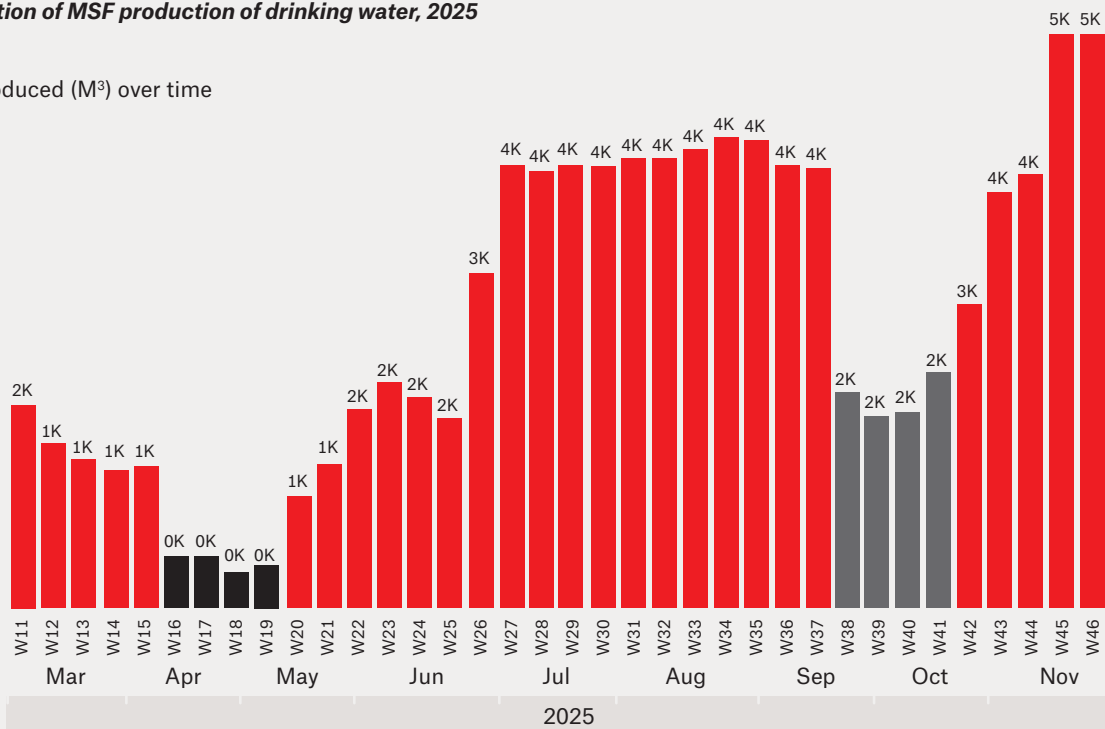
When water points move too far, many people lose access entirely. People have called us throughout 2024 and 2025, telling us that they saw snipers on top of buildings, people getting shot on the street, and airstrikes around them. Residents face difficult choices: risk longer walks to water points with greater exposure to danger, stay and hope a local charity or generous person will provide them with water, or be forced to evacuate their area entirely.



©MSF

Evolution of MSF production of drinking water, 2025

Produced (M³) over time



April-May 2025



The ceasefire broke and the Israeli military issued various “evacuation” orders, including the broad and permanent evacuation of Rafah that led MSF to lose our RO units. Other orders in the north forced MSF to move one RO unit from Jabalia to Gaza City, and it took five weeks to make it functional again.



During the week of 7-13 April, MSF was producing enough water to cover the minimum daily needs of 30,200 people; suddenly, on the week of 14-20 April and for 4 weeks, MSF produced enough for only 10,700 people – a **65 per cent decrease**¹⁸.

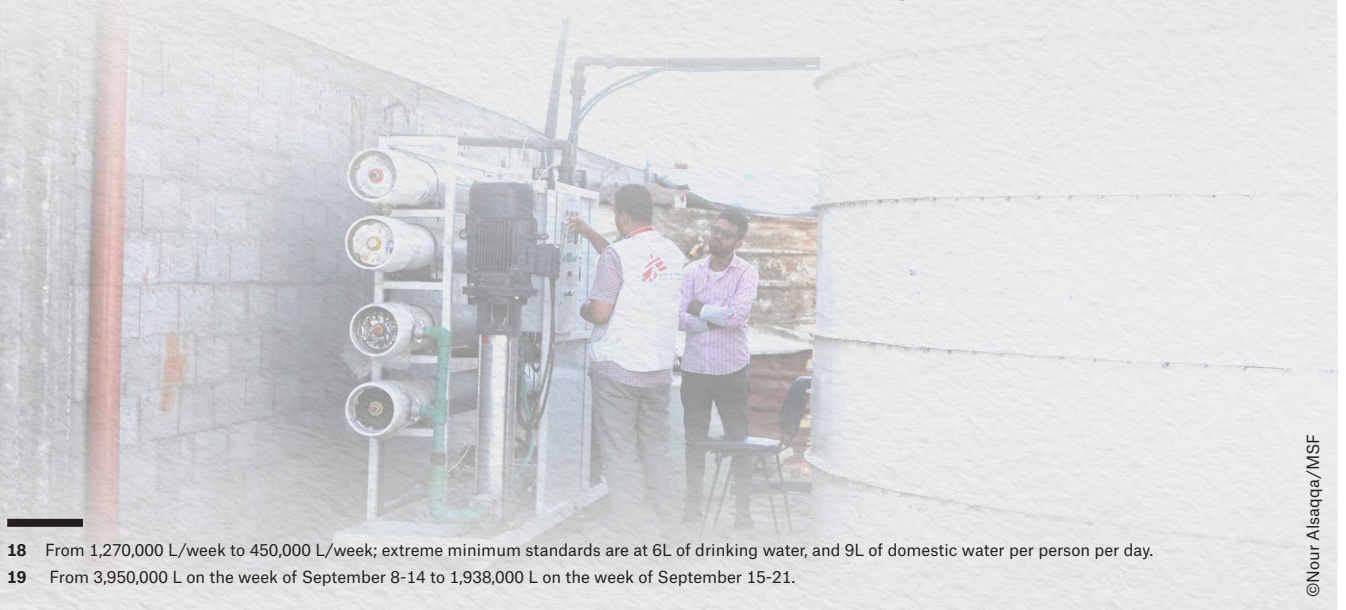
September-October 2025



Israeli forces expanded military operations in Gaza City, and MSF moved some RO units from its Gaza City hub to Deir al-Balah and Khan Younis.



On the week of 8-14 September, MSF produced water to meet the daily minimum needs of 94,000 people; on the week of 15-21 September, we could only cover the needs of 46,100 people – **cutting production by half**¹⁹.

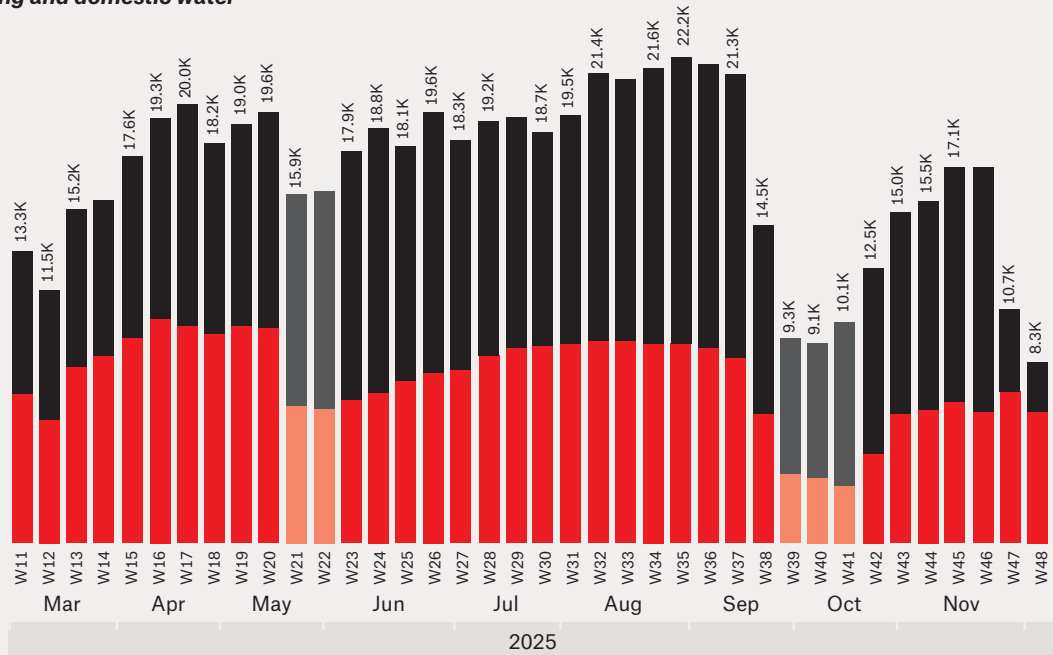


¹⁸ From 1,270,000 L/week to 450,000 L/week; extreme minimum standards are at 6L of drinking water, and 9L of domestic water per person per day.

¹⁹ From 3,950,000 L on the week of September 8-14 to 1,938,000 L on the week of September 15-21.

Distribution of drinking and domestic water

- Domestic Water (well, borehole)
- Drinking water (water trucking)



May 2025



In May 2025, “evacuation” orders were issued by the Israeli military in Jabalia and Beit Lahia in North governorate.



Those displacement orders cut off our MSF access to various distribution points, boreholes and generators, on top of the limited access to fuel. Between 12-18 May and 19-25 May, MSF’s distribution of domestic water from wells and boreholes dropped from covering the minimum daily needs of 155,300 people in 104 locations to 99,100 people in 60 locations: **over a third of domestic water distribution stopped**²⁰.



September 2025



Israeli forces’ military operations on Gaza City were making the security situation for the population and for WASH actors extremely risky, with airstrikes, gunfire and tanks advancing, and the refusal of MSF’s attempts to coordinate movements for water trucking.



Between 6 and 28 September 2025, MSF had to reduce water distribution points and was then forced to stop entirely; we then increased water distribution in the Middle Area. Across the Strip, MSF’s water distribution was cut by more than half²¹. In the **northern part of the Strip, including in Gaza City**, drinking and domestic water distributed by MSF **decreased by 95 per cent**²², going from:

- Covering the needs of about 268,700 people per day across 232 locations during the second week of September, to
- Covering the needs of over 114,000 people per day across 203 locations in the third week of September, to
- Covering the needs of fewer than 14,800 people per day across 54 locations during the last week of September; we then had to leave completely.

²⁰ From 9,781,000 L/week in 104 locations to 6,242,000 L/week in 60 locations (36% decrease). ²¹ From 3,950,000 L on the week of September 8-14 to 1,938,000 L on the week of September 15-21.

²¹ From 21,311,000 L on the week of September 8 to 9,327,000 L on the week of September 22.

²² From 12,942,300 L for the week of September 8; to 5,674,300L for the week of September 15; to 666,000L on the week of September 22.

People being displaced away from services:

Gazans lose access to water because they are repeatedly forcibly displaced

Humanitarian aid at such scale would not have been needed in the first place if people were not **massively and repeatedly displaced by Israeli authorities and armed forces** – mainly to zones without adequate infrastructure, including no water or sanitation networks, or other essential services. An MSF colleague who has been displaced multiple times explained, “Evacuation orders complicate everything. We do our best to organise to be able to access water, then there is another evacuation order and we embark on a new searching journey to bring water to our new settlement.” The impact on hygiene is also evident:

“// You have very little time to pack and flee, if at all. You get displaced again and again, wearing the same clothes, carrying the same mattress. //”

Access to WASH has also been strained by the **inhumane population concentration** resulting from those orders. Before the escalation of October 2023, the Strip was already one of the most densely populated areas in the world, with a population density comparable to London or Tel Aviv. In September 2025, during Israeli forces’ incursion on Gaza City, the so-called “humanitarian zone” where the entire population of 2.1 million people was ordered to move was just 43.3 km² – representing a density of 48,500 people/km². In comparison, Manhattan, New York (which has skyscrapers instead of low buildings and tents) has a density of 28,000 people/km². That zone would have confined half a million more people in an area 27 per cent smaller, with no basic needs met and no escape. Though not all people left Gaza City, the forcible transfer of hundreds of thousands of people from Gaza City to western Deir al-Balah and Khan Younis – in areas already full of displaced persons – put immense pressure on already exhausted resources. There was simply no space to install proper infrastructure.

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3. Obstruction of the WASH supply chain

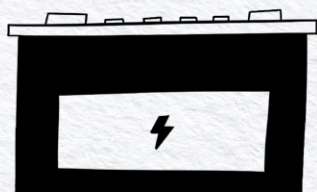
The lack of access to water, sanitation and hygiene for Gazans is caused, on top of destruction of infrastructure and access impediments due to forced displacement and insecurity, by Israeli authorities' obstruction of access to technical solutions for energy and WASH equipment.

Obstruction of access to energy

Energy is crucial to produce and distribute clean water, treat wastewater including sewage and even distribute hygiene items. Those activities notably require electricity to run desalination plants and other treatment equipment, and fuel for trucks that distribute water, dislodge cesspits and distribute goods like soap or jerrycans across the Strip. However, Israel cut off the Gaza Strip's **electricity supply** in October 2023. It was only rarely and sparingly reconnected: At the end of July 2025, almost two years later, electricity to the southern seawater desalination plant was reactivated.

Gaza's limited **electricity production capacity** was damaged despite being protected by international humanitarian law. MSF witnessed destroyed electricity lines, solar panels and generators, and entire areas being flattened. A grandmother in an MSF hospital in Gaza City told MSF how Israeli soldiers did not allow her family to save their solar panels: "They called me on the phone and told me to evacuate. I begged them: 'Can we at least take the solar systems?' and he said 'You can only take one. If you take more, we will shoot you.' So we took one solar system and they destroyed the house."

Most of Gaza's energy that did not come from Israel or (in a smaller measure) from Egypt was made from **fuel**. Now, nearly everything depends on fuel – but UNOPS, the UN agency responsible for distributing the fuel allowed into Gaza, has to prioritise its distribution. Israeli authorities systematically restrict the fuel supply despite humanitarian needs, and their movement restrictions have limited UNOPS' capacity to retrieve its stock inside Gaza.



Consequences of lack of fuel for access to WASH

By 17 June 2025, no fuel had entered Gaza for more than 100 days, and UN attempts to retrieve fuel stocks from "evacuated" zones had repeatedly been denied²³. Municipalities would make their boreholes work only once every week or two.

For MSF, this resulted in one of our stocks in the north running very low in the first week of June 2025, with only three days of fuel left until we could not run WASH activities anymore. We had to limit water trucking, with some trucks in June 2025 limited to distributing in a radius of 3 km around water stations. In May 2025, we were already allocated less fuel and thus had less to distribute. We had to halve the quantity we provided to a borehole in the north; the production of domestic water for 110,300 people (993 m³/day) was also **cut in half**. We also had to cancel plans to pump out sewage-contaminated ponds in areas where displaced people were sheltering because the few available pumps required gasoline rather than diesel, and the little gasoline allowed in Gaza had understandably been prioritised for ambulances by the humanitarian sector.

²³ United Nations Secretary General. "Highlights Of The Noon Briefing By Farhan Haq, Deputy Spokesperson For Secretary-General António Guterres, Tuesday, 17 June 2025", <https://www.un.org/sg/en/content/noon-briefing-highlight?date=2025-06-17>

Obstruction of WASH supplies entering the Gaza Strip

Israeli authorities have continuously impeded the capacity for humanitarian organisations, as well as public and private WASH actors, to provide emergency WASH services to support the population despite the destruction of infrastructure, forced displacement and access restrictions. As of December 2025, MSF was one of the few international humanitarian NGOs still able to bring in some supplies. For months, most others had been systematically blocked. Since 1 January 2026, MSF's requests for the entry of any supplies through the dedicated system, where approval is determined by the Israeli authorities, have **all been denied**.

However, these supply impediments are not new. Israeli authorities restricted supply way before October 2023, but at the moment when people needed aid most, obstacles only increased. As documented in the report *Choking Gaza*, MSF has witnessed for over two years of war on the Strip a **strategy of arbitrary and inefficient Israeli procedures and practices for authorising and managing the entry of essential supplies in Gaza, as well as the pervasive subordination of fundamental humanitarian needs to military interests** — severely undermining the scale and quality of MSF's humanitarian response.

The case of Nasser Hospital: No supplies to make drinking water

Two main boreholes provide water to Nasser Hospital. In October 2025, testing revealed severe contamination: One borehole was fully infected with *E. coli* and fecal coliform bacteria, while the second, newer borehole remained uncontaminated but had high salinity, making it unsuitable for use without treatment. The hospital had three RO units, but none were functioning properly. The main issues were shortages of membranes, filters and essential chemicals such as antiscalant and chlorine. This situation left the **hospital without direct access to clean water**, even for preparing infant formula in neonatal units – requiring water to be extracted and cleaned elsewhere, then brought by truck. MSF has repaired the water treatment units – with delays as we lacked most components.



An arbitrary, inefficient and restrictive system

Authorisations by Israeli authorities

MSF's water, sanitation and hygiene supplies face major obstacles in getting approval from the Israeli Ministry of Defense unit called Coordination of Government Activities in the Territories (COGAT). MSF has not seen meaningful improvements in the situation with the establishment of the US-led Civil-Military Coordination Centre (CMCC) in October 2025, as decisions on approvals ultimately remain in the hands of the Israeli government.

Many WASH items are either **blocked** or **never approved**. Even during the January-March 2025 ceasefire, despite overall improvements in the entry of supplies, some WASH supplies were still not allowed, such as RO units to produce water. The Israeli military deems many essential humanitarian items, including for WASH, to be **"dual use"** (with a risk of military use) despite not being considered as such in other contexts. MSF did not have a list of such items for months – we were provided lists a few times, then told they were not valid anymore – leaving us guessing. The latest list, received in October 2025, still categorises water trucks, water desalination pumps, metal waste containers, small generators, sewer inspection and clog removal devices, water testing kits, membranes for RO systems and chemical cleaning materials as requiring a specific approval process. As for RO units, toilets and showers with aluminum panels and diesel generators powerful enough for larger-scale water activities (above 30 KVA), must be submitted for the most complex level of approval, resulting, in reality, in almost never being approved.

From the beginning of 2024 until mid-December 2025, at a time of dire need, out of all requests for entry of WASH items submitted by MSF, **only 2 out of 3** (67 per cent) of these life-saving humanitarian goods were approved – even with MSF limiting the types of items requested to try to comply with the complex restrictions. Other requests were either rejected or received no answer. When COGAT did give answers, **29 per cent – almost 3 in 10 – were rejections**, while Israel has the legal obligation to facilitate access to assistance in the territory it is occupying.



Membranes used in reverse osmosis units to desalinate and clean water.

Items rejected

Rejected **WASH items** in 2025 included water pumps for hospitals, RO units to produce drinking water, antiscalant to prevent scale formation in RO systems, spare parts for ROs (pressure switches, flow meters, water filters, membranes for filtration and dosing pumps), water hoses, water tanks to transport drinking water and squatting plates for emergency latrines.

Although humanitarian aid should never be conditioned on political processes, the **October 2025 ceasefire** agreement promised an improvement in entry of aid supplies. The Plan promised "full aid", "rehabilitation of infrastructure (water, electricity, sewage)", "without interference from the two parties". Since the agreement was effective and as of 14 December 2025, **13 types of WASH items have been rejected**. This includes antiscalant, water pipes for an MSF hospital, chlorine tablets for disinfecting drinking water, a water storage compound (to prevent the growth of bacteria and microorganisms in stored water and in desalination equipment), rodenticide and insecticide.

MSF struggles to understand the reasons behind the blockage of such critical items. It seems particularly disproportionate to impede their entry in light of the threat posed by WASH conditions on the survival of an entire population. Those impediments appear even more arbitrary when we see that the same items that are **sometimes rejected or remain pending can also be approved** – such as water tanks, antiscalant, chlorine tablets and RO units. Amongst our most requested logistical items is also engine oil, which is crucial to keep our generators functioning; sometimes it is also rejected, left pending, or approved.



«يقوم أحد العاملين في منظمة أطباء بلا حدود بسكب مادة مانعة للتكلس ليتم تمريرها عبر نظام التناضح العكسي الذي ينتج مياه شرب نظيفة. ويساعد هذا المنتج الأساسي على منع تكوّن الترسبات المعدنية على الغشاء الذي يربّح المياه، مما يحافظ على نظافته وكفاءته التشغيلية.»

Items left pending

As of mid-December 2025, our requests for **19 types of items have been pending** for a month to a year. This includes two water pumps for water distribution, which were submitted three times after two rounds of questions from COGAT. The requests were first submitted respectively in April and May 2024, with the latest resubmissions in July 2025; they were still not approved. Other examples include water tanks, antiscalant and simple pumps to empty latrines. All of those types of items have been accepted and/or rejected in the past, highlighting the arbitrary nature of the process.

Other obstacles to approval

Another obstacle has been added since July 2025: COGAT requires MSF to provide the **full composition** of any item classified as a “chemical.” Each material must be listed individually with the exact percentage of each component. Providing this information is impossible, as manufacturers consider it confidential. MSF has requested to submit the international industry standard document used to indicate a product’s composition, safety and associated risks. However, this request has been denied.

All of our requests for chemicals have therefore been effectively blocked, including the following for WASH:

- Thirteen types of cleaning and disinfection products such as soap, hand sanitiser gel, disinfectants for medical devices or surfaces, and chlorine. Chlorine tablets, which are essential to treat water, have alternately been allowed and rejected using the same documentation.
- Products essential to treat and store clean water such as antiscalant and a storage compound. Both were last rejected at the end of October 2025, whereas all the other elements of our request for RO-related items were approved. *This undermines our ability to ensure that the water produced at our sites **remains safe for the population.***
- Three types of products for vector control, including mosquito repellents and insecticide.

After Israeli authorities have already approved an item twice (general authorisation and dual-use validation), we still have to comply with a detailed **customs** clearance process. Despite seeing how much people living in tents are affected by the constant biting and presence of mosquitoes, sand flies and flies – especially between the months of June and October – 86 boxes of insect repellent have been sitting in a warehouse since July 2024, blocked by customs processes.

Effective entry of items

Approval does not guarantee entry: Once items finally receive all authorisations, MSF faces another phase of lengthy and costly challenges to effectively get the items into Gaza. Many WASH items that are approved by COGAT end up stuck in transit waiting for the next step in the process, or are simply turned away at the border – in both cases by the same Israeli authorities. *For the people in Gaza, these impediments mean key humanitarian items **take months to arrive, or never do.*** For MSF, this amounts to enormous costs for storage and trucks; for instance, trucks loaded with MSF WASH supplies were repeatedly rejected at the crossing point and had to drive back to Egypt to wait to try again, sometimes for weeks at a time – costing over \$12,000 USD per truck, for multiple trucks.

While Gazans have to find and buy prohibitively expensive and impractical materials to make latrines due to general restrictions on building materials, MSF has had 2,150 units of **latrines** waiting in Jordan to enter Gaza since the end of April 2025. After an initial request in March 2025 and 106 days waiting for a response, they were approved in July. As of mid-December 2025, these units still had not moved, as we were

given an incorrect approval number and, despite continuous advocacy, have never been given a new one. Not only do the stuck goods represent enormous costs (just for the latrines, 268,707 euros) for an organisation funded by private, individual donors, but their storage – as for all the other items stuck in transit – represents costs more money and logistical work.

In our requests to bring **RO systems** into Gaza, MSF has faced many rejections and lengthy processes, including for requests to resubmit information to Israeli authorities, and equipment turned away at the border. As a result, we have had to make various units from parts salvaged from old and damaged ROs that were already in Gaza, but we are running out of spare parts, filters and the chemicals that are essential to run them. Those desalination systems are the most concerning WASH item that is being blocked, as MSF cannot provide safe drinking water without them.

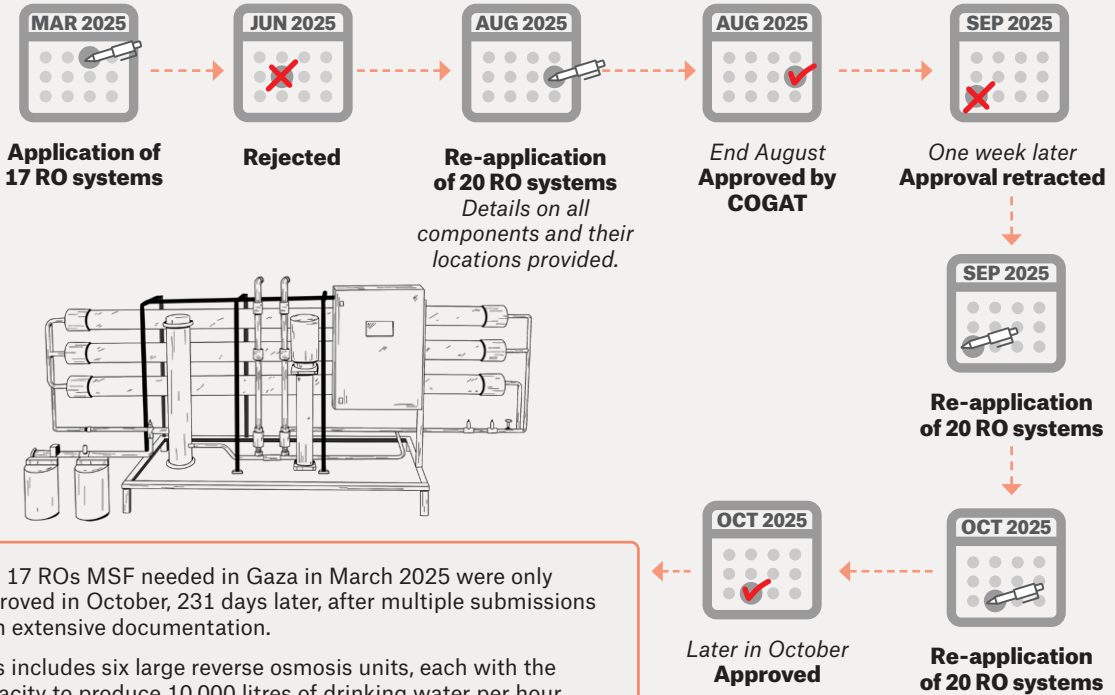
None of MSF's desalination systems entered Gaza in 2024 – they were either rejected at the application stage or at the border.

Only 6 small desalination systems requested by MSF entered Gaza in 2025.



Timeline: Israeli blockages of MSF attempts to bring desalination (RO) systems into Gaza to produce drinking water in 2025

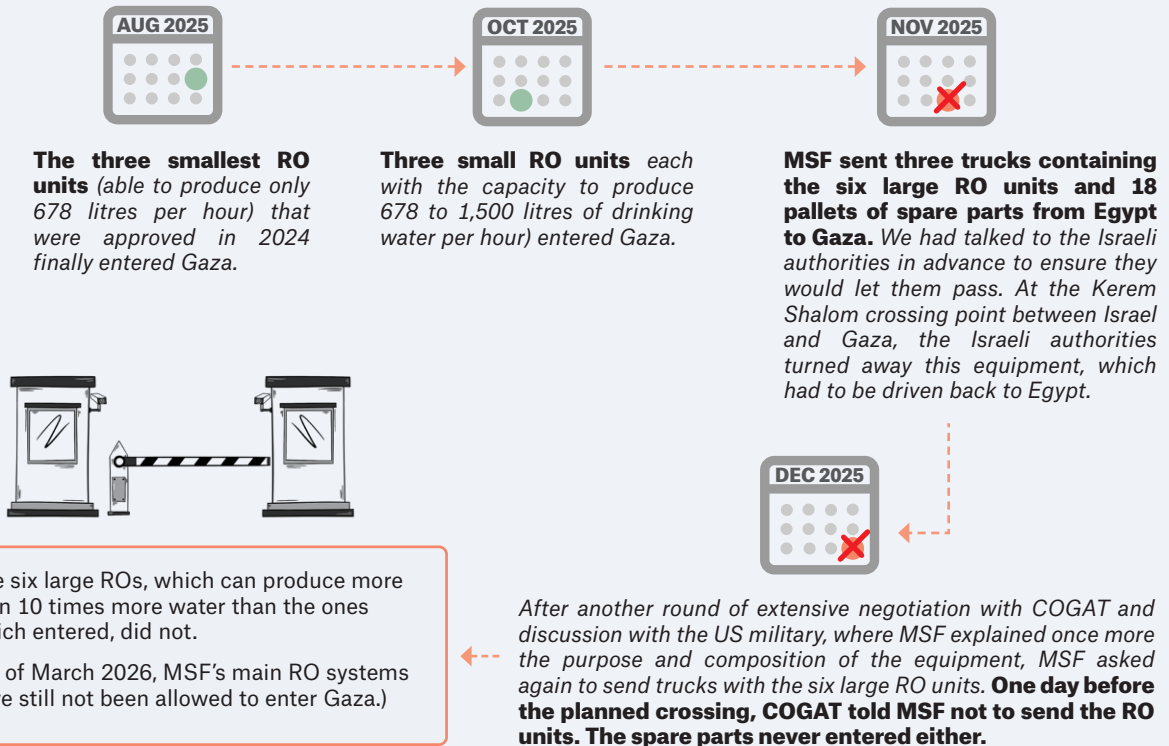
APPROVAL BY ISRAELI AUTHORITIES



The 17 ROs MSF needed in Gaza in March 2025 were only approved in October, 231 days later, after multiple submissions with extensive documentation.

This includes six large reverse osmosis units, each with the capacity to produce 10,000 litres of drinking water per hour.

EFFECTIVE ENTRY AT THE CROSSING POINT MANAGED BY ISRAELI AUTHORITIES



The six large ROs, which can produce more than 10 times more water than the ones which entered, did not.

(As of March 2026, MSF's main RO systems have still not been allowed to enter Gaza.)



Limited alternatives

MSF is forced to try to obtain key supplies through alternative ways. Repair of Nasser Hospital's water systems remained unfinished for a whole month as we were trying to obtain RO membranes – while ours were stuck outside the Strip. When MSF built a new RO system in Khan Younis, it took MSF one month to find the equipment necessary to dig and install the new borehole on the local market.

Since MSF has been blocked from having supplies enter Gaza on 1 January 2026, our capacity to improve WASH is now all the more limited. The few spare parts available on the **local market** are expensive and often low in quality – for instance, water filters, sprayers, connectors, hoses and taps, among others. Spare parts for generators and vehicles are almost impossible to find locally, affecting water trucking, transportation of equipment and energy.

It is appalling to see a third of MSF's already-reduced list of WASH items unapproved, and many of those approved being turned away at the border. This is especially shocking as Israel has a legal obligation, as the occupying power, to ensure the needs of the population are met. Those needs have been created by Israeli authorities themselves by bombing infrastructure, displacing people on a massive scale and impeding access to most of the Strip. In January 2024, the International Court of Justice (ICJ) established a plausible risk of genocide and required immediate measures to prevent it and to ensure the provision of humanitarian assistance²⁴. In March 2024, the ICJ reaffirmed those measures and added new ones, urging for the unhindered provision at scale of urgently needed basic services and humanitarian assistance, including water, hygiene and sanitation²⁵. **While Gazans are deprived of water and sanitation, Israeli authorities are using aid as a tap, closing or opening slightly to allow only drops of aid to enter the Strip.**

When access to water becomes a weapon, when going to the toilet or washing one's body becomes a daily struggle, it **threatens survival and human dignity – and engages State responsibility**. For over two years, MSF has witnessed firsthand how access to water, sanitation and hygiene are being used against the whole population of Gaza in the genocide perpetrated by Israeli authorities. The extensive destruction of civilian infrastructure, imposed access limitations for WASH actors within Gaza, repeated forcible population displacement, and the blocking of lifesaving supplies have destroyed conditions of life and amount to the collective punishment of the entire population. This is happening while Palestinians in the West Bank are suffering ethnic cleansing, including through Israeli attacks on access to water. All States bear legal and moral duties here. The Israeli authorities must ensure the Palestinian population have water, sanitation and hygiene – amongst the basics everyone should access to sustain life. Other States must do everything in their power to not let Palestinians be dehumanised any longer.

²⁴ Application of the Convention on the Prevention and Punishment of the Crime of Genocide in the Gaza Strip (South Africa v. Israel), Provisional Measures, Order of 26 January 2024, I.C.J. Reports 2024, Paragraphs 78 and 79, p. 3, <https://www.icj-cij.org/sites/default/files/case-related/192/192-20240126-ord-01-00-en.pdf>

²⁵ Application of the Convention on the Prevention and Punishment of the Crime of Genocide in the Gaza Strip (South Africa v. Israel), ICJ, Order of 28 March 2024, <https://www.icj-cij.org/node/203847>.

Urgent calls

MSF calls on the Israeli authorities to:

- 1 Stop obstructing the entry and distribution of lifesaving water, sanitation and hygiene supplies** into Gaza, which continues to harm and kill people by deprivation alongside the continued direct violence against civilians.
 - Emergency WASH supplies like reverse osmosis units and their chemicals and spare parts, water tanks, water trucks and their spare parts, generators, pumps, latrines, and other such supplies must be allowed to enter Gaza.
 - Supplies necessary for the recovery of WASH systems, such as construction material and equipment, must also enter the Strip.
 - The supply entry process must immediately be streamlined, made transparent and allow for all necessary humanitarian goods. All approved humanitarian goods must effectively enter. Aid must flow from all possible corridors (through Jordan, Egypt and Israel); all entry points to the Gaza Strip must be opened; and more roads must be authorised and cleared for the passage of goods inside Gaza.
- 2 End access restrictions within the Gaza Strip** that prevent humanitarians from providing and repairing essential water and sanitation services. Israeli authorities must ensure that services are accessible and restored in a principled manner across the whole Gaza Strip and reach people wherever they are.
- 3 Facilitate access to the Gaza Strip for WASH humanitarian actors.** The continuation of INGOs' independent, impartial humanitarian operations must be ensured.
- 4 Respect the protected status** of water, sanitation and hygiene infrastructure and services, and other civilian objects.
- 5 Uphold the protection of civilians** under international humanitarian law as well as the protection of **humanitarians** providing WASH and other humanitarian services
- 6 Stop the forced displacement** which *inter alia* impedes people's access to WASH services and forces them into areas without appropriate infrastructure. People must be allowed to return to their areas of origin should they desire to.

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MSF calls on UN Member States,

- which have a responsibility to uphold international humanitarian law, implement the obligations restated in the 2024 ICJ Advisory opinion and protect principled humanitarian aid,
- and notably to States involved in the Board of Peace mechanism,
- States which maintain close security, political and economic ties to Israel, and/or
- States which provide aid in the Occupied Palestinian Territory,

In their engagements with Israeli authorities, to:

- 1** Demand – using all necessary economic, security and legal leverage – that Israeli authorities **stop impeding Palestinians’ access to water, sanitation and hygiene** in Gaza through the destruction of infrastructure, the prohibition of people accessing over half of the Strip, and the blockage of humanitarian access and supplies into Gaza. States must uphold international law and demand that Israel stops its direct and structural violence against Palestinians.
- 2** Demand that Israeli authorities abide by their obligations as an occupying power and **ensure** people in Gaza have sufficient, dignified access to WASH services.
- 3** Demand that Israeli authorities ensure a swift and urgent scale-up of WASH assistance through **established UN- and INGO-coordinated delivery mechanisms** without interference by warring parties, ensuring the safe, efficient and impartial delivery of humanitarian assistance to all those who are in need.

In their humanitarian and development donor capacity, States must:

- 4** Increase flexible, sustained and predictable funding
 - for **immediate WASH needs** such as the production and trucking of safe drinking water, the pumping and distribution of domestic water, access to safe and dignified toilet solutions and access to hygiene items.
 - and for the longer-term **recovery and reconstruction of WASH infrastructure**, without which people will continue suffering and risking their health and lives, while using all necessary leverages for the necessary materials to enter the Strip.

Urgent humanitarian needs should not be deprioritised even when the conditions for recovery will materialise.

Funding should come with firm advocacy on access to ensure financial resources materialises into concrete aid for the population.

- 5** Ensure services – notably water and sanitation, healthcare and shelter – are supported, rebuilt and restored in a principled manner **across the whole Gaza Strip, to reach all people in need**. Prioritise funding for the **principled** humanitarian response, ensuring resources are directed to meeting urgent humanitarian needs rather than commercial or politically driven initiatives.

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