



## Water in Gaza: ‘I wake up and go to sleep thinking about water’

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### Introduction

Access to safe water, sanitation and hygiene (WASH) is the most basic human need for health and well-being (United Nations (UN), 2010). It is also an essential element of reducing poverty, conflict and food insecurity, but according to UN estimates (considerable progress notwithstanding), billions of people still lack access to safe drinking water, sanitation and hygiene. Achieving universal coverage by 2030 in line with Sustainable Development Goal (SDG) 6 will require greatly accelerated global rates of progress: sixfold for drinking water, fivefold for sanitation and threefold for hygiene (UN, 2018).

The challenges of accessing safe water, sanitation and hygiene are compounded in fragile and conflict-affected contexts. There is a growing recognition that water can be both a source of tension and a contributing factor in violent conflict, and that water is also increasingly being used as a weapon of war in armed conflicts in violation of International Humanitarian Law (Global High-Level Panel on Water and Peace, 2017). For young people, these violations can be devastating. Not only are children in conflict-affected countries almost twice as likely to be deprived of access to an improved water source, but they are also more likely to die of diseases linked to a lack of clean water than from conflict-related violence (United Nations Children's Fund (UNICEF), 2019, quoted in Schillinger et al., 2020).

In the war on Gaza, Israel has weaponised the Strip's water infrastructure through the systematic destruction of Gaza's wells, water tanks, desalination plants, and wastewater treatment facilities. According to Human Rights Watch (HRW), Israel's deliberate attempt to deprive Palestinians of water amounts to acts of genocide (Geneva Water Hub, 2024; HRW, 2024). Since October 2023, Gazans have experienced a dramatic drop in individual water consumption – from 83 litres a day prior to October 2023 to as little as 2–9 litres a day, far below the minimal personal needs of 15 litres treated water in humanitarian settings according to the World Health Organization (WHO) (HRW, 2024; WHO, n.d.). Although Gaza's water was considered undrinkable even before the conflict, water was still available (UNICEF, 2023). Since October 2023,

however, accessing water has become a major challenge (Geneva Water Hub, 2024). This brief explores the effects of this water crisis on young people drawing on unique mixed methods data collected in Gaza in 2024.

» The Israeli army besieged us for a whole week, and we were without filtered water, so we used the pump... It affected my body because I was injured, and my body was weak. Every time I drank from this water, I had cramps and pain, so I started just wetting my lips until we got out of there and found good water.

(An 18-year-old young man in the north of Gaza)

## Methods

This brief is based on the findings of a cross-sectional household survey conducted in August and September 2024 and in-depth qualitative research with adolescents and key informant service providers conducted in November and December 2024. The quantitative data involved 1,011 young people (526 girls and young women and 485 boys and young men, aged 10–24 years) who were proportionately sampled from across the five governorates of the Gaza Strip. The qualitative data sample involved 100 young people and 24 key informants. For both the qualitative and quantitative data collection, a two-day training course was held with 10 female enumerators for the survey and 6 female researchers for the qualitative data collection, covering data collection methods, safety precautions, ethical issues, and recruitment of participants. For the analysis, quantitative data was organised with the Statistical Package for Social Sciences software, while the interviews were transcribed and translated into English (from Arabic) and then coded thematically using MAXQDA, a qualitative software package (see also Abu Hamad et al., 2024; Vintges et al., forthcoming).



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## Findings

The survey instrument covered young people's source of water for drinking, hygiene, time taken to access water, reasons for access challenges, and measures taken to ensure drinking water safety (see Table 1).

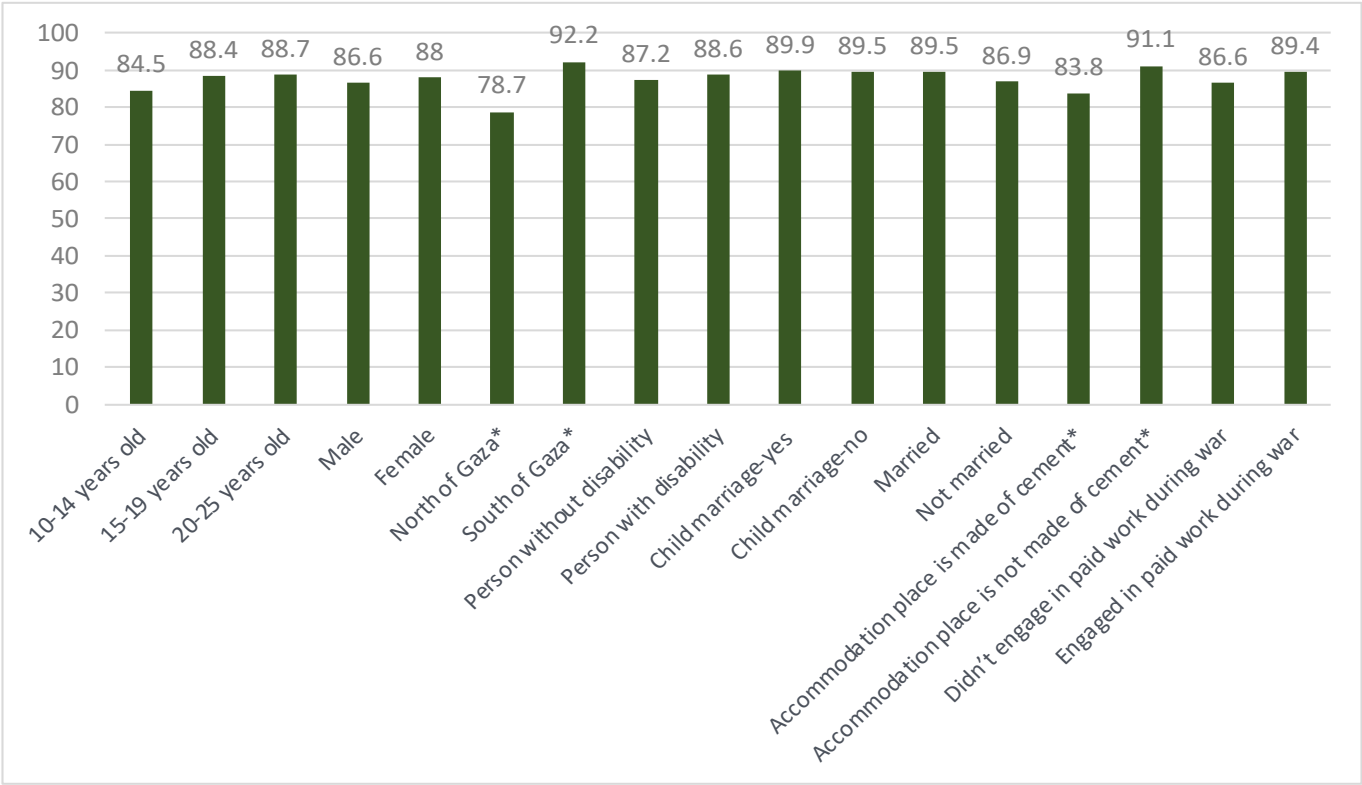
**Table 1: Main sources of water**

Items	Number	Percentage
<b>The main source of drinking water during the past month</b>		
Tank (filtered water, paid)	585	57.9
Tank (filtered water, free of charge)	359	35.5
Network/well (e.g. private shared well)	48	4.7
Others/charity	19	1.9
<b>Main source of water for hygiene</b>		
Private well	368	36.4
Public well	223	22.1
Municipality network	219	21.7
Tank (filtered, free of charge)	80	7.9
Sea water	48	4.7
Tank (filtered, paid)	41	4.1
Charity	31	3.1
<b>Location of drinking water source</b>		
In the street	822	81.3
At private accommodation	175	17.3
At a neighbour's residence	7	0.7
At public places	7	0.7
<b>Location of water for hygiene source</b>		
At private accommodation	292	28.9
In the street	508	50.3
At a neighbour's residence	110	10.9
At public places	100	9.9
<b>Time it takes for household members to reach a water source, get water and return</b>		
10 minutes and less	258	25.5
11 to 20 min	160	15.8
21 to 30 min	174	17.2
31 to 60 min	199	19.7
61 to 120 min	111	11.0
More than 120 min	109	10.8
<b>Last month, household ever experienced not having enough drinking water</b>		
Yes, at least once	188	18.6
Yes repeatedly	567	56.1
No, it's always enough	256	25.3
<b>The main reason for not being able to access water in sufficient quantities when needed during the war</b>		
Water not available from the source (cut off)	481	63.7
Water is very expensive	195	25.8
Source is not accessible	72	9.5
Other reasons (no fuel)	7	1.0
Taking measures to make water for drinking safer	34	3.4
<b>Type of measures applied to make water safer</b>		
Boiling water	21	61.8
Adding disinfectant/chlorine	11	32.4
Using water filter (ceramic, sand, composite)	4	11.8
Solar disinfection (exposure to sunlight)	1	2.9
Letting water settle	1	2.9



Of the young people who participated in the survey, 87% of participants were classified as highly water insecure on the Household Water Insecurity Experience Scale, with a lower average score in the North of Gaza (see figure 1). Close to half of the participants worried more than 10 times in the thirty days prior to the survey about having enough water. Approximately 75% of young people reported a lack of sufficient water, primarily due to water being cut off at the source and the high cost of purchasing it. Of the participants, nearly half had experienced going to bed thirsty (Abu Hamad et al., 2024). As a 22-year-old male from the north of Gaza reported: *'I wake up and go to sleep thinking about water'*.

**Figure 1: Households which experienced a high level of water insecurity (5-25 points) on the household water insecurity experience (HWISE) scale**



The percentages above are based on the full sample of young people (n=1,011); Categories noted with an asterisk (\*) demonstrated statistically significant differences at the 0.05 level.

According to a 19-year-old young man from the south of Gaza securing water is a key priority in the context of the conflict: *'water... the most essential thing...only comes once a week. The water arrives, and we try to conserve it as much as possible to make it last.'*

To obtain water, young people in Gaza must queue for long hours in unsafe spaces. For around 30%, collecting water takes longer than half an hour, with 10% spending at least two hours waiting for water. A 22-year-old young man in the south described his experience as follows:

*We get water...we wake up at around 3 a.m. and go to one of the displacement camps, and we wait our turn from 3 a.m. until 8 a.m. so that we can reserve a place. At 8 a.m., the water is filled, in gallons, I carry the water from the displacement site to the place where I'm staying. I walk for about an hour until I get there, and I carry these things with me. This also affects us a lot. Umm, waking up at 3 a.m. in this situation is very scary, very terrifying. Also, going to unstable places, there's a kind of fear in this, so that you can reach water.'*

Fraying social cohesion in the context of the unending stressors that the hostilities in Gaza have unleashed exacerbates the risks people face. A young woman from the south aged 19 years described the chaos and violence when getting water during periods of scarcity:

*I was filling water, and a woman started insulting me and tried to steal my gallon [container]. She hit me with it on my shoulder, and my shoulder still hurts a lot.*

### Box 1: Young people with disabilities face intersecting challenges accessing water

Young people with disabilities face additional challenges when accessing water. Often, they require more time to obtain the necessary amount of water, and report experiences of physical discomfort, mockery, and even violence while doing so. A 19-year-old married man with a disability from the north of Gaza, for example, described how, *'because of my hand... I can't carry much [water]'* and he needed to make multiple journeys, *'maybe three or four times... I fill, empty, then return... fill, empty, then return.'* It takes him a long time to get enough water: *'I wait at least an hour... just to fill the jugs... every two days'*, compounding his risks, as *'a lot of fights happen... people are chaotic.'* For drinking water, he needs to make a separate trip: *'I go down to the Sidra area... to fill a bag for one shekel.'* Still, this is not enough for his family, as he stated that *'Many times, we slept without water.'*

Similarly, a 13-year-old girl in the south of Gaza described her experiences of getting water: *'I go in the morning. I start limping till I get there, I wake up and take the gallon with me and I run as fast as I can so I can have a turn. It's true that my legs hurt, but I must get water because it's the essence of life.'* People on the street mock her, and this has become worse since the war. She said, *'Because the limp got worse, people started to say, "oh look at what this girl is doing"... I meet more people, and the mockery increased.'* Her disability notwithstanding, she still faces violence at the water points: *'A woman would push you from behind, there were many fights.'*

The quality of the water is another concern, as wastewater treatment facilities are inoperable, and fresh water gets mixed with contaminated or sea water. More than 80% of participants depend on street-based water sources, with most reporting that they collected water from sources that were potentially contaminated. Only 3% took any steps (boiling, disinfecting, filtering, etc.) to make water safer for drinking. A married young woman from the south complained about the quality of water, saying, *'There is no good water, it's all chlorine and filth.'* Many young people have lived through a siege, where Israeli soldiers do not allow for any humanitarian relief or access to fresh water. An 18-year-old young man in the north of Gaza explained that:

*The Israeli army besieged us for a whole week, and we were without filtered water, so we used the pump... It affected my body because I was injured, and my body was weak. Every time I drank from this water, I had cramps and pain, so I started just wetting my lips until we got out of there and found good water.*

Several young people with disabilities, who are more susceptible to ill health, also complained about the effects of having to drink from unsanitary water sources. A 23-year-old young woman with a disability from the north of Gaza stated, *'I cannot drink it as I feel heavy, my stomach doesn't bear it'* (see also Box 1).

In addition to water scarcity, much of Gaza's sewage system has become inoperable due to destruction or a lack of fuel (HRW, 2024; Dardona et al., 2025). Just over a quarter of participants were reliant on public wells and sea water for hygiene. Young people struggle to manage their hygiene without proper access to water, and with wastewater left untreated and the rise of public defecation, infectious and non-communicable diseases have spread rapidly in Gaza (Lodhi, 2024; PAX, 2024; United Nations Development Programme (UNDP), 2024). A 14-year-old girl in the south described her washing routine:

*Honestly, my personal hygiene habits have changed a lot before and after the war. When you need to use the bathroom, you don't have privacy. You feel like you're just trying to get through it, and you don't get the chance to relax and clean yourself properly. There might be four or five people waiting for you outside. You feel like you're rushing through it, you don't have hot water in the winter, and soap is something we buy.*

She described the fear she experiences whenever she goes to the bathroom:

*Before this year, we used to use public bathrooms. It was the worst feeling when you wake up at night, it's crowded, sometimes you feel overwhelmed by the crowd, and you go out at night, thinking about how far you have to walk. I might wake up my mom to come with me and take a flashlight with me. This distance is full of fear, and when you're running, you're scared, and people see you as suspicious. Anyone could come out at night, a man who might harass you, and you're terrified the whole way.*

Due to a lack of bathrooms, menstrual pads, and clean water to bathe, our findings underscore that girls and young women also struggle with managing their menstrual hygiene. A 22-year-old young woman in the south of Gaza reports that during the war, *'We are facing a lot of difficulty in being able to get period hygiene.'* Shelters often provide limited privacy – a situation made more difficult by cultural taboos surrounding menstruation (see also Vintges et al., forthcoming).

► There is no good water, it's all chlorine and filth.

(A married young woman from the South)

## Conclusions and implications for policy and programming

Since the start of Israel's genocidal military campaign in Gaza, people have been deprived of their right to water. This has led to harrowing conditions, where young people, in their effort to collect water or manage their hygiene, are stripped of any human decency and the right to humanitarian relief. In order to fulfil SDG 6, to achieve availability and sustainable management of water and sanitation for all, it will be critical to secure an immediate ceasefire so that humanitarian relief can be provided to more than a million Gazan young people and their families who are in need. Beyond this, other key measures are urgently needed including:

- End the blockade and allow for sufficient quantities of fuel to operate wells and potable water, at least to fulfil the minimum required level of 15 litres per person in humanitarian settings, and ensure access to bulk water for hygiene and sanitation purposes.
- Rebuild public and individual WASH facilities, paying particular attention to the needs of girls and women, including ensuring privacy and providing the supplies required for menstrual hygiene management.
- Ensure that reconstruction of WASH infrastructure is also informed by the needs of persons with disabilities so that rehabilitated facilities are disability-accessible.
- Support Gaza's municipalities in the rehabilitation of Gaza's freshwater basins, desalination plants, personal water wells (including spare parts for maintenance), water decontamination methods, and its sewage system, in line with people's rights to safe drinking water and sanitation, as recognised by the UN General Assembly in 2010 and 2015 respectively (UN Water, 2021).

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