



STATE OF PALESTINE
PRIME MINISTER'S OFFICE



MAS
PALESTINE ECONOMIC POLICY
RESEARCH INSTITUTE (MAS)

Proceedings and Papers

The Palestinian National Population Conference: Palestine's Demography - Resilience and Development

2024



**Proceedings and Papers: The Palestinian National Population Conference:
Palestine’s Demography - Resilience and Development**

This book was prepared by the Palestine Economic Policy Research Institute (MAS) for the benefit of the Prime Minister’s Office and the National Population Committee, with generous support and in partnership with the United Nations Population Fund (UNFPA) in preparation for the “Palestinian National Population Conference: Palestine’s Demography - Resilience and Development” held in July 2023

The views presented in this publication are those of the author(s) and do not necessarily represent those of the Conference organizers or partners.



PALESTINE ECONOMIC POLICY
RESEARCH INSTITUTE (MAS)



Palestine Economic Policy Research Institute (MAS)
Jerusalem and Ramallah
2024



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Part One

Conference Proceedings

Overview

The Conference was convened on the occasion of the World Population Day against the backdrop of a growing challenge to Palestinian demographic transition and development prospects posed by unabated settlement and occupation. The seven-sessions conference, was administrated as an interactive forum for national dialogue on demographic change and population policies, as well as related political, social and economic impacts in the State of Palestine.

It brought together distinguished experts, policy makers and stakeholders from different sectors to engage in insightful discussions and knowledge exchange on demographic trends especially in relation to women and youth empowerment, employment, equality, health and reproductive health, and social protection.

Agenda

The Palestinian National Population Conference

DAY ONE AGENDA: Tuesday 11th July 2023		
09:00	09:30	Reception and Registration
09:30	10:30	<p style="text-align: center;">Opening Remarks</p> <p>H.E. Dr. Mohammad Shtayyeh, Palestinian Prime Minister</p> <p>Ms. Lynn Hastings, United Nations Resident and Humanitarian Coordinator the Occupied Palestinian Territory</p> <p>Ms. Laila Baker, Regional Director of the United Nations Population Fund (UNFPA) for Arab States</p> <p>Mr. Maher Masri, Vice-Chairman, Palestine Economic Policy Research Institute (MAS)</p>
First Session: Current and Future Demographic Trends and Changes in Palestine		
10:30	12:00	<p style="text-align: center;">Session Moderator:</p> <p style="text-align: center;">Mr. Raja Khalidi</p> <p style="text-align: center;">Director General, the Palestine Economic Policy Research Institute (MAS)</p> <p>Presentation: Prof. Youssef Courbage, Sorbonne and Dauphine Universities, France and Fares Awad, MAS</p> <p>Panelists:</p> <p>H.E. Dr. Ola Awad, President, Palestinian Central Bureau of Statistics (PCBS)</p> <p>Mr. Dominic Allen, Representative of the United Nations Population Fund (UNFPA) for the State of Palestine</p> <p>Interactive discussion with the audience</p>
12:00	12:15	Coffee Break

Agenda

The Palestinian National Population Conference

Second Session: Forced Demographic Change in Palestine			
12:15	13:45	<p>Session Moderator:</p> <p>Dr. Shaker Khalil Zabada</p> <p>Prime Minister’s Advisor on Economic Affairs</p>	<p>Presentation: Mr. Raja Khalidi, Director General, MAS</p> <p>Panelists:</p> <p>H.E. Dr. Ahmed Majdalani, member of the Executive Committee of the PLO and Minister of Social Development</p> <p>Dr. Hunaida Ghanem, Director General, The Palestinian Forum for Israeli Studies (MADAR)</p> <p>Prof. Rassem Khamaisi, Palestinian Geographer</p> <p>Mr. Ajith Sunghay, Head of Office, Office of the United Nations High Commissioner for Human Rights</p> <p>Interactive discussion with the audience</p>
13:45	14:00	Coffee Break	
Third Session: Imminent Demographic Risks: Jerusalem, Gaza Strip, Area “C”, and Migration			
14:00	15:30	<p>Session Moderator:</p> <p>Dr. Jad Isaac</p> <p>Director General, the Applied Research Institute – Jerusalem (ARIJ)</p>	<p>Presentation: Dr. Nahed Habiballah and Dr. Rabeh Morrar, MAS</p> <p>Panelists:</p> <p>H.E. Mr. Fadi Al-Hidmi, Minister of Jerusalem Affairs</p> <p>Dr. Khalil Toufakji, Head of the Technical Department, Civic Coalition for Palestinian Rights in Jerusalem (CCPRJ)</p> <p>Dr. Omar Shaaban, Founder and Director, Pal-Think Institute for Strategic Studies - Gaza</p> <p>Mr. Andrea De Domenico, Deputy Head of Office - the United Nations Office for the Coordination of Humanitarian Affairs in the Occupied Palestinian Territories (OCHA)</p> <p>Interactive discussion with the audience</p>
15:30	Lunch		

Agenda

The Palestinian National Population Conference

DAY TWO AGENDA: Wednesday 12th July 2023

09:15	09:30	Day One Recap: Dr. Shaker Khalil Zabada, Prime Minister's Advisor on Economic Affairs	
Fourth Session: Demographic Trends in Palestine: Promoting Health and Reproductive Health			
09:30	10:45	Session Moderator: Dr. Duha Shellah Y-Peer Network	Presentation: Prof. Bassam Abu Hamad, General Coordinator and Professor in the School of Public Health-Al-Quds University (Jerusalem) and manages the Gaza Branch. Panelists: H.E. Dr. Mai Al-Kailah, Minister of Health Dr. Reem Amarneh, Sexual and Reproductive Health Analyst, UNFPA Mrs. Rihab Sandouka, Program Manager, Juzoor for Health and Social Development Dr. Weeam Hammoudeh, Institute of Community and Public Health, Birzeit University Interactive discussion with audience
10:45	11:00	Coffee Break	

Agenda

The Palestinian National Population Conference

Fifth Session: Demographic Trends in Palestine: Toward Achieving Social Justice			
11:00	12:30	Session Moderator: Mr. Daoud El Deek, Prime Minister's Advisor on Strategic Affairs	Presentation: Dr. Samia Al-Botmeh and Mr. Misyef Jamil, MAS Panelists: H.E. Dr. Riyad El Attari, Minister of Agriculture Ms. Muna Al-Khalili, Secretary-General, General Union of Palestinian Women Ms. Lucia Elmi, Special Representative to the State of Palestine, UNICEF Mr. Firas Jaber, Co-founder and Researcher, The Social & Economic Policies Monitor (Al Marsad) Interactive discussion with the audience
Sixth Session: Investing in Youth Potential			
12:30	14:00	Session Moderator: Mrs. Sima Alami Youth Programme Officer UNFPA	Panelists: Mr. Marwan Wishahi, Assistant Undersecretary, The Supreme Council for Youth and Sports Ms. Siwar Odeh, Youth Advisory Council Mr. Islam Masoud, Youth Advisory Council Mr. Qutiba Odeh, Director, Al Bustan Association, Silwan Mr. Mohammed Ghrouf, Member of the Jericho Municipality Council Interactive discussion with the audience
14:00	14:15	Coffee Break	

Agenda

The Palestinian National Population Conference

Seventh Session: Palestinians Abroad: Demographic Dividends			
14:15	15:30	Session Moderator: Dr. Muntaser Jarrar Director General, Palestine Research Center -PLO	Presentation: Dr. Faisal Aranki, member of the Executive Committee of the PLO and Head of Expatriate Affairs Department at the PLO Mr. Qasim Ayna, Palestinian NGOs in Lebanon Ms. Zaha Hassan A Palestinian Legal Expert and Researcher in the USA Interactive discussion with the audience
15:30	16:00	Closing Remarks : H.E Dr. Mohammad Shtayyeh Palestinian Prime Minister	
16:00		Lunch	

Opening Session



H.E. Dr. Mohammad Shtayyeh

Palestinian Prime Minister

Firstly, I would like to extend my sincere thanks and appreciation to you all for organizing this important conference. The importance of this conference stems from three features: the importance the topic, the attendance and its timing.

Demographic change is a reality, whether natural or enforced by settlement building in the occupied Palestinian territories and across historic Palestine.

Man and land are at the root of the conflict in Palestine. Israel Zangwill, one of the leaders of the Zionist movement, said: "Palestine is a land without a people for a people without a land". Then, in 1948, about 950,000 Palestinians fled or were expelled, while 531 Palestinian communities were flattened. In 1967, 250,000 Palestinians were expelled, and three major towns were leveled: Imwas, Yallo and Beit Nuba.

The Zionist-Israeli vision was built on the desire and wish that the land of Palestine be cleansed of inhabitants. The refugees who then numbered 950,000 have now become eight million. As for Palestinian residing in the 1948 areas, their numbers have grown from 164,000 in 1948 to two million today.

The government is working to strengthen people's steadfastness by focusing on resilience, as we are experiencing an unprecedented Israeli attack across all areas of the West Bank.

Despite demographic complexities, the political pathway is no more, as the current U.S. President is the only one not to present a peace initiative or dispatch a peace envoy, preferring to play the role of spectator. The war in Ukraine has also affected the Palestinians in three ways. First: the rise in prices, both in Palestine and globally, has forced the Government to provide support for basic goods to the tune of NIS 159 million. Secondly, there exists clear and ugly double standards. President Zelenskyy is a hero while Palestinians are terrorists. This creates a state of exceptional anger among Palestinians towards an international policy based on double standards and the selective application of law. Thirdly, the

Quartet died in the Ukraine: the United Nations, the United States, the European Union and the Russian Federation. This organ was a sponsor of the peace process. Now, there is no one left to sponsor the peace process.

As far as Israel is concerned, successive, extremist Israeli governments want to kill the possibility of establishing a Palestinian state. The current Israeli government is the most criminal in the history of Israel. During the Lapid administration, 235 Palestinians were killed within one year. During the era of the current government, 190 have been killed since the start of July, while 13,000 housing units have been constructed in the settlements. The Israeli government moved from secular to religious Zionism, hence the attack on the Dome of the Rock and all things Palestinian. Israeli opinion polls are linked to spilling Palestinian blood, so the popularity of Israeli leaders is directly based on the amount of Palestinian blood they can spill, not to mention the scale of destruction to infrastructure, housing, lands, combined with the intensification of settlement expansion.

In short, the current Israeli government - and previous governments - only want to maintain the status quo, in which Israel wages a series of complex wars:

- The first war is over land and geography, through confiscation, restrictions and declaring areas inaccessible to Palestinians, designated military training areas or earmarked for settlement expansion, all helping to increase the quantity of confiscated lands.
- The second war is on demographics and humanity. There are 4,651 Palestinian male and female prisoners in Israeli prisons, with 190 killed since the beginning of this month. Thousands are wounded, others deported from Jerusalem, all combined with the blockade of Gaza. All this suffocates Palestinian movement.
- The third war is about money. Israeli deductions exceed NIS 267 million a month, largely under false pretexts. This is a systematic war aimed at maintaining the status quo, such that the government is unable to carry out a development process, or even fulfill its duties.
- The final war is one of narrative - the Israeli government only acknowledges the exclusive right of Jews to settle across all the lands of "Judea and Samaria", i.e. the entire West Bank.

Therefore, this the most complex situation we have faced since 1967.

Regarding the topic of this Conference, that is, demography between steadfastness and development in historic Palestine and its political implications, today, there are 7 million Israelis (of whom 751,000 are settlers in the West Bank), and 7.3 million Palestinians. This means, that for the first time since 1948, the number of Palestinians in historic Palestine has resulted in an Israeli 'minority' controlling, governing, and occupying the majority of Palestinians, similar to the former South African model. Therefore, this demographic component is an essential element in reformulating the conflict across all of historic Palestine, especially in light of the non-existence of a meaningful political process with successive Israeli governments, and the preoccupation of Europe with war in the Ukraine. This government is trying hard to revive the peace process, working with Arab states to forge a new, political horizon.

The Palestinian government faces challenges that it works hard to resolve. The most important are:

- An attempt to end the state of division. The Palestinian President called for a conference of Palestinian factions, to be held in Cairo at the end of July. There were attempts to end the division by holding elections across the Palestinian territories, but Israel prevented this.
- Enhance resilient steadfastness.
- Provide quality public services, as Palestinian resilience requires responsive services such as healthcare, education, social care, poverty reduction and job creation.

This government will remain committed to its people, and will not yield to Israeli pressure.

Opening Session



Ms. Lynn Hastings

United Nations Resident and
Humanitarian Coordinator in the
Occupied Palestinian Territory

Partners and friends,

Thank you for coming today.

Inspiration for this special day came when the world's population reached 5 billion on 11th July, 1987. We reached 8 billion on 22 November last year. A shocking exponential increase representing challenges – and maybe opportunities – that the world must face together.

This year's global theme for the conference is "8 billion people; infinite possibilities: the case for rights and choice."

Eight billion is a scary number. Some countries' populations are declining dangerously while others are exploding. But as UNFPA points out in its annual report, it's not about the number and trying to engineer it. It's about quality of life. It's about governments using data to identify the causes of the trends and developing policies to make life better. And it's about rights and choice: this includes family planning and expectations about women's roles at home and work.

In ageing countries with low fertility and labour productivity concerns, achieving gender parity in the workforce is considered the most effective way to improve productivity and income growth.

In high-fertility countries, empowerment through education and family planning is known to yield enormous dividends in the form of economic growth and human capital development.

And it's certainly not just a number in Palestine. Five decades of Israeli occupation have denied all Palestinians of every single right that all 8 billion of us are entitled to.

The protracted crisis affecting the State of Palestine is causing Palestinians to live in an ongoing humanitarian crisis – and I need to highlight in that regard that the UN's Humanitarian Response Plan is currently only funded at 20%.

The United Nations 2022 Common Country Analysis found that the Israeli occupation, together with recurrent conflict, the internal Palestinian political divide and the fiscal crisis facing the Palestinian Authority, is the principal barrier to achieving the 2030 Agenda and the Sustainable Development Goals (SDGs). Not only are these barriers an obstacle for peace, they also result in significant challenges to economic growth and fiscal stability and human development.

A protracted crisis means we need to make sure most humanitarian assistance can transform into longer term resilience and strengthen systems and policies, including population policies for health, education, employment, social protection... This requires flexibility from all of us – including from donors in how they fund programming.

Demographic projections indicate that the Palestinian society will remain youthful, with the number of youth reaching 3.30 million in 2023. This can serve as an important driver for development – but only if effectively utilized. I often hear things like “It is through their passion and determination that we will drive sustainable development in Palestine”. But it is also up to us to ensure the path is open for them to do so – and now.

Currently, the demographic characteristic of the youthful Palestinian society has not yet been reflected in the labour market – nor in political life - both of which are critical if real change is to be achieved.

Despite all the challenges, and even though we are behind globally, progress on the 2030 Agenda is made every day. The Government's commitment towards the Sustainable Development Goals is clear and can be seen through:

- Its broad reform agenda;
- The significant decline in the under-5 mortality rate; between 2014 and 2019/2020, from 22 to 14 deaths per 1,000 live births;
- A literacy rate of 97.7%; and
- The adoption of the first National Employment Strategy which will be instrumental to promote decent jobs.

The United Nations Sustainable Development Cooperation Framework supports the PA's reform agenda and its vision to improve Palestinians' opportunities to prosper and realise their full potential and human rights. We also look to the Palestinian Authority to:

1. Further empower the National Population Committee, to take forward the recommendations from the Conference, and to coordinate/collaborate/advise across the government on demographic issues.
2. Ensure population situational analysis and demography are the stepping-off point for the new national development plan/sectoral strategies; and reconsider/re-position and re-engage on the Family Protection Bill - which is linked closely to population issues and find a new path forward for its passage.

This conference is an opportunity for us to delve into the heart of the Palestinian population dynamics and sustainable development, to understand the aspirations, hopes and dreams of the Palestinians people.

It will complement the efforts of all partners to orient development programmes towards the well-being of the Palestinian people through examining demographic trends and population policies that will move us closer to achieving the SDGs.

Today and tomorrow present an opportunity to reflect on how demographic issues will be integrated into the national sectoral planning process and improve the lives of all Palestinians. I hope we can take this time to address the root causes of demographic challenges and advocate for policies that empower individuals and communities.

Thank you.

Opening Session



Mrs. Laila Baker

Regional Director of the
United Nations Population
Fund (UNFPA) for Arab
States

This is deeply personal as well as professional moment for me. I join you here today as a proud Palestinian woman, not only in my capacity as the regional director for the United Nations Population Fund, but also here as someone who rejoins the community. This is the first time that we gather here for a conference on population and development and on this momentous occasion that coincides today's world Population Day, which we celebrate every 11th of July. Next year marks 30 years after the International Conference on Population and Development and ICPD was one of the groundbreaking, transformative conferences as well, where the world got together to show that population is not just about numbers, but they are incredibly important in the planning and the individual journey of countries as they grow.

And it is with that in mind that I am compelled today to shake the foundations of perceptions, challenge the status quo, and to bust some of the myths around population within each and every one of us. From a global perspective that we will bring from UNFPA and into the Palestinian context. So allow me again to begin on a deeply personal note.

One of the most difficult moments in my own life and journey was to reconcile when I could know I could never have children. I was married, financially independent and an adult woman. But despite my desires for a family, there were other ends in store for me. You might ask, What's one less child in a world of 8 billion?

And today we are here precisely to answer why. When human numbers are tallied and population milestones pass, the rights and potentials of individuals can be easily overlooked in the quest for what is considered an answer. We see birth rates polarized as either the problem or the solution to our countries, with little acknowledgment to the immensely personal and deeply emotive choice.

It is especially for the women of this world who bear much of the physical and emotional demands of reproduction and fertility. You heard that the world has already reached its 8 billion mark. Most people see that as 8 billion problems. I'd like you to consider that they may be also 8 billion hopes, 8 billion dreams, 8 billion solutions, a world of 8 billion possibilities where if you turn the number eight on its side, it would actually look like the symbol for infinity.

And I think all too often we overlook those hopes and possibilities. Now, let's zoom in on the Arab region for a moment and talk numbers. There are approximately 470 million people residing in the Arab world. And zooming in even further on the West Bank and Gaza, around 5.4 million. And excuse me if the numbers don't tally all the time.

This is part of the reason that we have the whole demographic discussion. The West Bank and Gaza have approximately 5.4 million people living in it. Fast forward to 2030, which is only seven years from now. There will be another million people living in the same territory. Occupation of fifty-six years... Conflict... Many challenges that you've already heard my esteemed colleagues allude to.

Those include what the occupation has done in Jenin over the last two weeks, what is occurring in Jerusalem right now and in many other places that are too many for me to recount in one setting. But we're gathered here to rethink those 5.4 million possibilities for the Palestinian population and what it might mean with the population growth of another million over the next seven years.

Today, we're building on the momentum that more people are living longer, though not necessarily in greater prosperity. And as we look to commemorate the 30th anniversary of the ICP, to which the State of Palestine announced its commitment in the Nairobi summit in 2019, allow me to recall what the principles of the ICP highlighted.

First and foremost, it's that population is not just about counting people, but to make sure that every person counts. And that sounds like a good slogan. First and foremost, each one of us has the right to live in dignity and then in Palestine, at the moment that is the key question. What does dignity mean and how much margin is there from within the individuals and the population on the whole? Where reproductive health is concerned, that means every person, every woman, every couple has the right to decide when they are married when they will have children, how many they will have, and to have access to the information and services that would allow for that choice to be a reality, that no one should have to face discrimination, physical or otherwise, because of their gender.

Gender equality, women's empowerment and ensuring women's ability to control their own fertility must be at the heart and center of every conversation around population and development. And in the Palestinian context, that refugees are part and parcel of the population and must be afforded equal access to health, including reproductive health care. All of that ties in to the conversation around demographic resilience and development.

The good news is that we know that there's been a lot of achievements in the last years, and I want to thank the Palestinian government for their concerted efforts over the years. And despite the challenges with the leadership and support that enabled many Palestinians to live healthy, fulfilling and dignified lives.

We've just undertaken the latest review in preparation for the ICC PD 30 Conference and there will be a regional review in September that Palestine will take part in that, through its national report. That report has revealed that Palestinian women now have increased access to sexual and reproductive health services. That's a big deal for UNFPA, and I hope that we can continue to develop those services. Palestine is one of the few countries that actually recognizes the need for sexual and reproductive health and rights and has embedded it within the national plans. I hope that that will continue.

Reproductive and maternal health have also significantly improved. We've increased the minimum age for legal marriage to 18. That's also a first. Many other Arab states have not been able to commit to that and a number of measures that combat sexual and gender-based violence, including Article 308 of the Penal Code, have been removed, that previously pardons a rapist from criminal responsibility if he marries the victim.

And last but not least, I'd like to commend the government for the health insurance system for people with disabilities. It was endorsed in 2021. This is an opportunity to harness that demographic dividend, make use of the 5.4 million people here and drive the economic prosperity that you've heard of this morning as decision makers and policy makers, development actors, practitioners and other stakeholders, including our donor community and other international individuals.

We stand here today, myself included, to reflect on how to prioritize the investments in education, health care, job creation. Oftentimes, seemingly competing priorities and ensuring that the national necessary infrastructure and resources are in place to maximize the potential benefits. Despite much progress that the Palestinian development actors achieved in the last year, we still have a long way to go towards the fulfillment of ACP program of action. These are challenging times for the Arab region and the Palestinian context in particular, and it remains a deeply protracted crisis where Palestinians live in a situation of vulnerability and structural disadvantage emanating from the ongoing Israeli occupation.

We are, however, facing a backlash on what much of ICP represents and stands for, particularly where women's rights and marginalized groups. Many of them are young, all living with disabilities in rural areas and people affected by the conflict. When these factors intersect, life is even more precarious for the individual woman and adolescent girls. We still witness high rates of gender-based violence, limited uptake to the services that are available with only 2% of GBV survivors actually seeking any kind of care.

There are also challenges related to adolescent girls who, despite all of the efforts, still face child marriage. And if I told you that 13.4% of women aged 22 to 24 right now still report having been married under 18, despite the fact that the law prevents it, I ask why and what can we do about it?

There are challenges facing young people who cannot take advantage of even the services and the information that is available. And we fear that that disparity will be one of the leading factors contributing to the non-achievement of the SDG goals with only seven years to go.

I wouldn't be able to conclude without alluding to the specific concerns that we have for Gaza Strip. The almost complete closure suffocates an unbearable population density, of nearly 6000 inhabitants per square meter

that is unparalleled in almost any place in the world, except for perhaps Shanghai and Beijing. More and more Palestinian residents in a little bit will reside in Gaza Strip more than the West Bank.

That's the bad news. But I'm an eternal optimist, so I trust as you go through the next days, that will be able to take into account the future planning for inspiring mothers and fathers, the working woman, the ten year old girl. Young men and women across the country and with a very open heart and mind to how everyone without exclusion can be a part of that journey.

A closing remark: a girl born now at this moment as we speak, will be 27 in 2050. It's not too long from now. How will we as development actors, be fulfilling our promise to her and her generation? How will she live in a free society.. Free of violence... How can she access quality, reproductive health services and care to make her own choices. There's so much that we can do together. We know what needs to be done. But this is only possible when we actively engage everyone in this room. Government, civil society organizations, development partners, the media, private sector, and other non-state actors.

We believe that when reproductive health and bodily autonomy are the starting point for any population on fertility policy, countries will be able to achieve zero maternal mortality, zero unmet need for family planning and zero gender based violence.

UNFPA is honored to collaborate with the Prime Minister's office and the National Population Committee on the launch of this important conference. We believe with our respective strengths and expertise that can be leveraged to ensure that the conference messages and recommendations reach the widest audience possible and have a lasting impact on all Palestinians now and future generations.

Opening Session



Mr. Maher Masri

Vice-Chairman, Palestine
Economic Policy Research
Institute (MAS)

Good Morning,

We gather today to announce the launch of the very first Palestinian Conference on Population titled “Demography between Resilience and Development” held on the occasion of World Population Day. This conference is the fruit of the strenuous and continuous efforts of MAS Institute in partnership and cooperation with the Prime Minister’s office, as well as the National Population Committee, and with the support of the United Nations Population Fund (UNFPA)

Extending over a year, these efforts involved the logistical preparations for the conference, as well as preparing the necessary research papers, supported with accurate statistics, which we hope will constitute a broad analytical database that helps decision-makers in setting the necessary future plans to deal with the issues of population and development, including geography and natural resources. Noting that this topic is an essential part of the concerns of countries in general and developing countries in particular, because of its crucial impact on their future and the future of the coming generations.

As for Palestine, the issue of population, geography, natural resources, and development constitutes a fateful matter in our existential battle against the Israeli occupation and its continuous attempts for more than a century....

starting with spreading the biggest myth that Palestine is a land without a people, i.e., without a population, to its continued confiscation and expropriation of lands, demolishing homes, and besieging our people in their land to subjugate the people. In light of the breaking down of these attempts on the Palestinian steadfastness wall, on the ground, we must draw attention to the cruciality of equipping our people with the tools that enhance their steadfastness, through economic and development plans that provide them with job opportunities and a decent life in a democratic state built on solid grounds and a more solid foundation for steadfastness in the future.

MAS has given due consideration to the topic of demography in its current research work, believing in the importance of demography for the Palestinian people and the future generations who strive to live in dignity and freedom in a fully independent Palestinian state. MAS will publish the conference's outcomes and recommendations to ensure policymakers will use them to create action plans for the competent institutions.

In conclusion, I would like to extend my sincere gratitude to all our partners who have worked to make this day happen, to all experts and researchers who have worked on the research papers, and to all partner organizations who have supported this research. I hope Allah will help us in our endeavor to come up with practical recommendations from this conference that support our homeland.

Peace be upon you all.

Moderators



Mr. Raja Khalidi

Director General, the
Palestine Economic Policy
Research Institute (MAS)



Dr. Shaker Khalil Zabada

Prime Minister's Advisor on
Economic Affairs



Dr. Jad Isaac

Director General, the
Applied Research
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Mr. Daoud El Deek

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First Session

Current and Future Demographic Trends and Changes in Palestine

This session highlights the most important demographic trends and changes in Palestine until the year 2050 for a deep understanding of demographic transformations, their causes, and their approaches for proper population planning and development needs.

Panelists



Prof. Youssef Courbage

Sorbonne and Dauphine
Universities - France



Fares Awad

Researcher, MAS



H.E. Dr. Ola Awad

President, Palestinian
Central Bureau of Statistics
(PCBS)



Mr. Dominic Allen

Representative of the United
Nations Population Fund
(UNFPA) for the State of
Palestine

Summary of First Session Discussion:

Dr. Ola Awad, President of the Palestinian Central Bureau of Statistics (PCBS)

Questions: How can the government's policy agenda be linked to demographic trends and changes? How can it face the negative demographic changes and invest in its positive returns for Palestine? How can data collection and analysis be enhanced? How can partners contribute to the data collection process and subsequent actions?

The Palestinians are engaged in a demographic war with the Israelis, especially with the immigration of Israelis from overseas into the occupied Palestinian territories. That being said, one must also note the existence of an Israeli counter-migration, and their increased abroad emigration. At the national level, more attention must be paid to the issue of large demographic gaps between the West Bank and Gaza Strip, creating and exacerbating internal challenges in Palestine. Greater emphasis must be placed on data collection on Palestinians in the Diaspora, however PCBS faces great challenges in collecting accurate census data on Diaspora Palestinians across the globe. This situation is further complicated by the absence of serious cooperation between official, statistical agencies in other countries and their Palestinian counterparts in sourcing accurate data. Driven by a political decision to further cooperation between Palestine and Lebanon, a census of Palestinian refugees in camps across Lebanon was previously undertaken. However, in other countries, the only reliable sources for statistics on refugees in camps are usually UNRWA reports. . Currently, there is cooperation between the PCBS and the Palestinian Ministry of Foreign Affairs, through its embassies, with the purpose of collecting population data. However, given the limited capabilities of Palestinian embassies abroad, there are numerous challenges associated with this process. That being said, it remains important for Palestinian embassies to cooperate with Palestinian communities in different countries, in order to count the number of Palestinians in the Diaspora.

Question: What are the challenges facing the PCBS in producing accurate statistics on population and demographic growth?

There are a number of challenges: most notably, Israeli control over vast areas of the West Bank, reaching about 85% of that land area. Israel controls Area C (which constitutes about 65% of the West Bank), those areas adjacent to the Separation Wall, settlements, military camps and restricted zones. This limits population growth, and the associated need for natural resources to support this growth. Israeli control - in addition to constituting a negative, suffocating presence - impedes access to natural resources necessary for population growth. The same applies to the Gaza Strip, given high levels of population growth and ever-increasing population density, particularly in light of its limited geographical area. This creates enormous social, economic and humanitarian challenges.

It is crucial for the public sector to pay more attention to improving social services, such that they can support the growth of the Palestinian population (e.g. education and healthcare). It is also necessary to ensure decent job opportunities, and reduce unemployment in the Palestinian labor market (with emphasis on women and youth). This can only be achieved through complementarity between relevant

authorities. In the end, we must focus on developing the education sector through the further development of specializations and skills, to keep pace with current, rapid global changes, and their accompanying structural changes in (both local and foreign) labor markets.

Mr. Dominique Allan - Representative of the United Nations Population Fund to the State of Palestine (UNFPA)

Question: What policies are necessary to support and invest in demographic growth and changes? What forms of cooperation and coordination are required between different parties in building policies that can take advantage of current and future demographic changes?

- We must focus on official policies that support women, aiming to empower them financially and economically, as a starting point for qualitative demographic support.
- There is a need to rely on official statistics when formulating public policies, in order to develop policies that result in real and targeted impact.
- At the national and official levels, interventions are required to support social and economic support-services for the overall population. There is also a need for complementarity and coordination in roles and responsibilities between official authorities and ministries. This will help support the Palestinian population currently, especially youth and women.

Comments by the Attendance

- It is imperative to develop the national identity of Palestinian citizens, especially youth. Social and economic challenges - such as poverty and unemployment – have changed the perceptions of Palestinian youth and their priorities. On the other hand, for Israeli settlers, there is much support that is accompanied by the provision of decent living conditions in the settlements by the Israeli government.
- More research must be done on the conditions of Bedouin communities in the West Bank, especially Area C, in order to address economic and living challenges facing them (water, electricity, housing, etc.).
- It is important to find official funding sources that are more sustainable than external support and grants, in order to develop and implement sustainable policies and plans.
- It is important to bridge the gap between Palestinian embassies and communities in the Diaspora, especially since bridging this gap requires a political decision.

Second Session

Forced Demographic Transformation in Palestine

The session presents forced demographic changes in Palestine, and geographic shrinkage caused by settlement expansion and forced displacement, land confiscation, demolition policies, and other Israeli policies and practices targeting the Palestinian presence in the West Bank and the Gaza Strip, especially in Jerusalem and Area “C” including the Palestinian Jordan Valley

Panelists



Mr. Raja Khalidi

Director General, the
Palestine Economic Policy
Research Institute (MAS)



H.E. Dr. Ahmed Majdalani

Member of the Executive
Committee of the PLO
and Minister of Social
Development



Dr. Hunaida Ghanem

Director General, The
Palestinian Forum for Israeli
Studies (MADAR)



Prof. Rassem Khamaisi

Palestinian Geographer



Mr. Ajith Sunghay

Head of Office, Office of
the United Nations High
Commissioner for Human
Rights

Summary of the Second Session's Discussion:

Session Moderator: Dr. Shaker Khalil – Prime Minister Advisor on Economic Affairs

When we talk about demography, we talk about its inherent connection to the issue of people's steadfastness and their sense of belonging to the land. However, the coercive nature of the occupation (killings, repeated arrests, house demolitions, daily violations including Area C, Jerusalem and Gaza, the blockade of Gaza) brings into question the impact of these coercive practices on future demographic trends. Which policies can help keep Palestinians on their land? This is what we will discuss in this session.

Dr. Ahmad Majdalani - Minister of Social Development and member of the PLO's Executive Committee:

Moderator's question: Given that this is a struggle for survival with never-ending violations, generally speaking, where are we heading?

Today, we are faced with two strategies practiced by the Occupation. The first is the Zionist movement's strategy is based on the colonial strategy 'a land without a people for a people without a land', while the second strategy is settlement expansion. The ideological strategy faces a greater dilemma - the Zionist movement conceived its State as a democratic state, however, this is often at odds with its Jewish identity. The expansion of the State requires the integration of non-Jews into the Jewish State, creating a historical impasse for this State. As for the challenges facing the Palestinian national movement, they are the survival and continued existence in the face of an ethnic cleansing policy that reached its zenith in 1948.

Today, there are changing demographic variables in the West Bank, Gaza Strip and East Jerusalem, despite the passage of 75 years since the Nakba. Currently, the number of Palestinians in historic Palestine is about 50,000 more than Israeli Jews. Thus, a dilemma resides at the core of the settlement project as a result of the presence of an overall Palestinian majority. Mostly, there is an evacuation process underway in the West Bank, while settlements are concentrated in Jerusalem because of its religious and political significance, and its civic identity as a political symbol. In any case, it is important to point out that the policies that commenced in 1967 to this moment are evacuation settlement projects. Therefore, it is important to use the correct terminology, that is, to talk about a colonizer instead of a settler, and to talk about colonization instead of occupation. This is also important from the perspective of international law, in terms of dealing with the problem.

The true face of the Zionist movement is a government that presents political solutions, but then backs down from them. This government has made political choices for the Zionist movement across the right, left and center. By 2030, the settlement project aims to bring the total number of settlers in the West Bank and East Jerusalem to one million (today, they number approximately 700,000), thereby becoming one-third of the population. This will see a transformation in the conflict, from a national-political struggle to end the Occupation, into a struggle between two population blocs, as adopted by the government today.

The main question of the day is 'what can be done'? We have three paths ahead of us. First, the political and diplomatic path via international forums. Second, the legal path via international, legal institutions. Third, the path of developing and escalating popular resistance in Palestine. Today, we have moved to a new form of resistance. The settlers have turned into paramilitary militias, and are playing a role that the official army does not play. Therefore, this requires a change in the strategy of confrontation and resistance in the West Bank. How can we turn towns and villages into towns of resistance, and strengthen steadfastness, in different ways to economic and social steadfastness.

Dr. Hunaida Ghanem - Director General of the Palestinian Forum for Israeli Studies (MADAR)

Moderator's question: How can the issue of demographic conflict - and the enforced challenges between Palestine and Israel - be addressed? What key issues revolve around this topic?

Comments that the Israeli project is in a real crisis are untrue. Rather, the real crisis is the one the Palestinians are in. Re-reading Israel's defamation and its new concepts shows us that the Zionist project has evolved, mutated and re-aligned. The ideological conflict in Israel has been resolved, concerning the conflict between Judaism and democracy. Israel is in the direction of its transformation into a Jewish state, and not a democracy. What matters to Israel is that it retains its Jewishness, through the introduction of settlers and by expelling and exhausting the Palestinian people, to the point where it becomes difficult to resolve such issues. If we want to link this to demography, our struggle is doomed to failure because of the increase in female fertility and the rate of population growth. Population growth is concentrated in the religious, Zionist segment, which forms the central demographic basis for the settlements. Recent changes have seen this category become an increasingly active player within the Zionist state. Institutionally, Israel as a multi-ethnic state has ended. The current judicial overhaul process is for religious Zionism to dominate the political arena.

There is a problem in talking about population in terms of Palestinian numerical superiority. There is a demographic 'reserve' of 60 million Jews, according to Smotrich, with decisions to bring in new colonizers, such that majority status with change. Hope exists in the people themselves, and the initiative must be retaken. We must think outside traditional frameworks (currently we do not have resources, technology or industry, and we survive on aid). Departing from this reality, it is possible to invest in knowledge that can be turned into a tool of power. Israel has knowledge, turning this into a driver. This requires investment, in terms of transforming knowledge into capital that can be further transformed into a tool of power. This not only relates to resources. Israel's project is colonial, in the sense that we are facing a sword determined to resolve the conflict in its favor. The important question is: are the tools currently deployed by the Palestinians appropriate or sufficient? If we are unable to extract the appropriate tools from reality, do we, as Palestinian women, make the maximum effort possible to confront the situation? Or do we accept the reality that we are in internal conflict, with all its misinterpretations? In fact, we are not doing enough to counter the sword.

Dr. Rassem Khamaisi - Palestinian Geographer

Moderator's Question: From a political, policy, or scientific perspective in geography and urbanism, and after Dr. Hunaida's diagnosis of the situation inside as terrifying, and after Dr. Ahmed Al-Majdalani's diagnosis of the Palestinian situation, how is the reality in this matter?

Firstly, we are still speaking in a somewhat visionary language, driven by desires and aspirations, and some constructivism. As a society, we need to transition from being an elite of constructivists to embracing reality

with appropriate ideas. The second point is that the interpretation of the Jewish community should be approached differently. It is not enough to merely understand the community. It is not a colonial society but rather a loyal community. Its choices are influenced by historical and regional considerations, and its essence and all the work within it are based on the endeavor of transforming it into a state. Despite the occupation, population census, and displacement, there were approximately 65,000 Palestinians in 1948, and today they have grown to 2 million (within the 1948 territories). Palestinians have increased since 1967 despite all the obstacles imposed by the occupation. The Palestinian community has grown, evolved, and will continue to exist. However, it is important to understand how to interpret this situation. Merely discussing Palestinians as a numerical quantity is not enough. We must also discuss them in terms of quality. Investing in human beings is crucial so that they have a meaningful presence in spheres that contribute to the nation, the region, and the world. While numerical quantity is important, its consequences are also significant. Population expectations should serve as a compass, and it is important to consider the necessary tools that can be utilized to achieve those expectations.

Indeed, it is important to consider the division of the paper into different regions (Jerusalem, West Bank, and Gaza) because privacy is crucial as it affects needs, behaviors, and so on. In a Palestinian society of 14 million, there are diverse aspirations and visions (while the Jewish community tends to have more unity). We need to be creative in our behavior and nurture it based on our own needs, rather than simply imitating the Jewish community. It is necessary to critically and accurately read and describe the situation in order to generate knowledge, science, and formulate tools for development. We must also understand the implications at the individual, collective, and societal levels within the national framework. When formulating policies and speaking boldly, we can apply these policies effectively. Additionally, it is important to consider our capacity within the context of the global society and its changes, and how we can shape our own narrative as Palestinians, intertwining and integrating it in a way that allows us to move from resilience to development and progress. Language should be translated into tangible achievements, and there should be cumulative work, asking ourselves what is appropriate in the current circumstances. The natural increase of Palestinians within the various components of Palestinian society, which shapes their identity, has been declining, as well as their material capabilities, due to the dominance of the Jewish problem in Europe. What is the appropriate course of action? When things are unclear, we cannot achieve progress.

Agith Sanghay - Head of the United Nations High Commissioner for Human Rights office.

Moderator's Question: As international organizations, particularly within the United Nations, you undoubtedly receive daily news about violations of international law. In the Palestinian public opinion, there is a belief that international organizations should do more than just issue statements regarding these violations. In your opinion, what else can be done?

It is indeed important to highlight the fact that international staff members have been prohibited from entering Palestine for the past three years due to Israel's refusal to grant them entry visas. This restriction

is significant in the context of human rights and human rights monitoring. It is relevant to many issues that arise in the General Assembly, the Security Council, and the Human Rights Council. At OCHA, our role is to provide objective reporting to the United Nations, and we have been doing so for years. However, there is always an attempt to sideline us to ensure that monitoring and reporting are not carried out, and this occurs in many cases. The impact of silencing on human rights violations is extensive. More specifically, we can witness the expansion of settlements, the construction of settlement outposts, attacks by settlers, house demolitions, land seizures for military purposes or nature reserves, and so on.

The question remains: What else can we do? It is important to continue the approach of adhering to international law as it takes precedence in this situation when compared to politics. Additionally, we must differentiate between the United Nations and its direct presence in the field (through various organizations) and the member states of the United Nations. As organizations, we are tasked with working, and there are certain aspects that we can control. However, there is significance in maintaining analysis, disseminating its results, which clearly indicate human rights violations. What happens thereafter falls to the member states, academics, journalists, and therefore, it is important to exert pressure and influence regarding the presented violations. It is crucial to stick to the narrative side, consistently reminding people of the violations and shining a spotlight on them. Furthermore, it is important to reiterate that this is an occupation, with an occupied people and an occupying power. These are not two independent states with equal power engaged in a conflict or battle.

Attendees' Interventions:

- We are aware that forced change affects the social structure in Palestinian society. What strategies can the Ministry of Development adopt to mitigate the impact, enhance cohesion, and strengthen the social structure (in terms of influencing social services and addressing demographic shifts)?
- Some argue that numerical superiority is a victory in theory, but is numerical superiority truly sufficient?
- After three decades of the first Palestinian governance experience, it is our right to question the success of this experiment in confronting the project, not only in terms of intensifying Palestinian production as a quantity but also as a narrative.
- We must acknowledge that we are indeed experiencing a state of failure, and we need to evaluate why we have failed.
- We continue to talk about resilience, development, and the future, but all our assumptions are based on the premise of occupation. The central question is: Will we assume until 2050 that we will remain under occupation? This is a crime. How will we exercise the right of return? How will we accommodate the fact that in 2030 or 2050 there will be 13 million Palestinians in the land of Palestine? We must plan for all children to receive all services, and this integration between resilience and development is built on a foundation that I am unsure of.

Third Session

Imminent Demographic Risks: Jerusalem, Gaza Strip, "Area C," and Migration

This session highlights the most pressing demographic risks facing our Palestinian reality, especially the geopolitical transformations experienced by Jerusalemites under Israeli occupation, which have had political, economic, social, environmental, and demographic impacts on the city and its suburbs. The session also focuses on demographic risks associated with the unbalanced geographic distribution of the population between urban and rural areas, forced internal population displacement, particularly from "Area C," and the ongoing migration flows to urban areas driven by economic and social motives.

Panelists



Dr. Nahed Habiballah

A faculty member at the Arab American University in Palestine



Dr. Rabeh Morrar

Director of Research - MAS



H.E. Mr. Fadi Al-Hidmi

Minister of Jerusalem Affairs



Dr. Khalil Toufakji

Head of the Technical Department, Civic Coalition for Palestinian Rights in Jerusalem (CCPRJ)



Dr. Omar Shaaban

Founder and Director, Pal-Think Institute for Strategic Studies - Gaza



Mr. Andrea De Domenico

Deputy Head of Office - the United Nations Office for the Coordination of Humanitarian Affairs in the Occupied Palestinian Territories (OCHA)

Summary of the Third Session's Discussion:

Session Moderator: Dr. Jad Isaac - Director General of ARIJ (Applied Research Institute - Jerusalem)

The current Israeli government's main objective is to acquire all of Area C in the coming period, which is what the occupation is striving for through its various measures. While Area C was previously under the responsibility of the Civil Administration under the Ministry of Defense, it has now come under the administration of the Ministry of Finance, a move that has significant implications in facilitating the annexation process for Area C. The existence of sustainable statehood is not possible without control over Area C, as 87% of nature reserves, 90% of forests, 48% of wells, and 37% of springs are located in Area C. It should be noted that Area C constitutes approximately 61% of the land in the West Bank. Therefore, the session director raises a question within the framework of presenting the papers on internal and external Palestinian migration and its developmental challenges, as well as the policy of spatial planning and the demographic conflict over Jerusalem. Given that Area C represents a significant portion of the Palestinian food basket, it cannot be treated solely as a piece of land. So, what is the number of Palestinians in Area C? 92% of the population in the West Bank resides in Areas A and B, which means the remaining 8% of the population resides in Area C. How do we deal with it? How can it be developed? How can we assert our rights to establish our state?

Fadi al-Hadmi - Minister of Jerusalem Affairs.

Moderator's question: There is a need to refrain from treating Jerusalem as Area C. We should be guided by the definition of Area C as the areas that will be transferred to the Palestinian Authority after the first Legislative Council elections, which Israel has violated and reneged on in every aspect without being held accountable. This was followed by Israel's land settlement process in Jerusalem, where we find that most of the settled areas are those seized by settlers. Consequently, there is a significant looming danger to the areas of Jerusalem. Can you shed light on the risks surrounding them?

The areas of Jerusalem are subjected to almost daily attacks by the occupation. Fadi al-Hadmi referred to a conversation with Nora Sub Laban, in the darkness of this scene, as her house was seized today in the Old City of Jerusalem. He felt in her the struggle of the resilient Jerusalemites under the shadow of settler policies, including forced displacement, house demolitions, and other discriminatory practices, all falling under the name of the demographic war aimed at reducing the Palestinian presence in the capital city of Jerusalem. (There are more than 480,000 people in the Jerusalem Governorate, including 310,000 within the separation wall). This includes both Christians and Muslims. The objective is to disrupt the demographic balance and increase the number of settlers through massive settlement blocs, in order to create a significant settler presence that disrupts the demographic balance geographically. This settlement bloc and the surrounding settlements are intended to support the settlement envelope within the Jerusalem neighborhoods, in order to merge the Jerusalem area within the settlement envelope. Consequently, this creates a marginalized and geographically constrained demographic neighborhood within Israeli plans for East Jerusalem.

This is in addition to the war on narrative through a systematic policy, which is manifested in what is being done in the issue of education and the fight against the Palestinian curriculum, in addition to what is happening in the courtyards of Al-Aqsa Mosque in order to create an alleged reality in this holy Islamic place. The demolition of houses and settlement expansion through the housing committee (more than 35,000 settlement units planned to become a reality) is accompanied by the demolition of homes of Jerusalemites in order to reduce their presence, not to mention all the policies aimed at forcing them to leave Jerusalem areas. However, on the other hand, what is reassuring is the increasing awareness and great resilience of the people of Jerusalem, not through rhetoric, but through resilience and attachment to Jerusalem and its alleys in order to thwart the Zionist plan. Therefore, the ministry is working on enhancing resilience and development for the people of Jerusalem whose homes are demolished, through buying time in legal defense or strengthening resilience for those who are subjected to the tragedy of being forced to demolish their own homes. As for the second aspect (the developmental aspect), it is through strategic planning of what we want Jerusalem to be, formulated through the local community to embody the theory of enhancing this resilience, but in the future and in its developmental aspect to confront the occupation policy in undermining the education process and other policies that target the youth and others.

Working in Jerusalem is like swimming against the current, but there is a determination that Jerusalem will remain solely Arab, Islamic, and Christian with its sanctities, people, and neighborhoods. Therefore, the plan must be executable by addressing the challenges, as the greatest challenge lies in how to engage with reality.

Dr. Khalil Al-Toufakji - Head of the Technical Department in the Civic Coalition for the Palestinian Rights in Jerusalem.

Moderator's Question: Regarding absentee properties and the issue of West Jerusalem, when Jerusalem was included as part of the negotiations for a permanent solution, East Jerusalem was not exclusively designated for that purpose. Additionally, to what extent does Israel's declaration to annex 290,000 dunams of land to the municipality of Ma'ale Adumim impact the expansion of Greater Jerusalem? Can you provide some insight on this?

Regarding the issue of the resilience of residents in Area C, we as Palestinians are responsible for addressing this, particularly concerning the Bedouin communities in Area C. Currently, there are no defined geographical names for these locations. The ongoing displacement of Bedouin communities in Area C is a significant concern, as without clearly identifying and naming these geographic areas, we risk losing significant portions of our lands. It is imperative for local governance to determine these geographical names.

The issue of Jerusalem is complex for two reasons. Firstly, Israel's policy began in 1850 when the first Israeli settlement was established in West Jerusalem during the Ottoman period. This resulted in a Jewish majority and an Arab minority in West Jerusalem, while East Jerusalem had an Arab majority and a Jewish minority. The outcome of the 1948 conflict was determined based on the Arab majority in the eastern part of Jerusalem and the Jewish majority in the western part. In 1967, a strategic plan was developed by the Arnon Gaffney Committee, which aimed to have a demographic composition of 25% Arab and 75% Jewish population in Jerusalem. This was to be achieved by providing all the

necessary resources, including land confiscation, through what is known today as the Third Generation Law. Regarding the Absentee Property Law, there were 18 Arab neighborhoods in West Jerusalem, with numerous properties affected by the construction of the railway between Jaffa and Jerusalem, resulting in the redirection of property development. Forty percent of the properties were owned by Palestinians and managed by the Israeli Custodian of Absentee Property. In East Jerusalem, Arab and Jewish properties were

managed by the Custodian of Enemy Property, but the Custodian was not allowed to sell the properties. Instead, they were leased to other individuals, and the revenue went to the Jordanian Ministry of Interior. On the other hand, the Israeli Custodian considered the properties in West Jerusalem to be Jewish-owned, denying Arabs the right to return to their properties (the “what is ours is ours and what is yours is ours” approach). This is the issue of absentee properties, where the owners have the right to sell and purchase these properties. This is part of a demographic conflict (the Third Generation Law) where Israel, through the expansion of municipal boundaries, seeks to fully integrate the eastern and western lands of Jerusalem through tunnels. This raises security concerns, including the process of isolating neighborhoods, penetrating them through settlements, and dispersing these neighborhoods. Lastly, the Israeli side currently aims to place Jerusalem at the heart of the Israeli state by annexing all settlement blocs located outside the municipal boundaries in order to tip the demographic balance and achieve a single solution.

Dr. Omar Shaaban - Founder and Director of the Pal-Think Institute for Strategic Studies – Gaza.

Moderator’s Question: There is a significant portion of the Gaza Strip that remains occupied despite all that is being said. Israel controls everything that enters and exits the Gaza Strip. However, there is a restricted area where Palestinians are not even able to engage in agriculture. Please explain the obstacles faced by the people of Gaza in that regard.

The situation in Gaza is characterized by the ongoing policy of occupation, which has been followed since the establishment of the state and even before that in the separation of Palestinian territories. This policy was further reinforced by the unilateral withdrawal from Gaza, which aimed at two objectives. Firstly, it aimed to rid Israel of the largest population cluster with the smallest land area. Secondly, it sought to create a different political context that would make Gaza a detached and isolated entity, connected only by corridors to the rest of Palestinian territories, with the hope of achieving Israel’s goal of establishing a small Palestinian state in Gaza. The problems facing the Gaza Strip can be attributed to both natural and political settlement issues. The natural problem arises from its isolated nature from the rest of Palestine, while the second problem is the combination of its small size and high population density. The population of Gaza increases by approximately 60,000 individuals annually. Despite this, Gaza remains completely Palestinian and in full solidarity with Jerusalem and the West Bank, albeit without direct access to them. Two-thirds of the population have never left the Gaza Strip, with only around 100,000 individuals forcibly migrating to Egypt, utilizing their high skills and capabilities. Additionally, 37% of the population were born under the blockade (one-third of society), and approximately 40% have become youth under the blockade. In other words, 75% of the Gazan community either grew up or were born under the blockade.

All of these factors have led to significant structural changes. The Gaza Strip has become reliant on humanitarian aid rather than being productive. It has also become impoverished, with increasing unemployment rates among graduates, which are among the highest in the world. Moreover, two-thirds of the population over the age of 35 have never participated in elections. The skills gap has widened due to the division and subsequent halt in economic activities. Many skilled individuals have shifted to other sectors, and their loss has not been compensated for. Furthermore, the opening of work opportunities in Israel after 2021 has exacerbated the skills gap, as there is a lack of skilled labor in industries such as textiles, sewing, and construction. There is a significant difference between the context of the West Bank and the Gaza Strip, as much of the intellectual diversity in Gaza has migrated abroad. As a result, the Strip has lost its diversity and transformed into a conservative and narrow-minded society with limited horizons and poor society. Given the contextual differences between the West Bank and the Gaza Strip, the priorities differ significantly between the two regions. Therefore, it is necessary to develop unified policies that address the specific needs of each party. The Gaza Strip is not a burden, as some may claim. It has the potential to be a tourist destination and has a rich history. A future Palestinian state cannot exist without a port connected to the Gaza Strip, as it would serve as a vital resource for the Palestinian state. Regarding the restricted area, there is a 500-meter strip along the border in Gaza where habitation and cultivation are prohibited, except for basic crops like wheat and other simple items.

Andrea de Domenico - Deputy Head of the United Nations Office for the Coordination of Humanitarian Affairs in the Occupied Palestinian Territories (OCHA).

Moderator's Question: What are the constraints that OCHA encounters, and how can these challenges be mitigated to strengthen support and development in Area C?

We should continue providing support to those affected by the occupation, in addition to informing the international community about what is happening. Currently, 37% of Palestinians in Jerusalem suffer from the policy of house demolitions, where the homeowners themselves are forced to demolish their own houses. Furthermore, concerning the evictions, there are approximately 1,000 people at risk of eviction in Jerusalem with the aim of altering the identity of East Jerusalem specifically. There is also a growing number of almost daily cases of settler violence against Palestinians, targeting individuals and properties. In addition to the permit and closure issues in Gaza. In reality, resilience is a daily struggle faced by Palestinians. Therefore, it is important to portray this reality and show the world the Palestinians' capacity for daily resistance. One of the key actions we must take is to promote the return to the Palestinian narrative by explaining this narrative to the international community to increase awareness about it. Thus, we try to document the Palestinian reality through maps, as this can help explain the complexity of the Palestinian situation to tourists and enhance the defense of the land. The focus is on promoting the Palestinians' right to self-determination, and we need to convince all capitals of this idea.

Attendees' Interventions:

I have a criticism towards international institutions as they provide limited support to specific sectors within Jerusalem, but they have not put significant effort into providing protection for Palestinians through support and advocacy for the residents of Jerusalem. The freedom of worship for both Christians and Muslims is hindered, yet such actions are not condemned. Additionally, the arrest of minors in Jerusalem is not criminalized.

Minister Fadi Al-Hadmi's Answer: I agree with the questioner regarding documentation. I have written numerous books and correspondences to international entities concerning the violations against the residents of Jerusalem. However, there is a double standard with many examples, such as Sherine Abu Akla, the martyr Abu Khdeir, Iyad al-Hallaq, and others. Nothing was done to hold the criminals accountable for murdering them. There may be statements and condemnation, but in the case of Jerusalem, this might give Israelis the green light to continue their actions. Therefore, we must be proactive in shaping public opinion. Due to the double standards and our constant demand for protection, there should be an enhancement of international support, taking into consideration the violations of international laws that occur silently and should draw significant attention from the international community, which should take a more advanced stance. However, we emphasize the importance of the role played by the international community in supporting the Palestinians.

Andrea de Domenico's Answer: I agree with your concerns. However, I believe there are two aspects to consider: the legal aspect and the need for a political definition for what can be done because we, as employees, may not have the power to do everything that should be done due to the lack of a clear and defined framework for international action. Therefore, we continue to write reports to clarify the facts and the reality on the ground.

Fourth Session

Demographic Trends in Palestine Promoting Health and Reproductive Health

The session provides an opportunity to reflect on the demographic changes in Palestine and their impacts on the Palestinian health sector and the health system's comprehensiveness, sustainability, and ability to respond to health crises and needs and to enhance the quality of health services, public health, and reproductive health for women and youth.

Panelists



Prof. Bassam Abu Hamad H.E. Dr. Mai Al-Kailah

General Coordinator and Professor in the School of Public Health-AI-Quds University and manages the Gaza Branch



Minister of Health



Dr. Reem Amarneh

Sexual and Reproductive Health Analyst, UNFPA



Mrs. Rihab Sandouka

Program Manager, Juzoor for Health and Social Development



Dr. Weeam Hammoudeh

Institute of Community and Public Health, Birzeit University

Summary of the Fourth Session's Discussion:

Session Moderator: Dr. Duha Al-Shalla - Y-Peer Network.

The current session allows for reflection on the progress made in Palestine in the field of reproductive and sexual health, particularly for women and youth. It addresses the coverage of family planning and reproductive health services in urban and rural areas, as well as ensuring that individuals of all age groups and genders have access to sufficient information regarding their reproductive and sexual health. Additionally, it emphasizes the need for necessary policies to be improved to meet the needs of population growth.

Dr. Sawsan Abu Shariah - Director of the Directorate of Community Health at the Palestinian Ministry of Health.

Moderator's Question: What are the policies that are important to develop in order to enhance sexual and reproductive health to keep pace with population growth?

There are issues caused by division and lack of communication in the healthcare sector. Additionally, the occupation prevents us from accessing the necessary resources. Our reproductive health services have seen development, although some indicators have been affected by the COVID-19 pandemic. In the 2023 annual report, the percentage of postnatal visits has increased to 45%, which is a high rate compared to what we achieved during the pandemic.

Greater efforts should be made to expand family planning services and raise awareness within the local community about the importance of family planning. In addition to essential services, modern services should be introduced. The coverage rate for pregnant women is 95%, and the rate of safe births is 99%, which is a very positive development. We have observed a significant decrease in maternal mortality rates before the COVID-19 pandemic, but an increase during the pandemic. The ministry is currently working to regain the progress made in reducing maternal mortality rates.

We hope that the Comprehensive Health Coverage program will be implemented as it is relied upon to enhance youth health. However, the scarcity of resources hinders our ability to carry out the work in the desired manner. We continuously strive to develop services to provide them with the highest quality possible.

Moderator's Question: What priorities should the Ministry of Health focus on to fulfill Palestine's commitments?

The work requires partnership between all components of the government and non-governmental sectors. Due to the occupation and division, we are unable to provide services in all areas where Palestinians are present, such as Areas C, Jerusalem, and marginalized areas in the Jordan Valley.

We strive to implement appropriate health measures to reduce births (fertility rate) and ensure the inclusion of sexual and reproductive rights as fundamental rights. Additionally, we aim to increase the number of hospital beds to meet the needs and available resources. The occupancy rate is high, reaching up to 140% in some specialties, so there is a need to increase the number of beds in hospitals for these specialties.

Dr. Reem Amarneh - Director of the Reproductive and Sexual Health Program - United Nations Population Fund (UNFPA).

Moderator's Question: What is the role of the United Nations Population Fund (UNFPA) in responding to the promotion of reproductive and sexual health?

The health-related objective within the core and framework of the seventeen Sustainable Development Goals, specifically Goal 3, focuses on ensuring healthy lives and promoting well-being for all at all ages. This goal includes a particular emphasis on improving universal access to sexual and reproductive health services, as well as the integration of reproductive and sexual health services within national strategies. We approach all these issues using a life cycle approach. It is essential to work towards integrating adolescent sexual and reproductive health services into the healthcare provided by the Ministry of Health. There is much to invest in and focus on, particularly in terms of service integration, building upon existing services, and developing them.

The health goal is interconnected with other goals, including the goal of ending poverty, which can hinder access to appropriate healthcare services. We collaborate with various stakeholders to achieve all health-related goals and improve the quality of life for individuals and families. We operate within the developmental framework in Palestine, which intersects across different sectors to enhance quality of life. We also employ various mechanisms to overcome the policies of occupation and marginalization, such as mobile clinics that aim to reach underserved areas with limited healthcare services.

There should be a focus on investing in the midwifery profession to empower women's access to services and promote integrated service delivery models in planning and implementation.

Mrs. Rihab Sandouka - Founder of Juzoor for Health and Social Development.

Moderator's Question: What is the role of civil society in relation to sexual and reproductive health, and what is the importance of involving youth and women in program planning and development?

Based on the data and demographic changes, there is an approximately 20% increase in the youth population. If this increase is not utilized for development, it will become a burden. We have formed a coalition of adolescents to coordinate national efforts, ensuring fair and equitable distribution of resources and reaching marginalized and deprived groups. This involves capacity building, advocacy, and pressure for change. To advance adolescent and youth health, we have established the Adolescent Health Unit in collaboration between Juzoor and the Ministry of Health. The focus is on addressing the needs of individuals with disabilities and other marginalized groups, ensuring their equitable access to these services.

It is essential to develop youth-friendly and inclusive reproductive health services and youth-friendly primary care clinics, and integrate healthcare and reproductive services into primary health services through training on work protocols, making simple changes, and creating a supportive work environment. There is a policy in place to address the increase in the elderly population by integrating specialists in chronic diseases. The national strategy for adolescent and youth health adopts comprehensive cross-cutting interventions to improve the health of this group, which lacks adequate and specialized services.

Dr. Weaam Hamouda - Institute of Public Health, Birzeit University.

Moderator's Question: Why is there a gap between scientific research and the policies being implemented?

There is an aspect related to the nature of research being conducted because they are tied to specific funding. Many research studies exist in the healthcare field, but unfortunately, there might not necessarily be effective engagement with various partners in the healthcare sector whether during the research preparation phase, by aligning the research topic with the priorities of healthcare partners and determining appropriate research methods or when presenting the research and sharing the results and recommendations with stakeholders interested in the outcomes of the research. At times, there are numerous research studies which do not necessarily need communication with relevant entities to involve them in research findings. However, for effective utilization, more collaboration is needed to ensure that these research outcomes are integrated into policies. Sometimes, numerical data require sufficient expertise, and healthcare professionals might not be able to interpret them. Therefore, it becomes the responsibility of the researcher to elucidate the numbers in a manner that healthcare professionals can comprehend and utilize effectively.

Attendees' Interventions:

- There is an unmet need for family planning methods, and this need is increasing. This means that there is growing awareness, but there's a gap in the ability to meet this demand. We are still using outdated methods that might be suitable for women who cannot access or use modern family planning methods due to their lack of suitability. We have requested from the ministry the implant method, but we have not received them yet, and they are crucial.
- Comprehensive sexual education should be included in curricula both within and outside of schools. Is this still worked upon?
- I extend an invitation to stop hiding from the truth; women have diverse productive roles that must be supported. I call on the Ministry of Health and the Ministry of Education to prioritize comprehensive sexual education and to implement our commitment in reality through school health programs. Are the opinions, suggestions, and observations of civil society being listened to and considered for course correction? When you formulate strategic plans, are civil society organizations invited to participate in their development? Is the geographical aspect considered, and is there feedback integration from civil society institutions in Gaza?
- The percentage of postnatal service utilization was increased when we integrated it with the immunization program, reaching 100%.
- We call upon the private sector to adopt the policies developed through partnership.

- The discussion about reproductive and sexual health doesn't start from scratch. We have sufficient expertise, having trained doctors in Iraq on this topic. We have a specific guide for Palestine that has been shared with other Arab countries. We should rely on these resources and avoid reinventing the wheel and wasting resources. The importance of mental health should also be a fundamental recommendation.

Answers from panelists

Dr. Sawsan Abu Shariah: Recently, there have been joint meetings for healthcare qualification. There will be an update to the health protocol for family planning, and modern family planning methods will be included. It is important for youth and children to receive information from reliable sources. Many programs have been postponed due to the pandemic, but we agree on the right to health for everyone and the necessity of raising awareness about the right to health to ensure access for all. We have a national strategy developed in collaboration with various governmental and non-governmental entities to make decisions and set policies. All heads of community institutions are invited to participate in shaping health policies.

Dr. Reem Amarneh: There is indeed a gap between service development and the declining rate of service utilization. One study has highlighted the importance of introducing modern family planning methods. Access to services is a personal decision, and in order to make informed decisions, it is necessary to study the influencers within the family and reach out to all stakeholders.

Policies and plans should not remain on the shelves; they need to be translated into action. Implementation tools are needed on the ground, and there should be integration among all stakeholders to harness them for collaborative work.

Ms. Rahab Sandouka: In response to emerging needs, there is ongoing work on adolescent healthcare, including the establishment of a residency program in Palestinian hospitals for this specialty. I support comprehensive sexual education, but it should be approached with absolute sensitivity, taking into consideration social concerns to avoid rejection. Dealing with this topic requires prudence and expertise.

Dr. Bassam Abu Hamad: Family planning is not available in all ministry clinics, and therefore, it is not considered as part of basic rights. It is necessary to consider gender and age when providing services in order to ensure appropriate care.

It is important to approach this issue differently and develop information systems to effectively utilize data and identify underprivileged populations in terms of health. This will help improve targeting and organization of healthcare services.

Fifth Session

Demographic Trends in Palestine: Toward Achieving Social Justice

This pillar tracks the current reality of protection systems and their drawbacks, through reviewing social protection programs and the competent institutions and gaps in those systems, the mechanisms for distributing social assistance, the lack of a social security system, and the indicators of the current and future health status in Palestine, and the extent of its impacts on marginalized groups and the coming generations with all their social needs. Also, it builds on the current demographic indicators and their projections to track the future growth needs of these social protection modalities and to fill gaps in the current reality of the social protection system. The session also reviews social and economic indicators related to social protection and the demographic structure of Palestine, with the aim of proposing strategies and policies that are based on a socio-economic development perspective capable of facing population, social and economic challenges.

Panelists



Mr. Misyef Jamil
Researcher, MAS



Dr. Samia Al-Botmeh
Dean of the Faculty of
Business and Economics
at Birzeit University



H.E. Dr. Riyad El Attari
Minister of Agriculture



Ms. Muna Al-Khalili
Secretary-General,
General Union of
Palestinian Women



Ms. Lucia Elmi
Special Representative
to the State of Palestine,
UNICEF



Mr. Firas Jaber
Co-founder and Researcher at
the Social & Economic Policies
Monitor (Al Marsad)-Ramallah.

Summary of the Fifth Session's Discussion:

Session Moderator: Mr. Daoudd Al-Deek - Prime Minister's Advisor on Strategic Affairs

The session will focus on social protection alongside the emphasis on social justice, which forms the basis for policies and orientations. Social justice is built upon four essential components: rights, equality, fairness, and participation. The session will also highlight the importance of outcomes and results, or achieving convergence in outcomes for all marginalized groups. This overall framework aims to achieve social justice, which is the foundation of social protection.

Ms. Khaloud Abdul Khaliq, Assistant Undersecretary - Ministry of Social Development

The marginalized population, along with the demographic distribution, adds to the burden of implementing social protection. Despite the Ministry of Social Development's long-standing efforts in developing strategies and plans, there are challenges and obstacles. There is an increasing demand and obligations placed on the Ministry of Social Development, including changes and amendments to social protection systems and programs. This requires additional financial programs for people with disabilities, as well as the development of specialized systems. In addition, strategies to address multidimensional poverty and develop systems to measure the levels of marginalized individuals for tailored service delivery, particularly within families, are needed. There are systems that do not adequately respond to women with disabilities and unemployed youth, which have been addressed through the development of some systems. However, it necessitates further efforts and intensification to achieve inclusivity and ensure the fulfillment of human rights. Collaboration and concerted efforts facilitate access, and the demographic transition requires interventions tailored to specific regions, such as the Jordan Valley and Masafer Yatta. This highlights the need for a comprehensive social protection framework.

The national transfer systems should reach all segments of the population, as there are areas that require coverage. The transition to achieving the Sustainable Development Goals by 2030 necessitates the establishment of a comprehensive and unified social protection system in Palestine.

Important considerations include the necessary plans and frameworks for social protection programs, as well as identifying the challenges and available resources for the development process.

Mr. Firas Jaber - Researcher and Founder of the Social and Economic Policies Monitor (Al Marsad)

Providing social protection for workers is of great importance and priority, and it requires a comprehensive structure in terms of both revenue collection and expenditure. Social protection programs should transition from being mere programs to becoming legitimate systems with complete structural arrangements. It is crucial to protect families from impoverishment caused by the costs and expenses related to education and healthcare. Achieving a high-level healthcare and education insurance system is essential. Additionally, it is important to calculate the costs of tax evasion and corruption, and integrate Zakat

funds into the social protection system under the management of the Ministry of Social Development. Programs and services need to be transformed into systems, and attention should be given to the development of specific liberation strategies to secure resources, such as utilizing lands and water resources. Economic empowerment and empowerment of the poor, along with the establishment of a comprehensive healthcare insurance system, the enforcement of labor laws and minimum wages for workers, and ensuring justice between workers and employers are also important aspects to consider.

Ms. Lucia Elmi - Special Representative for the State of Palestine, UNICEF

There is a golden opportunity for social protection to enhance communication between institutions, despite the challenging circumstances. The opportunity is also available to develop experimental plans that align with the crises facing Palestine, such as the COVID-19 pandemic, the Ukrainian war, and the ongoing practices of occupation against the Palestinian people.

There are numerous challenges regarding allocations and financial budgeting, given the financial crisis facing the Palestinian Authority, which hinders full cash coverage as it naturally should be. To ensure its continuity, donor entities will continue to provide financial support within organized plans and laws. Additionally, support will be provided to families with specific needs while preserving human dignity. This will be carried out under the framework of the Ministry of Social Development.

Mr. Mahmoud Fatafta - Ministry of Agriculture

The Ministry of Agriculture plays another role in achieving food security, aiming to achieve social justice by providing essential commodities. This is done through strategic plans, taking into account previous international experiences. However, unfortunately, there are no ways to achieve development as long as there is complete control over basic natural resources (water and land) by the occupation. It should be noted that agricultural resources fall under Area C, which is controlled by the occupation authorities, who have the power to evacuate them and prevent the establishment of wells for irrigation. On the other hand, there is self-sufficiency in some commodities such as olive oil and certain crops. However, there is a decline in working in the agricultural sector and a decrease in the labor force. Family labor has been gradually decreasing in agriculture. The agricultural sector offers strong employment opportunities, and systematic planning and preparation have been undertaken to expand the production base at different levels to achieve agricultural output. All prepared programs aim to achieve food security, knowing that 1.5 million Palestinians suffer from food insecurity, especially in the Gaza Strip.

The global crises affected the plans and led to a decline in implementation performance, despite the increased government support to the agricultural sector. In 2018, the budget of the Ministry of Agriculture was 45 million shekels, which has now increased to 110 million shekels. This increase aims to enhance agriculture and promote employment in this sector, especially among youth.

Ms. Muna Al-Khalili, Secretary-General of the General Union of Palestinian Women

Women's energy and their capabilities are a valuable asset in advancing increased participation in the workforce. It involves viewing women as productive contributors rather than simply service providers

within society. However, laws still fall short in protecting women's rights, such as the minimum wage, with a significant percentage of women not receiving the minimum wage. It is essential to implement a government policy to monitor and enforce the application of labor laws in practice, holding accountable those employers who fail to comply with Palestinian labor laws. Additionally, laws related to family and violence should be enacted, focusing on women's rights and empowerment, while aligning with both Sharia law and the customs and traditions of Palestine.

Indeed, demographic transition requires special consideration, and it necessitates strategic approaches that take into account marginalized groups and others. The need for a social security law requires raising the level of consultations and discussions, as it is an integral part of the social protection framework. It contributes to achieving gender equality and recognizing women as essential partners in nation-building, while also considering the specificities of women in society.

Focusing on expanding productive sectors that employ women in agriculture, industry, and technology is crucial. Encouraging investment and providing targeted financing, especially in the technology sector, while separating it from Israeli companies, can be beneficial. Activating women's employment through investment and lending policies, followed by marketing and product distribution, can further enhance their economic participation.

Attendees' Interventions:

There are several factors that call for defending women's rights and explaining the low rates of women's participation in Palestine, especially in 2023. It is necessary to identify the reasons behind these low rates of women's participation in Palestine. Regarding the Ministry of Agriculture, alternatives must be identified to enhance the resilience of Palestinian residents. In terms of social justice, it gains added value in promoting resilience and liberating from colonization. Can justice be established without resource distribution, which is linked to the national project within laws and conditions, rather than as a mere preference? Social justice is the liberation from occupation, and the issue of social security is overlooked. There are differences between social protection and the social security law, which is based on contributions and includes eight insurances. We are among the few countries that are required to implement a social security system, and this is a phase to reintroduce this system through discussions and solutions to achieve a better social security law.

We need a continuous national dialogue, and social security is one of the key elements to enhance Palestinian resilience. It is essential to redefine unemployment, especially for women, as it is known that women contribute to the informal economy. Additionally, the decline in fertility rates in conjunction with the labor market requires a reassessment, as this is a critical issue, particularly in terms of demographic matters. It is important to ensure women's participation in the labor market in a thoughtful manner, avoiding blindly burdening them with additional responsibilities. Furthermore, improving laws pertaining to women's property rights is crucial.

Sixth Session

Investing in Youth Potential

As known, the youth category, which constitutes 22.2% of the total Palestinian population, is the most influential on society as this potential can make the change and shape the future. The youth are the key to development in Palestine, as progress in economic and social aspects cannot be achieved without investing in the potential of the youth. Therefore, youth issues are a top priority of the State of Palestine, given that Palestinian youth face many realities and challenges that are different from youth in other parts of the world. This session discusses the current challenges the Palestinian youth face, whether economic, social, or political, and addresses key policies and interventions aimed at enhancing youth investment for the advancement of development dimensions, especially in light of the demographic growth where youth represent a high percentage of the population.

Panelists



Mr. Marwan Wishahi
Assistant Undersecretary,
The Supreme Council for
Youth and Sports



Ms. Siwar Odeh
Youth Advisory Council



Mr. Islam Masoud
Youth Advisory Council



Mr. Qutiba Odeh
Director, Al Bustan
Association - Silwan

Summary of this Sixth Session's Discussion:

Session Moderator: Sima Al-Alami - Youth Program Officer, United Nations Population Fund – Palestine

The youth, aged between 18-29 years old according to the official definition in Palestine, constitutes 22% of the population, and 66% of the total population in Palestine is under the age of 30. The session aims to find developmental solutions and programs in light of the difficult conditions experienced by the Palestinian people.

Mr. Marwan Wishahi - Assistant Undersecretary, in the Higher Council for Youth and Sports

Moderator's Question: What are the policies and measures implemented by the Higher Council for Youth and Sports?

- The goal of establishing the Higher Council for Youth and Sports is to cover the population centers, monitor youth issues in all provinces of the country, and provide a safe and suitable environment for their aspirations.
- The Civil Work Law of 2000 is considered the law applied to all civil organizations, associations, sports clubs, and youth institutions. However, there are no specific laws regarding youth sponsorship.
- During the previous period, the Higher Council for Youth and Sports sought to rectify the status of these institutions by monitoring and rectifying three types of institutions:
 - a. Institutions registered with the Ministry of Interior.
 - b. Institutions licensed by the Ministry of Youth and Sports.
 - c. Institutions registered with the Ministry of Interior and licensed by the Ministry of Youth and Sports.
- The Council has worked towards developing infrastructure that meets the needs of youth, such as providing sports fields. Youth centers have been established, such as the City of Hope in Jericho and the Putin Center in Bethlehem. These services are provided free of charge in cooperation with the Higher Council.
- In the field of youth exchange programs, the Council, in collaboration with the youth work system and the Arab League, seeks to provide youth participation in international workshops, conferences, and competitive sports.

Ms. Siwar Odeh - Youth Advisory Council

Moderator's Question: What is the concept of the social contract? What is the relationship between the community and its individuals with national institutions, both governmental and non-governmental? And what do young people want from national institutions to ensure their inclusion in institutions and programs?

Achieving the concept of the social contract includes the participation of young people in national programs and institutions. To fulfill any contract, there must be commitment from both parties and a clear structure for managing youth efforts and investing in their potential. Youth participation in policy-making means involving them in shaping public services such as health, education, environment, and political engagement. It is noted that young people have not had a role in shaping the sectoral strategies of each ministry, and their involvement has been limited to participating in some awareness workshops and dialogue sessions. Therefore, youth should have a real role in monitoring, oversight, and implementation. Additionally, the National Review Report for 2023 considered youth, along with women and persons with disabilities, as vulnerable groups who have not been seen as active actors with the capacity to bring about change and influence public policies. The social contract should include an effective national plan that serves the youth based on their priorities, allowing them to be agents of change, evaluation, and monitoring in collaboration with governmental institutions. In the absence of a legislative council, there is a need to reconsider laws and provide a safe space for youth political participation in decision-making centers. Furthermore, efforts should be directed towards increasing the necessary funding to enhance youth activities in political, economic, social, and other areas.

Mr. Islam Masoud - Youth Advisory Council

Moderator's Question: What is the role of the Youth Advisory Committee in ensuring the inclusion of youth needs and issues and conveying them to decision-making positions?

The Youth Advisory Committee strives to dedicate its efforts to ensure the voice of youth is heard in development plans from four perspectives:

- Firstly, the committee works on representing youth, their aspirations, and needs within the official decision-making process in Palestine. It serves as a link between young people and local and international institutions concerned with community development, promoting youth participation. The committee has also established youth circles in various governorates to conduct surveys on their needs, ensuring the Palestinian youth's voices are heard.
- Secondly, the committee monitors youth issues, provides guidance, and offers advice to relevant entities to integrate youth issues into development plans.
- Thirdly, the committee works on raising awareness and advocating for youth issues by involving young people in different initiatives aimed at enhancing youth political participation in accountability and dialogue sessions.
- Fourthly, the committee monitors the evaluation and implementation of programs, policies, plans, and projects provided for young people.

The Youth Advisory Committee has also participated in formulating the national strategic plan in collaboration with the Higher Council for Youth. The committee hopes to involve young people in developing strategic plans alongside other governmental institutions and ministries.

Mr. Qutaiba Odeh - Director of Al-Bustan Association - Silwan

Moderator's Question: What is the role of civil society organizations in ensuring the participation and access of young people to developmental and youth-specific services in Jerusalem?

The focus should be on the participation of young people in Jerusalem, considering their unique circumstances. After the closure of the Orient House institution, youth activities have been restricted due to the Israeli occupation's harassment. However, despite these challenges, some initiatives have proven their efficiency in implementing youth activities regardless of their funding sources. In recent years, the ideal image of Jerusalemite youth has been distorted. However, they have demonstrated their resilience and determination to remain steadfast on their land. Hope remains strong, and Jerusalem needs a generation of conscious, aware, and resilient young people who are rooted in their land. Simple initiatives, such as the sports marathon that started from the Sheikh Jarrah neighborhood to Silwan, have shown that youth are a force for change and independence. In the absence of an official representative for the city of Jerusalem, it is essential to encourage young people to take on this role and lead the way.

Attendees' Interventions:

- To involve young people in the development of plans and policies amidst political division, it is necessary to elect youth representatives to the legislative council. The initiatives offered to young people should be seen as employment opportunities for some and may not represent all youth.
- It is important to guide young people towards studying disciplines that are in high demand in the Palestinian job market and provide training for graduates to practice their professions and create other job opportunities for youth.
- There is potential among young people, and therefore, there is a need to involve them in the development of government development plans, with guidance and oversight from official institutions.
- Dealing with the current circumstances requires new tools led by young people, and the promotion of democratic practices among all members of society at all levels.
- The demographic uniqueness of Palestine being a youthful society should be utilized by directing these forces towards resisting the occupation.
- It is crucial to enhance youth opportunities in decision-making positions and guide their abilities towards shaping political plans and strategies.

Seventh Session

Palestinians Abroad: the Demographic Dividend

Palestinian diaspora constitutes a vital part of the Palestinian demographics, and there is a great need to invest in this factor to achieve demographic returns that contribute to local development. This session presents the success stories of Palestinians abroad to highlight the role that Palestinians in the diaspora can play and the policies that can enhance connectivity with them.

Panelists



Dr. Faisal Aranki

Member of the Executive Committee of the PLO and Head of Expatriate Affairs Department at the PLO



Mr. Qasim Ayna

Palestinian NGOs in Lebanon



Ms. Zaha Hassan

A Palestinian Legal Expert and Researcher in the USA



Prof. Issam Shahrour

Academic in Europe

Summary of the Seventh Session's Discussion:

Session Moderator: Dr. Muntaser Jarrar - Director General, Palestine Research Center - PLO

Dr. Montaser Jarrar opened the session by emphasizing the importance of addressing the issues of the Palestinian diaspora, as they constitute a potential source of strength that instills hope for the future. He highlighted the significance of harnessing this factor to achieve demographic dividends that contribute to local development. Dr. Montaser referred to Issue 289 of the magazine "Palestinian Affairs," titled "Palestinians in the Diaspora and Renewed Resistance," which shed light on Palestinians in the diaspora through an examination of the reality and history of Palestinian communities in various countries around the world. The studies presented in this issue focused on important success stories within the Palestinian diaspora and the crucial role that diaspora Palestinians can play in revitalizing and reinvigorating the collective spirit of the Palestinian national movement worldwide. Dr. Montaser discussed five key points related to the conference in this regard:

Firstly, before the emergence of the Palestinian Liberation Organization (PLO), Palestinians organized themselves through clubs that brought together individuals from the same villages or regions. These clubs helped support local projects in the West Bank, strengthen their Palestinian identity, and enhance their presence. However, with the emergence of the PLO, the dynamics changed, shifting towards a more national organization rather than purely local.

Secondly, the Palestinian cause has not lost its existence among Palestinians in the diaspora to the extent of assimilation into foreign societies. It continues to strongly resonate in their hearts and minds. These Palestinians possess untapped capabilities that can be directed towards supporting various aspects of the Palestinian cause, including political, scientific, and material contributions. They remain committed to their identity and national belonging despite attempts by the occupation to undermine their identity.

Thirdly, the importance of demographic research and studies to understand the achieved and potential feasibility of the Palestinian situation. Delving into the economic, social, and political transformations they undergo can provide deeper insights into their conditions and the impact of these factors.

Fourthly, regular cooperation between the diaspora and official institutions, ministries, and the PLO enhances the organization and strengthens its ability to confront the challenges faced by the Palestinian people. This cooperation allows them to effectively tackle problems, protect their rights, support Palestinians abroad, and contribute to their mobilization for the national cause.

Fifthly, activating popular, academic, cultural, and digital economic diplomacy, particularly by building a comprehensive national strategy to work with the diaspora, involving all

institutions in Palestine and the diaspora strengthens Palestinian efforts and ensure positive and effective outcomes that serve the Palestinian cause in all fields.

Dr. Montaser highlighted that the purpose of this session is to showcase success stories of Palestinians abroad in order to shed light on the role that Palestinians in the diaspora can play and the policies that can strengthen the connections with them. To enrich the discussion, a set of questions will be posed to the participants.

Dr. Zaha Hassan: Palestinian-American human rights lawyer, political analyst, activist, researcher, and writer.

Moderator's Question: Why is it important for Palestinians in the diaspora to actively participate in national planning processes and public policy discussions, and how can Palestine benefit from the experiences of its diaspora members?

Dr. Zaha Hassan believes that Palestinians have a strong influence in the United States and that they have a sense of belonging to both Palestine and the United States. She also emphasizes that Palestinians are committed to their important and active role in redirecting U.S. foreign policy to align with the rights of the Palestinian people and the pursuit of peaceful solutions away from violence. She points out the necessity for Palestinian Americans to have access to Palestine in order to support their communities there, both materially and morally. On the other hand, it is essential for Palestinian Americans in their homeland to have the ability to communicate and coordinate with Palestinians in the diaspora through Palestinian community channels. She believes that providing support and joint coordination plays a crucial role in maintaining connections and communication between us. Dr. Zaha Hassan believes that digital public diplomacy and the establishment of a joint international solidarity front between the homeland and the diaspora, along with direct coordination with the diplomatic corps and civil society, are crucial. She sees the need for civil society participation and the strengthening of relationships in order to facilitate communication between the diaspora and the Palestinian homeland. In the United States, immigration laws hinder efforts in this regard. She emphasizes the importance of having local Palestinian agents or representatives to engage with politicians and advocate for human rights issues and national aspirations. Enhancing civil participation enables the community to have an impact and defend their rights. Dr. Zaha Hassan also believes that communication should include individuals and institutions in the diaspora and the homeland. This requires ensuring coordination and communication to enhance the influence of Palestinian efforts abroad, as well as revitalizing and activating national institutions. This will contribute to achieving our goals, which are in the best interest of both the diaspora and the homeland.

The current situation poses challenges for Palestinians in various locations, and it is important to achieve a balance between them. Especially considering the economic and legal challenges that affect movement and support, Dr. Zaha Hassan believes that the focus should be on removing restrictions and empowering civil society, while simultaneously coordinating with Palestinian Americans and Arab Americans. This, in turn, will contribute to supporting Palestinian issues and achieving equality. She also emphasizes the need to enhance the role of Palestinian civil society in political dialogue and influencing decisions.

To achieve change, effective cooperation and coordination between the homeland and the diaspora are necessary, with the participation of civil society and the revitalization of national institutions to unify and strengthen efforts.

Professor Issam Shahrour — an honorary professor of Civil Engineering and Civilization at the University of Lille, France, for Science and Technology.

Moderator's Question: What role can Palestinians in the diaspora play in the development process in Palestine, especially in the absence of an alternative homeland for the Palestinian people, and what Palestinian policies do you believe can enhance connections with Palestinians in the diaspora?

Professor Issam Shahrour began his intervention by noting that there is a large number of Palestinians living abroad, yet they still hold hope of returning to their homeland. They are part of the Palestinian people and share in their concerns. Professor Shahrour believes that the homeland can benefit from these experiences through knowledge exchange and cooperation in areas such as scientific research, economic development, and technology. Additionally, Palestinians in the diaspora have an important role in influencing public opinion and policy in the West. Through their relationships in political and civil societies, they can confront Zionist attacks and change the world's perspective on the Palestinian cause. They also possess economic successes and experiences worldwide, which can be transferred to Palestine to enhance economic and technological progress. Advanced concepts such as smart nations and smart cities can play a significant role in developing communities, improving the economy, and promoting sustainable development. The experiences and expertise of Palestinians abroad can be a valuable contribution to the development of the homeland by strengthening scientific and economic capabilities and influencing public opinion while providing support.

Question: Can you evaluate your experience in France and how to benefit from Palestinians in the diaspora, provide aid and support for them?

The issue of integration while preserving Palestinian identity is of utmost importance. Being a Palestinian, his experiences and struggles have served as a strong motivation for achieving success. He learned from these experiences how to deal with challenges and how to utilize knowledge across various fields. He spoke about his work with companies and the public sector, as well as how he received a position in northern France with the duties of supporting the economy and development. Moreover, he touched on his efforts to enhance international relations for the benefit of Palestine.

Question: What is the importance of having a database specifically dedicated to Palestinian expertise and competencies?

Regarding this, Dr. Issam emphasized that we have immense potential in various fields of life, and that the Palestinian human capabilities abroad are fully prepared to work for their homeland. This is where the importance lies in recognizing and connecting with the Palestinian human capabilities abroad through the establishment of a database dedicated to Palestinian expertise and competencies.

Mr. Qasim Ayna — a representative of Palestinian civil institutions in Lebanon since their establishment in 1977 and a member of the Executive Office of the Arab Network for Development.

Moderator's Question: How do you address the question of Palestinian identity in Lebanon? How do you express your Palestinian identity in diaspora, and what is the nature of your relationship with Palestine as a country or cause?

Mr. Qasim highlighted that Palestinians in Lebanon live under difficult conditions and face significant challenges on legal and social levels. Despite these hardships, they continue to hold onto their Palestinian identity and history. This sense of belonging is clearly evident during national and cultural occasions. They confront racism and discrimination firmly and courageously, facing attacks with resilience and determination. The Palestinian refugee camps in Lebanon play a crucial role in preserving their identity and maintaining connections with Palestine. Despite the harsh circumstances, Palestinians in Lebanon persist in working towards enhancing national unity and their connection to Palestine. They demonstrate the importance of unity among all Palestinians in the diaspora and reflect their contribution through communication and collaboration with those in the homeland. Palestinians in Lebanon are an integral part of the Palestinian people and consistently make efforts to preserve their identity and promote their cause amidst challenges and difficulties.

Question from Mr. Raja Al Khaldi (Director General of MAS) to Mr. Qasem: What are the connections between Palestinians in Lebanon and Palestinians in the occupied territories, and what can be done to assist Palestinians in Lebanon?

Mr. Qasim explained that the relations between the Palestinian diaspora and Palestinians in the homeland need development and improvement. There may be a lack of understanding of the real situation faced by Palestinians in the homeland from some delegations. It is crucial to enhance communication between families in the West Bank, Gaza Strip, and the refugee camps in Lebanon to ensure an accurate portrayal of their suffering and challenges. He then emphasized a crucial point regarding the responsibility of educating and nurturing children by Palestinian civil institutions, highlighting the necessity of providing educational curricula that empower and strengthen their Palestinian identity. He also believes that communication should not be limited to organizations alone but should encourage direct engagement with individuals and communities to understand their opinions and struggles. He noted that the current situation in Lebanon requires addressing security and economic challenges seriously and working to tackle issues of unemployment and injustice to achieve balance and promote solidarity. In this context, he sees Palestinian institutions as playing a more active role in addressing these problems and providing support to the community, aiming to create a positive impact and enhance solidarity among Palestinians in the diaspora.

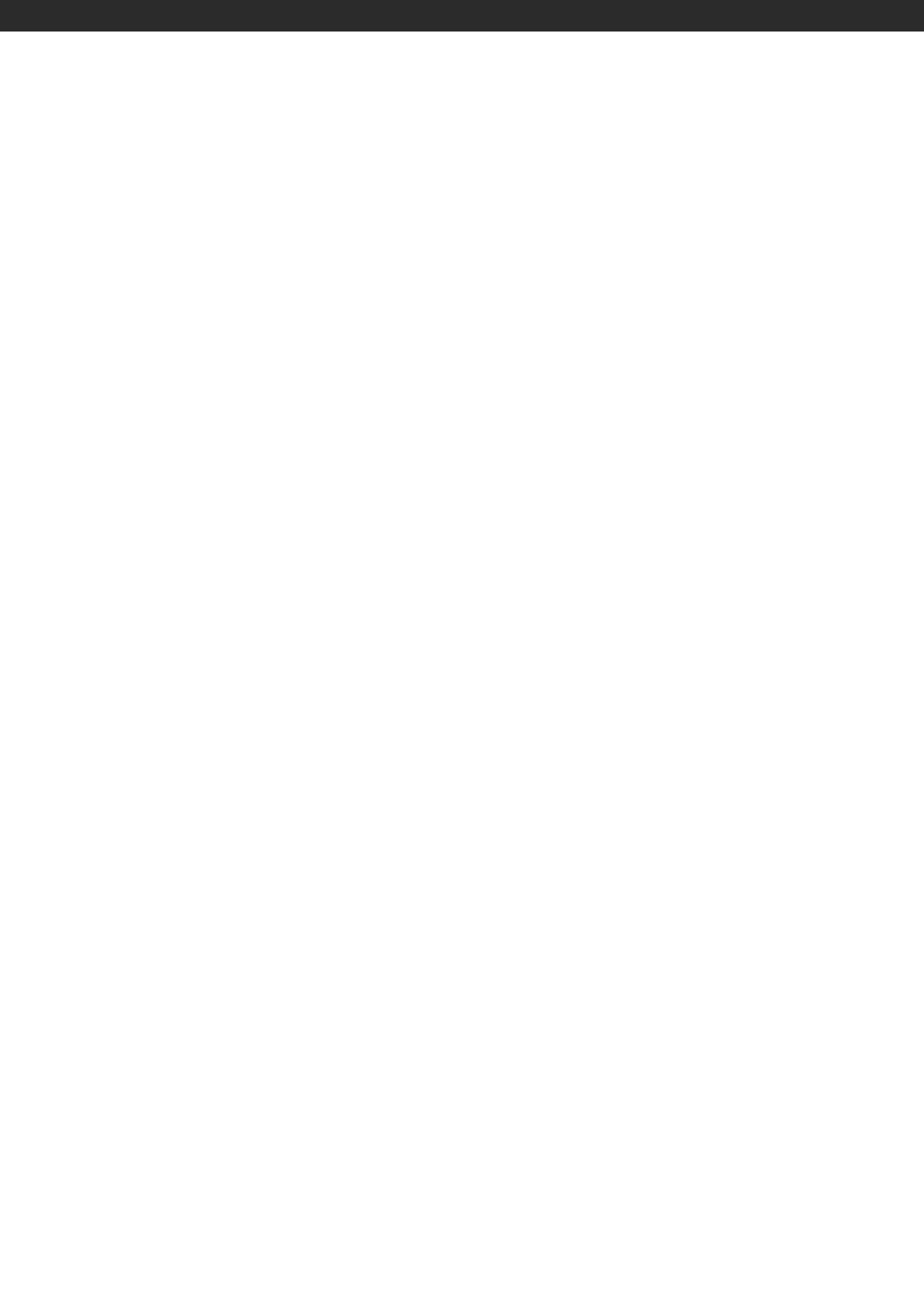
Attendees' Interventions:

The attendees inquired about the population of the Palestinian diaspora worldwide and the most suitable mechanisms to be used for counting the Palestinian communities around the world. They also wondered about the impact of Palestinian successes in the diaspora on the Palestinian cause. Additionally, there was a suggestion from the attendees to have a dedicated online forum for the diaspora in the era of globalization and the internet, accessible to all Palestinians to be able to log in to this forum.

These questions emphasize the importance of establishing a dedicated database for the experiences and competencies of Palestinians in the diaspora. Such a database would enhance the relationship between Palestinians in the diaspora and those in the homeland, facilitating the transfer of knowledge and technological advancements from advanced countries where Palestinians reside to the homeland, especially benefiting the youth. It would also enable the integration of Palestinians in the diaspora into the public policies of the Palestinian government. Additionally, having this database would assist in providing support to Palestinians abroad, particularly marginalized communities.

Part Two

Conference Papers



**Current and Future Demographic Trends and Changes in
the State of Palestine a Socio-economic Analysis**

**Youssef Courbage
Fares Awad**

Introduction

Palestinians' demography is perhaps one of their more important assets. Although this study will concentrate mainly on the State of Palestine, it would be important to mention that Palestinians are now spread all over the world from Oceania to Latin America, with population numbers of the diaspora, higher than those of the State.

Apart from their demographic significance, even their presence in small numbers holds substantial symbolic and ideological weight. Since the middle of the 19th century, Palestinians quitted the shores of the Ottoman Empire to settle elsewhere, but the *Nakba* and its unfortunate consequences were decisive in the depleting of their homeland; around 800 thousand Palestinians were exiled from their homes to the West Bank, Gaza Strip, and Diaspora in 1948 (Palestinian Refugee Portal, 2020). Another round of displacement came as a result of the 1967 war, which saw nearly 200,000 Palestinians becoming refugees in Jordan and other Arab countries, with roughly equal numbers being internally displaced (Ministry of Foreign Affairs, n.d.). A total of 28.4% of refugees now reside in 58 refugee camps in Palestine and Arab Countries (PCBS, 2021a). As a result, and on the national level, 42.5% of Palestinians living in both the West Bank and the Gaza Strip are refugees (PCBS, 2019).

The fluctuating demographics of the Palestinian diaspora have been influenced by the profound impact of wars in the Middle East. While the Palestinian identity may occasionally diminish in the second generation, it often resurfaces in the third or fourth generation, offering a valuable contribution to the Palestinian cause. Black September, the Lebanese war, the Gulf war, and more recently the ongoing Syrian war since 2011, forced Palestinians to take another path of exile, sometimes in the region but more and more outside it.

The country-by-country approach makes it possible to highlight the specificity of Palestinian communities. A Palestinian from the State of Palestine, differs by his socio-economic and demographic characteristics, from his cousin in Lebanon and even more from his remote parent in Chile, due to differentiated characteristics: period of emigration of the individual and his parents, status of refugee, born-in or emigrant, naturalized or foreigner...

It is still extremely difficult to approach the number of Palestinians in the world since no census or survey has been taken yet¹. However, there are some indices

¹ A possible collaboration between PCBS and the US Census Bureau for a census of Palestinians in the United States has been envisaged. This would have been very promising, due to the large experience in the US Census to get the ancestry of the persons interviewed.

which show that their numbers have been underestimated, maybe not in Palestine (State or historical), nor in the close diaspora in the Arab countries, but in the distant diaspora, in Europe, or mainly in America, North and South. Today, mid 2022, the Palestinian Central Bureau of Statistics estimate their number worldwide at 14.3 million, among which 5.35 million (37%) in the State of Palestine and the remaining 8.95 million elsewhere (Wafa, 2022a).

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1. Why a Peculiar Demography?

Palestinian demography, whether in Palestine proper or in Israel, even in the nearby or remote diaspora, cannot be studied independently of the demography of Israel. This is far from the classical cases where demographic questions are solely posed in terms of balance between population and resources or in terms of economic development and *per capita* income (Courbage & Todd, 2011, pp.64-67). For the Israeli authorities, demography cannot be dissociated from a political project that has made the growth of the Jewish population a major strategic objective. Hence, a very dynamic population policy to encourage high and increasing birth-rate. Of course, fertility is not the sole parameter of population growth. To achieve such population growth, it is important to minimize mortality rates, aiming for low crude mortality rates and high life expectancy. This involves reducing infant mortality, child mortality, and mortality among women in childbearing age. Also notable is the preference of immigration from Europe and America, rather than from Arab, African, or Asian countries. Nevertheless, it is crucial to acknowledge that fertility rates remain of utmost importance in driving population growth

The success of this policy is obvious. With a Total Fertility Rate among Israeli Jews recently culminating at 3 children per one woman in 2020, although it was already very high, some 20 years before in 2005 (2.6 children per woman), now surpassing Palestinian fertility in Israel, and approaching Palestinians' fertility in the West Bank. Importantly, this high fertility – twice higher than for the diaspora Jews – is not only reserved to religious or hyper nationalistic Israeli but even secular Jews have fertility higher than the reproduction rate fertility². It is noteworthy that in areas of frictions such as the settlements in the West Bank, Jewish fertility is also much higher than elsewhere, approaching 5 children per woman in certain years. This is not the effect of ideology or religiosity alone, because it is massively subsidized by the government or by Jewish organizations. Although, not as high as in the settlements of the West Bank, East- Jerusalem's Jews have also a higher fertility, much higher also than the Palestinian one.

² In 2013, the TFR was 7.0 for the Haredis, 4.1 for National Religious, 3.0 for the Traditional not Religious 2.5 for the Secular, see Alex Weinreb, Dov Chernichovsky and Aviv Brill, *Israel's Exceptional Fertility*, Taub Centre for Social Policy in Israel, Jerusalem, 2018, p.12.

2. An Exceptionally High Fertility, (But not for ever)

Therefore, the very crucial role of politics in the demography of the region must be stressed. Whereas, during the 1967 war, Ben Gurion urged his Jewish countrymen to have more children to resist the Arab threat³, now, some years later, Yasser Arafat exhorted the Palestinians to have 12 children 2 for the family and 10 for the Palestinian cause: the womb of Palestinian women being the strongest weapon.

Yet, contrary to what could have been predicted, the second Intifada inflicted a dementia to this rule. Instead of increasing or even remaining stable, Palestinian fertility started to fall. From 5.6 children per woman in 1999 to less than 4 in 2016. Beginning in 2000, the natalist slogans seemed to have lost their effectiveness. And this trend is still carrying on until now as shown by the last Palestinian MICS survey in 2019-2020 with a TFR equal to 3.84 almost half the rate of the eighties of the last century.

³ David Ben Gurion, “Without massive Jewish immigration to Israel, without significant increase of the Jewish Birth rate in the country, we are condemned to become a minority, even if the threats of the Arab dictators to exterminate Israel are foiled by our national army. To neglect this danger is tantamount to saying: after me the flood”. Haaretz 17 November 1967, quoted by Sabri Jeryes, *Les Arabes en Israel (The Arabs in Israel)*, Maspéro, Paris, 1969.

3. The Present Demographic Situation

In the State of Palestine, the Palestinian Central Bureau of Statistics estimated the Palestinian population (not the overall population which includes in addition to the Palestinian population some 700 000 to 800 000 Israeli settlers in the West Bank and East-Jerusalem) at 5.36 million in mid-2022; about 3.19 million in the West Bank and 2.17 million in the West Bank). Despite its decennial higher fertility, the Gaza Strip: 2.2 million inhabitants (40.5%) is still less populated than the West Bank 3.2 million (59.5%). The overall sex ratio 103 for males and for 100 females are well-equilibrated.

Moreover, youth constitute a major part of the Palestinian population where more than a third of the population is below 15 years of age. According to the Palestinian Central Bureau of Statistics (PCBS) the age-group 0-14 years amounted to 38% of the total population, 36% in the West Bank and 41% in the Gaza Strip; this is due to a significantly higher fertility there during the recent past, although by now fertilities are significantly converging. On the other hand, fertility rates in urban areas: 3.8 is lower than in rural areas: 4.4, the lowest fertility being observed in the refugee camps: 3.5.

Mortality has decreased a great deal in Palestine and life expectancy increased concomitantly. In 2019-2020, the recent MICS survey has shown an infant mortality rate equal to 12.1 p. thousand during the five-year preceding the 2019-2020 MICS survey. It was twice higher in the period 1995-2000. Mortality in the Gaza Strip was not abnormally high contrary to what could have been feared due to duress of the living conditions, worse than in the West Bank. However, an aspect which is of concern is the relatively higher childhood mortality of girls as compared to boys -a ratio of 0.87- slightly higher than a normal rate of 0.70-0.80.

4. Demographic Prospects for the Future

4.1 Short-term

In this section, we will present first the short- term projections of PCBS from now on until the horizon 2030, then longer ones until horizon 2050.

Table 1: Projections of the population of Palestine, the West Bank and Gaza 2023-2030, (1000)

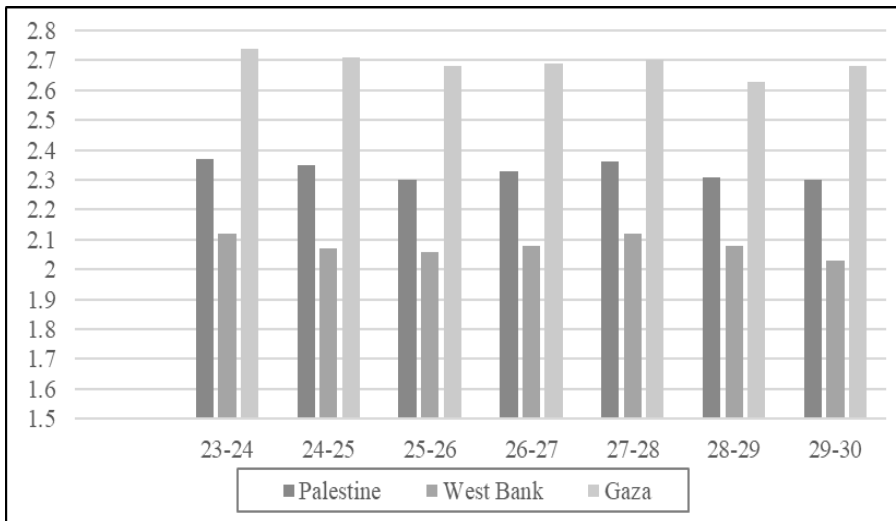
Year	Population (1000)							
	2023	2024	2025	2026	2027	2028	2029	2030
Palestine	5,483	5,613	5,745	5,877	6,014	6,156	6,298	6,443
West Bank	3,257	3,326	3,395	3,465	3,537	3,612	3,687	3,762
Gaza	2,226	2,287	2,349	2,412	2,477	2,544	2,611	2,681
	Rate of annual increase (%)							
		23-24	24-25	25-26	26-27	27-28	28-29	29-30
Palestine		2.37	2.35	2.30	2.33	2.36	2.31	2.30
West Bank		2.12	2.07	2.06	2.08	2.12	2.08	2.03
Gaza		2.74	2.71	2.68	2.69	2.70	2.63	2.68
	Proportions in the West Bank and Gaza (%)							
	2023	2024	2025	2026	2027	2028	2029	2030
West Bank	59.4	59.3	59.1	59.0	58.8	58.7	58.5	58.4
Gaza	40.6	40.7	40.9	41.0	41.2	41.3	41.5	41.6

Source: PCBS, Population projections transmitted to MAS

Since demographic transition is still relatively recent in Palestine, high population growth is still expected in the short run. Hence the total population will gain almost one million inhabitants in seven years, from 5.4 now to 6.4 million in 2030.

The annual rate of increase will remain high and will diminish by few decimal points from 2.37% to 2.30%. Hence, a slight decrease of the birth-rate being compensated by a decrease of the deathrate, without considering international migration in the meantime. In Gaza, where demographic transition is slower than in the West Bank (including East-Jerusalem), the rate of growth will remain much higher: 2.68% against 2.03%, one-third more. More and more Palestinians will be residents of Gaza rather than the West Bank.

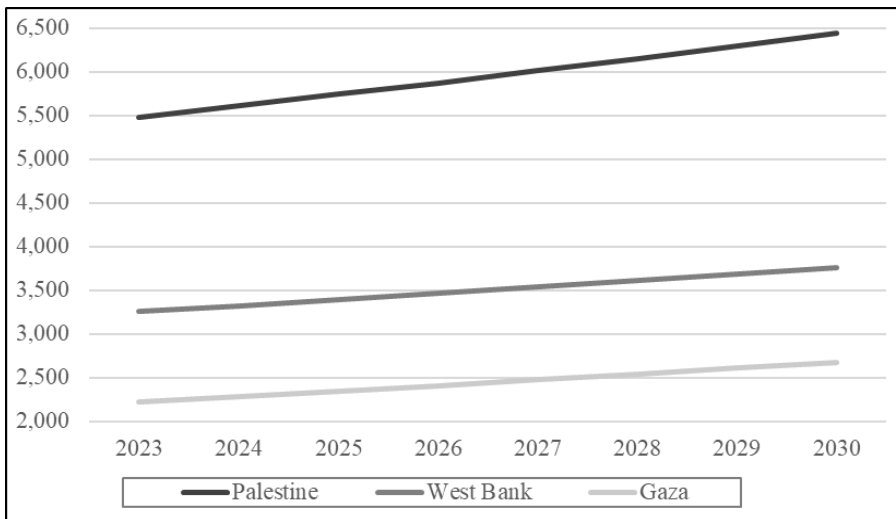
**Figure 1: Annual Rate of Increase (%), Palestine.
West Bank and Gaza, 2023-2030**



Source: Table 1

Aggravation of the socio-economic conditions in Gaza under the impact of high population increase and improbable density are to be expected.

**Figure 2: Projections of the Population of Palestine,
West Bank and Gaza, 2023-2030 (1000)**



Source: Table 1

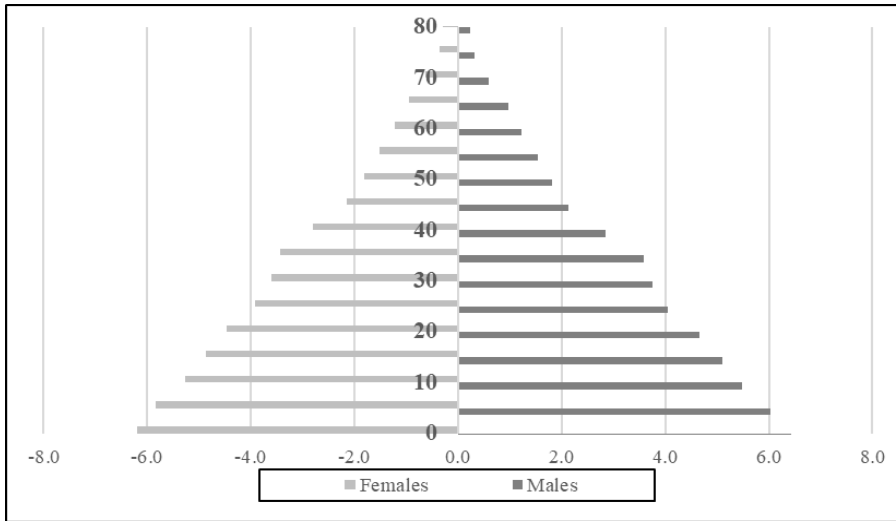
The age-and sex structure, an important component of population dynamics has been projected until 2030.

Table 2: Projection by Age-group and Sex (1000), Sex-ratio (p;100), Palestine, 2023-2030

Year	2023				2030			
Age	Males	Females	Total	Sex ratio (p.100)	Males	Females	Total	Sex ratio
0	382	368	750	103.8	414	399	813	103.8
5	340	324	664	104.9	389	376	765	103.5
10	323	308	631	104.9	353	339	692	104.1
15	287	276	563	104	329	314	643	104.8
20	252	242	494	104.1	300	288	588	104.2
25	244	233	477	104.7	261	252	513	103.6
30	218	209	427	104.3	242	232	474	104.3
35	163	162	325	100.6	231	221	452	104.5
40	130	131	261	99.2	184	180	364	102.2
45	116	113	229	102.7	137	138	275	99.3
50	96	93	189	103.2	117	117	234	100
55	82	78	160	105.1	99	98	197	101
60	62	59	121	105.1	79	78	156	101.3
65	39	40	79	98.5	62	61	122	101.7
70	25	27	53	92.7	38	40	78	95
75	14	17	32	82.8	21	23	44	93.3
80	11	17	28	67.1	15	19	34	81.1
Total	2786	2698	5483	103.3	3270	3173	6443	103.1
Proportions by Large Age-groups (%)								
0-14			37.3				35.2	
15-64			59.2				60.5	
65+			3.5				4.3	

Palestinian population is still young now in 2023, with 37.3% below 15 years of age and will remain young in 2030 with 35.2% youngsters. Ageing is not a problem, since the 3.5% seniors of 2023 will almost remain at the same level: 4.3% in 2030. Hence, the demographic dependency ratio: 0.69 will slightly decrease to 0.64, with limited possible implications on demographic dividends in this short run.

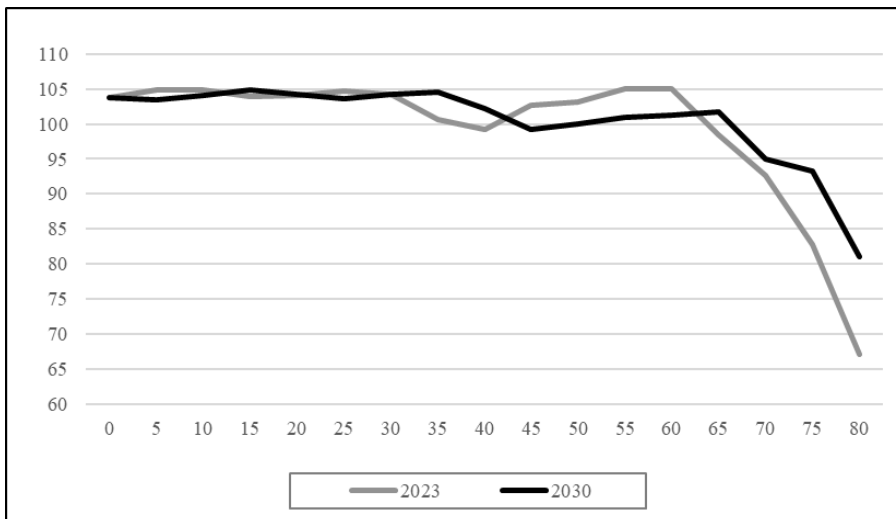
Figure 3: The Age-pyramid, Palestine, 2030



Source: Table 2

While, the age structure in 2023, has the perfect shape of a pyramid in the early phases of demographic transition, with each age-group always significantly larger than the elder one, in 2030 the premises of fertility transition, although still timid, are visible, and, one can expect that, after a certain while, the shape of the basis of the age-pyramid will decrease as compared to older age-groups.

Figure 4: Sex Ratio (p.100), Palestine, 2023 and 2030



Source: Table 2

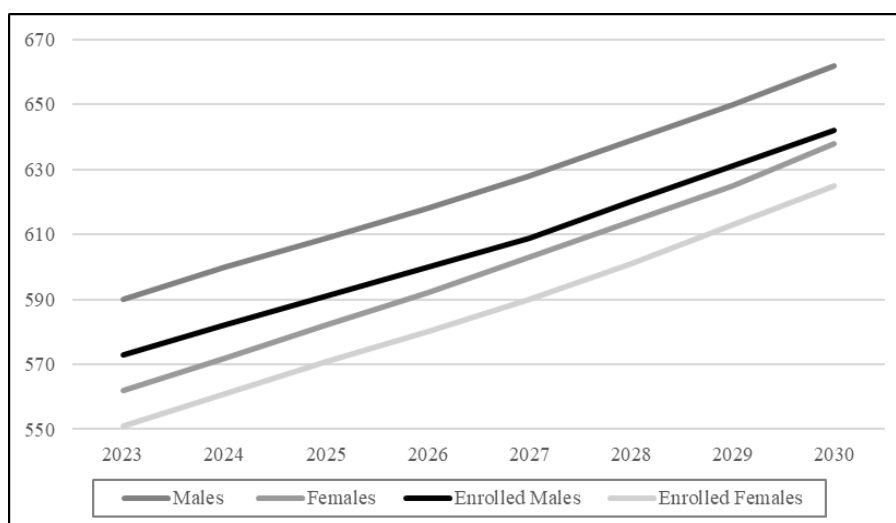
Table 3: Projection of Population and School-enrollment

	Pop. 6-14 years		Primary students		Pop. 15-17 years		Secondary students	
	Males	Females	Enrolled Males	Enrolled Females	Males	Females	Males	Females
2023	590	562	573	551	177	170	125	153
2024	600	572	582	561	182	174	128	156
2025	609	582	591	571	186	178	131	160
2026	618	592	600	580	189	181	133	163
2027	628	603	609	590	193	184	136	166
2028	639	614	620	601	196	187	138	168
2029	650	625	631	613	198	189	139	170
2030	662	638	642	625	199	190	140	171
Constant enrollment ratio			97%	98%			70%	90%

Source: PCBS and MAS

The sex-ratio by age-group may depict differential out or in migration by sex, like the slight larger out-migration of males in 2023, at some active ages from 35 to 50 years of age.

Figure 5: Population Aged 6-14 Years and School Enrollment in Primary Level 2023-2030 (1000)



Source: Table 3

PCBS projections also provide the number of children aged 6-14 years and those enrolled in primary schools and those aged 15-17 years enrolled in secondary schools, by sex. Projection from now on until 2030 assumed a net enrolment of

87% for boys in primary schools and a larger one of 98% for girls, during the whole period 2023-2030, and a net enrolment of 70% at 15-17 years for boys in secondary schools and a much larger one of 90% for girls in secondary schools.

The numbers of primary and secondary students will increase significantly from 2023 to 2030, at the same rhythm than the concerned population of the age-group but at lower rate than the total population. This is due to fertility transition which affects in the first stage, the younger age-groups. One subject of concern is the still very low enrolment ratio of males in secondary schools, 70% only as compared to females: 90%. This is an important issue, since the active population in Palestine, is predominantly masculine.

4.2 Long-term

In Table 4 (Appendix A), a comparison is made for the total population of the State of Palestine according to different sources from the oldest to the more recent ones. Interestingly, although these projections were carried out in a large time span, from 1999 to the present time, they yield not too different results at the horizon 2050. An exception, nevertheless, is the World Bank with lower projected figures due mainly to the fact that East Jerusalem's population is not recognized as part of the State of Palestine, therefore an acknowledgement of its annexation (and somewhat to projected higher fertility decrease than in other sources, a TFR of 2.1 in 2050 for the West Bank and the Gaza Strip).

The most sensitive parameter, which will determine most of population variables: total population, structure by age groups, support ratios, and ultimately demographic dividends is the Total Fertility Rate. There are in this connection, significative differences in the projections. According to PCBS, fertility decrease between 2017 and 2050, would reach minus 33%. This is not too far, from the United Nations Population Division projection as revised in 2022: - 37%, a bit more than the forecast of the Palestine 2030 study which bets on a 42% decrease, slightly higher than for the World Bank - 41%.

At any rate, there is a general agreement about the trend of Palestinian fertility. It is going to decrease at a significant pace. There are certain general factors pleading for this direction: the fact, that today fertility transition can accelerate when resources are becoming rarer (the so-called poverty led transition) and the recent pandemic coronavirus crisis which might diminish fertility desires for large families.

5. Incorporating Educational Attainment in the Population Projections and Fertility Trends

In the nineties of the last century, the United Nations Population Division had suggested a method to project more accurately population by using the very important parameter of women’s educational level. However, probably for reasons of time constraint and rarity of data they didn’t carry on in this direction. In 1992, however an essay was taken in direction on a limited number of countries⁴. For each country where these data are available it should be necessary to incorporate this important variable which determine to a great extent future fertility trends. This was the case for Palestine in 2016, where this methodology was applied by the team of UNFPA office in Palestine (Courbage et al., 2016).

Table 5: Total Fertility Rate Palestine, Projection Using Females’ Educational Attainment, 2015-2025

Year	2015	2020	2025
Primary and less	4.54	4.25	3.98
Secondary and less	3.95	3.7	3.47
University, Higher	3.3	3.09	2.9
TOTAL	4.06	3.46	3.16

Hence the projected (interpolated) TFR by this method in 2019-2020: 3.76 is very close to the observed one at the last MICS survey: 3.84, for the three years preceding the survey in 2019-2020 which clearly justify the projection by using educational attainment (PCBS, 2021).

Why then fertility transition will get speed in the future? This is due to the synergistic effect of intrinsic fertility decrease for each group of women, less educated women tending to adopt fertility preferences of more educated ones, and compositional effects, each year relatively more educated women enter the fertile age-group 15-49 years, whereas less educated ones, leave this age-group. In 2019-2020, the MICS survey has shown the great strides accomplished in this direction, with most women in the fertile age-group having accomplished higher education: 42.7%, with 34.2% with secondary education and only 23.1% with basic or no education.

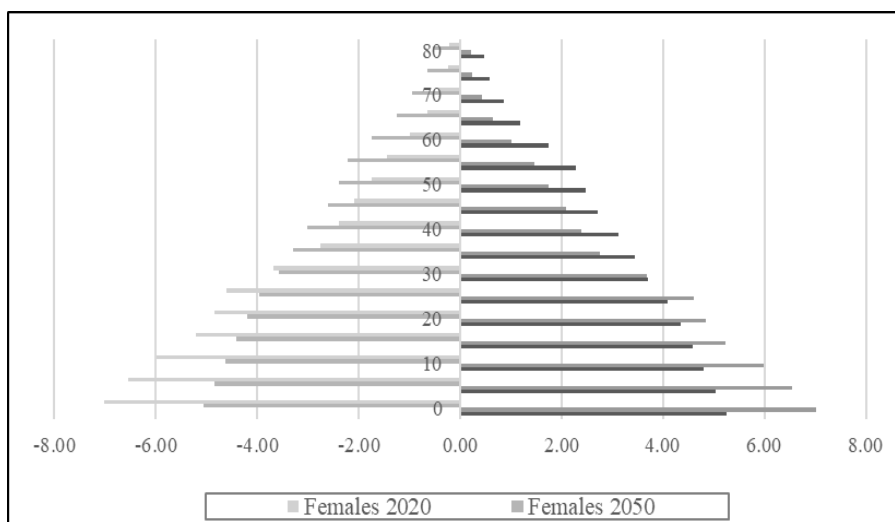
⁴ Youssef Courbage et Philippe Fargues, *L’avenir démographique de la rive sud de la Méditerranée Algérie, Egypte, Maroc, Syrie, Turquie, Tunisie ; Projections de la population et réflexions sur la migration*, Plan Bleu, Sophia Antipolis, 1992. The State of Palestine was not incorporated in this study due to the unavailability of data at this time.

6. The Demographic Dividend from a Population Point of View: The Transformation of the Age-structure 2020-2050

The most recent observation of the age-sex structure of the Palestinian population is the one present in PCBS projections (Table 6 Appendix B). It displays a still young population with 38.2% below 15 years of age and few seniors over 60 years at 5.3% only. The shape of the age-pyramid, with each age-group larger than the preceding one shows also that fertility transition is recent and moderate. The sex-ratio shows a rather fair equilibrium between sexes, with few exceptions (at 50-54 years, for instance: 105.2).

How the age structure is going to evolve in the future is a crucial determinant of future demographic dividends. To answer this question, it is requested to have the age-structure of the population in future years. There are several sets of projections. Better to rely on PCBS official projections. Anyway, there are no major differences between other different sets (except the World Bank one).

**Figure 6: The Transformation of the Age Pyramid
in Palestine, 2020-2050**



Source: Tables 6 and 7 in the appendix.

Tables 6 and 7 and Figure 6 show the decisive effect of increasing educational level on the age-structure of the population. The basis of the age pyramid will accelerate its retraction and each younger age-group will be less numerous than the preceding one. Hence, considering the decomposition of the population into large age-groups: the youngsters from 0-14 years the adults between 15 and 64 years and the elderly above 65 years, the first age-group will diminish from

38.2% in 2020 to 29.6% in 2050. Concomitantly, the elderly will move from 3.3% to 6.5%; a not so worrying jump to speak of an aging of the population. The adult age-group will be a beneficiary of this demographic transition from 58.5% to 63.9%. Hence, this is just the first premises of the demographic dividend, with a significant decrease of the population dependency ratio: the share of the dependents 0-14 years and 65 years and over (the youngsters and the aged) to the active age population (15-64 years) decreasing from 0.65 to 0.46.

7. The Socio-economic Aspects of the Future Demographic Dividends

But, for collecting demographic dividends, demography is far from being the sole concern. It is just the first initial step, important as it may be, it must be accompanied by other major transformations.

As suggested by UNFPA, demographic dividend is the economic benefit that can arise when a population has a relatively large proportion of working-age population and invest effectively in their empowerment, education, and health (Das Gupta et al., 2014).

However, to introduce this analysis an important precision should be made. It is impossible to ignore the very peculiar nature of the Palestinian economy, still almost completely dependent of the present Israeli occupation. The Palestinian government lacks control over international and sometimes local trade and natural resources (water, natural gas, forests), including the large area C of about 60% of the territory, nor the almost total closure of the Gaza Strip from the Israeli and sometimes Egyptian side.

Under occupation, the capacity of the Palestinian economy to stimulate jobs creation and inject more people as effective producers from consumers only, will remain low thus limiting the realization of demographic dividends. A recent United Nations (UNCTAD, 2022), evaluation in November, of the cost of the Israeli occupation of Palestinian lands has revealed appalling figures: US \$ 50 billion between 2000 and 2020, and US \$ 2.5 billion per year, the cost of additional restrictions in about 30% of Area C alone. Moreover, UNCTAD estimates that the annual contribution of the Israeli settlements to the Israeli economy, \$US 41 billion per year, represents 221% of the Palestinian Gross National Product in 2021. One cannot be but stunned by the huge contrast between the economic performances of the two countries: a GNP per capita of US \$ 51,450 in Israel in 2021 against US \$ 3,654 only in the State of Palestine, 7% of the Israeli one. A large part of the Israeli richness is provided by Israeli control of the West Bank.

The initial step is to forecast the active population, meaning the population effectively employed and those seeking an employment. According to UNFPA estimates, the Palestinian active age-population will rapidly increase from now on until 2050. The impact of fertility transition is obvious while total population will grow by 74% active age population will increase by 113%.

However, the big issue is more social, behavioral and in a way political. It has to do with participation rate to the labor force and since male's participation rate is not an issue, there remains only female's participation rate.

Males' participation rates (recall that unemployed are included in the active population but seeking an employment) would remain constant. Contrarywise, females' participation in an optimistic scenario would and should increase in certain age brackets.

Table 8: Projection of Labor Force Participation Rates by Sex and Age, 2020-2050 (%)

Age group	Males				Females			
	2020-2050	2020	2025	2030	2035	2040	2045	2050
15-24	51,9	10,4	10,4	10,4	10,4	10,4	10,4	10,4
25-34	91,1	39,7	46,4	53,1	57,0	57,5	58,0	58,5
35-44	93,5	30,7	34,6	38,6	42,5	46,4	50,3	54,2
45-54	87,1	27,9	31,6	35,3	39,0	42,7	46,4	50,1
55-64	54,9	12,1	12,1	12,1	12,1	12,1	12,1	12,1
65+	19,6	4,1	4,1	4,1	4,1	4,1	4,1	4,1
Total 15+	72,4	23,4	26,4	28,8	30,5	31,8	33,1	34,4

Source: Projected according to labor force surveys 2001 and 2015 and oriented according to trends of certain Asian countries.

Hence, the overall females' participation rate would increase from 23,4% to 34,4% in 2050, still markedly below males' participation rate 72.4%. Overall, the active population in the labor force would increase from 1.623 million, 1.235 million males and 0.388 million females to 2.553 million in 2050 among which 1.222 million males and 1.222 million females.

8. The first demographic dividend in Palestine

Dealing with demographic variables alone, isolated from other socio-economic variables (not including education) provides a mixed apprehension of the future socio-economic situation of Palestine. Yet, as already pointed by local and international NGO's and organizations, it is almost completely surreal to neglect the real situation and the strangulation of the Palestinian economy under the on-going Israeli occupation added to the Palestinian government lack of control over local and international trade and natural resources (water and gas) including the large area C (about two-third of West Bank) completely out of Palestinian control and the almost complete closure of the Gaza Strip, suffocating under an unbelievable population density of some 6000 inhabitants per square kilometer. In simple terms, one can hardly expect demographic dividends to materialize by the possibility for the Palestinian economy to create sufficient jobs and incorporate more people into the productive sector as effective producers, and the demographic dividends to materialize.

From the outset, while giving credit to the demographic dividend for economic growth, it should be warned against excessive triumphalism of the demographic impact, in Palestine, certainly more than in "normal" countries. While the demographic dividend plays a significant role in the economic take-off, it is not only because the age structure is changing to the benefit of the active over the dependents, that the country is on the trajectory that will guarantee its economic take-off and development. The demographic dividend is a potential that must be accompanied by public policy measures and good political and economic governance. The example of the countries of the Far East, which have managed and succeeded to reap the demographic dividend for their economic development, is there to prove it: it is estimated by econometrist analysis that about one-third of Eastern's and South-Easterner Asia's increase in per capita income was due to demographic dividend. Besides as UNFPA has reminded in its Demographic Dividend Brochure, this DD can arise when a population has a relatively large proportion of working age population and invests effectively in their empowerment, education, and wealth.

Despite the many conceptual difficulties raised by the estimation and measurements of the demographic dividends in Palestine, still it is interesting to try to attempt this exercise, with the -optimistic – view that things might become better in the not-too-distant future. Recently, research in partnership with the Prime Minister Office National Population Committee and UNFPA was initiated. It is necessary to recall its approach and conclusions, important in themselves and which will be helpful when new census and survey data, on population: fertility,

mortality, internal and external migration..., education, activity, health will be made available.

The first demographic dividend, which depends heavily on educational attainments, is transitory since aging of the population will ultimately lead to a relative decline of the working age population. In Palestine, however, this perspective is still very remote. Anyway, someday but not in the foreseeable future, a second demographic dividend may appear, generated by the very aging of the population itself.

According to experience of several developing countries, everyone can benefit during 3 of 4 decades to build the dividend. There is a steep rise in consumption from birth to 15 years of age, then the consumption curve remains almost stable, slightly decreasing by 60 years of age. Labor income, which is nonexistent before 15 years of age, increases sharply until a maximum between 40-50 years then decreases until 70, becoming negligible afterwards. Unfortunately, in Palestine, data on production and consumption are not collected by age groups which prevents the estimation of the economic life cycle (Chawla, 2006).

The first dividend is defined as the rate of growth of the support ratio, hence either to increase the share of active producers or to diminish the share of effective consumers, or both. Is this feasible in Palestine? The first stumbling block which comes to mind, is indeed the enormous unemployment rate, the plague of the Palestinian society. The most recent statistics, in September 2022 shows a double-digit unemployment rate of a quarter of the active population: 24,7%, not the worst result for two years before in September 2020 it was 28,3%. The double-digit unemployment rate affects both males: 21% but much more females, with almost twice this rate: 38%. In the West Bank, the double-digit unemployment rate is high:14%, but nothing in comparison with the Gaza Strip :44,1% in June 2022 after culminating at 47% two years before. This clearly reflect the more than abnormal political handicaps which affect the Gaza Strip, much worse than in the West Bank, where they are also very present: the settlements, the separation of East-Jerusalem from the rest of the West Bank, the huge area C. In theory, the increasing access of females to education at its higher levels should have enabled them to access employment much more than what is occurring in Palestine, especially in the Gaza Strip. Hence, females appear as double victims because of their citizenship and because of their gender. Fortunately, they perform rather well, better than boys, in education as will be seen later.

The number of effective producers: active population minus unemployed, is confronted to the number of effective consumers⁵ across time. The rate of change of this ratio provides the first demographic dividend, thus the rate of growth of the Gross Domestic Product per capita. Hence, a rise in the support ratio might also reflect a decrease of the rate of population growth, thus a decrease in fertility and a possible increase in the growth of the GDP per capita. Under the pessimistic scenario, the support ratio would increase from 25% in 2015 to 35% in 2050, leading to a total dividend of 32%, or an average increase of 1% increase per year. Under the optimistic scenario, the support ratio would reach 41% in 2050 and the corresponding increase of GDP per capita 51%, thus 1.46% per year.

However, it is important to consider, particularly in Palestine that what is regarded as economically active is more a potentiality of employed persons than those effectively employed. A very high rate of employment is a major drawback for the reasons already mentioned, namely the Israeli restrictions. Many males and females who are willing to work are unable to enter the productive sector. There are significant rates of unemployment for those who have worked but are now unemployed, out of the labor force, sometimes voluntarily or because they were fired from their job, and, significant numbers of persons who are considered employed, but are in fact underemployed: 6.2% in 2014. Fortunately, this rate has recently diminished to 1.9% in 2021, this contributing to give a slight push to the support ratio.

Unsurprisingly, much more efforts should be made in the Gaza Strip to improve its economic conditions. One of the keys of success would be **the increase of female's participation rate in the labor force**, which contribute to the increase of the support ratio. Feminization in employment is at odds with the high level of female's enrolment in Gaza's education system, including higher education. All educational indicators are in favor of Palestinian women, all employment one against them. There are 69% of females in formal education against 59% for males, 10% more. In higher education the discrepancy among sexes is even wider 61% enrolled females 39% males only. Contrariwise, female's unemployment rate :43% is twice higher than males: 22% (Wafa, 2022b).

⁵ These weights are attributed to each age-group: for 0-4: 0.4, for 5-9 0.7, for 11-14: 0.9 and 1 for other age-groups.

9. Possible increase of the senior's participation rate of activity?

Besides, females' participation rate, which should absolutely be increased both for economic and social reasons -after all, it is one of the keys to modernity- there are other tracks to explore, although they raise difficulties, due to a political and economic context, which contributes to discourage employment. If one bets on a relaxation of the restrictive measures due to occupation, it would be possible to explore, as it is done now in several countries belonging both to the developed and developing world, the opportunity of increasing the employment rate of the Palestinian seniors.

Table 9: Participation Rate (%) by Age Group and Sex, Palestine, 2021

Age group	Males	Females
15-24	47,3	9,5
25-34	88,8	28,1
35-44	90,5	23,6
45-54	82,0	17,5
65+	15,2	1,3
Total	68,9	17,2

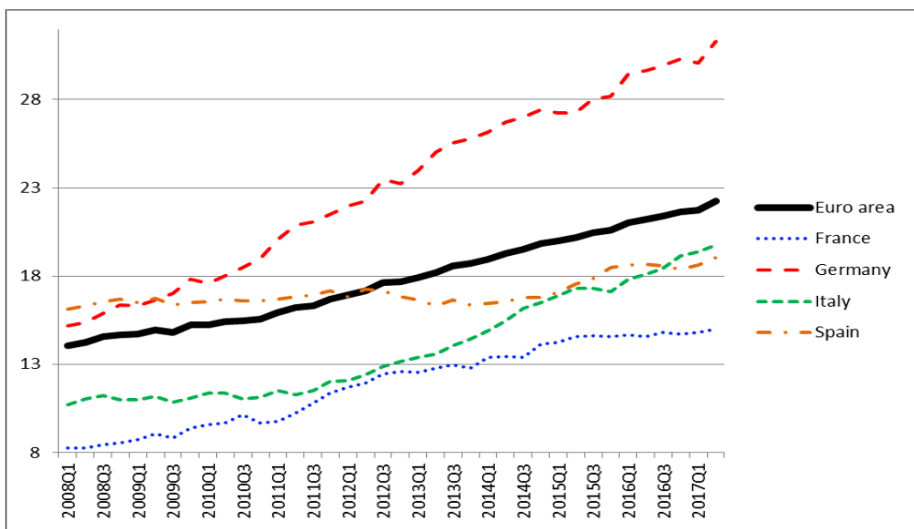
Source: PCBS, Survey of Palestinian Labor Force-Annual Report 2021, p.52 (in Arabic)

Table 9 shows how low are the participation rates of senior Palestinians (above 65 years of age): 15.2% for males and 1.3% for females. Probably among the lowest rates, in the world and among Arab countries. Besides, looking at recent trends of participation rates for seniors, it was revealed that these rates, which were negligible in 2001, slightly improved between 2002 and 2014 reaching 19.4% for males, 65 years and over and 4.1% for females of the same age-group. Hence the conclusion is obvious, in recent year, 2014-2021, contrary to the expectations, seniors' participation rate has decreased a great deal, from 19,6% to 15.2% among males and even worst among senior females from 4.1% to 1.3% only! To forecast future senior's activity both for males and females according to these trends, would have led to catastrophic results, therefore the need to explore any possibilities to raise their contribution.

Senior's participation to the labor force, necessary to increase production and improve the well-being in the society, has become an important issue, first in developed countries then in developing ones, which discovered this hidden resource that might improve their lot. Adult females' contribution is essential but

as noted before it raises some difficult issues in the present context on the economic role of women, and which tasks should be assigned to them. However, one can imagine a brighter situation in the future, and this is the reason why it is better to have forecasts not only on the very short term, but also on the mid-range future. For this mid-range, one can look at what is occurring in other regions of the world, in more advanced countries.

Figure 7: Seniors' (60 – 74 years of age) Participation Rate to the Labor Force in Some Countries of the Euro Zone 2008-2017 (%)



Source: Violaine Faubert and Antoine Lalliard, « Increase in the employment of seniors in the Euro area, *Econote pad, Banque de France*, 2018.

Figure 7 shows that in countries that are geographically not so far from Palestine, in Western Europe, the participation rate of seniors aged 60-74 increased significantly between 2008 and 2017. For the euro zone, it rose from 14% to 20% between 2008 and 2017.

The trend is general, even if the Mediterranean countries in France, Italy or Spain, the increase in the employment of seniors is below average of European area. But in Germany, considered in many respects as the "beautiful economic model", the growth in the economic participation of seniors is spectacular, with an activity rate of 16% in 2008 which rose to a third of the active population (32%) in 2017. Another "beautiful model", Asian this time, South Korea is also experiencing a significant recovery in the employment of seniors: At 65-69 years of age, their activity rate has thus increased from an already very high level of 41% to 46% between 2010 to 2017.

To improve the demographic dividend in the next two or three decades, the input of seniors would be required. But is it conceivable in Palestine? There are some presumptions which militate in this direction although the obstacles are there: rarefication of jobs creation due to the political situation, maybe also conservative attitudes which consider that Palestinian seniors should not work to get their living, a role that should fall on their off springs, the males essentially, or on the retirement pensions for those who are lucky enough to benefit from this privilege. However, there are some presumptions which militate in this direction. First, there is the sharp decline of morbidity and mortality and the increase of life expectancy, not only at birth but also at retirement ages, around 60 years. Also, one might consider the likely increase of the life expectancy in good health⁶. Hence, the individual by his sixties, does not resent himself as “old”, maybe as “senior”, and still able to work. Sometimes, unwillingly, because his income or his pension are not sufficient to enable him and his family to preserve their initial standard of living before his retirement.

But sometimes also willingly, not that much for economic reasons, more and more individuals choose to prolong their activity. This is very often the case in the upper tertiary sector, a sector of activity which is expanding. For instance, the education sector at all levels: from primary to higher, in the public as well as in the private sector, for both males and females. Same for the health sector, physicians, and paramedics, who enthusiastically prolong their activity. For many seniors, to exercise an activity is a necessity, not only financial but also psychological. Because many resent the emptiness of their existence when they are deprived of their usual activity. But some do not hesitate to change completely of activity, moving from one branch to the other⁷. This may contribute, directly or indirectly to the increase of the National Product. But one must consider also the non-negligible senior’s philanthropic unpaid activities, in the NGOs mainly.

Maybe these considerations about an expansion of senior’s activity seem far remote or even utopic, in view of their present negligible rate: 8% (both sexes) only. Thus, the necessity to prospect not only the near future but also the longer term which might be more promising due to significant societal changes.

⁶ The calculation of Life expectancy in good health, a very important indicator is not yet available in Palestine due the lack of statistics.

⁷ Such as this civil servant who converted into manager of an aluminum firm, or a law professor who converted into a Chef and owner of a restaurant, this chief surgeon who became a music composer, an insurance company director who settled as farmer, a UN international civil servant who became a hotel manager etc. etc.

10. The Ubiquity of the NEETS phenomenon

According to ILO estimates, the share of youth neither in employment nor in education or training (NEETs) in the State of Palestine even if it remained almost the same between 2013 and 2015 from 35% to 33%, respectively, is much too high. Besides, the share among young women was double that of young men in 2015 at 44.6 and 21.6%, respectively, and is explained primarily by the obligation of many young women to remain outside of the labor force for reasons of family responsibilities (ILO, 2016).

More recently, in 2021 the Palestinian Labor Force Survey, has shown extremely high rates of unemployment (very much correlated to the proportion of NEETS) among youth (Table 10), especially among young women aged 20-24 years with almost a quarter being unemployed.

Table 10: Unemployment rate (%) of Adolescents and Young Adults by Age Group and Sex, Palestine, 2021

Age-group	Males	Females	Both
15-19	43,2	42,0	43,2
20-24	38,1	70,6	45,3
25-29	29,2	64,3	37,9

Source: PCBS, Survey of Palestinian Labor Force-Annual Report 2021, op c it.

Despite the difficulties of all kinds, one of the priorities in the State of Palestine should be the question of employment, with a strategy aimed at going beyond traditional labor market policies, putting employment at the center of the concerns of public action, through a global approach integrating economic, financial, budgetary, and institutional dimensions, and finally cultural dimension (gender, seniors, NEETS). The promotion of productive and decent employment and the creation of sufficient and quality jobs, particularly for females and young people and the correction of inequalities between genders and territories, are concerned. Ideally, some of its goals could be (i) to enhance human capital through the promotion of female employment, the development of lifelong training and the expansion of the scope of social protection (ii) to promote job creation by encouraging employment-friendly macro-economic and sectoral policies (more labor intensive than capital intensive for instance), (iii) To orientate unformal enterprises towards formality and promote the development of local jobs (iv) To improve the effectiveness of employment programs and strengthen labor market intermediation through the consolidation and development of employment

promotion mechanisms and the development of services for job seekers and employers (v) To create a national employment observatory.⁸

⁸ These measures are inspired from UNFPA-Observatoire National du Développement Humain, *Le dividende démographique au Maroc*, Rabat, 2019, 73 pages

11. Derived Population Projections

To evaluate more completely the impact of population dynamics in Palestine it is necessary to forecast the geographical distribution in the future of this country, which is significantly diverse between the West Bank and the Gaza Strip, annexed East Jerusalem, Area C etc.

11.1 Regional Projections

Due to a comparatively delayed demographic transition, with lower fertility decrease and the impact of the population momentum, the Gaza Strip might record higher population and growth than the West Bank (Table 11). This raises important matter of concern. Gaza Strip is already highly congested. What then when its population would reach 4.2 million (2050) and a population density of more than 13 000 square kilometer? One must consider, under ideal political circumstances, the opportunity to allow the Gazans free movement and the possibility to settle in the much less crowded *governorates* of the West Bank.

Table 11: Projections of the Population of the West Bank and the Gaza Strip, 2020-2050 (million)

	2020	2025	2030	2040	2050	% inc. 2020-2050 %
West Bank	3,1	3,4	3,8	4,5	5,2	67.7
Gaza Strip	2,0	2,3	2,7	3,4	4,2	110

Source: PCBS, Population projections transmitted to MAS

Although annexed after 1967, East-Jerusalem, maybe the future capital of the State of Palestine, has an important Palestinian population. Besides, many Israeli settlers have moved to the colonies of this part of the Holy city for more than half a century.

The forecast the Palestinian population is quite complex since figures are provided both by the Palestinian and the Israeli statistical offices. With its symbolic and strategic importance, the knowledge of the future of this population is a must, especially that many of its characteristics (Fertility, infant and global mortality, age-sex structure...) differ from those of the West Bank.

East-Jerusalem Palestinian population, probably underestimated in Table 12 (more recent figures suggest a figure of 362 thousand Palestinians⁹). Its forecasted

⁹ Or 367 000 according to *Statistical yearbook of Jerusalem*, 2022, Published in West Jerusalem.

increase by 45% until 2050 remains highly questionable, because of the difficulties of everyday life, worse than in the West Bank, the strict rules of residence, the colonization of the heart of the city etc.

Table 12: Projection of the Palestinian Population of East-Jerusalem, 2020-2050

	2020	2025	2030	2040	2050	Increase 2020-2050 %
East- Jerusalem	293	315	336	385	426	45.4

Source: State of Palestine, Prime Minister Office, National Population Committee, UNFPA, *Palestine 2030-Demographic Change: Opportunities for Development*, op. cit. p.143.

11.2 Projection of Area C

With more than 60% of the area of the West Bank and fully occupied, Area C with a population of 11% only of the West Bank covers several *governorates*. Hence, relatively underpopulated, it would have been well indicated to welcome internal immigrants from the overcrowded Gaza Strip... unless the occupation imposes an annexation which might lead to yet more population displacements outside the C zone.

Table 13: Projection of the Population of Area C by Governorates, 2020-2050 (1000)

<i>Governorates</i>	2020	2030	2050	Increase 2020-2050 (%)
Hebron	83	103	142	71.1
Jerusalem	81	92	111	37.0
Nablus	11	12	14	27.3
Ramallah/El Bireh	43	51	66	53.5
Jenin	24	28	34	41.7
Bethlehem	45	52	65	44.4
Tulkarm	19	21	22	15.8
Qalqilya	11	13	16	45.5
Salfit	14	15	17	21.4
Tubas	3	4	6	100.0
Jericho	12	14	18	50.0
Total	311	405	511	64.3

Source: Table 13 and propensity to live in Area C provided the Office for the coordination of Humanitarian Affairs (OCHA)

11.3 Projection of Refugees

The State of Palestine, especially in its Gaza Strip, counts an enormous number of refugees, either those directly concerned after the Nakba in 1948 or their descendants from the patrilineal line, around half the population of the State.

Table 14: Projection of the Registered Refugees by Region, 2023-2050 (1000)

	2023	2030	2040	2050	Incr. 2023-2050 (%)
West Bank	972	1024	1259	1503	54.6
Gaza Strip	1457	1712	2105	2511	72.3
Total	2429	2736	3364	4014	65.3

Source: PCBS, Population projections transmitted to MAS

Under present conditions, the total population of registered refugees would grow by over half their current numbers between 2020 and 2050, from 2.4 to 4.0 million, with higher growth in the Gaza Strip than in the West Bank. With rates of growth, in the Gaza Strip, which are higher than for the total population, this implies significant meanings from the political, educational (younger population), socio-economic and humanitarian aid perspectives.

11.4 Projections for Health

One of the successful achievements in the State of Palestine despite the many unfavorable conditions, is the reduction of mortality to acceptable levels. With an infant mortality rate of around 14 thousand and a life expectancy at birth of 74.3 years at the beginning of this decade. To carry on with these fair results, the State of Palestine should try to invest as much as possible in the health sector, the main contributor to mortality decrease.

For this purpose, increment of the medical density is a necessity. It was estimated at 1.7 physician per 1000 inhabitants, which places Palestine relatively well among Arab countries, but still lower than Jordan, Lebanon, or Egypt., and with half the medical density in Israel. To improve the medical density to a level of 3.3 by the middle of the century table 15 presents the numbers of required physicians in the whole State, in the West Bank and in the Gaza Strip.

**Table 15: Projection of Required Physicians,
Palestine 2020-2050**

Area/Year	2020	2030	2050
West Bank	5100	8000	15100
Gaza Strip	5300	8200	15400
Total	10400	16200	30500

Source: Assumption of increasing medical density to reach 3.2 physician per thousand inhabitants, in State of Palestine, Prime Minister Office, National Population Committee, UNFPA, *Palestine 2030-Demographic Change: Opportunities for Development, op. cit.* p.233.

A trebling of the number of physicians is therefore required at an annual rate of growth of 3.6%, which may seem high but acceptable. Medical professions, general practitioners, and specialists and paramedical ones, and health facilities, hospital beds and resources should increase at comparable rates.

11.5 Projections for Education

The decisive role of education on demographic transition: mortality and fertility decrease has been presented. In turn, population dynamics will affect considerably the field of education. The synergetic effect of the more than necessary increase of enrolment ratios in all grades of the school system and the increasing flows of children and adolescents, due to still high fertility and therefore abundant births, will lead to more and more pupils and students thus enlarging the Palestinian human capital.

As acknowledged by education specialists, pre-primary education is not a luxury but plays a major role in the mental development of the children and their future in the educational system. In Palestine, the enrolment rate of the children aged 4-5 years, although recently increasing, remains particularly low. To reach full enrolment in 2050, requires an almost doubling of the enrolments, equally divided among boys and girls.

The other level of education, which impacts heavily on the State budget is the tertiary level. To reach its goals, the number of students in this level should increase from 1.7 million in 2020 to 2.9 million in 2050 at an annual rate of growth of 3.0%, much higher for males: 3.7% than for females, relatively privileged as far as higher education is concerned, with enrolment ratios exceeding males' ones by more than 50% in the recent period.

**Table 16: Projection of school enrolment (1000)
by level of education and sex, 2020-2050**

	2020	2030	2050
Males			
Pre-primary	89	126	161
Primary	277	329	331
Secondary	380	533	676
Tertiary	114	179	346
Total	860	1167	1514
Females			
Pre-primary	88	130	153
Primary	261	311	313
Secondary	393	531	631
Tertiary	160	233	327
Total	902	1205	1424
Both sexes			
Pre-primary	177	256	314
Primary	538	640	644
Secondary	773	1064	1307
Tertiary	274	412	673
Total	1762	2372	2938

Source: Projection by age group and sex, medium variant, enrolment ratios according to past trends, State of Palestine, Prime Minister Office, National Population Committee, UNFPA, Palestine 2030-Demographic Change: Opportunities for Development, op. cit. p.199.

For the intermediate levels, in primary schools, the increase of enrolment will be more moderate, since enrolment ratios have almost reached their maximum level for both boys and girls. Thus, this increase will result mainly from population growth at these ages. For the secondary level, the increase of enrolments will be more significant, especially for boys, whose enrolment rate is slightly lower than for girls.

12. Demographic Factors and Poverty

12.1 Introduction

Poverty rates in Palestine have been historically high, with rates in the Gaza Strip and East Jerusalem on the rise. Between 2011-2017 they reflect an increase in poverty by 3.4% across Palestine, with regional divergence among the poor in the West Bank (WB) and the Gaza Strip, the former decreasing by 3.9% while the latter increased by 14.2% (Atamanov & Palaniswamy, 2019). Small shocks to income levels in the WB could significantly lower household expenditures, highlighting the sensitivity of poverty in the region. The occupation remains the main factor impeding progress for the poor Palestinian population, as vulnerabilities amongst groups persist due to the Palestinian Government's limited accessibility and policy reach in East Jerusalem, Area C, and H2 in Hebron. Nevertheless, it is important to understand the characteristics of the Palestinian population living in poverty as well as the factors that drive change in such communities.

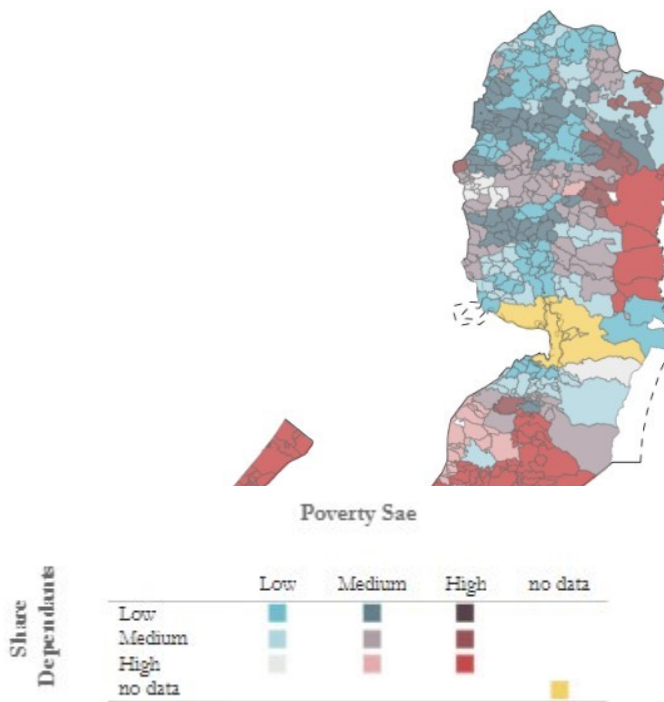
12.2 Fertility and Mortality

Literature on the relationship between demographic factors and poverty attempts to establish associations to guide targeted population policy and interventions. One such prominent demographic variable is fertility, where higher levels in most developing countries tend to tighten poor families' budgets and impact children's educational, nutritional, and health outcomes. There exist certain norms that have driven high fertility rates in Palestine despite its population's educational outcomes, key among them is emphasizing women's reproductive contribution to society at the cost of their productive potential. Child marriage is also prevalent in the country, and so are unplanned pregnancies, mainly attributed to traditional mindsets and lower legal minimum ages of marriage for girls compared to boys. Moreover, women are found to be contributing the most to unpaid labor. Furthermore, poverty rates have been noted to diverge in Palestine according to family size, where in 2017, the highest poverty rates were found among families of seven or more members, with poverty rates increasing as family sizes grew larger (PCBS, 2020). While birth rates have been decreasing in Palestine, the low use of modern contraception methods among married couples, at 42.7%, have been noted as a driver of high fertility rates (PCBS, 2021, pp.76).

Life expectancy at birth has been on the rise in Palestine, reaching 74 years, an additional 6 years in within the span of 30 years. This figure, however, pales in comparison with Israeli successes, with a life expectancy of 83 years in 2020 (World Bank, 2022). Similar is the case of infant mortality rates where Israel has almost five times fewer the rates of Palestine. It is generally the case that as a

population suffers from poverty, their education, health, and life expectancy suffer, thus perpetuating a vicious cycle of poverty. Improving life expectancy in a country can go a long way in improving growth, as it has been postulated that populations with lower life expectancies have higher time preference, decreasing their savings and investments and favoring consumption. Poor nutrition and diets also reduce work effort and are detrimental to productivity and earnings at older ages. More importantly, for a country with nearly 1.79 million individuals experiencing food insecurity, 60% of whom severely so, 90% of which live in the Gaza Strip, food deprivation is a key issue that could negatively impact infants in their early years with effects lasting into adulthood limiting the potential of the country (MAS, 2022).

Figure 8: Overlay – Poverty and Share of Dependents, 2017



Source: Palestine Central Bureau of Statistics, Interactive Atlas of Poverty, 2017, *Two Indicators Map, Overlay – Poverty & Share of Dependents*.

The figure splits each indicator into 3 equal groups (low/medium/high), showing overlays and 9 interactions. There are two key overlays from the figure: localities with higher shares of poverty and lower dependents, and the opposite with high share of poor and high dependents. It appears that the Gaza Strip shows areas of

high poverty and shares of dependents, congruent with the literature. Similar are several localities in Jericho and Hebron. Interestingly, there seem to be few localities in the WB that have a high share of dependents and poverty rates.

At the current pace, the country is headed towards a lower degree of demographic burden with fewer dependents to the working age population, which is opportune for growth, development, and an increase in the standards of living, conditional upon sound human capital investments boosting the economy's productivity (MoSD, 2020). Despite it being empirically the case, that fertility rates would decline with increased female labor force participation rates, the Palestinian circumstance is one of great discrepancy between male and female participation rates, 70% and 18% respectively, making such a shift doubtful with so few female job seekers (PCBS, 2022a).

13. A Final Word

From David Ben-Gurion to Benyamin Netanyahu, demography has remained a major concern in Israel. The conquest of the Holy Land, the occupation of the whole of historical Palestine wouldn't have been possible with a declining and aging population. Hence a population policy with the help of the Jewish agency to boost the Israeli birth-rate. The success of this policy is obvious, with a Total Fertility Rate or a crude birth rate of a country of the Third War, while the GNP per capita exceeds 50 thousand USD among the highest among rich country.

Palestinian high fertility may be considered as a direct answer to Israeli one. From Yasser Arafat to Mahmoud Abbas the official line was populationist and pro-natalist. With an indisputable success, at least until the second intifada, and, despite the relatively high educational standards for both males and females and the spread of the cities.

However, since then fertility decreased in Palestine and in historical Palestine for the Palestinians in Israel, while it started to increase for the Jews in Israel to the extent that the Total Fertility Rate is now twice higher than for the Jews in the diaspora or in the more developed country. Hence one can conclude that demographic rationality or moderation has spread in Palestine at the time it has been leaving Israel.

Therefore, no matter if by now the Israeli Statistical Office predicts for 2065 a Jewish population of over 16 million, a doubling in just 40 years¹⁰. Or that in 2050 the Jews in Israel would be at par by their demographic strength with the Palestinians living in the two sides of the Green Line both in Palestine and Israel. Now the important fact is that thanks mainly to its high and increasing level of education the Palestinian population has clearly opted for demographic moderation.

¹⁰ Results of the population projections, medium variant in Central Bureau of Statistics, *Statistical Abstract of Israel*, 2021. However, these projections raise some problems, namely the "others" neither Jews nor Arabs but are added to the Jews or the numerous Israeli diasporas abroad with almost a million who are probably still classified as residents in Israel.

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Appendixes

Appendix A

Table 4: Future population of State of Palestine, different sources

Source	Years			
	2020	2030	2040	2050
New Demographic Scenarios		6,2		
<i>West Bank</i>	2,9	3,2		
<i>East Jerusalem</i>	0,2	0,2		
<i>Gaza Strip</i>	2,4	2,8		
PCBS	5,1	6,4	7,9	9,4
Palestine 2030 (medium variant)	5,4	6,9	8,3	9,5
UN Population Division (2022)	5,1	6,3	8	9
World Bank	4,8	5,7	6,5	7,3
<i>West Bank</i>	2,9	3,4	3,8	4,2
<i>Gaza Strip</i>	1,9	2,3	2,7	3,1

Sources: Youssef Courbage, *New Demographic Scenarios in the Mediterranean Region*, INED, Paris 1999.

- PCBS
- UN Population Division
- World Bank
- State of Palestine, Prime Minister Office, National Population Committee, UNFPA, *Palestine 2030-Demographic Change: Opportunities for Development, Full Report*, 2016, 275 pages.

Appendix B

**Table 6: Age and Sex Structure of the Population,
2020 (%)**

Age Group	Males	Females	Both sexes	Sex ratio
0-4	7.0	6.7	13.74	104.5
9-5	6.5	6.2	12.75	105.2
14-10	6.0	5.7	11.69	104.7
15-19	5.2	5.0	10.22	104.4
20-24	4.8	4.6	9.46	104.7
25-29	4.6	4.4	8.99	104.8
30-34	3.7	3.6	7.27	102.9
35-39	2.8	2.8	5.52	99.8
40-44	2.4	2.4	4.77	101.0
45-49	2.1	2.0	4.10	103.4
50-54	1.7	1.7	3.40	105.3
55-59	1.5	1.4	2.81	106.8
60-64	1.0	1.0	1.97	103.0
65-69	0.7	0.7	1.32	97.3
70-74	0.4	0.5	0.90	91.4
75-79	0.2	0.3	0.53	78.7
80+	0.2	0.3	0.55	62.4
Total	50.84	49.16	100	

Source: Source: PCBS, Population projections transmitted to MAS

Appendix C

**Table 7: Projection of the age and sex structure
of the population, 2050 (%)**

Age Group	Males	Females	Both sexes	Sex ratio
0-4	5.25	5.05	10.30	103.9
9-5	5.04	4.85	9.89	103.9
14-10	4.80	4.62	9.43	103.8
15-19	4.59	4.42	9.01	103.8
20-24	4.35	4.20	8.55	103.6
25-29	4.09	3.96	8.05	103.3
30-34	3.70	3.57	7.26	103.7
35-39	3.44	3.29	6.73	104.4
40-44	3.13	3.01	6.14	103.9
45-49	2.71	2.61	5.32	103.6
50-54	2.47	2.38	4.86	103.7
55-59	2.29	2.22	4.50	103.1
60-64	1.73	1.74	3.48	99.4
65-69	1.18	1.26	2.43	93.5
70-74	0.87	0.95	1.82	90.9
75-79	0.58	0.65	1.23	88.7
80+	0.46	0.53	1.00	86.5
Total	50.67	49.33	100.00	

Source: Source: PCBS, Population projections transmitted to MAS

**Forced Demographic Change: Palestinian Population
Resilience against Colonial Segregation and Displacement**

**Raja Al-Khalidi
Anmar Rafeedie**

Abstract

The population of the occupied Palestinian territories (the Gaza Strip and the West Bank, including East Jerusalem) has been affected by the suffocating impact of prolonged Israeli occupation. A settlement process had already begun within the borders of the State of Israel before 1967; expanded to form the greatest demographic challenge facing the Palestinians. It is the goal of Zionism to settle the entire land of Palestine. The paper studies the impact of colonial policies on population distribution in Palestine, by reviewing the most prominent policies across four population centers defined by the Oslo Accords. These are Areas A and B, Area C, the Gaza Strip, and East Jerusalem, where Colonial policies and practices differ in each of these areas. Additionally, this paper examines factors causing population expulsion, characterized by daily confrontations in each region. It identifies the drivers of forced demographic change and developmental weakening. In light of the importance of development as a key pillar of Palestinian resilience, the paper also focuses on the economic and social impact of colonial policies and plans, especially in terms of access to education, health, agricultural services and natural resources, as well as their quality and content. These are important factors in demographic and geographic resilience, specifically in light of the expected increase in the population of Palestine until 2030, and resultant needs. The paper also examines Palestinian procedures and pivotal issues in the resilience-building process, to clarify any existing gaps. Finally, the paper presents a set of recommendations regarding the steadfastness of Palestinians in Palestine, specifically in the most vulnerable and marginalized areas that suffer from intense population expulsion policies.

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1. The Challenge of Palestinian Demography to Encounter the Israeli

The demographics in the occupied Palestinian land (Gaza Strip and the West Bank, including East Jerusalem), before any other natural factors, has been influenced by the prolonged Israeli occupation, in continuation of a settlement process that began within the borders of the State of Israel pre-1967, and has extended to constitute the biggest demographic challenge to the Palestinians in the pursuit of the Zionist project to colonize all the land of Palestine. However, according to the perspective of the prominent Israeli demographer, Sergio Dellapergola (Sergio Dellapergola, 2010), Israel also faces a different existential dilemma in achieving its key objectives of: maintaining a democratic system, asserting the Jewish identity of the state, and retaining the maximum geographic territory of the state. It can achieve either of these higher objectives, but not all the three of them together. In other words, if Israel wants to remain a Jewish state and retain maximum territory, it cannot be democratic, and ultimately it must adopt a formula that involves compromising one of these strategic objectives.

This expert who cares for the liberal Israel goes beyond that hypotheses and adds that there is a threshold for the percentage of Arabs that can be sustained out of the total population without compromising the Jewish and democratic identity of the state (20-25%) and without sliding into a binational state model. These contradictions have been intensified during the past decade, manifested in increased settlement activity on Palestinian land, intensified Jewish immigration toward it, and the rise of exclusionary religious, racist, and anti-democratic rhetoric within the Israeli governing institution, countered by liberal forces unwilling to relinquish democracy in favor of territorial or Jewish values. This demographic debate not only concerns the future of the state of Israel and its Jewish citizens at the national level but also affects the resilient Palestinian people in the occupied territories despite this alarming situation.

Since 1967, Israel has managed to avoid resolving this dilemma regarding its relationship with the Palestinian people, especially since the delineation of the internal borders in the West Bank between its jurisdiction and the jurisdiction of the Palestinian National Authority, based on conflict management concepts that separate jurisdiction over the population from control over the land (Joel Singer). These strategies sought to confine the civil authority of the Palestinian Authority to the largest possible proportion of the Palestinian population within the smallest possible area of the West Bank territories- based on policies it developed from its experience of occupying and besieging the Gaza Strip (Darryl Li). This colonial approach resulted in the invention of "Area (A)," "Area (B)," and "Area (C)" classifications, which encompass around 90% of the occupied West Bank

population (excluding East Jerusalem) in 40% of its area, permitting 60% of its area for the housing of as many Israeli Jewish settlers as possible.

In the historical Israeli perspective, achieving demographic dominance within the 1949 armistice agreement borders did not pose a problem, as the percentage of non-Jews out of the total population remained below 20%. However, Israel's demographic control is not assured when the entire Israeli community considers the three aforementioned core Zionist objectives.

The factor that further complicates the rapid demographic transformation within the Israeli society is the continuous increase in the population, cultural, and political weight of the Haredi Jews (Eastern Orthodox), contrasted with a decline in the proportion of Israeli Jews from other ethnic backgrounds and other religious fundamentalists, as well as a decrease in immigration. All such pressures push Israel away from its secular socialist identity and the European demographic composition of the Zionist movement that founded and led the state during its first five decades. While this component represented approximately 11% of the total Jewish and Arab population of Israel in 2015, it is expected to reach 32% by 2065 (Even). Therefore, since the colonial expansion to seize the largest possible area with the fewest possible number of Palestinian inhabitants represents the most significant demographic challenge to Palestine, this colonial strategy of geo-demographic expansion, in turn, generates new-old crises within the Israeli society.

There is no doubt that the demographic conflict is ongoing and persistent, and achieving numerical demographic superiority is a necessary goal that cannot be ignored. However, numerical superiority alone is insufficient -and perhaps unnecessary- to achieve the desired development that supports Palestinian resilience in the upcoming critical years. In light of Israel's planning and construction policies, which revolve around the dual approach of preventing Palestinian development and displacing Palestinians from their land (B'Tselem, 2019), the importance of this paper lies in reviewing the path of forced demographic change in Palestine and its consequences. It seeks to provide a roadmap for the upcoming years to achieve comprehensive demographic and economic development that uses the demographic factor to create developmental practices based on structural foundations of the resilience that leads to liberation.

Accordingly, the paper examines the impact of colonial policies on population distribution in Palestine by reviewing the most prominent colonial policies in four Palestinian population-concentrated areas according to the Oslo Accords classification, namely Areas A and B, Area (C), the Gaza Strip, and East Jerusalem, due to the varied colonial policies and practices in each area. Additionally, the paper studies the factors of population displacement represented by colonial practices and daily confrontations in each area to understand the drivers of forced demographic

changes. In connection with this, the focus is on the economic and social effects resulting from colonial policies and plans, particularly the accessibility to education, healthcare, agriculture, and utilization of natural resources as well as their quality and nature, as important factors for Palestinian demographic and geographic resilience. The paper also addresses Palestinian measures related to population and the key factors in the resilience process to highlight their gaps. Finally, the paper provides a set of recommendations on the Palestinian resilience in Palestine, particularly in the most vulnerable and marginalized areas facing significant population displacement factors.

2. Spatial Demographic Change in Palestine

Demographic change, as a term, refers to the historical transformation in fertility and mortality rates from high rates of birth and death in ancient societies to low fertility and mortality rates in modern societies (Kirk, 1996). Accordingly, population policies are formulated targeting three processes: death, birth, and migration, either to reduce or increase the population according to national needs. Some countries, like Sweden and Gulf countries, adopt immigration encouragement policies to increase their population for economic development purposes. On the other hand, demographic transition models in different countries have been used to reduce population, including theories like Malthus's, which sees population growth as a barrier to development due to the depletion of natural resources. Other theories see reducing population as beneficial for protecting the ecosystem and improving quality of life by reducing the population against services provided. Based on this, modern society has expanded mechanisms to reduce fertility rates and the accompanying population increase in order to achieve development (Naser, 2021; Khamaisi, 2019). This is significant per se in the Palestinian context, where colonial control over space and resources poses a clear obstacle to Palestinian development. However, this is not the only reason for emphasis on the demographic factor. Despite the global trend of reducing fertility rates, which may contribute to Palestinian development, it is necessary to confront a replacement project that seeks to eliminate the Palestinian demographic composition and replace it with a different, even hostile, demographic component. This project has been implemented in Palestine in all its demographic components and the continuous shrinking territorial space on the two sides of the Green Line since 1948.

Natural demographic transformations in Palestine have started to clash with forced transformations since the beginning of the displacement of Palestinians, and this confrontation continues with more intense displacement operations during some periods than others (Kanaanah, 1992). As a result, the demographic map of the distribution of the Palestinian people inside and outside Palestine has substantially changed (especially in 1948, 1967, and subsequent stages). By the end of the British Mandate rule, the percentage of Palestinian inhabitants was approximately 67% of the population (Khamaisi, 2019), and by the end of 1947, there were approximately 1.25 million Palestinians living in Palestine. Dozens of thousands of them were displaced to what became known later as the West Bank and the Gaza Strip before the eve of the Nakba (Kanaanah, 1992).

By the Nakba in 1948 and the displacement of no less than 700,000 additional Palestinians, the number of Palestinians residing within the borders of Israel became 156,000 compared to 717,000 Jews (Khamaisi, 2019). As a result, about

500 Palestinian villages were destroyed, leading to approximately 800,000 Palestinian refugees in the West Bank, the Gaza Strip, and the neighboring countries (hosting the refugees), accounting for about 70% of the Palestinian population (Kanaanah, 1992; Palestinian Refugee Portal, 2020). In contrast, around 350,000 Jewish immigrants arrived during the first year and a half after the establishment of the State of Israel in May 1948. The same scenario was applied to the early 1950s, as the number of Jews continued to increase significantly and accompanied by the displacement of Palestinians from their villages, which resulted in the demolition and displacement of more than 20 additional villages and generated a new wave of Palestinian refugees (Kanaana, 1992).

In the years following the Nakba in 1948 until 1975, more than half a million additional Jews immigrated to Palestine. This, itself, was a demographic displacement factor in the Palestinian territories. However, this is not the sole reason for the rapid demographic change in Palestine as the Nakba resulted in demographic changes in the geographic space of Palestine that extended over seventy-five years, followed by the displacement of approximately 250,000 Palestinians to Jordan as a result of the June 1967 war. This has played an additional role in the forced demographic change in Palestine. Cities in the West Bank and Gaza Strip began hosting a group of refugee camps, which became a new part of their demographic formula.

Throughout chronological structures, we see that the Israeli demographic policies and the Jewish demographic concern have recently led to an increase in the number of Jews to reach parity with the number of Arabs within the historical borders of Palestine (Khamaisi, 2019). Therefore, it can be said that the demographic change in Palestine was not a result of changes in birth and death rates or natural migration, but it was the outcome of colonial displacement and replacement forces that have affected Palestine and altered its demographic composition, which is different from the prevailing definition of demographic change in other contexts.

While Israel views the demographic issue and fertility from an ideologist-nationalist-religious perspective linked to the place and geography and the feasibility of the Zionist project, the limited powers of the Palestinian Authority prevent effective linkage between the local context of demography and the broader context of the struggle against colonization. Palestinian demographic policies appear to be subject to the prevailing justifications of global development and the associated financing policies, thus it fails to consider the requirements of the demographic confrontation with Israel (Naser, 2021). Therefore, reviewing the conflicting Israeli and Palestinian perspectives on demography is essential if development is to be pursued within the context of a liberating definition of Palestinian resilience against colonization.

As of mid-2022, the number of Palestinians reached approximately 14.3 million, with 5.35 million residing in the territories of the state of Palestine according to the Palestinian Central Bureau of Statistics. Out of those, approximately 3.19 million live in the West Bank (including East Jerusalem), compared to 2.17 million live in the Gaza Strip. By the year 2030, the population in the occupied territories is expected to reach approximately 6.44 million, with 3.76 million in the West Bank and 2.68 million in the Gaza Strip (PCBS 2022a). The number of Palestinians in the territories occupied in 1948 reached 1.8 million in 2022, so the total number of Palestinians residing within the historical Palestine in 2022 is approximately 7.15 million. This balance between the Palestinian demographic composition inside Palestine and in the diaspora into 50% each, and the distribution of the Palestinian population within Palestine (i.e., one quarter inside Israel and three quarters in the occupied territories) is the result of decades of colonial practices that displaced and scattered the Palestinian people from their lands. This Palestinian balance is, of course, countered by the mentioned demographic balance (also 50% for each) between Jews and Arabs.

It is noticeable that the future growth drivers for Israelis and Palestinians differ completely. Jewish population growth is generated by historical large-scale immigration, and recently by the natural growth of the religious population (Haredim), which is spreading in an environment that the state of Israel accommodates and supports and allows it to freely expand spatially. This reality is faced by fragmented Palestinian developmental policies that are not centered around demography as a primary political development axis. These policies are subject to the laws of natural growth on the one hand and the restrictions imposed by the occupation on the other, which results in resilience as the last resort for the Palestinian demography against such a serious challenge.

The number of settlers has reached about 719,000 Jewish settlers in the West Bank (including 326,000 in East Jerusalem) according to the estimates of the Palestinian Central Bureau of Statistics (PCBS, 2022b), while other estimates are close to approximately 900,000 (ARIJ, 2022). The number of Israeli settlers is increasing at a faster pace than Palestinians in general as well as in comparison to other Israeli population segments. The accelerated Jewish population growth is particularly evident in the demographics of settlements in the West Bank, which have a growth rate of up to 5% (PCBS, 2022c), higher than the Palestinian population growth rate (which has been low in recent years). This phenomenon has become a source of concern, especially under the Israeli plans to replace the Palestinians by Jewish settlers wherever possible and reduce the ability of Palestinians to steadfast. This demographic increase and its advancement by the governing political institution in Israel raise questions about the future prospects of Palestinian development in relation to the demographic factor for achieving development that fulfills the hopes of the Palestinian people for liberation and independence.

3. Palestinian Demographic Change: Naturally and Coercively

Based on the experiences of peoples, and in the case of Palestine specifically, the colonial project primarily acts towards replacing the indigenous population with new colonizers. The indigenous population faces symbolic and physical removal by settlers (Wolfe, 2006 & 1999). There are various methods through which the ultimate goal of colonization is achieved. Some of these methods involve policy processes through enacting laws and regulations to impose changes on the ground and establish wide networks of roads connecting these settlement nuclei. Other methods to which colonial forces resort involve reducing the prospects of life in certain areas to the utmost degree by restricting Palestinian life practices, such as education, healthcare, agriculture, and imposing constraints on movement and travel, as well as tightening the issuance of building permits and imposing taxes and fines. Additionally, direct attacks on Palestinians by settlers contribute to maximizing the demographic displacement forces, and therefore these processes collectively form an attempt to empty the geographic space of its demographic component. This can be described as "spatial cleansing," which refers to the occupation and destruction of the geographic space and uprooting its inhabitants (Hanafi, 2009), which may be one of the factors leading to internal migration and leaving the space demographically empty. This can be referred to as "transfer" or "silent deportation," which indicates the use of indirect methods to induce displacement by making the lives of Palestinians difficult and pushing them towards migration (Zureik, 2003).

Rassem Khamaisi uses the term "demophobia" to describe the "fear and awe of demography" among Israeli planners, which plays a significant role in "distributing the geographic and demographic resources and sharing them in a specific geopolitical space or entity" (Khamaisi, 2019, 9). This is evident in the colonial context in Palestine. Therefore, demographic change in relation to the geography of Palestine is not a natural transformation resulting from the relationship between fertility and death rates or between rural and urban areas, but rather a product of external colonial conditions that reshape the Palestinian presence in the place. Furthermore, Kanaana (1992) indicated what he called "number and time factor" of increased Palestinian displacement in the past century, which is proportionate to the growth of settlers resulting from the displacement process. This highlights the deeply rooted element of replacement in the Zionist settlement project, which aims to reduce the number of Palestinian inhabitants and secure a larger area of land for them simultaneously. As Kanaana describes it, "cleansing" Arab villages of Arabs (Kanaana, 1992, 101), leaving behind geographic spaces devoid of their demographic component. These considerations guided the Israeli negotiator when the lines of Areas A/B/C were set to ensure the Palestinian Authority jurisdiction over the largest number of Palestinians in the smallest possible area (Singer, 1996).

Therefore, the coercive element in demographic change lies in the presence of colonial population-repelling factors that hinder the ability of Palestinians to resilience in their lands. Generally, internal migration factors are centrally linked to economic factors. Those living in rural areas or areas far from urban centers with higher economic opportunities tend to move to areas closer to economic activity. In Palestine, however, the repulsion factors are additionally related to various colonial policies and plans that diminish the Palestinians' capacity to resilience in their land. This is evident in the general trend of internal migration over the years, particularly highlighted by the density of internal migration resulting from the Nakba and subsequently from the 1967 war. For example, statistics indicate that 42.2% of Palestinians in the West Bank and Gaza Strip are refugees (Palestinian Central Bureau of Statistics, 2021a), and such a demographic composition resulted from decades of Israeli practices that displaced the Palestinian people from their land.

Here, we may recall the inherited stories about the migration of people from some villages during the Nakba, not due to the commission of massacres there, but through the spread of rumors about the massacres to push the inhabitants out of their villages, which was called "psychological warfare" (Salama, 2021; Kanaana, 1992). Again, we find that the demographic transformation that occurred in many Palestinian villages did not occur due to natural demographic change factors, but it was associated with demographics and the demographic conflict in particular. The colonial settlement expansion occurs through several stations, one of which is the illegal transfer of land from the indigenous Palestinian inhabitants to Israeli settlers, which affects the demographic composition in the space.

The colonial engineering, in its various manifestations such as streets, borders, infrastructure, and bypass roads are all colonial settlement structures aimed at gradually removing the Palestinians. As the settlement outposts (enclaves) expand to become cities surrounding and besieging neighboring Palestinian areas (exclaves), the Palestinian people become densified in a small geographic space without access to various life resources (Falah, 2005). In addition, the colonial planning has led to the emergence of "unplanned expansion operations" in semi-urban areas as a result of the Palestinians flow to these areas due to colonial policies and laws, such as Kufr Aqab in Ramallah (El-Sakka, 2015, p. 55), which have become places characterized by weak livelihood components due to their geopolitical situation.

In conclusion, it is observed that Israeli colonial planning relies on a strategic vision aimed at achieving Israeli demographic superiority in all areas of its power (within Israel, within occupied Jerusalem, and within the rest of the West Bank) "to ensure its geographical control and political dominance" (Nasser, 2021, p. 45). These plans do not recognize the 1967 borders, the separation wall, or any boundaries between

the river and the sea. On the other hand, the Palestinian policies are directed towards economic strategies that are not directly linked to demographic dimensions, and their results are summarized in limiting the rapid population growth to achieve development (Nasser, 2021). If there is any hope for Palestinian development and resilience using the demographic factor, Palestinian policies related to the population issue must be at the level of the challenge posed by the Israeli planning system, which unifies the elements of humans, place, and security in a coherent ideology, legislations, and practices.

4. Spatial Interaction between Israeli Colonial Expulsion Forces and Palestinian Demographic Resilience

Historically, colonizers have used planning as a tool to impose power, domination, and laws based on their own agendas and objectives (Zaiad and Thawaba, 2018; Sandirkok, 2004; Carson, 2007; Con, 1992 in Zaid and Thawaba, 2018). The Zionist colonial policy meets in its nature other colonial models throughout history. The occupation employs a policy that is "hostile and unsympathetic" towards Palestinians while supporting the development and service plans of settlers (Zaid and Thawaba, 2018), which have precisely the opposite effect on Palestinian communities (B'Tselem, 2019). This policy has had geographic and demographic effects on both Palestinians and Jewish settlers.

The signing of the Oslo Accords led to further division of the West Bank's lands and its demographic components, resulting in its division into three areas known as (A), (B), and (C). Areas (A) and (B) constitute approximately 40% of the West Bank's area and contain the majority of the Palestinian population. Area (A) includes all Palestinian cities, in addition to villages and refugee camps in Area (B). The Palestinian Authority has full power to administrate the affairs of individuals as well as land, internal security and public order in Area (A). However, it has partial authority in Area (B), where it only administrates public order and civil affairs, leaving internal security under Israeli control in coordination with the Palestinian Authority (Singer, 2020). Area (C) covers over 60% of the West Bank's area in which around 300,000 Palestinians live, representing approximately 11% of the West Bank's population, 80,000 of them residing in towns located entirely within Area (C). Most of Area (C) is military and settlement areas with various functions. The Israeli occupation directly controls 76% of the total area of Area (C), and the settlement regional councils dominate 63% of this area of (the 76%), while 33% of the Area (C) is closed military zones (Oxfam, 2019; B'Tselem, 2013). This means that approximately 25% of Area (C) is accessible and available for Palestinian use.

In the following sections, the demographic components and political divisions of four Palestinian regions will be presented: Area (A) and (B), Area (C), East Jerusalem, and the Gaza Strip to give a general overview of the demographic situation in relation to the spatial context, as well as the impact of varied jurisdiction in each area (between the occupying power and the Palestinian Authority) and the impact on the population and the land.

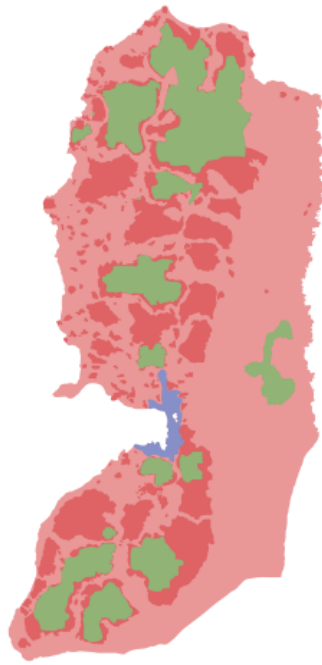


FIGURE 1
West Bank Area A (green), Area B
(dark red) and Area C (pink)

4.1 West Bank (Area A and B)

As most of the land in the West Bank is classified as Area (C), population density becomes an important issue in Areas (A) and (B), especially due to the shortage of land classified for urban purposes, such as residential buildings, public buildings, and necessary infrastructure for living. Palestinians' influx to live in Areas (A) and (B) is a result of the Israeli measures and five decades of occupation effects distorting the productive economic structure, sectoral agricultural growth, and rural development. More than 90% of Palestinians live in these two areas although they approximately cover one-third of the West Bank's area. Therefore, the spatial factor associated with the demographic factor becomes evident. The population density in these areas is primarily a result of Israeli measures related to construction and demolition, which push people away from Area (C) and consequently alter the demographic composition of this spatial domain. From a developmental perspective, in principle, Area (A), due to being under the full jurisdiction of the Palestinian Authority, its local development affairs should not be completely isolated from the occupier. However, this becomes impossible in the presence of policies of impoverishment and substitution implemented throughout Palestinian territories. Additionally, the reality that most of Area (C) constitute a buffer zone between Areas (A) and (B) and the settlement influence areas results in difficulties for urban development in these besieged areas as well.

4.2 West Bank (Area (C))

Since 1968, Israel has built predominantly urban settlement blocs in Area (C), which now includes approximately 200,000 settlers in East Jerusalem and over 600,000 in the rest of the West Bank. The years following the signing of the Declaration of Principles witnessed a two-fold rise in the number of settlements (United Nations Population Program, 2016). Until the signing of the Oslo Accords, there were 144 settlements and outposts (Peace Now, n.d.). By 2021, the number of settlements reached around 151, in which approximately 719,000 settlers live, in addition to 220 settlement outposts of some kind or another (ARIJ, 2021). Israeli sources indicate that there are 132 settlements, excluding settlements in East Jerusalem (Peace Now, n.d.).

In addition, spatial planning in the West Bank has made the lands classified as Area (C) distributed and scattered throughout the West Bank in the form of 165 "islands" (B'Tselem, 2019). Consequently, Palestinians living in this area lack geographic connectivity and rely on transportation connectivity through the road and transportation network, under Israeli sovereignty, that connects between these islands. This situation also affects their social relationships between the northern and southern parts of the West Bank. Moreover, Palestinian lands and villages are disconnected due to settlements and roads for settlers. Handel (2014) described this phenomenon as the settlements in the West Bank being a "gated community" where Palestinian villages and towns are like islands between them.

More importantly, the Area (C) lands are primarily agricultural, which could be a cornerstone for Palestinian development if Palestinians were able to utilize them. Additionally, the fact that the land is agricultural limits the possibility of construction on it, even if it is permitted.

According to the British Mandate regulations that the Israeli occupation selectively employ according to its planning needs, only one main building is allowed for every 1,000 square meters of land classified as agricultural land (B'Tselem, 2013). However, the Civil Administration does not even recognize the right to build a single building. Between 2000 and 2012, 3,750 applications for building permits were submitted, and only 5.6% of them, 211 applications, were approved. On the contrary, the Civil Administration uses the Mandate regulations to issue demolition orders for Palestinian facilities built without permits. In 2015 alone, approximately 13,000 Palestinians, mostly from marginalized families, were affected by over 11,000 demolition orders issued by Israeli authorities (Oxfam, 2019). By and large, there are 59 Palestinian communities particularly vulnerable to demolition orders (previous reference). However, the impact of Israeli planning and construction policies does not extend to settlement development, as settlements in Area (C) are

granted wide areas of land for construction and development of infrastructure and housing without consequences (B'Tselem, 2019).

Furthermore, Palestinians residing in Area (C) face various continuous life-threats for being surrounded by settlements whose residents persistently harass Palestinians in this area. The multiple attempts to empty the areas inhabited by Palestinians in Area (C) aim to make it a "land without a people" to serve settlement the expansion (B'Tselem, 2014; Stein, 2013 in Zaid and Thawaba, 2018), and these attempts are still ongoing at a very high pace. According to the United Nations Office for the Coordination of Humanitarian Affairs, many years of neglecting the needs of Palestinians in Area (C) have rendered them highly marginalized and severely exposed to coercive displacement to meet their basic needs (OCHA, 2011). In addition to the direct spatial policies of the Israeli occupation, the factors of displacing the Palestinian communities in Area (C) have also increased in terms of moving or residing in Areas (A) and (B), which clearly shows the forced demographic transformation caused by the occupation (previous reference). For example, farmers, especially youth, incur significant losses due to the practices of the occupation, such as uprooting crops, confiscating lands, killing livestock, demolishing water wells, and more, which drives them to seek work in other sectors, specifically inside Israel and in the settlements, as well as in office jobs, which pushes them to move to Palestinian cities (Harb and Lahlooh, 2017; Khalaf, 2022).

The development prospects in Area (C), as well as in the Gaza Strip, are subject to the control and dominance of the Israeli occupation (Ministry of Education and Higher Education, 2017). Despite the Palestinian government's control, according to signed agreements, over vital aspects of life such as health, education, and services, etc., the Israeli control over building plans obstructs the Palestinian government's ability to construct schools or various types of health facilities. The Palestinian government does not possess any judicial or policy powers in these areas (MAS, 2021), which directly restricts its ability to perform developmental or service roles for Palestinians in these areas. Despite the possibility of construction (in terms of land classification) on approximately 30% Area (C) lands, the restrictions imposed by the Israeli Civil Administration practically allow Palestinians to use less than 1% of this Area (B'Tselem, 2013).

There are 179 Palestinian schools located in Area (C) that experience continuous violations and attempted demolitions as well as humiliation of their teachers and students (Ministry of Education, 2017). In 2022, 10 schools received demolition notices, and one has been demolished so far (Ministry of Education, 2022). Moreover, the construction of the apartheid wall near schools in Area (C) has resulted in isolating 1,206 students behind the wall (Ministry of Education, 2022). All such practices lead to weakening the educational process in these areas. The

educational achievement in Area (C) is the lowest in the West Bank, and females face more obstacles than males in academic achievement (Oxfam, 2019). The same applies to health services, for which the Palestinian government lacks the authority to build facilities or the necessary infrastructure to provide adequate healthcare to individuals (World Health Organization, 2020). Many citizens cannot access these services, and medical teams often cannot access Area (C). There are only (11) mobile clinics in the entire area (C) (Ministry of Health, 2019) specialized in providing primary healthcare to 96 thousand people (World Health Organization, 2020). Barriers and checkpoints prevent the Palestinians from accessing to medical services or the mobile clinics, which expose their lives to continuous risks (previous reference). Additionally, 70% of residential communities in Area (C) are not connected to a water network, resulting in the per capita water consumption in these areas being one-fifth of the amount recommended by the World Health Organization (OCHA, 2014).

The impact of the Wall extends beyond the education and health sectors. The construction of the wall has led to the destruction of wide agricultural lands that are no longer used in the development process or in supporting the resilience of Palestinian farmers in Area (C). Approximately 170,000 dunams of fertile land were destroyed during the wall construction process (World Bank, 2008). Due to movement and access restrictions to the land, Palestinians currently exercise sovereignty over only one-third of agricultural resources (UNCTAD, 2015). Many farmers cannot access their lands, and therefore they cannot cultivate and benefit from these lands (Union of Agricultural Work Committees, 2019). Conversely, settlers in these areas can exploit wide areas of land for agricultural and green development purposes (B'Tselem, 2019). Similarly, the Palestinian government is unable to access or utilize natural resources that can be used in agricultural activities, which hinders local and economic development processes (MAS). The construction of the apartheid wall has also affected more than 219 Palestinian communities and isolated approximately 67,000 Palestinians between the wall and the Green Line, preventing them from safe access to their lands (PCBS, 2020a).

Bedouin population in Palestine, for example, who are characterized by their nomadic lifestyle and therefore are an exceptional case in terms of space and population, face numerous threats of demolition and are unable to access or possess various health and social services under the security and civil control of the Israeli occupation (MAS, 2021). These rural and Bedouin communities, particularly those in the Jordan Valley, suffer the most and face difficulties in accessing educational services (Oxfam, 2019).

The intensive restrictions on Area (C), particularly in terms of the ability to build developmental infrastructure such as health, education, and economic facilities, limit the Palestinians' ability in these areas to withstand the arbitrary eviction

attempts they face. This requires intensive efforts to enhance resilience in these areas based on the principles of sustainable development and resilience, rather than just addressing the immediate effects of the occupation.

4.3 The West Bank (East Jerusalem)

“East Jerusalem” was formulated as a result of the Nakba in 1948 when Jerusalem was divided into three areas: the western part under the Israeli occupation, which constitutes 84% of the total area of the city of Jerusalem; the eastern part under Jordanian jurisdiction, which constitutes 11.48%; and buffer zones under the administration of the United Nations, which constitutes approximately 4.4% of the total area (Tafakji, 1997). The destruction inflicted by Israeli occupation on the infrastructure and housing of the occupied part of Jerusalem in 1948 led to a clear coercive demographic change in the city. This destruction compelled the population to migrate away from the areas that became uninhabitable to other areas in the West Bank, but most of the population have migrated to East Jerusalem (Palestinian Central Bureau of Statistics, 2021a). This included the displacement of around 20,000 Palestinians from West Jerusalem without allowing them to return, categorizing them as "absentees" (NAD, 2022), which has affected the demographic composition of West Jerusalem and fundamentally changed it through the settlement of hundreds of thousands of Jews in its old Arab neighborhoods and other confiscated areas surrounding the city.

A separate paper addresses in detail the various elements that contribute to the demographic transformation in Jerusalem. However, in the context of the coercive displacement, it is useful to focus on the identity incentive for Jerusalemites, which entails a connection to the land and the holy city, motivating individuals to stay in East Jerusalem and strengthen their resilience, particularly in the Old City (Glass & Khamaisi, 2005; Marie et al., 2018). However, in general, migration to the Old City is driven by "weaker" motives compared to those that encourage migration outside the city (Glass & Khamaisi, 2005). Israel employs a range of discriminatory measures to make life difficult for Palestinian residents, including identity-related procedures, residency rights, building restrictions, tax imposition, geographic and social isolation, and unleashing extremist Jewish religious groups to organize protests and violent disturbances. Demographically, Israel seeks to revoke the residency of Palestinians in East Jerusalem in an attempt to drive them out of the city, which reshapes the demographic special status of Jerusalem. In contrast, Jews living in violation of international law enjoy their full rights as citizens in the state of Israel (NAD, 2022).

This contradicts the Israeli promotion of Jerusalem as a "mixed" city, of Palestinians and Jews who constitute a diverse and integrated community (Yacobi and Katz, 2021). The Palestinians living in Jerusalem also suffer from restrictions

on construction and renovation. Israeli authorities prevent Palestinians from renovating their homes under the pretext of "municipal laws" and hinder the process through requesting permits that are usually denied (Glass & Khamaisi, 2005). While the estimated available housing space per capita in Arab neighborhoods is 11 square meters, it reaches up to 20 square meters per capita in Jewish neighborhoods (Khamaisi, 2013).

It should be noted that at least 30% of the Jerusalemites living in Jerusalem have changed their place of residence since the construction of the separation wall (Sabella, 2007). The policy of the "security wall" around Jerusalem has encouraged population movement, leading thousands of Jerusalemites living outside East Jerusalem to return and live within the boundaries of the Israeli municipal jurisdiction of Jerusalem due to fear of losing the economic and social benefits attached to the Israeli identity card (Glass & Khamaisi, 2005). Meanwhile, many Jerusalemites have fled Israeli measures to neighboring towns (which fall within the occupation municipality's jurisdiction but outside the separation wall) to preserve their Jerusalemite identity, such as the village of Kufr Aqab. The massive influx of Jerusalemites to Kufr Aqab has reshaped its demographic composition, increasing population density and housing. The colonial division has placed Kufr Aqab within the urban space of Ramallah, although it is considered part of the Jerusalem suburbs. Its approximately 80,000 residents suffer from a lack of central healthcare services, which exposes them to various health problems (El-Sakka, 2015).

Conversely, Sabella points out that thousands of Palestinians holding Jerusalemite identity have returned to Jerusalem due to the construction of the separation wall. However, the existing geographic connection of Jerusalemite residents in the West Bank to East Jerusalem remains in terms of accessing healthcare, education, and social services, and sometimes working in the city. Many students living in East Jerusalem continue their education at universities in the West Bank outside the separation wall and shop at commercial markets there due to lower prices compared to East Jerusalem markets (Sabella, 2007). Thus, the impact of colonial policies on the demographic change in Jerusalem and its relationship to the spatial context is quite evident.

4.4 Gaza Strip

When discussing dual-demography and place, the Gaza Strip represents an extreme case that reflects the clear impacts of forced changes on demography and the impact of forced population density in a limited spatial area on all walks of daily life. The natural demographic transformation, as defined at the beginning of the paper, refers to the historical transformation in fertility and mortality rates. Conversely, coercive transformation necessarily refers to unnatural factors that affect fertility and

mortality rates. Fertility rates in Gaza remain high at an average of 3.9 births (Wafa, 2020). However, repeated aggression on the Gaza Strip has led to changes in mortality rates that go beyond natural causes and are related to cases of martyrdom. Additionally, migration to and from the Gaza Strip due to occupation over the years has been an additional factor of forced demographic change in the Gaza Strip.

Palestinians who were displaced from their cities and villages in 1948 migrated to other cities in what is now known as the West Bank as well as to Gaza City. Approximately 300,000 Palestinians migrated to Gaza, which represents about a third of the total number of refugees in a small spatial area (Palestinian Department of Labor and Planning, no date), which resulted in a clear change in the previous geographic composition of Gaza. By 1961, approximately 17% of the total refugee population was living in the Gaza "Strip" (previous reference), and thus a new demographic cluster emerged in addition to the city and village, namely the refugee camp. In 1967, Israel controlled over the Gaza Strip, and the occupation confiscated Palestinian lands on which it built settlements, including the settlements of Eretz and Nesani. However, all settlements in the Gaza Strip were evacuated in 2005, leaving the only demographic composition in the Gaza Strip as Palestinian. However, the lands that were confiscated during that period and returned to Palestinian control are still prohibited to Palestinian farmers and are therefore not utilized for any productive projects in the Gaza Strip (Palestinian Ministry of Agriculture, 2017), rendering them devoid of population components.

Signing the Oslo Accords was accompanied by the return of many refugees from neighboring countries to Palestine in the years following the agreement. Hundreds of thousands of refugees returned to the West Bank and the Gaza Strip (Hilal, 2007). The period after the signing of the agreement in 1993 witnessed a high influx of returnees to the Gaza Strip (previous reference), resulting in an additional demographic transition in the Gaza Strip.

Currently, 2.2 million Palestinians live in the Gaza Strip in a small area of approximately 365 square kilometers only, with a population density of 5,936 individuals per square kilometer, making it the highest population density in the developing world (Palestinian Central Bureau of Statistics, 2023). Refugees constitute 66% of the total population of the Gaza Strip and reside in eight camps (previous reference; UNRWA, 2017). It is worth noting that the possibility of leaving the Gaza Strip is almost nonexistent for these two million people. The Israeli occupation besieges the Gaza Strip from all directions, and Palestinians have extremely limited access to the sea (Veronese et al., 2021). Across this "open-air prison," all aspects of life for the residents of the Gaza Strip are blockaded. However, control is not limited to the border strip; the occupation controls

approximately 24% of the total area of the Gaza Strip (Palestinian Central Bureau of Statistics, 2021).

The central factor in the forced demographic change in the Gaza Strip is the repeated aggression on the Strip. Since the Israeli withdrawal from the Gaza Strip in 2005, the Gaza Strip has been exposed to five major aggressions, resulting in over 100,000 internal displaced persons within the Gaza Strip and a similar number without shelter. The latest aggression of 2021 led to the displacement of over 74,000 Palestinians from their homes due to shelling and house demolitions, leaving more than 7,000 housing units destroyed (Al-Mizan Center for Human Rights, Palestinian Center for Human Rights, and Al-Haq, 2022; Independent Commission for Human Rights, 2021). According to a report by the United Nations Development Program (UNDP) (2016), the successive wars have caused massive destruction to various aspects of industrial, agricultural, health, and educational infrastructure. Goods and movement ban also prevents the authorities in Gaza from providing essential and emergency services (UN-OCHA, 2017, in Al-Kahalout, 2018).

As the occupation affected all walks of life in the three different areas, it has also affected the Gaza Strip but differently depending on the context. Central policies in Gaza that are related to blockade, closure, and aggression have resulted in a state of systematic de-development, particularly in the economic field, which hinders Gaza's ability to overcome shocks and achieve development, due to years of colonial dominance, 14 years of siege, and repeated attacks that have caused long-term structural distortions in a fundamentally weak infrastructure and have made the economy dependent on the occupation (Roy, 1995, 1999, 2016; Nashif, 2022). The variations in the central demographic indicators related to poverty, unemployment, and food security in Gaza are very low compared to the West Bank and East Jerusalem (Bellisari, 1994; Barakat, Milton, and Elkhalout, 2019). In 2021, the unemployment rate in the Gaza Strip reached 46.9%, so we can conclude that population growth and demographic changes in Gaza occur simultaneously with a clear decline in the economic situation, which will have more serious future consequences if not addressed promptly. However, at the social level, the widespread of poverty and its high rates have resulted in high societal solidarity rates among Palestinians in the Gaza Strip as 73% of Gaza's population participate in solidarity activities, mainly economic solidarity (Hilal & Al-Malki, 2006).

Gaza has also faced numerous economic crises due to limited access to work opportunities under occupation, which has not been accompanied by any economic or coastal labor market growth due to continuous attacks by the occupation (Al-Kahlout, 2018). Maritime colonial policies impose significant restrictions on maritime economic activity, preventing fishermen from accessing and entering the sea, which is a fundamental reason for the decline in Gaza's fishing sector

(B'Tselem, 2018). The same applies to the agricultural sector as the Israeli policies of land confiscation and water control have led to a decline in the agricultural sector's contribution to Gaza's GDP from 28.1% to 8.3% (Ministry of Education, 2017). The water allowed for agricultural purposes does not exceed 90 million cubic meters annually (Union of Agricultural Work Committees, 2019).

Demographically, the repercussions of growth are crucial in the context of Gaza. The massive increase in population exacerbates pressure on already scarce material resources (Roy, 1995). This has been further aggravated by the increasing pace of migration during that period (Hilal, 2007). This may be an indicator of future trends in fertility and mortality rates. Even if they continue to decline, it does not necessarily mean the avoidance of an impending catastrophe due to limited resources, services, and available facilities that cannot accommodate such a large population due to such restrictions.

The Israeli occupation has had negative and sometimes deadly effects on the educational process in the Gaza Strip. The blockade plays a role in the scarcity of educational resources in schools and universities, such as books and stationery. Additionally, the electricity cuts in the Gaza Strip caused by the siege serve as an additional factor obstructing the educational process. Electricity is cut off for 8-16 hours a day, which imposes psychological and health burdens on students during their study time. Blockading the Gaza Strip from the outside world isolates students in Gaza from the academic environment outside Gaza, including studying at West Bank universities or traveling when obtaining educational scholarships (Afouna, 2014). In addition, educational facilities are exposed to bombardment during wars, resulting in material and human losses. The loss at three faculties at the Islamic University in Gaza after one of the attacks amounted to approximately \$55 million, and 407 students were martyred during the 2014 aggression. The more dangerous is that the state of developmental impoverishment created by the occupation often prevents the authorities from rebuilding what was destroyed during the aggression. The cost of rebuilding Al-Aqsa University in Gaza alone is estimated at over one billion dollars (Al-Mighari, 2009). In addition, there are Israeli restrictions imposed on the entry of construction materials to rebuild and renovate schools and universities (Ministry of Education and Higher Education, 2017). In general, the state of developmental impoverishment which the Gaza Strip experienced has created a reconstruction situation that, in the best-case scenario, will not be able to keep pace with the ongoing effects of the continuous siege and its economic, social, and political ramifications (Barakat, Milton, and Al-Kahlout, 2019). However, partial reconstruction is still possible (previous reference), so it is necessary to review ways the Gaza Strip development utilizing the available resources to enhance the resilience of Palestinians in the Gaza Strip, in order to prevent the current demographic transformation from becoming an obstacle to Palestinian development, exacerbating crises such as the density and pressure on resources.

5. Demographic Expectations until 2030 and the Required Palestinian Response¹

Population growth in Palestine still characterized by positive but declining rates, and it is expected to remain unchanged over the upcoming years. According to the population census of 2017, the number of Palestinians in the occupied territories is expected to reach 6.44 million by 2030. Despite the wide area of the West Bank compared to the Gaza Strip, the expected population in both areas is close; 3.76 million in the West Bank and 2.68 million in the Gaza Strip. Demographic projections indicate that the Palestinian society will remain youthful, with the number of youth reaching 3.30 million in 2030, which can serve as an important driver for development if effectively utilized. However, the demographic characteristic of the youthful Palestinian society has not yet been reflected in the labor market as this youth group suffers from higher unemployment rates than other demographic groups, particularly in the marginalized areas such as the Gaza Strip, where youth unemployment rates for intermediate diploma holders reach 74% (PCBS, 2022d).

Given the narrow area in which people live in the Gaza Strip, along with the ongoing restrictions imposed by Israeli occupation, if the situation remains the same until 2030, it is expected that this open-air prison will face unsustainable population, urban, and transportation congestion. The same applies to Area (C), which is subject to confiscation and repeated evacuation attempts over the years. Despite its vast areas that provide developmental opportunities, it serves as a natural geographic safety valve in the face of forced demographic transformation. The ultimate goal of enhancing resilience on the ground to achieve Palestinian development cannot be achieved without considering these expectations and working to improve Palestinian performance to confront the challenges of forced demographic changes and mitigate their destructive effects on Palestinian society and its development prospects.

On the other hand, Israeli demographer Arnon Sofer warns that the year 2022 witnessed that for the first time since 1948 Arab population superiority between the river and the sea: according to his figures it reached 7.53 million Arabs (including Syrians in the occupied Golan Heights) compared to 7.45 million Israelis (including non-Jewish and non-Arab Israelis estimated at 495,000). From his Zionist perspective, this situation represents a danger as the majority of Israelis do not realize that they are becoming a ruling minority, which poses a threat to the Israeli democracy. In response to the Arab population increase, he asks, "Where will we

¹ All the expectations in this section are based on calculations by the Palestinian Central Bureau of Statistics (PCBS) based on data from the Population, Housing and Facilities Census, 2017.

sit? Where will we stand?" (Times of Israel, 30/08/22). This concern has two important implications for the future of the Palestinian population. First, it encourages Jewish natural growth and global Jewish immigration to Palestine, which requires a settlement expansion that targets land and resources. Second, it provides a Palestinian opportunity to increase population pressure on the "ruling Israeli minority" by encouraging and nurturing natural growth, which is contingent on targeting investment in resources, social services, and economic empowerment that citizens are entitled to enjoy, as well as supporting small and big family size. Thus, this is the appropriate Palestinian strategic approach to deal with the forced demographic changes in the long term.

On the other hand, Palestinian strategies for integrating the issue of forced demographic transformation into development planning, and for transitioning to the common defensive stance embodied in the concept of resilience, which means staying in the place, are still begin developed. With the formation of the National Population Committee and the convening of the Palestinian Population Conference, Palestinian policy effort can begin in linking demography to various sectors and dimensions of development. The Palestinian government, through its bodies and ministries, is organizing Palestinian life affairs and serving the Palestinian individual and society, especially in four vital sectors: education, health, agriculture, and the economy. These entire sectors are affected by the pressures of forced demographic changes, and they can also serve as fields for demographic policy actions that not only promote resilience and development opportunities but can also form important physical structures to counteract the trends of forced demographic transformations.

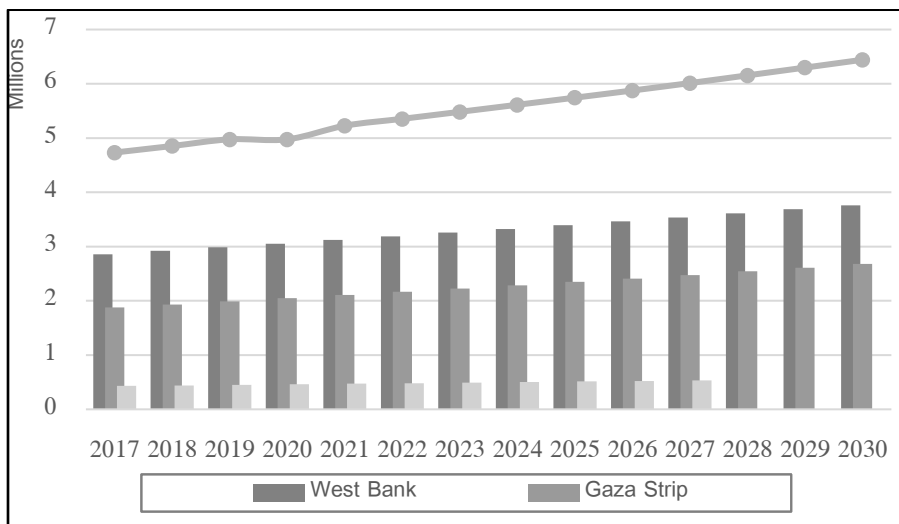
Government plans related to population transformations centrally rely on human development practices that assume a number of social and economic goals that do not necessarily favor population growth, but rather aim to reduce it. These practices include the importance of providing opportunities for women's participation in the labor market, the need for coherent family planning policies aligned with the financial capabilities of families (especially the poor ones), and achieving a concept of economic welfare that implies a decrease in family size from one generation to another, as well as other aspects of urban and modern life (Naser, 2021). Consequently, such policies naturally contribute to reducing the pace of population growth in line with the requirements of modern developmental policies that implicitly involve reducing the rate of population growth.

This approach represents a kind of compensation for the difficulty of aligning development plans with the structural population changes in the Palestinian context, which weaken the foundations of the development process, or what can be called "developmental impoverishment." However, despite the natural trends to reduce the rate of natural population growth, the expected population increase will

intensify the current pressure on resources as well as service inclusiveness and quality, and opportunities in the labor market. Given the impossibility of enhancing Palestinian population growth through incoming human immigration, as allowed for the other side, the challenge, and the need to reconsider the available means to directly address the structural components threatening the Palestinian development bases, especially the threat of Israeli/Jewish demographic superiority, becomes more significant.

At the same time, efforts are concerted forward in various sectors to mitigate the negative impacts that may arise from the expected population increase. This dual challenge requires a dual response in terms of advancing programs and policies that invest in human capital and socio-economic well-being on one hand, without abandoning programs that facilitate and enhance healthy population growth and human settlement expansion beyond the current urban boundaries on the other hand, to create opportunities for natural population growth in a natural, free, and sustainable environment.

The estimated number of population 2017-2030 in Palestine and based on the district



Source: Palestinian Central Bureau of Statistics, 2022. Estimates based on the Final Results of the General Population, Housing, and Facilities Census, 2017. Ramallah, Palestine.

5.1 Jerusalem: Increasing Service and Housing Needs in a Hostile Environment

The Palestinian population is expected to increase to about 534,000 in the Jerusalem governorate, including approximately 344,000 inside the wall of East Jerusalem. As for the Gaza Strip, projections indicate a population increase at a higher rate

than the West Bank, reaching 2.68 million people by 2030, which will inevitably place an additional burden on the limited resources in these two areas. Currently, Jerusalem suffers from a crisis in both educational and healthcare facilities, and there is a shortage of schools due to restrictions on construction and repeated attempted demolitions (Nuseibeh & Ahmad, 2013; Ministry of Education and Higher Education, 2017). This crisis is expected to continue as population growth will lead to an increase in the number of students (Courbage et al., 2016). The number of students in the West Bank, including East Jerusalem, is also expected to reach one and a half million, which means that there is an urgent need to increase the number of schools in both the West Bank and East Jerusalem to accommodate the expected increase. In 2021, government spending on the education sector was estimated at around \$850 million, with only about 7% allocated to development expenses (Ministry of Finance, 2021). Specifically, in areas experiencing overcrowding due to population growth and restrictions on construction, such as Jerusalem, the budget allocated for education can be reassessed to improve the quality of education for future students.

5.2 Poverty, Youth and Women Unemployment

Data of 2011 up to the population census of 2017 indicated that poverty rates continue to rise over the years in both the West Bank and the Gaza Strip, with a clear increase in the Gaza Strip. The population increase is likely to lead to further poverty if employment opportunities in the Palestinian market remain limited, particularly in the Gaza Strip. Indicators for 2030 expect an increase in the working-age population to 61%, compared to 58% in 2015. This is a double-edged sword, as this increase is important for increasing the production by productive forces and thus increasing the economic development. However, it requires additional efforts from the government to provide incentives and regional planning aimed at creating decent job opportunities in areas outside the cities and near population centers, as well as mobilizing international support to overcome the obstacles imposed by the occupation on Palestinian rights in these areas.

The unemployment rates have been generally increasing in recent years and reached 26.6% in 2021. If the situation remains unchanged, it is expected that we will have approximately 485,000 unemployed individuals by 2030 in the absence of radical changes in the conditions surrounding the labor market. However, if male unemployment rate is reduced to 10% and female unemployment rate is reduced to 20%, the number of unemployed individuals in 2030 is expected to decrease to 259,000. Therefore, there is a need to create more job opportunities for both genders, particularly in vital sectors of development such as agriculture, to promote their sustainable growth and provide employment opportunities therein as well as the sectors that are expected to remain of lowest employment in 2023 such as telecommunications and agriculture sectors. This requires a change in government

spending policies to align with the development needs of sectors like agriculture and economy to achieve desired resilience goals. In this context, the allocated budget for the agricultural sector reached only \$65.6 million in 2021, with only about one-third (34%) spent on development expenses, despite its increase by 115% compared to previous years (AMAN, 2022).

Unemployment particularly affects the youth, who constitute the largest percentage of the Palestinian society, with a labor force participation rate of 59% among youth aged 19-29 (PCBS, 2020b). The gap is evident at the national level as unemployment rates among young graduates reach 28.6% in the West Bank and 73.9% in the Gaza Strip. This situation requires special attention when developing employment, development, and resilience policies at the national level to reduce youth emigration in both areas. Women also suffer from the unemployment, with a double female unemployment rate compared to males (40% versus 20%). In terms of the intersection of youth and female unemployment, women of the youth category (aged 19-29) holding at least an intermediate diploma or higher have an unemployment rate of 61.3%. Moreover, women have significantly lower participation rates in labor market (18.6%) compared to men participation that amounts to (70.7%) (PCBS, 2022d). Therefore, there is an urgent need for policies that not only address the persistent unemployment among women and youth but also promote women's participation in the labor market.

5.3 Palestinian Development Policies and Community Health

Economic development policies are usually made within partial economic development framework, without addressing the obstacles of access to resources, especially for women (Kuttab, 1995). However, more importantly, there is a need for emancipatory policies from occupation regarding the economy and the development of production and business sectors to encourage Palestinian workforce and skilled individuals to work in the Palestinian market instead of settlements and the Israeli labor market. Partial livelihood solutions do not benefit the long-term resilience capacity of communities, which exacerbates the developmental crisis (Weinthal and Sowers, 2019). In this context, the public expenditure on the economic sector in 2021 amounted to only \$300 million (Ministry of Finance, 2021), which may not be sufficient to accommodate the expected growth in the labor force in Palestine expected for the next decade, which is projected to reach 61%, along with the potential growth in the workforce willing to work in settlements.

Currently, in line with the adopted development goals, the focus of the health sector- in addition to improving primary care and health services- is directed towards reproductive health, to alleviate the pressure on healthcare resources and family financial capacities. Despite the notable improvement in healthcare services

mentioned earlier, the weakness in the Palestinian health sector goes beyond birth and death rates merely, due to the restrictions imposed by the occupation. This issue may not be addressed adequately within the allocated health sector budget, which accounted for only 12.3% of the 2021 budget (AMAN, 2022).

Moreover, 1.59% of the population still relies on water sources managed safely (PCBS, c2020). The majority of mobile clinics and healthcare providers in Area (C) are affiliated with non-governmental organizations (World Health Organization, 2020), despite the fact that the Ministry of Health is the main provider of primary healthcare in the West Bank and therefore, the Ministry of Health is required to activate its work in Area (C). Hence, attention must be given to the challenges resulting from the commitment to typically achieve sustainable development goals, without addressing the root causes of developmental issues or the associated population challenges and the accompanying demographic challenge in the conflict with Israeli settlements (Naser, 2021). International development policies often do not aim to address or confront structural changes so that they overlook the local dimensions for development (Kuttab, 1995).

5.4 The population in Area (C) is the Spearhead against Demographic Transformation

In the past, the policies implemented by the Palestinian government did not address Area (C) in detail but were formulated in a more comprehensive manner, focusing primarily on some policies related to the Gaza Strip and East Jerusalem. The Palestinian Ministry of Planning has developed a development framework in 2014 to coordinate Palestinian policies and interventions of partners in Area (C), but it was not approved at that time. Recently, the eighteenth government showed more interest in the specificity of Area (C), despite the limited Palestinian powers in these areas (Shbeita, 2018). However, these areas still suffer from developmental and livelihood marginalization. Given the specificity of the four areas discussed earlier, newly created development clusters should be nurtured to be more competent to encourage economic and developmental activities in the most marginalized areas, such as Area (C), East Jerusalem, and the Gaza Strip with further financial resources to be allocated to enhance the resilience and development of these areas based on their immediate needs, rather than relying on foreign funding requirements, and without attributing the demographic development to pure economic development aspect.

In principle, the 2014-2016 Development Plan and the 2017-2022 National Policy Agenda were supposed to formulate "a new phase of governmental attention to Area (C) and East Jerusalem" (Omar, 2019). However, statistics and reports indicate that these areas remain highly marginalized with limited developmental opportunities, and their inhabitants suffer from a lack of various services and

persistent attempts to displace residents from their homes and lands through various means and continuous demolition of their facilities. This is the case despite the allocation of funds specifically for service development and infrastructure in Area (C) (Prime Minister's Office, 2019). Naser (2021, 63) suggests that the developmental issue has become a "purely technical process devoid of political dimensions" due to financing policies and agreements. This brings us back to the Arnon Sofer's vision and the necessary Palestinian position towards such a reality, which means that the biggest developmental obstacle facing these fragmented Palestinian areas is their failure to be framed within the appropriate political context of the Palestinian-Israeli geo-demographic conflict.

6. Summary: Adopting a Palestinian Doctrine of "Maximum population in the Widest Possible Areas"

Regardless of their location, young male and female Palestinians today do not have a clear or certain prospect regarding the conditions that may determine their career, family, or geographical future. This challenging situation is not primarily due to defect in the national or institutional development planning, or the limited sovereign authority, no matter how important these factors are among the factors obstructing development. The lack of development, employment, and decent living prospects for a young person in Gaza, a woman in the Jordan Valley, or a new graduate in Jerusalem is a result of the coercive choices created by Israeli policies. This is evident through the pressure exerted on the entire Gaza Strip as well as the cleansing of large areas in Area (C) or the restriction of their expansion, and not leaving any option for a new job seeker in Jerusalem other than forced integration into the Israeli labor market.

Therefore, without directly addressing settlement projects (especially in those three areas that constitute the majority of the occupied Palestinian land) and mobilizing Palestinian efforts and international support to confront those hostile policies, Palestinian resilience alone will not be sufficient to halt the deterioration in the Palestinian demographic landscape. At the same time, it should not turn a blind eye that the decline in the growth rate or the decrease in fertility is a global trend not only related to the Palestinian people due to the occupation or the risks of the Israeli settlement project. The Palestinian citizens also have the right to aspire to a better life and not just be subject to decisions aimed at increasing fertility and population growth independently of their capabilities, requirements, or societal awareness, as part of the natural historical development of humanity and demographic transformations.

The Zionist ideology revolves around the demographic concern, as the first slogan raised by the movement was "a land without a people for a people without a land." Through such a slogan, population and territorial issues were central to their quest to build the Jewish state, making our conflict with the occupation an existential and demographic matter, just as it is for the other side. In recent years, the occupation has succeeded in balancing the demographic scale in the historical Palestine. However, the data indicates that with the expected increase in the Palestinian population surpassing the Israeli population in the coming years, the occupation enforces coercive displacement policies (in Jerusalem, Gaza, and Area (C)), which fuel demographic imbalances and contribute to the evacuation of Palestinians from their land. At the same time, the data also shows that Jewish immigration remains intensified, and the growth rate of Haredi/Eastern Jews is higher than the Palestinian growth rate throughout Palestine. Therefore, it is imperative to make

diligent efforts to enhance the resilience of Palestinians in their land, encourage investment, improve infrastructure development and services, build cities and residential clusters in areas threatened by Judaization, especially those that provide decent housing for people of middle and limited incomes.

The review of the impact of colonial measures on Palestinian resilience in the previous sections shows a direct link between Palestinian displacement and these measures, particularly in areas such as the Gaza Strip, East Jerusalem, and Area (C). Since the occupation's displacement factors work on coercive demographic transformations in the spatial domain, the appropriate and natural response is to enhance local economic development and public services in the most threatened areas. This will reduce the displacement factors and necessarily reinforce the resilience of Palestinians in those areas. Currently, development attempts have not achieved the desired impact in enhancing Palestinian resilience, and Israeli measures continue to outweigh Palestinian efforts in repairing the damage caused by these measures, which requires a reassessment of action programs and mechanisms of the Palestinian government on development and resilience.

The concept of resilience has generated numerous study literature that blend its various meanings and contexts. New interpretive terms have been added, such as "resilient resistance" or "emancipatory/responsive resilience" and recently it was called "transformative resilience" or it has been introduced in the context of promoting infrastructure projects supported by international donor institutions. The latter formula could seem more "practical" as transformation intends to mean a potentially better life, job opportunities, services and individual freedoms. However, there is no prospect in this narrow concept of any transformation in the structural problem represented by the occupation, denial of sovereignty and societal flourishing. This form of resilience does not appear to bring the Palestinian people closer to their national goal of independence.

According to Rassem Khamaisi, the model of resistant planning can precisely stem from this point (Khamaisi, 2020). Within the framework of resistant planning, a challenging model can be developed that defies the occupation's structure and surpasses it through disassociating Palestinian development and planning efforts to the "post-liberation" trajectory. Instead, it starts with the idea of initiating planning, adoption, approval, and work on structural plans in parallel with confronting and attempting to counteract the occupation through what may be called "alternative planning," particularly in Area (C).

Therefore, confronting forced demographic transformation is not just about providing services and employment opportunities in densely populated areas. It requires adopting a doctrine of "maximum population in the widest possible areas." This translates into encouraging horizontal urban expansion wherever possible in

Areas (B) and (C), within a strategy of creating new demographic realities on the outskirts in parallel with areas of colonial expansion, empowers the livelihood, service and employment resilience for the residents of those areas. This is included within the framework of alternative planning proposed by Khamaisi in an attempt to regain control over the spatial domain threatened by population deportation (Khamaisi, 2020). Of course, this requires comprehensive spatial studies to determine the directions of urban and rural expansion and the possibility of establishing new urban centers linked to industrial and agricultural areas that serve the population in the area. It is worth mentioning in this context that it is necessary to reconsider the approach to regional and local development planning as an advanced step in the administrative and planning organization of the State of Palestine, which responds to the reality of geographic dispersion resulting from settlement expansion and its interconnected networks (MAS, 2019).

Demographic orientations in development strategies in Palestine are made as if they were derived directly from the sustainable development goals. This is particularly evident in setting the objectives that involve reducing fertility as a means of achieving development under challenging conditions (Naser, 2021). The developmental dimensions in national plans and policies focus on localized multi problem-solving without addressing the major political dimensions leading to weak Palestinian development. Researchers argue that development reliant on external financing does not align with the requirements of sustainable development in Palestine, especially in the presence of an occupation that impoverishes the region developmentally for the sake of its expansionist project (Naser, 2021; Kuttab, 1995).

This requires placing demography as a central focus in Palestinian sectoral strategies (as done in several specialized attached papers) and not treating it as a separate issue in other sectoral strategies. This methodological approach allows for a deeper understanding of the demographic issue and the formulation of solutions that align with the challenges presented.

Accordingly, it is important to focus on the specificities of each of the four areas as a starting point for shaping future development plans and strategies, accompanied by policies that promote economic independence and disengagement from the Israeli economy and labor market. This can be achieved by directing attention towards developing productive sectors such as agriculture, which play a dual role in both development and resilience. Regarding the relationship between the demographic issue and local development and resilience, it is supposed to be addressed primarily within sectoral strategies. This is per se will create strategies that directly contribute to enhancing the demographic factor instead of dealing with the demographic challenge in isolation from local development processes.

Among the urgent steps that should be emphasized in the coming years to maximize the opportunities of resisting the forced demographic transformation are the following:

- Facilitating access to education and healthcare services for the residents of Jerusalem, specifically those residing in “grey” areas (such as Kufr 'Aqab and Anata), to enhance their residence and provide nearby clinics for each neighborhood cluster.
- Encouraging investment in Area (C), particularly in agriculture and industry, to play a dual role in preserving the land and providing employment opportunities for Palestinians residing in these areas.
- Developing and supporting public and private investments in vertical construction projects in areas with limited Palestinian sovereignty, such as Area (C), especially for low-income individuals.
- Mobilize and coordinate the support of the international community, donor countries, and international organizations working in the most marginalized areas threatened by forced demographic change, particularly Area C, East Jerusalem, and the Gaza Strip, and the continuous demand for the implementation of international regulations regarding the right of return for refugees to their homeland.
- The social, economic and cultural networking between Palestinians on both sides of the Green Line and with Palestinian communities abroad, to maximize the projected demographic dividend of 14 million Palestinians.
- Reviewing the allocated expenditure in the public budget of the Palestinian government to provide the minimum resources necessary to proceed in achieving sustainable development and resilience goals, especially in areas exposed to confiscation and Judaization. This includes:
 - Increasing the budget of the Ministry of Agriculture to support agricultural projects and plans for farmers in Area (C), and Gaza, to preserve land, provide employment opportunities, and boost local production.
 - Allocating part of the Ministry of Health's budget to increase the number of mobile clinics, specifically in Area (C), Jerusalem, and areas like Kufr 'Aqab and Anata.
 - Reviewing the budget of the Ministry of National Economy to allocate a larger portion for encouraging and developing projects that employ new graduates and target vulnerable groups such as youth and women, particularly in Area (C), the West Bank, and the Gaza Strip, to reduce unemployment, emigration, and Palestinian workforce to the occupation.
 - Creating job opportunities based on market needs to develop the local economy and achieve economic disengagement from the Israeli market, thereby enhancing Palestinian resilience.

- Increasing the percentage of development expenditures in the Ministry of Education to develop an educational curriculum that aligns with the labor market requirements in order to ensure the employment of the expected large number of graduates in the coming years, reduce unemployment, and achieve sustainable development within the context of Palestinian resilience.
- Building schools in most vulnerable areas to forced displacement, such as Area (C) and East Jerusalem.

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**The Politics of Space in the Demographic
Race Over Jerusalem**

Nahed Habiballah

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Abstract

Demography and space have always been at the heart of the Palestinian Israeli conflict, and remain central to the politics of Jerusalem and its potential for future development. The Israeli occupation of East Jerusalem (EJ) in 1967 resulted in the Israeli control of the old city of Jerusalem and a large bulk of the Jerusalem hinterland in the West Bank (WB). This resulted in the opening of new 'frontiers' for Jewish settler colonial expansion beyond the previous borders of the Green Line and infringe on the Palestinian lived space of East Jerusalem and the West Bank. This paper explores the politics of demography and space under a settler colonial regime. It investigates the different modalities adopted by the state of Israel to maintain a Jewish majority in East Jerusalem and their effects on Palestinian citizens of the city and their prospects for remaining in the city while living a quality life .

The paper starts by a brief history of the city of Jerusalem, building on theories of citizenship and politics of space within a settler colonial context. It explores the different methods of demographic manipulation which have contributed to transforming the Palestinian population of the city from a majority to a minority. It also explores the effects of colonial policies on the lives of Palestinians in Jerusalem, as well as several key pillars for development, especially cultural heritage and economy of the city. The paper concludes noting the somber reality that Israel will utilize all its power to maintain the objective of a Jewish demographic majority in both eastern and western Jerusalem. Nevertheless, the paper presents tactics that can be developed by the Palestinian community and its leadership for the empowerment of the Palestinian residents to transform its demographic dividend to a developmental one for East Jerusalem.

1. Introduction

What would a demographic reading of Jerusalem look like? answering such a question may not be as easy or straightforward as it may sound.

Demography is concerned with human population. It quantifies the different composition of human population and provides a solid data for researchers and policy makers alike. Broadly speaking, the main concern of demography is tracing population trends through measuring mortality, fertility, migration, and other variables which affect the population. Demography has proved vital to politicians and governmental institutions alike as it provides data which can be utilized in a state's actions and policies.

Demographic observation and analysis may hold a positive role as it informs decision makers on the vitality of the population. Additionally, it allows for close observation of any abnormalities and social deviance and hence facilitates addressing such abnormalities in a timely manner. On the other hand, demography could be a powerful tool in places of conflict as governments may enact policies and laws for the manipulation of the population for maintaining the desired demographic objective. Yet, demography is not merely a source of information for policy makers within the context of development, it is also a key pillar to development itself.

The occupation of the eastern part of the city in 1967 resulted in the Israeli control of the old city, or Holy Jerusalem (Al Quds Al Sharif'), with all its rich religious and cultural heritage. Additionally, it opened the 'frontiers' for its settler colonial enterprise to infringe on the Palestinian lived space of East Jerusalem, the West Bank, and the Gaza Strip. This paper explores demographic changes in Jerusalem occurring over the last decades at the hand of the Israeli occupation and the resultant political, social, and economic implications, taking into consideration the Jerusalemite population projections in 2030 and required socio-economic policies.

The paper is set against a scenario of a consistently receding east Jerusalem population and economy in comparison to the rest of the West Bank (and complete disconnection from the Gaza Strip), due to a faster demographic transition (towards lower fertility and population growth rates), which appear to be sustainable in the future. The falling share of east Jerusalem population in the state of Palestine until 2030 has important strategic implications for the future State as well as these Palestinians' legal status.

The paper investigates the different modalities adopted by the state of Israel to maintain a Jewish majority in East Jerusalem as well as their effects on Palestinian

lives within the city. It also provides a look into the future, showcasing population projections for the city and their social, and economic implications for the city. It concludes by providing a set of strategic implications for Jerusalem to support its own development within the scope of development and Sumoud for Palestinians in the historical Palestine as a whole until 2030.

For methodological and definition reasons, Palestinian and Israeli population estimates for EJ differ. According to the Israeli Central Bureau of Statistics (ICBS), the population of Jerusalem at the end of the year 2021 comprised of approximately 971,800 residents; of which 590,200 are Jewish and 374,900 are defined as non-Jewish (these include Palestinian-Israeli citizen residents of west Jerusalem). Of the 590,200 Jewish residents, 209,000 live in settlements in East Jerusalem (ICBS, 2022). Based on this data, the ratio between Jews to Palestinians in metropolitan Jerusalem is 61.2% to the former and 38.8% to the latter (ICBS, 2022). In occupied east Jerusalem the balance remains in favour of the indigenous population (55%), even as settler population grows unabated. PCBS data confirms no less than 314 thousand Palestinian residents in East Jerusalem (statistically classified by the PCBS as J1 – within the separation wall) in 2022 (PCBS, 2023) . Needless to say Israel continuously restricts PCBS work in EJ (Nasser, 2023), thus exacerbating the gap in population data, which surely results in negative implications of the attempts of development in the city.

2. Jerusalem and its residents: A brief history

On May 14, 1948, the British Mandate Administration abandoned Palestine, and on the same day the Jewish Agency announced the establishment of the State of Israel. The Arab armies of Egypt, Iraq, Syria, Lebanon and Transjordan intervened against the newly established state. The outcome of the war resulted in Israel keeping all the land that was allocated for it by the United Nations Partition Plan plus 60% of the area that had been intended for the Palestinian state. The Armistice Agreements were signed between all countries that took part in the war except for Iraq. The 1949 Armistice Agreement created the “Green Line”, which divided the Gaza Strip and West Bank from the rest of Palestine and eastern Jerusalem from western.

The 1948 war resulted in a population shift in both parts of the city. 60,000 Palestinians were evacuated from the western part of the city, of whom 25,000 were residents of urban areas. Consequently, all the western part became fully populated by Jewish settlers. Conversely, 2,000 Jews were evacuated from the east, mainly from the old city area (Dumper, 1997).

After the division of Jerusalem, the eastern part of the city became part of the Hashemite Kingdom of Jordan (along with the East Bank), as per the union between Palestinian notables and Jordanian officials announced in Jericho in December 1948. The city remained divided into East and West until 1967 under Jordanian and Israeli jurisdiction, respectively. The conflict between the Arab States and Israel culminated in another full-blown war in 1967 when Israel went to war with Syria, Jordan, and Egypt, bringing further losses to the Arab states, with Syria losing the Golan Heights, Egypt losing the Sinai Peninsula, and Jordan losing what remained of Mandate Palestine not yet under Israeli occupation, including East Jerusalem.

After Israel’s occupation, Jerusalemites witnessed a drastic change in every aspect of their lives. For one, the Palestinian citizens of the city, all full Jordanian citizens, were demoted to a legal category of “Permanent Residents” of Israel. Secondly, the holiest of places for the three monotheistic religions fell under Israeli sovereignty, with repercussion on the Christian and Muslim Palestinians alike. Thirdly, spatial planning was utilized to emphasize the uncompromising stance of the State of Israel towards Jerusalem as the “undivided and eternal” capital of the Jewish State.

When Israel captured west Jerusalem in 1948, it utilized the “Law and Administration Ordinance” of May 19, 1948, to ‘legalize’ its seizure of Palestinian land. The same law was amended in June 1967 to aid the state to spread its control over the land of east Jerusalem and its hinterlands. The law and administration ordinance reiterates that “the law, jurisdiction and administration of the State shall extend to any area of Eretz Israel designated by the Government by order.” Thus

even though there is no mention of east Jerusalem specifically, the amendment of the law was published explicitly for incorporating its territory and the surrounding hinterland into the State of Israel, as took place subsequently. This law legalized the annexation of approximately a third of the area of East Jerusalem. this resulted in an outrageous reality for the Palestinian residents of Jerusalem. The appropriated land was then transferred to the Israeli Land Administration (ILA) for the sake of developing the land exclusively for the Jewish people Dumper, 1997).

Palestinians who lived in what was Jordanian controlled territory prior to the Six Day War received another calamity as a result of the Israeli occupation because they were Jordanian citizens and as the Absentee law states that those who lived in enemy land were categorized as absentees and thus loses the right to his/her property. The law specifies that any person who was a citizen of an Arab country or in Palestine outside the boundaries of Israel is deemed an 'absentee' and as a result his/her property is expropriated by Israel (Benvenisti, 1976, pp.111). After the capture of East Jerusalem, Israel conducted a census which accounted for 66,000 residents of Jerusalem who came to be permanent residents of the state of Israel, Today numbering some five-fold. The expropriated lands were used to create (initially) twelve Jewish settlements encircling the center of the eastern part city.

Of the 70km² of land that was annexed following the Six Day War, 23.5 km² were confiscated under the Land Ordinance of 1943. To this day Israel has been denied *de jure* recognition by the international community of its annexation of East Jerusalem, indeed it has been condemned and rejected on numerous occasions. In 1980, the state of Israel enacted the Jerusalem Basic Law which declared that Jerusalem is one and unified and is the capital of the State of Israel. The 'unification' of Jerusalem came with a "price" that Israel continues to grapple with today: the land that was occupied came with an unwanted population; the Palestinians of Jerusalem.

In 1988 the Palestinian Declaration of Independence proclaimed the establishment of the State of Palestine on liberated Palestinian land with Jerusalem as its capital. The Israeli-Palestinian Liberation Organization (PLO) Oslo Accords of 1993 affirmed the formation of the Palestinian National Authority (PNA) to serve as an interim self-governing body. Consequently, the Declaration of Principles deferred the Jerusalem question together with other 'thorny' issues to the permanent status negotiations scheduled to be concluded by 1999, which never materialized due to the breakdown in negotiations between the two parties, indeed of the peace process.

Israel treated this extended interim period as a 'Carte Blanche' to create facts on the ground which firstly complicated the possibility of finding an acceptable solution and secondly, it created a new reality which renders it impossible to go back to the status quo ante of 28 September 2000, i.e.. before the eruption of the

second Intifada. The Israeli authorities adopted a new mechanism to suppress the intifada and isolate East Jerusalem from the rest of the Palestinian Territory. Palestinians were prohibited to reach Jerusalem; complete isolation of the city took place when the Separation Wall was erected as of 2002. The building of the wall resulted in further acquisition of Palestinian land by the State of Israel; it also cemented the isolation of the Palestinian community from one another, as they became cantonized communities isolated from one another through an intricate surveillance and population containment system composed of interspersed and centrally planned checkpoints, the Wall, and Jewish settlements.

The isolation of East Jerusalem has crippled its Palestinian community as it resulted in new Israeli measures which were aimed at emptying East Jerusalem of its residents through annulling their residency status, house demolition, economic suffocation, and increased settlement building. East Jerusalem which was predominantly Palestinian is losing its Palestinian population and has become a home for many Israeli Jews. The state of Israel hopes that by changing the facts on the ground it will steer the final status solution to its direction namely maintaining its rule on entire Jerusalem as well as maintaining a Jewish majority in East Jerusalem. The most recent political developments in the Israeli ruling political system bodes a dark horizon for the resilience, indeed the very existence of a vibrant Palestinian people in East Jerusalem.

As a settler colonial state, the state of Israel perceives the Palestinian population as a demographic threat that should be monitored. Most importantly, this threat is especially worrying for Israel when it comes to Jerusalem. Thus, after occupying East Jerusalem, the state of Israel utilized several policies to address the 'demographic problem.' Those policies of control aimed at minimizing the number of Palestinian residents in the city through discriminatory laws that pertain to citizenship/membership status and spatial planning.

3. Demography as a method of control

Since its inception, the state of Israel has been keeping a close watch on what it termed the ‘demographic problem.’ From an Israeli perspective, a Jewish majority in East Jerusalem would hinder any attempts to challenge its sovereignty over the city.

Consequently, the state of Israel adopted the 1973 recommendations of the ‘Gafni Committee’ which stated that the demographic issue should be always monitored. The recommendations also stated that the state of Israel should aim for ‘a demographic balance’ of 30% Palestinians to 70% Jewish in greater Jerusalem. The ‘demographic balance’ is still upheld to this day and has been affirmed by all municipal planning policies. The use of the wording ‘balance’ is interesting since it is not a balance of equal representation but of power domination and hegemony over the Palestinian residents of the city.

From that date onwards, consecutive Israeli governments have kept close scrutiny over the demographic ‘balance’ with each elected government ensuring that it is not jeopardized even if severe actions are implemented to hinder the growth of the Palestinian population. Interestingly and despite all efforts to hinder the presence of the Palestinian population in the city, it is estimated that the ratio between Palestinians and Israeli Jews stands today to 38:62 respectively.

To maintain a ‘demographic balance’ in its favour in Jerusalem, Israel has relied on several ‘creative’ measures. As it turns out, the classical variables that make up demography such as birth, mortality, natural increase, and migration are not sufficient for maintaining a ‘demographic balance.’ East Jerusalem was exclusively Palestinian; to alter the demographic reality; the state of Israel formulated four strategies. It annexed East Jerusalem and claimed control over land resources.

Additionally, it manipulated the Palestinian population itself through crafting policies which would hinder their existence let alone growth in the city, such as bestowing permanent residency status on Palestinian Jerusalemites, which is a fragile membership status that puts Palestinians under constant threat of losing their right to live in the city. The state of Israel broadened the borders of the municipality of Jerusalem to increase the number of Jewish residents and consequently creating a Jewish majority in the newly marked borders of ‘Greater Jerusalem.’ Furthermore, it built Jewish colonies in the newly annexed land, starting as enclaves, which have now become “exclaves”. It also included Jewish settlements in the municipal borders while at the same time excluding Palestinian neighborhoods and townships to the east and south that were traditionally part of

the municipal borders of the city. The same approach has been followed in the old city, but with limited success despite a half century of efforts.

Such acts achieve two goals; the first is to disrupt the Palestinian character and contiguity, the second is to implant a settler community that acts as a de facto Judaizing tool of the Palestinian lived space. As a result, the Jewish residents became a majority in Jerusalem municipal and metropolitan divisions.

Despite all efforts to sway the demographic ratio of the Jewish population nonetheless, the demographic balance is shifting to the benefit of the Palestinian population, despite all the oppressive and restrictive Israeli measures. Upon occupation in 1967, Jews comprised 74% of the city's population which has since dropped to 61% notwithstanding massive Jewish immigration to Israel and settlement in the eastern part of the city (Yalon, 2022).

3.1 Control of population: permanent residency membership

Even though Israel's control over East Jerusalem is contested internationally, it nonetheless spread its Jurisdiction on Palestinian Jerusalemites' livelihood through their classification as 'permanent residents.' The Nationality Law of the State of Israel defines the different categories of Israeli residence and citizenship. The **Nationality Law, 5712- 1952** specifies a section relating to the residency status. It declares that Palestinians who have been registered in the population census of September 1967 and their descendants are allowed to stay in East Jerusalem as 'permanent resident'. This category is a fragile category under which Palestinians are 'permitted' to live in their home country in a state of limbo since their legality to reside in east Jerusalem is under close and constant scrutiny by the Israeli occupying forces (Shafir & Peled, 2017).

As per the Nationality Law mentioned above, Palestinians of East Jerusalem are provided with Israeli Identity cards (as presumed permanent residents of Israel, but not citizens of the State). This fragile status may be easily revoked, in instances such as residing for a long period abroad, or if a Jerusalemite is granted citizenship by any other country (Sheleff, 2001, pp. 302). It has been documented that between 1967 – 2017 at least 14,630 Palestinians of East Jerusalem had their residency status revoked (PASSIA, 2019).

Palestinian Jerusalemites can leave and create a life of possibilities beyond Jerusalem but in many cases, they risk losing their right to come back and settle in their homeland. For Palestinian Jerusalemites pursuing a life abroad; whether for work, study or for whatever other reasons, they are surveilled closely by the State upon return. "Permanent" residency status can be revoked for several reasons; one

of those reasons is indicated under Regulation 11a of the Entry into Israel Law¹ which states that the residency is revoked if the person lives for more than seven years outside Jerusalem or Israel. Another threat to the residency status can arise if a Palestinian Jerusalemite forms a family abroad, as the process of legalizing their status is conditioned through application and acceptance what has been termed by the Israeli jurisprudence, as ‘family reunion.’

For one, the spouse won’t be granted entry or a residency status if she/he holds a citizenship from an ‘enemy’ Arab country or if the family does not wish to move back to Jerusalem. In other cases, the state does not register children who are born abroad to parents from East Jerusalem and as a result are not permitted entry to the country and here again the parents find themselves forced to relinquish their residency status and relocate outside the country permanently. This policy resulted in the ‘voluntary deportation’ of many Palestinians who were forced to choose between their family members and their hometown.

Additionally, a new complication to the family unification process was introduced in early 1997 where the Israeli Ministry of Interior introduced the ‘graduated procedure’ in which the permanent status would be granted for five years and three months from the day of approval of the family unification petition. This enabled the spouse to live and work in East Jerusalem without the benefits of health insurance or social rights. “On average, it took ten years from the day a request for family unification was submitted to the day that the spouse from the Occupied Territories received permanent status in Israel – if the Interior Ministry approved the request.”²

A change of the procedure took place in 2002 because of **Executive Order 1813** which froze the application of family unification from the West Bank and Gaza Strip. This provision was converted into a law in 2003 under **the Nationality and Entry into Israel Law (Temporary Order) 6753-2003** which prohibited the Jerusalemites and their spouses who are from the West Bank and Gaza to live in East Jerusalem, needless to say that their children were also prohibited to live in East Jerusalem (OCHA, 2018).

Due to the belligerent occupation of east Jerusalem, the right of Palestinian Jerusalemites to their homeland is denied on the basis of migration and relocation of one’s center of life. Even more alarmingly, this right is denied to their children who’s right to return to their homeland will forever be severed.

¹ Annex 4, Entry into Israel Law

² UNHCR report, p.18

Another method of stripping Palestinian Jerusalemites of their right to live in the city is through the redrawing and shifting of the municipal borders. Historically speaking, social ties between Palestinians in Jerusalem and the hinterland were strong in the different spheres of the social, economic, and political life. Intermarriage and relocation from one area of Palestine to the other was common. With population growth and expansion, many Jerusalemites moved beyond the city center in search of better living conditions, more space, cheaper residence, and work.

One of the mass revocations of residency occurred during the eighties of the last century because of the redrawing of the municipal boundaries. Many Jerusalemites found themselves in lieu of the 1988 Israeli High Court of Justice decision in the case of *Awad v. the Prime Minister*. The court ruled “that the annexation of East Jerusalem turned East Jerusalem residents into Israeli permanent residents and that such residency ‘expires’ upon the relocation of the center of one’s life.”³

In 1995 and in light of this court decision and on behalf of the government, the Ministry of Interior started revoking residency status in mass numbers which reached a peak in 2008. In March 2022 the Knesset passed a provisional law which stated that the Ministry of Interior “will not grant Israeli citizenship, or a residence permit to a resident of Judea, Samaria for Gaza, or to a citizen or resident of enemy states as specified by law and the military commander of the region will not be able to grant a resident of the region a residence permit in Israel” (Knesset News, 2022).

With one goal set in mind, the state of Israel utilized all possible means to create an impossible environment for Palestinians of Jerusalem and has thus pushed them to ‘voluntary self-deportation.’ Through different means the state was able to achieve increasing a Judaization of East Jerusalem, reducing the number of Palestinian residents in the city to the minimum legally/physically possible, and to create a subordinate group out of them. Thus, the permanent residence status “addressed the demographic and political concerns of Israeli government. Residency rights of Palestinians living in East Jerusalem, unlike citizenship, could easily be revoked in order to strengthen the Jewish demographic presence in the city” (Rempel, 1997, pp. 525).

Palestinian Jerusalemites are henceforth a significant social group in greater (and especially eastern) Jerusalem, that is not denied many of its rights or any legitimate voice. The legal mechanisms afforded by the State discriminates against them and as such they can rarely resort to such mechanisms to achieve justice. Their right to have rights in their home county has been downgraded to an act of judicial liberalism, at best, by the state of Israel which retains the right to revoke it as it sees

³ UNHCR report, p.14

fit. By imposing the “permanent residence” category on Jerusalemites, the state of Israel is able to make those residents accountable under the Israeli law while at the same time equip them with a limited set of some civic rights to defend their existence in their city.

Under the pretext of security and protecting its own citizens; the state of Israel isolated the occupied part of the city from the rest of the Palestinian nation. It provided the residents of the city with a fragile non-citizenship status which left them helpless in the face of the State’s discriminate legal procedures and jurisdiction and have left many of them with no choice but to leave the city in search of a better life and better opportunities elsewhere in the nearby West Bank or further afield.

3.2 Spatial Planning: Control of the Palestinian lived space

This section examines how the concept of ‘lived space’ impacts the lives of Palestinians in East Jerusalem. Spatial planning is the reconstruction of geography for the purpose of creating new realities. It is a modern set of knowledge which produces an imagined space and can erase the features of history. Thus, history alone is not sufficient in producing a narrative; building narratives through the utilization of space have become no less powerful. Through shaping and morphing ‘geography’ a new reality is produced; embedded in this reality are structures of power which aim to subjugate and control. Within this produced space, a new narrative is constructed and produced. Spatial planning is an all-encompassing state venture, it refers to urban, regional development as well as land utilization and ‘area zoning.’ Consequently, the paper highlights the interrelatedness between planning and the state; planning as a field has developed in proximity with state apparatuses and in fulfillment to the needs and vision of those in power. Israel’s creeping and widening matrix of control of Palestinian people and space in East Jerusalem is an advanced version of this dynamic at work under conditions of belligerent occupation.

Yiftachel examines Israeli spatial and regional planning policies which produce methods of control towards the Palestinian population. He defines three dimensions of Israeli planning policies; territorial, procedural, and socioeconomic. “These dimensions embody the most critical aspects of planning as an organized field of policy and professional practice: its spatial content (the territorial dimension); its power relations and decision-making processes (the procedural dimension); and its long-term consequences (the socioeconomic dimension) (Yiftachel, 1995, pp. 220).” Thus, as is apparent in the case of Jerusalemites, those long-term policies have long lasting effects of population subjugation and impoverishment. It was reported in 2019 that 77% of Palestinians in East Jerusalem fall below the poverty

line in comparison to only 23% Jews living in West Jerusalem (Jafari and Abdullah, 2019).

Consequently, land plays an integral role in the production of space. In a battle for marking a territory, land ownership is vital. Accordingly, in contested spaces, the hegemony through planning turns it from a tool of reform into a tool of repression. As a result, “control policies typically attempt to retard the minority’s economic development, contain its territorial expression, and exclude it from the state’s centers of power and influence” (Yiftachel, 1995, pp. 218). As will become apparent in the case of Jerusalemites, the Israeli threat is a full-fledged threat to the Palestinian’s existential presence in the city.

Spatial planning of east Jerusalem took place in three phases; the first was through connecting east with west Jerusalem. The Israeli government authorized the construction of housing projects of Ramot Eshkol, Givat Hamivkar, Ma'alot Daphna and the French Hill (Dumper, 1997, pp.1111). This allowed the state to normalize its control over newly annexed areas through implanting the Jewish community in Palestinian neighborhoods while disrupting latter’s contiguity. The construction of those Jewish neighborhoods was completed in the early 1970s; soon after, the plan was to solidify those neighborhoods through establishing networks and road systems to link them with other areas of the capital.

The construction of Road 1 on what was part of the seam-line between eastern Jerusalem (Damascus Gate of the old city) and western (Musrara quarter to its north), created a major arterial road which connects the western part of the city with the north and east, hereby connecting the periphery to the core. Moreover, Road 1 sidelined the Palestinian neighborhoods in northeast Jerusalem and encircled it between Road 1 and the Old City Walls, preventing any possibility of the community’s expansion west beyond the road.

Alternately, the state of Israel invested heavily in developing the western side and the area of the seam line. The western areas opposite Jaffa Gate were renovated to become upscale neighborhoods. Additionally, the Mamilla project which was completed in 2007 links west Jerusalem to the Old City through an open public space into Jaffa Gate. Through such measures, the state extended the Israeli presence into East Jerusalem through planning schemes which diluted the Seam line and cemented a settler presence in the Palestinian lived space of Jerusalem.

The second phase of planning aimed at increasing the Jewish presence in the eastern part of the city. This stage started in the early 1970s and “was a direct response to the 1969 Rogers Plan and a later UN Resolution calling for Israeli withdrawal from East Jerusalem” (Dumper: 1997, pp. 114). The government authorized the construction of four settlement blocs; Ramot, Neve Ya’aqov and Pisgat Ze’ev to

the north; Gilo, East Talpiot to the south. Settling Jewish residents would create facts on the ground which would be hard to revoke.

The new Jewish settlements built through the 1980s served several purposes; the first pertains to demography as those settlement resulted in a Jewish presence in East Jerusalem. Those settlements were of military value as they served as points of surveillance and observation. They were of strategic value, as they are situated along main traffic axes of major Palestinian cities. More importantly, the settlement blocs separated neighboring Palestinian cities from Jerusalem. “These second stage construction typify the 'fortress Jerusalem' architecture most associated with post-67 Israeli planning” (Dumper, 1997, pp.116).

The third phase of planning involved implanting scattered settlements on elevated areas and close to strategic roads all around metropolitan Jerusalem. This enterprise is consistent with the different planning schemes within Israel proper which was inspired by architect Arie Sharon. The whole purpose of those settlements is to break any Palestinian conglomeration. They also served as observatories to control the Palestinian population. The main settlements are Ma’ale Adumim to the east and Efrat and Givon to the north. Furthermore, industrial areas were built on the fringes of the municipal borders with a purpose of creating a barrier between the West Bank and East Jerusalem while at the same time taking advantage of the cheap labor that the Palestinians of the West Bank provide without admitting them into the city.

3.2.1 Border Expansion

The outcome of these planning schemes on annexed Palestinian East Jerusalem resulted in three rings of Jewish settlements with an inner one in the core, a municipal ring encircling the center of East Jerusalem from its suburbs and a metropolitan area that extends to the borders of villages and towns in the West Bank hinterlands.

The inner ring comprises the densely populated areas of the city center of East Jerusalem and includes the Old City, Silwan, Sheikh Jarrah, the Mount of Olives (At-Tur), Wadi Joz, Ras al-‘Amud, and Jabal al-Mukabbir.” (Dumper, 2014, pp. 85). The Jewish settler community in this area is small but steadily growing, currently comprising around 6000 settlers (Ir Amim, 2019). These settlers are militant messianic Zionists who harass the Palestinian community with the government’s support.

The municipal ring comprises of a second ring of Jewish settlements and surrounds the inner ring. Those are large Jewish settlements which house about 200,000 Israeli Jewish residents (www.ir-amim.org.il). The municipal circle comprises

twelve settlements separating the center of the city from its hinterland; some were divided by the separation wall. Those settlements disrupted the north-south contiguity of the Palestinian community. (Dumper, 2014, pp. 85-86)

The final ring is the metropolitan ring which extends beyond the municipal borders however, connected with the center of the city through a sophisticated “network of roads and tunnels bypassing Palestinian areas and Israeli checkpoints and offering fast and easy access to the center of the city...” (Dumper, 2014, pp. 86). This ring has provided the means to disconnect Jerusalem from its historic orientation towards its West Bank hinterland and contain its growth within Israeli dominated territory. The Wall was diverted to encircle these metropolitan settlements as well as appropriating Palestinian land needed for the Palestinians’ growth and development.

Within a few decades the Israeli government managed to transform the urban landscape of Jerusalem. The manipulation of the urban space for the purpose of connecting West Jerusalem with the new developed Jewish settlements on the eastern side of the Armistice Line has achieved at least two things; Firstly, it has increased the Jewish presence in the Eastern part of Jerusalem and have ultimately maintained a Jewish majority in the city. Secondly, the different plans have resulted in the division of the Palestinian community and the creation of disrupted enclaves that are easier to control and isolate from one another.

3.2.2 Jerusalem Master Plans: Judaization

For the purpose of developing Jewish neighborhoods, Israel has expropriated 1/3 of East Jerusalem land to be used for the building of homes for settlers. 35% of East Jerusalem land has been designated as Green Spaces. Israel’s control over all parts of the city has been done in phases; the outcome is the ‘Judaization’ of Jerusalem and the de-Palestinianization of the city (Dumper, 2014, pp. 84). Since 1967, several Master Plans of Jerusalem have been drafted; the recurrent themes that are discussed in those plans are: Settlements Construction, Demography, Open Spaces, and Palestinian Construction.

The 2000 Master plan reiterated Israel’s recurrent concerns of successive Israeli governments, namely, the demography ‘problem’ and the fact that despite all attempts to maintain 70:30 ratio, nonetheless, the ratio stabilized at about 60% Jewish to 40% Palestinian residents. Since 2000 and the accelerated rise of messianic Zionist fundamentalism, the eastern part of the city has become a site of coerced control that is orchestrated by the military and the settlers. In 2009, Netanyahu became Israel’s Prime Minister; his right-wing coalition have brought extremists into the decision-making positions. Since then, actions by the state have

emboldened extremist religio-nationalist movements to usurp the Palestinian city from its residents and alienate its culture.

Judaizing the city and branding it as a Jewish center and a religious theme park (Wharton,2006) simultaneously attracted the internal migration of religious, traditionalist families at the expense of secular liberal Jews. The data published by ICBS on the occasion of Jerusalem Day 2022, confirms that the majority of the Jewish community in Jerusalem identifies as religious. The data (from 2020) shows that 35% identify of the Jewish population identify as ultra-Orthodox, 22% as religious, 25% as traditional, and 18% as secular. Since 2002, there has been a rise in the number of Ultra-Orthodox residents and a decline in the secular Jewish population. the number of religious Jews grew from 27.3 between 2002-2010 to 34. % between 2011 -2020.

This may affect the demography of the city since the religious population tends to have–larger families (ICBS, 2022). Such a demographic shift may sway the demographic ratio in Israel’s favor. The recurrent issue of demography is addressed in the most recent Master Plan for Jerusalem. The 5800 (2040) Master Plan is a private initiative that aims at ‘developing’ the municipality of Jerusalem and transforming it into a global city with well-connected transportation system and a solid social infrastructure which builds on tourism and economic development. The plan’s architect capitalizes on private funds from world Jewry and relies on a close partnership with the municipality. This partnership is not official but as a government official in the Jerusalem Affairs ministry states, “Large parts of the proposed policy in the brochure are applied by the government...”(Hasson, 2016).

In this proposed plan, there is an emphasis on the ‘Jewishness of the city.’ The Master Plan reiterates the demographic concern in relation to the rising number of Palestinians in the city. However, there is also a recommendation to addressing these concerns through emphasizing the role of the Jewish diaspora as a vibrant variable in the increase of the Jewish population in the city, “Growth of the Jewish population ... will be supported by the country attracting Jews in the diaspora to immigrate to Israel...”⁴ The plan reiterates the role of the state as an active participant in swaying the demographic balance for the interest of the Jewish population. The plan asserts that national consideration pertaining to demography should be upheld, and that further measures should be adopted to make sure that the demographic balance reaches a ratio of 75% of Jewish residents and 25% Palestinians “... Within the municipal region of Jerusalem there is a mixed population of Jews and non-Jewish minorities at the ratio of 65:35. This is a very

⁴ <http://downloads-en.jerusalem5800.com/files/assets/basic-html/page-14-15.html> retrieved Nov. 2022

low ratio for the capital city of the Jewish people ... in past Israeli government policy documents, theoretical ratios of 75:25 or 80:20 were stipulated.”⁵

The proposed plan reaffirms that the increase in the number of Jewish residents will come from the expansion of the metropolitan border of the city and from settlements, neighboring towns and “areas outside the municipal city limits of Jerusalem.”⁶ This is in line with Israel’s policies and actions in relation to Jewish expansion and infiltration of the Palestinian lived space. The development and expansion of the city and transforming it into an international metropole are all buzz words which translate into increasing Jewish migration to the city and expanding it to blur the number of Palestinians and delegitimize the Palestinian claim to East Jerusalem.

3.2.3 Isolation and severing of the Palestinian population: the separation wall

The erection of the Separation Wall has led to the isolation of East Jerusalem from its vital relations with its hinterland. It also severed it from itself as some neighborhoods to the north and west were cut off from the center of the city by the wall. This impacted the Palestinian community in East Jerusalem as their reliance on the hinterland for economic, social, and cultural sustenance was disrupted. As a result, the center of East Jerusalem with all its economic, cultural, and social potential was stunted. Indeed, continuing Israeli annexation measures in various sectors undermine the viability and promise of East Jerusalem as the capital of an independent state of Palestine (Khalidi, 2022).

Isolating Palestinian Jerusalem from its surrounding hinterland has proved challenging for Palestinian contiguity. Palestinians from the West Bank are no longer allowed to enter Israeli territories (including East Jerusalem) unless they have a permit. Neighborhoods that are considered part of ‘unified’ Jerusalem according to the state of Israel ended separated from one another with some encircled outside the city center by the separation wall and Israeli checkpoints which control access into and outside the city center. Palestinians who live in neighborhoods outside J1 have a hard time commuting to the center of the city as it is fraught with challenges as they must cross checkpoints and congested unpredictable routes. This is challenging to the community as they have to maintain their links and ties with the city to maintain their residence by proving that Jerusalem is their center of life.

This has created a very particular type of forced demographic transformation, causing an extraordinary and dangerous increase in population density (like Kufri

⁵ ibid

⁶ ibid

Akab—with issues to maintain social and economic services for the population in these areas), the inability of the residents to access services, poor service quality, the deterioration of infrastructure, the rise in the cost of resources worsening living conditions, and the inability of any government to provide educational and health services keeping up with the high population density levels.

J2 areas is adjacent to Area A, however, the PNA has no jurisdiction over this area and are not accorded access or means to control and govern those areas. It remains under Israeli control however, there is limited municipal services to these areas with municipal officials catering mainly to population registry and control. J1 areas on the other hand are those Palestinian neighborhoods that have fluid access to the center of Jerusalem without any physical barriers that obstruct their movement from place to the other. In spite of paying taxes to the Israeli government, they receive basic municipal services even if they pale in relation to what the Jewish neighborhoods receive (Wharton, 2018). It was reported that the municipality allocates 10% less funds in its budget to Palestinians in East Jerusalem despite their large percentage of the city of Jerusalem's population (Jafari and Abdullah, 2019). In terms of building, about 28% of land is designated for settlement building as opposed to 15% being used for Palestinian housing (Tatarsky and Cohen-bar, 2017).

Those neighborhoods which were categorized as part of the metropolitan area but were encircled by the wall, like Kfur Aqab to the north and al Walajeh near Bethlehem to the south have become a conglomerate of Palestinian residents who choose to live there to maintain their status as residents at a lower cost of living, or for mixed couples (holder of a Jerusalemite Identity card and a Palestinian identity card) whose spouse and children are not permitted to enter the city.

The physical severing of the city of Jerusalem from its own suburbs and from the rest of the West Bank through spatial planning is a key measure of colonial fragmentation of the Palestinian people in a shrinking living space. Most importantly, this shift has caused high population densities as a result of the sudden urbanization that occurred in nearby areas that are part of the Jerusalem municipality but are not served by it. As a result of the Israeli measures taken to increase Jerusalemite influx into such “grey areas” (Habbas, 2021) they are under threat of continuous deterioration of living conditions as a result of the projected high density, unsafe building standards and increasing lawlessness.

4. Culture & Economy

Identity is how we as human beings perceive and express ourselves; cultural practices are not only affected by our immediate surrounding but also by the larger society. Culture includes the ways in which members of the society act to provide their basic needs such as food, shelter, clothing but also consolidate a social identity that rests on collective beliefs, memories, and norms. Most importantly, culture is a key pillar for resilience and steadfastness in contexts such as Jerusalem. Thus, the impoverishment of a group of people, their isolation and alienation impact how they perceive themselves as a collective. It may be argued, that in the absence of Palestinian sovereignty in East Jerusalem with its cultural, political and economic institutions that are needed for a community's development and empowerment, Palestinian Jerusalemites as a social and cultural group may fall into the abyss of non-existence.

Palestinian Jerusalemites are an integral component of the 14 million Palestinian people; yet their recent experiences have been different from their fellow Palestinians. While their city has been central to the development of the Palestinian identity and has to this day played a central role in the shaping of the national identity of Palestinians on many levels, Jerusalemites face concrete and existential challenges. This section highlights two important pillars of Jerusalemite resilience, culture and economy, and the measures Israel utilized to weaken both structures for Palestinian Jerusalemites and impoverish the community mentally as well as economically and their effects on the community

4.1 Cultural deprivation through manipulation of education

Israeli actions attempt at breaking the sense of collectivity of Palestinian Jerusalemites. Anderson (2016) asserts that a community starts to imagine itself as a nation through a shared culture that instills a sense of a collective identity. Given that education is a vital institution in the enculturation of individuals in a society, in the case of Palestinians, education plays a major role in informing the younger generation of history, narrative, and identity of the Palestinian people. Since 1967, the school system in East Jerusalem has been divided into Four categories: public schools which teach the Jordanian curriculum, private schools which are perceived by the Israeli state as 'recognized but unofficial' (Eitan, Tartarsky et. al, 2013). The third category is Waqf administered schools⁷ and the final category is the Unified Nation Relief and Works Agency (UNRWA) administered schools.

In 1994 the PNA Ministry of Education assumed responsibility of the curriculum from the Jordanian counterpart. Israel interfered and imposed its authority in the

⁷ Schools under the Waqf (Islamic Endowment Foundation)

Palestinian schools in the city. After 2012, a more concrete interference took place with Israel censoring textbook materials that pertain to Palestinian historiography, collective traumas and events such as the Nakba, Palestinian refugees and Palestinian culture. It even interfered in erasing components of symbolic value to the Palestinians such as the Palestinian flag, national literary material, and other national identity markers.

Education is one vital tool in identity construction and enculturation. Bourdieu and Passeron (1977, pp.4) argue that one form of control that is adopted by the state to maintain a hegemonic narrative is through its manipulation of cultural material through what they termed 'symbolic violence.' Since its occupation of East Jerusalem, the state of Israel imposed its values and ideas on the Palestinian community through its control of the Palestinian educational system. Through this process, Israel has the capacity to instill its own narrative in the Palestinian education system and 'culturally reproduces' its own hegemonic discourse to maintain the status quo (Bottomore, 1993, pp.63) without resorting to outright violence. The state of Israel manipulates the Palestinian education system in order to achieve control over the Palestinians, manifested through surveillance of the Palestinian curricula, manipulation through economic incentives and deprivations, and fragmentation of the educational system for Jerusalemites.

"Deprivation" of school curricula in East Jerusalem is reflective of Israel's policy towards the Palestinian residents in the city. Through censorship and erasure of Palestinian history and narrative, the state acts to "dilute Palestinian identity, Judaize the area, and jeopardize Palestinian Jerusalemites' quality of education" (www.jlac.ps). The state's policy towards education with regards to the Palestinian population of Jerusalem is no different from other policies which set the scene for the impoverishment of the Palestinian population for the purpose of creating a docile, weak and ignorant community that relies on the state of Israel for its livelihood.

Conscious to the centrality of education in developing and shaping a collective's identity; the state of Israel has taken strict measures to re-shape the Palestinian educational system in East Jerusalem. Those measure range from providing incentives for schools who adopt an Israeli curriculum, censorship of material that pertains to the history, culture of the Palestinian people. Other measures pertain to seizure or closing of schools in violation of State guidelines. Within the context of Palestinian resilience, education thus becomes an essential tool that needs to be further strengthened, and in turn is vital for the future of development of the city.

4.2 Economic deprivation: The Jerusalem Development Limbo

A series of international and Palestinian studies (UNCTAD 2013, MAS 2017, MAS 2021, MAS 2022) have documented the hostile environment for Palestinian Jerusalemites and their economy, in which Israeli authorities are oriented principally towards serving the interests of a settler population in their midst and Palestinian authorities are effectively incapable of intervening in East Jerusalem and managing or otherwise sustaining the economy. It is indeed remarkable that a distinct Arab economy has survived, and that Palestinian society in the city has maintained its political, cultural and historical identity. The East Jerusalem economy since 1994 and especially since 2001 has been left to fend for itself and maintain its integrity, attempt to preserve its deep roots in the West Bank (and Jordanian/Arab) economy and safeguard its interests against those of an endlessly encroaching, and often threatening, Israeli settlement campaign in East Jerusalem that has continued unabated, especially over the past decades.

The scale of the decline of the East Jerusalem economy within the broader Palestinian economic context is most dramatically illustrated by its falling contribution to Palestinian GDP. From an estimated 14–15 per cent share of total pre-intifada GDP of OPT (UNCTAD, 1994), the East Jerusalem contribution to GDP was estimated by PCBS at the start of the Oslo interim period at just over 8 per cent. Notwithstanding the overall improvement of the economic environment after 1993, the East Jerusalem share of the OPT economy continued its downward trend (PCBS, 2003), to below 8 per cent by 2000, a strong indicator that East Jerusalem benefitted relatively less than the rest of OPT from the so-called “peace dividend” of the post-Oslo phase.

Though the real GDP of East Jerusalem has increased by relatively small increments since 2001, its relative size has fallen because economic growth in East Jerusalem has lagged behind that of the remaining OPT, which only began to recover starting in 2008. It has been estimated that the separation barrier has incurred over one billion dollars in direct losses to Palestinian residents in Jerusalem and that its adverse impact in terms of lost opportunities endures at the rate of \$200 million per year (Palestinian Authority, 2010). Sectoral data indicate that the size of the East Jerusalem economy compared to that of the remaining OPT had fallen to below 7 per cent by 2010 (PCBS, 1999–2011), equivalent to half of its share 20 years earlier and since then possibly falling even lower – a dismal testament to the decline of the East Jerusalem economy and its growing isolation under prolonged occupation, notwithstanding the concomitant “peace process”.

Hence, the East Jerusalem economy finds itself in a world quite apart from the two economies, Palestinian and Israeli, to which it is linked. It is at once integrated into neither, yet structurally dependent on the West Bank economy to sustain its

production and trade of goods and services and for employment, and forcibly dependent on Israeli markets to whose regulations and systems it must conform, and which serve as a source of employment and trade and as the principal channel for tourism to the city. These paradoxical relations have served to effectively leave the East Jerusalem economy to fend for itself in a developmental limbo, severed from PNA jurisdiction and subordinated to the Jewish population imperatives and settlement strategies of Israeli municipal and State authorities.

Just as the economic growth pattern and overall direction of the Gaza Strip in recent years has veered in a distinct and separate direction from that of the West Bank, so has East Jerusalem's economic trajectory diverged from that of the rest of the West Bank. These disturbing trends risk rendering redundant the notion enshrined in United Nations resolutions and the Oslo Accords, namely that the Gaza Strip and the West Bank, including East Jerusalem, constitute a single territorial and legal entity. This in turn has critical implications for human development prospects and eventual policy interventions in the East Jerusalem economy.

The policies and procedures adopted by the State of Israel pertaining to planning and zoning have contributed to the economic deprivation of the Palestinian residents of the city while at the same time have built a better environment for Jewish economic development. Land is an important component in the economic well-being of a community and the role of the state is to promote real estate development as well as housing production and allocation. The state contributed in the impoverishment of Palestinian Jerusalemites through its restrictive measures of land allocation for Palestinian community development. The scarcity of land for construction has resulted in skyrocketing prices of real estate which have burdened the Palestinian community. In effect planning and zoning policies not only affect the social development of the Palestinian residents of Jerusalem but also its economic one.

The state of Israel imposes what Harvey terms 'the quiet redistributive mechanism of land use planning.' This redistribution in planning is in effect an economic redistribution which impoverishes those who are excluded from the planning benefits. "Planning, as a tool of socioeconomic control and domination, helps to maintain and even widen socioeconomic gaps by locating development costs and benefits in accordance with the interests of dominant groups" (Yiftachel, 1988, pp. 402)

In their book Peled and Shafir (2002) have investigated the relation between Israel as a settler society and its construction on an ethno-class system. They conclude that Israel creates an ethnically stratified society which builds on both economic and political deprivation. Consequently, the interconnectedness between the

political and economic institutions in a nation-state creates the ultimate power of control of the disenfranchised minority groups.

Another factor that has contributed to the impoverishment of the Palestinian community of Jerusalem is the lack of employment opportunities. The Palestinian community has become isolated from the rest of the West Bank. This has created a small community which lacks the conditions to sustain a lively market. Added to that, Palestinian markets compete with the Jewish Israeli market in West Jerusalem which provides consumers with cheaper products. As a result, many businesses have no option but to close down or relocate to the West Bank where there is better purchasing power and less taxes to pay – others have ended up work within the orbit of the Israeli market despite the discrimination it entails. It is reported about 41.6% of Jerusalemite families depend on wages coming from Israeli work sectors (PCBS, 2022).

That being said, some of the forms of economic sustenance are the limited number of white-collar professionals who cater to the residents of East Jerusalem. The majority however, are “unskilled and semi-skilled workers who could easily adapt to the changing conditions ... most of the Arabs employed in the Jewish sector did different manual jobs in ... economic branches such as tourism, transportation, industry and above all construction” (Romann, 1967, pp.503), with hospitality, restaurant and service sectors being host to the larger percentage of Palestinian workers (more than 55% of labor distribution) (PCBS, 2022) as opposed to the public sector, social services, or financial and technological sectors (Nassar, 2023), that is despite young people holding university degrees. According to PCBS, the working force in Jerusalem make up 35.8% (62% males and 10.4% females) of the Palestinian working force. That is in addition to the non-systematic Israeli measure that are enacted by Israeli employers such as racism by employers, and working permits -if obtained- that lack workers’ rights (Nassar, 2023).

The vast difference in cost of living between the West Bank and Jerusalem discourage Jerusalemites from working in the West Bank, however given the previously mentioned non-systematic discrimination against Palestinians in the Israeli labor market, Palestinian youth in Jerusalem are often faced with limited opportunities to grow professionally. If taking pay-rates as an example, the gap is very clear between Palestinian Jerusalemites and Jews living in Jerusalem with Jews making around 3000 shekels more than Palestinians (PCBS, 2022).

Not to mention, Israel uses high taxes as an economic hinderance, especially to low-income citizens, which will expel Palestinian systematically from the city and transform their property to settlers (Nassar, 2023). Some of the taxes are specifically designed for Palestinians to pay but not for Jews (Nassar, 2023), thus

enlarging the already existing large economic gap between the two demographics in the city.

To conclude, in a state of conflict, the battle for dominance is conducted on many levels; thus, it is not only the geographical space, but it is also a fight over the history, memory and culture. Palestinians in Jerusalem face this constant battle for living space as the state of Israel tries to impose a new alien hegemonic culture into their environment. This new Jewish culture and the powerful, globalized economy of Israel imposes itself on east Jerusalem while at the same time dwarfing and mutilating the Palestinian culture of the people and their own means of sustenance. That being said, “while the colonial state tries to build its cultural existence at the expense of the indigenous Palestinians, the Palestinians attempt to conserve their cultural values which are part of their Palestinian identity” (Samman, 2013, pp.57).

Despite colonial policies and measures taken in Jerusalem and within the Old City walls, population data from the past few years, and projected growth showcase the failed attempts of ethnically cleansing Jerusalem from its original Palestinian citizens. Jewish settlers in the old city, including in the “Jewish Quarter” remain less than 20% of the population in that area, while less than 10% of properties in the city have been taken over by settlers (UNCTAD 2013). Youth movements in Sheikh Jarrah, Al Aqsa and Damascus Gate, and the repeated uprisings and acts of resistance by Jerusalemites, over a range of grievances since 2014, also highlight the youth’s determination to remain in Jerusalem despite Israel’s attempts to impoverish them as a demographic group and consequently offering low-paying jobs with minimal employment rights. Additionally, the recent local movements in East Jerusalem schools resisting the Israelization of the curriculum also highlight the resilience of Palestinian against attempts to cleanse the city culturally through education. This becomes a beacon of light in the future of Palestinian population and the struggle for the demographic race over the space in Jerusalem.

5. Conclusion: 2030 projections and the demographic dividend

From the above review, it might well appear that the race over population growth in Jerusalem is lost from the Palestinian perspective. This is based on available Israeli governmental information which forever reiterates the same conviction, that under no circumstances will the state of Israel allow a ratio less of 60:40 between the Jewish Israeli population and the Palestinian population. Meanwhile, new more extreme voices advocate for an 80:20 ratio as the ideal ratio for the capital of the Jewish nation.

PCBS data for the future of Palestinian population of Jerusalem projects continuous growth in the years leading up to 2027. The Jerusalem governate is expected to reach 533,949 by 2027 according to calculations based on the 2017 census at least 344,522 of which living in J1. Despite the Jewish population already surpassing the Palestinian population in EJ, growth rates remain in favor of Palestinians reaching 2.6% as opposed to 1.5% annual increase of Israeli population between the years 2010-2019 (Nasser, 2023). Of course, this positive dynamic needs to be supported to ensure that growth is not only quantitative but also qualitatively better. Services, living conditions, economy, culture, and all areas directly targeted by Israeli measures need to be defined in order to provide quality life for those living in Jerusalem to discourage their needs to go elsewhere in search of a better life and in-turn support Israeli efforts to cleanse the city.

Thus, it is safe to assume that the state of Israel will continue to work diligently to shrink the number of Palestinians within the municipal boundary. Additionally, those who are left in the city will be provided with minimal civic rights as dictated by their membership status. Additionally, any possibility of contextualizing themselves within a collective national project will be constantly crushed. Israel's control of Palestinian Jerusalemites is maintained through close surveillance on the social and cultural spaces including educational venues.

The plain reality is that the state of Israel will utilize every tool in its armament to control and subjugate the Palestinian minority in the city. Given this reality, and the powerlessness against the powerful reach of the Israeli occupying forces, Palestinians should formulate tactics to empower the Palestinian community of East Jerusalem through planned interventions which provide means of subsistence that are necessary for the survival of the population. Additionally, those tactics should cater to the development and revival of the lived space as a space of interaction and cultural enrichment which is a major tool in the development and flourishing of the Palestinian community in East Jerusalem.

Thus, Palestinians need to think of creative ways to strengthen the ties between Palestinian Jerusalemites and the rest of the Palestinian population as well as strengthen the centrality of the city of Jerusalem as the capital of the future nation of Palestine. As well as support the city economically and culturally to help it prosper in ways that encourage Palestinians to remain living within it. The below section presents some recommendations for the development and empowerment of the Palestinian community in East Jerusalem, which emphasize the centrality of creating several initiatives for maintaining the centrality of Jerusalem in history, culture, and identity of the Palestinian people.

6. Recommendations

The state in modernity plays a vital role in the formation and construction of a collective national identity. Many scholars have reiterated the nation's reach in dictating the path, culture and identity of the state and its residents. The Israeli state denies the PNA control or even influence over East Jerusalem and its Palestinians population. Consequently, such reality affords limited forms of intervention on behalf of the PNA in fending off the unforgiving reality of the Israeli occupation. This said, in today's reality and the advent of technology and globalization, new methods of intervention may be suitable for the Palestinian Jerusalem reality.

Due to the overreaching oppressive mechanisms of the state of Israel, the Palestinians have been constantly on the defense, trying to invent tactics for the survival of the Palestinian community. It is appropriate that Palestinians utilize the archived knowledge, human capital of Palestinians here and abroad, political experience and all other knowledge that has been accumulating from our interaction with the Israeli state to consolidate a national plan of resilience and resistance to Israeli hegemony.

Within such a framework, a reconceptualization of the centrality of the city of Jerusalem to the Palestinian national struggle for emancipation, and to the broader concept of Palestinian society and a national economy is required. Meanwhile, and as needs to be highlighted with a national unit/body responsible for fulfilling the material and non-material needs of the city and its population as the formed is needed for the actual survival and development of the Palestinian population and the former as needed for providing meaning and identity.

6.1 An overarching Palestinian strategy for development of East Jerusalem

The Palestinian Ministry of Jerusalem Affairs "Capital Development Cluster Plan (2021-23)" formulates a comprehensive development vision for the Governorate of Jerusalem. This Plan works to merge the development of this cluster with the broader policy framework of the Palestinian government, in addition to enhancing the ability of the city of Jerusalem to continue its confrontation with the occupation, and to protect Palestinian livelihoods in the city (MAS 2021). The Capital Development Cluster Plan seeks to realize social and economic development in the Jerusalem environs, by a matrix of complementary interventions aimed at strengthening key sectors in the governorate.

Given their strategic significance, these sectors are the appropriate targets for strengthening not only the reliance of Jerusalemites, but also providing the level of services they deserve, and should be the main pillars of any Palestinian

campaign to push-back against intensified Israeli pressure on space and people's livelihoods:

- *Housing*: Given the growth of the Palestinian population in Jerusalem, compounded by a corresponding increase in house demolitions and the inability of the housing market to grow as a result of the restrictions imposed by the occupation, there is a marked need for the provision of housing to Jerusalemites. Hence, it is important to focus on increasing the supply of housing, while at the same time working on defence mechanisms against the Judaization policies of the occupation in Jerusalem.
- *Education*: The Arab education sector in Jerusalem plays a pivotal role in creating awareness and a culture of resistance to the Israeli occupation, hence Israel's policy of targeting this sector. Palestinians need to regain control of Palestinian educational and cultural processes in Jerusalem's schools.
- *Health*: The health sector is essential for enhancing the resilience of Jerusalemites, by securing the right to health for all. It is one of the sectors directly targeted by the policies of the Israeli occupation (as well as other sectors), with the aim of eliminating the presence of Palestinian health institutions in Jerusalem, and replacing them with the institutions of the Israeli occupation.
- *Tourism*: The tourism sector is an essential sector in strengthening the steadfastness of Jerusalemites, as it constitutes a vital source of income. It also has strong linkages with other sectors, contributing significantly to preserving the city's cultural and religious identity.
- *Culture*: The cultural sector reflects Palestinian identity and roots in the city, closely linked to the tourism sector. Both sectors are directly targeted by Israeli occupation policies (as well as other sectors), with the aim of stripping Palestinian identity from Jerusalemites and their families.

Many of the proposed activities in the Plan are complex, and require coordination and cooperation between several different institutions and organizations, including governmental departments at the PNA as well as the Government of Israel and the Municipality of Jerusalem. Budget requirements are great, and all projects require prudent and professional management. One part of this Plan recommends the preparation of an implementation plan. However, it is not clear from the Capital Development Cluster Plan what resources are available for implementation, and the Plan does not seem to include any formal ownership or management structure.

Development projects in all the proposed clusters are considered very ambitious given the allocated three-year timeframe, especially in areas where required funding has not been secured. Many of the proposed activities that require funding are presented as raw data, without a detailed breakdown of the way in which costs

and activities have been derived. Therefore, it is difficult to estimate the resources required. For existing activities under implementation, these need to be managed and supervised to ensure that they are monitored and evaluated on behalf of the cluster and associated sources of funding. It is also necessary for each cluster to prepare its administrative structure with the appropriate, required skills, in order to ensure the successful implementation of current and planned projects within required timeframes.

6.1.1 Culture, Education and Identity

Education is one of the main tools to any government for the construction of a homogenized, harmonized subjects within the state. Education enculturates citizens, it bestows upon them a collective national identity that is grounded in history, culture, and identity. Like other colonial enterprises, the state of Israel practices symbolic violence through its control and censorship of the Palestinian curricula that is taught in the Palestinian schools in East Jerusalem. To curb the oppressive mechanisms of the state, the education branch should utilize different tactics for empowering, educating and strengthening Palestinians in East Jerusalem. Those tactics could be branched into two divisions with one concentrating on compensating the censored curricular material while the other branch focusing on extracurricular activities.

The PNA needs to work on providing financial allocations to support community centers and youth initiatives which provide social and cultural services that aim to preserving and enriching the Palestinian culture, as well as keeping younger generations connected to the cities and the Palestinian identity. Projects are also needed to maintain connections between Jerusalemites and Palestinians living outside of Jerusalem to limit the social disconnect that the wall created.

Jerusalem is central to the Palestinian national identity. It has been the cultural and religious center and one of the urban centers that helped in consolidating and constructing an imagined collective identity that seeks to achieve its independence from colonial powers. Due to its isolation, Jerusalem and its Palestinian population have been isolated from the rest of the Palestinian community. Concerted efforts are needed from the PNA and civil society to construct and disseminate a national and cultural identity narrative in relation to Jerusalem which goes beyond traditional religious or historic ties and counters Israel's undisputed version.

6.1.2 Economy

The PNA Cluster Development Plan envisages channels of economic networking and cooperation for the sake of reviving East Jerusalem's economy. The PNA could facilitate such channels between business owners of East Jerusalem and business

investors in the diaspora. Those in their turn could provide the capital and global opportunities in reviving native craft and East Jerusalem's economy.

Recently, the Palestinian Cabinet voted on providing \$3000 to those owning shops in the Old City through the High Committee of Jerusalem.⁸ Such initiatives are especially important to support the resilience of the isolated business community and the economy of Jerusalem. Allocations should be integrated within the PA's budget for the Ministry of Jerusalem Affairs to support Jerusalemites in several aspects, supporting families through monthly/annual allowances to compensate for high municipality tax, allocations to merchants to encourage them to remain in business. These past years, youth movements have started campaigns to support the local economy in the Old City of Jerusalem. With Israeli measures to weaken the Palestinian market through obstacles, daily harassments and high taxes, it is important to encourage said initiatives to support visiting the Old City market and its economic life.

Additionally, it is within high importance to invest in projects that aim towards providing job opportunities for newly graduates in Jerusalem, while also simultaneously supporting employers' ability to provide adequate and competitive pay rates for Palestinian youth to limit their need to work in the Israeli market or remain unemployed. Such focused lending and investment is rare in the complex business environment of Jerusalem. Efforts are also required to ensure that quality services are provided not only to those living in East Jerusalem but also in areas adjacent, such as Kufr Aqab.

6.1.3 Legal Support

Palestinians in East Jerusalem are under constant scrutiny of the different institutions of the state of Israel. Many Palestinian Jerusalemites fall victim because they fail to comply to the state's regulations. Providing concrete assistance through organizing and funding the needed legal assistance for building, maintaining residency, navigating municipal procedures and complying with Israeli tax burdens is vital for the survival of a coherent Palestinian society in Jerusalem, as is repeatedly emphasized in studies and policy papers. The PNA's role should be crucial to ensure that Palestinians are not being displaced or cleansed from the city of Jerusalem as a result of losing legal battles. It is recommended that a strong legal support programme undertakes to support Jerusalemites who are currently under threat of eviction from their homes in Jerusalem or are facing threats of destruction to their homes or businesses and basic civil or human rights, above all the right to live in the city.

⁸ <http://www.palestinecabinet.gov.ps/portal/GovService/Details/2836>

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تاريخ 2023\06\06

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**Palestinian Internal and External Migration
and its Developmental Challenges**

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Executive Summary

This paper examines immigration in Palestine, given that it is a key driver affecting local development and demographic balances within historic Palestine. The research explores motives for migration and its size, covering both internal (between governorates) and external migration. The paper also explores the impact of migration on the structure and demographic dividend of the Palestinian population, and plausible linkages with overall development in Palestine.

To this end, this paper is divided into four main chapters. Chapter One presents a review of the most important literature on migration, its most prominent features and impacts, while Chapter Two explores the external emigration of Palestinians, including its size, most important characteristics and its most prevalent features and outcomes. Chapter Three examines internal migration in Palestine, its size and most important characteristics across all governorates and with special focus on Area C¹, in addition to outlining the most important results of unbalanced population distribution resulting from internal migration between governorates. Finally, Chapter Four outlines a set of proposed policies to mitigate challenges associated with immigration in Palestine, including the most important policies for addressing Palestinian overseas emigration, particularly in the category of scientific-minded and skilled workers. Highlighted policies address the geographic imbalance in internal migration, focusing on directly addressing demographic changes in Area C. Such policies contain elements of flexibility that help relevant authorities to respond effectively to the needs of the population based on their place of residence, in light of current and future political, economic and social crises.

¹ Based on statistics sourced from the Palestinian Central Bureau of Statistics (PCBS).

1. Introduction

The phenomenon of migration (internal and external) is a global one affecting all persons, motivated by various reasons and objectives, including, but not limited to, political and economic considerations. In the Palestinian case, immigration acquires another dimension, given the conditions that Palestinians have lived through since the start of the twentieth century: political conditions and their resultant economic outcomes. On the other hand, the Palestinians, just like others, are affected by factors of both expulsion and attraction, as well as various social and psychological factors that influence their decision concerning the place in which they choose to reside, temporarily or permanently, inside the homeland (internal emigration) or overseas (external emigration). According to various studies, the most prominent reasons for Palestinian emigration (particularly young adults) are the political conditions of the Israel occupation and its negative effects on all aspects of social and economic life. For example, the siege on the Gaza Strip, and the occupation's arbitrary measures in the West Bank, have exacerbated the unemployment crisis, particularly for young people, which reached very high rates of 38.3% for young people aged 19-29 years of graduates holding an intermediate diploma and above by the end of 2021 (PCBS, 2022a). This is considered a primary driver of youth overseas emigration to secure the necessities of a decent life.

Undoubtedly, this migration (both internal and external) had a profound impact on Palestinian society in the economic, social and political spheres. This is due to the great impact of internal and external migration on the labor market, standards of living and social relations. In the Palestinian case, demographic and cultural balances are affected by the Zionist settlement project. Against the background of these dynamics, the Palestinian government faces increasingly difficult challenges in responding to the needs of its citizenry, in light of increasingly complex political crises and their economic, social and, health repercussions resulting from the drop in oil prices, the spread of the Corona pandemic and other factors.

The positive and negative effects of external and internal migration present formidable challenges to the policy-maker in Palestine, whether in the economic, social or political fields. The Palestinian 'brain drain' requires intervention at the policy level, to address its negative effects. The migration of Palestinian skill to employment in other countries deprives the Palestinian economy of a key contributor to economic and technological developments on the one hand, and of particular importance, to the steadfastness of the Palestinian people on their land, with decent life and a decent standard of living. Moreover, the Palestinian 'brain drain' leads to structural distortions and developments that are not appropriate to the needs of the country, across both the fields of university education and healthcare. This poses great challenges to the development of these two sectors, at

the levels of infrastructure, public investment and public services. Migration from the countryside to the city adds pressure on educational services (at the elementary and mid-school levels), health services, housing availability and public infrastructure (public utilities, roads and traffic). On the other hand, the effects on the country of departure (of origin) are similar to the effects of the ‘brain drain’, as rural areas are deprived of the skills of exiting migrants, affecting all facets of life, including the volume and quality of public services. The flight of the population from a specific area reduces demand for public services. This makes the cost of providing them relatively higher, so therefore their price rises (particularly if the provider is a firm). Societal returns decrease, and should the government act as the provider, it will have to carry what is known as ‘excess capacity’, or a waste of public resources (non-optimal use).

Furthermore, immigration is one of the main drivers of development, whether on the part of the sending or receiving country. Given its substantial contribution to the economic prosperity of the host country, in addition to financial and human capital flows upon return to their home countries, helping to reduce poverty and stimulate economic development. In addition, remittances from migrants to their families in their countries of origin represent a significant source of capital, helping to provide food and education to children, while greatly improving living standards. According to the 2030 Agenda for Sustainable Development, migration is a major factor in development. Therefore, the Sustainable Development Goals (SDGs) adopted intermediate objectives concerning the rights of migrant workers, the reduction of transaction costs on migrant remittances, combating human trafficking networks, scholarships for migrants, the adoption of soundly planned and well-managed migration policies, and others (IOM, 2017).

This paper examines the issue of migration in Palestine, focusing on both internal and external migration. It does not cover Palestinian refugees, as this is considered outside its scope. The mechanisms for its study differ, based on areas in which these refugees reside and their living conditions.

Following this introduction, the paper continues in four sections: the first explores the definition of migration, its most prominent factors and effects; the second covers external migration; the third section deals with internal migration. Both sections two and three are in themselves divided into two parts each: the first looks at the size and course of migration, the second examines factors influencing migration. The phenomenon of migration, its implications, and the challenges it poses for policy-makers. As for the fourth section, it examines the most important, proposed policies for managing migration (external and internal).

2. Migration: its Causes and Effects

The global definition of migration is “the movement of a person or entire family from one population group to another, or from one country to another, provided that the individual crosses the border between such two groups or countries and resides - or intends to reside - in the place of his/her arrival, even if she/he conducts visits to other locations” (PCBS, 2011). Internal and external migration is classified (by those who practice it) as voluntary² or involuntary³ (forced). It can also be classified by time, as permanent⁴ or temporary (Al-Malki & Shalabi, 2000).

Migration is not a recent phenomenon, but rather one inherent to humans since their inception, as they strive to search for a better place to live. However, interest in the phenomenon of migration has increased during the past decades, because of its contribution to “reshaping demographics, populations and socio-economic conditions” (Giddens, 2005). It has also become an important political issue, given the acceleration in its pace in conjunction with the end of World War II (Giddens, 2005; Maqboub, 2022).

There are numerous reasons and factors associated with migration, however it is most likely related to economic, social and political conditions in the country of origin. According to the theory of attraction and repulsion, the most prominent factors that repel populations are unemployment, economic stagnation, the deterioration of basic, local resources, low standards of living, racial discrimination, alienation and the absence or scarcity of opportunities for upward social mobility or stability. Marriage is the most important social and cultural factor in women’s migration, as women migrate from their country of origin to another to join their husbands, depending on where the latter reside. As for the most prominent ‘repulsion’ factors that cause mass migration, these are typically natural disasters and war. Conversely, ‘attraction’ factors include the ready availability of opportunities for work and education, opportunities to improve incomes and standards of living at the new location, and the availability of an attractive social and cultural environment and climate. Attractive factors can be related to the migration of the breadwinner, husband or wife to the new destination (Al-Malki & Shalabi, 2000).

² “Voluntary migration includes internal or external migration undertaken by the individual, without pressure or coercion.” (Al-Malki & Shalabi 2000, p. 3).

³ Forced migration means involuntary migration for political or natural reasons, etc. (Al-Malki & Shalabi 2000, p. 3).

⁴ Permanent migration is the movement of individuals from their original place of residence to other locations, with the aim of permanent residence there (Al-Malki & Shalabi 2000, p. 3).

With regard to the effects of migration, these are not limited solely to the destination, but also greatly affect the region of origin, including the middle classes and individuals with higher qualifications and skills.⁵ The brain-drain, as in the Palestinian case, changes the balance of human capital locally, which in turn affects economic and social conditions. However, internal migration will have an effect on less-skilled and marginalized workers in a particular geographical area, as the increase in labor caused by the migration of workers with certain skills reduces wages and available opportunities for local workers. In numerous countries, such as Morocco, migration from rural to urban areas leads to a decline in rural, agricultural activity, as immigrants abandon the land as a means of production. This form of labor transfers from males to females i.e., the feminization of agricultural activity. This leads to the emergence of a rural, consumer economy, instead of a productive economy. In addition to the loss of the countryside's labor force, traditional village values decline and start to mimic urban values. Additional effects include the emergence of individualism, the formation of middle and bourgeois classes who are essentially villagers, the rise of the nuclear family instead of the extended one, and production for the market, instead of subsistence (Maqboub, 2022). Given that the majority of immigrants are young adults, this rejuvenates the city at the expense of the countryside, increasing unemployment in cities, and leading to the emergence of suburban neighborhoods and shanty towns without a proper infrastructure.

⁵ “A term used to describe the migration of competencies, expertise and skills - intellectual and/or technical - from developing countries. Typically, such migration is from developing to developed economies, or those that offer better geographic, economic and professional conditions.” (Mataria, Hantash & Amer, 2008).

3. External Palestinian Migration

In the Palestinian case, the most important motives for emigration overseas are economic. This includes poor standards of living, high unemployment rates, a lack of job opportunities to secure a decent life, in addition to political motives characterized by a by the lack of personal security in Palestine, due to the blockade and repeated Israeli aggression, among others. For example, the poverty rate in Palestine reached 29.2% - and about 53% in the Gaza Strip (PCBS, 2020c). Moreover, it then increased even further due to the impact of the Corona pandemic and the ensuing financial crisis, worsened by the PA's financial crisis with Israel and its occupation measures (there are no recent figures from official sources). In addition to the very high unemployment rate, reaching 26.4% in Palestine in 2021 and about 47% specifically in Gaza (PCBS, 2022a), there has been a significant increase in the unemployment of youth and women. Resultantly, anxiety, frustration, fear, an uncertain future and political divisions all negatively impact the reality of life in Palestine (Hijazi, 2022).

Since the 1990s, return migration to the West Bank and Gaza Strip (especially from the Gulf) has been caused by several factors, the most prominent of which are the deterioration in oil prices, the replacement of foreign labor with local labor in such countries, and competition from cheaper Asian labor. Additionally, the period following the Second Gulf War witnessed the (almost) complete return of the Palestinian community from Kuwait, resulting from the repercussions of the war and a reduction in Palestinian populations across all Gulf countries. A large part of them returned to the West Bank and Gaza Strip. Likewise, the emergence of the PA after the signing of the Oslo Accords resulted in the return of a large part of the PLO's staff to the West Bank and Gaza Strip. From 1997 to 2007, the number of returnees⁶ totaled 195,300 (approximate number based on census data), followed by approximately 50,500 from 2007 to 2017 based on census data (PCBS, 2020a). About 40% of returnees settled in three governorates: Ramallah/Al-Bireh, Gaza and Nablus (Al-Malki & Shalabi, 2000).

3.1 Volume of External Migration and Some of its Characteristics

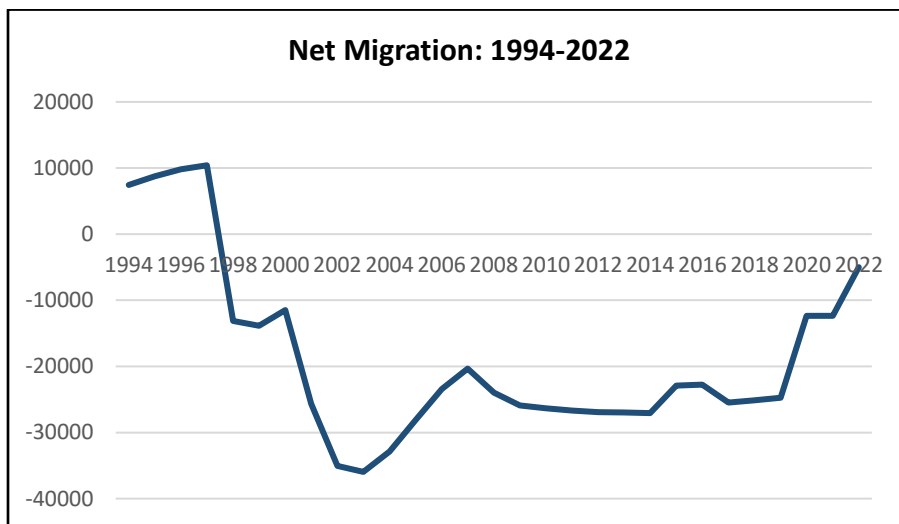
World Bank projections indicate that net external migration from Palestine in 2022 amounted to about -5,000, meaning that the number of immigrants from Palestine was higher than those arriving to live in Palestine, as shown in Figure 1. The 1990s trend saw the return of Palestinians from overseas, especially when coinciding with the signing of the Oslo. This was followed by a shift towards immigration from Palestine in 1998, which peaked in 2003 at -35,960, remaining stable until 2019

⁶ The numbers of returnees used by the Palestinian Central Bureau of Statistics do not represent the actual number, it is based on census data.

with periodic fluctuations. It then decreased in an uneven manner after the Corona pandemic. Moreover, according to the Peace Fund, the value of the Palestinian Brain Drain Index in 2022 is (8.8) thus Palestine ranks second in the Arab world ,⁷ in terms of the size of the brain drain (Fragile States Index, 2022).

The results of the 2015 Palestinian Youth Survey issued by the Palestinian Central Bureau of Statistics showed that about 24% of individuals (aged 15-29 years) in Palestine aspire to emigrate overseas, and it seems that prevailing conditions in the Gaza Strip have played a role in further increasing this number. The percentage of young people wishing to emigrate abroad reached 37% in the Gaza Strip, compared to 15% in the West Bank (PCBS, 2016). In the same context, the last quarterly public opinion poll (EO March 2023),⁸ conducted by the Palestinian Center for Policy and Survey Research (PCPSR), indicated that about 24% of respondents want to emigrate (19% in the West Bank and 32% in the Gaza Strip).

Figure 1: Net External Migration of Palestinians (1994-2022)



Source: United Nations Population Division, *World Population Prospects (2022)*. Net Migration - West Bank and Gaza.
www.data.albankaldawli.org/indicator/SM.POP.NETM?end=2022&locations=PS&start=1999

⁷ Each indicator is assigned a score based on a scale from 0-10, where zero represents the lowest intensity (most stable), and 10 represents the highest intensity (least stable).

⁸ <https://www.pcpsr.org/sites/default/files/Poll-87-Arabic-Full%20Text%20-March%202023.pdf>

Table 1: Palestinian External Migration Data (2005-9)

Year	Emigrants overseas (1,000 persons)	Returned immigrants (1,000 persons)
2005	5,841	7,077
2006	5,205	6054
2007	7290	5000
2008	7390	5854
2009	7122	6426

Source: PCBS, 2011. *Migration Survey in the Palestinian Territories, 2010. Main Report. Ramallah - Palestine.*

Does not include fully migrant families

Statistical reports from the *Migration Survey* in the Palestinian Territories for 2010 indicated that the number of overseas migrants from the Palestinian Territories reached about 33,000 during 2005-9 (note that this number does not include families who emigrated in their entirety), increasing after 2006 and declining slightly during 2009, as shown in Table 1. Data indicates that more than one-third of immigrants hold university degrees, such that university education was considered one of the most important reasons for the emigration of Palestinians, as it was the motive for the emigration of about one third of the total (34.4%). For 15% of Palestinian emigrants, the motive was better living conditions, while 14% cited the lack of suitable job opportunities in the Palestinian territories as their primary motive.

3.2 Factors

There are many factors that affect the decision to emigrate abroad, from the personal desire to experience life in other countries, or to work, amass wealth, and return to invest in the homeland. Other motives include university education, family reunification, asylum, or the wish to obtain second citizenship enjoy the privileges that this new citizenship entails. These factors are further reinforced by what is known as ‘repulsion’ factors prevailing in the land of origin, the extent to which a citizen is able to tolerate living with such factors, and the compatibility of his/her personality with the requirements of migration and adapting to new places and cultures.

Concerning the Palestinian condition, the occupation and its arbitrary policies are one of the most important factors that motivate Palestinians to emigrate overseas. Policies of restriction, repression, displacement and siege, as pursued by Israel’s occupation since 1967, which accelerated dramatically after the signing of the Oslo Accords. It created a wide range of economic and social challenges, characterized by a significant rise in levels of unemployment, poverty and food insecurity. This drives Palestinian youth (in particular) to want to emigrate overseas, to further

develop themselves in terms of better incomes, wealth creation, and securing a better standard of living for the remainder of the family back home. The rapid deterioration in economic and social conditions in the Gaza Strip, mainly resulting from the strict Israeli blockade since 2006, and the resulting significant increase in unemployment rates (45% in 2022) (PCBS, 2022b) and poverty are among the most important motives for the emigration of youth from the Gaza Strip, despite the grave dangers they are faced with during the immigration process. As shown in Table 1, immigration increased in 2007 in comparison with 2006, which could be a result of several political factors in that period.

The 2010 Migration Survey shows that for about 14.6% of immigrants, the main motive for emigration is improved standards of living, while 13.7% of immigrants cited the lack of job opportunities in the Palestinian territories (PCBS, 2011). Moreover, in a relatively old, MAS study (Hantash et al., 2008), the local political and security situation constituted the main reason behind outward migration. As for migrating skilled labor, they cited the difficulties they faced while trying to find a job compatible with their specialization, low incomes, a lack of job security, as well as exposure – on occasion - to repressive practices by the occupation, as primary motives for their migration. The results of this study are consistent with many recent studies and reports (Sabah, 2021; Di Barolomeo et al., 2011), as the political and economic conditions have not changed over the past two decades, but have rather worsened.

In addition to the above, the accumulation of conditions in Palestine have directly contributed to the decline in the economic and social feasibility of Palestinian higher education, which pushes graduates to emigrate abroad, or pushes students at Palestinian universities to select majors that are in high demand in countries hosting Palestinian labor. Emigration data for 2010 indicates that more than one-third of emigrants hold university degrees, as about 35.7% of emigrants residing overseas hold a bachelor's degree or higher, and a further 35.7% have completed high-school. Only 1.3% of emigrants residing overseas do not hold any educational qualification (PCBS, 2011).

3.3 Impact

Emigration overseas affects the Palestinian developmental situation in general and the economic situation in particular. The emigration of young people, especially those with an education, constitutes a loss for Palestinian economy and society. The loss of the skills they possess leads to the disruption (or decline) of the economic, social and structural development of Palestinian society, as detailed below (Hilal, 2007; Asem, 2015; Philippe, and Alessandra, 2015):

- First, immigration (even temporary immigration) leads to a decrease in Palestinian population density, a requirement for confronting the occupation and settlements, which are growing rapidly, especially in Area C, Jordan Valley, and Jerusalem. That is, the demographic balance in this aspect favors Israel's strategies of emptying Palestine of its people, especially youth, as the temptations to settle overseas are numerous.
- Many studies in developing countries have indicated that brain-drain leads to a shortage of skilled labor and, consequently, an increase in relative wages in exporting countries. This raises the cost of production as well as causing a decline in productive capacity (as the skills of remaining residents are less proficient than those who emigrated) (IZA, 2014). In Palestine, as in other developing countries, there is a fear that overseas immigration, especially for young people, could lead to a decrease in skilled labor especially in vital sectors (health, education, and infrastructure), which would raise production costs. As a result, a decrease in the growth rate in the Palestinian economy renders the private sector unable to offer attractive conditions (to counterbalance the 'repellent' factors) to retain skilled labor. In other words, the rate of economic growth is lower than what would otherwise have been possible (forgone growth). Within this context, many recent reports indicate a shortage of skills in vital sectors in Palestine during recent years (MAS, 2023), yet foreign emigration may not be the primary reason for this. That being said, the increase in the numbers of emigrants, especially young people, will exacerbate the issue in the future, especially with the high demand for skilled labor in the Israeli labor market.
- The increasing emigration of qualified labor overseas could lead to a decrease in human labor in some public services, especially vital ones, such as health and education, and as a result, negatively affect the quality of these services, especially since emigration in many developing countries is concentrated in these two categories (doctors, nurses, pharmacists, and teachers from different specializations). Emigration also leads to an increase in the cost of these services for Palestinian society, especially those services provided by the private sector for the purposes of making a profit. As for public services provided by the private sector, their quality declines. It is possible that remaining labor, despite their skills, are less proficient than those who migrated, or are reluctant to work in the public sector and prefer the private sector.
- Relatively high returns on education and skills overseas and low returns at home, a major reason for youth and talent seeking to emigrate (both temporarily and permanently). At the same time, the 'brain drain' causes a decline in relative returns to education in the Palestinian Territories, which exacerbates the problem characterized by the decline in returns to public investment in education (societal returns in particular). The orientation towards emigration also encourages Palestinian universities to invest in teaching subjects required

in foreign markets (especially the Gulf ones). This led to surplus capacity at universities, when foreign-based demand for such majors declined, and students shifted to studying other subjects.

- Emigration leads to forfeiting the possibility of generating local incomes, affecting unemployment levels, income levels, living standards, and the public sector's loss of tax revenues which government could otherwise have collected.
- Studies (IZA, 2014) indicate that remittances - in addition to their positive effects in terms of raising the standard of living of migrating individuals - can have inflationary effects (especially on the real-estate sector: housing and lands). Historic experience indicates that remittances pass through a cycle: escalating, reaching a peak, then declining. The impact on the living standards of some groups can be dramatic.

On the other hand, foreign migration (especially temporary migration) has important positive effects:

- Access to financial gains for the immigrant and his/her family, through jobs and opportunities available abroad but not at home. Their remittances back to their family and relatives contributes to alleviating poverty.
- The possibility of returning home with an adequate size of capital to invest, thus stimulating employment and growth while raising living standards, as poverty is reduced through remittances sent by immigrants to their families.
- Immigration contributes to reducing the unemployment rate in some sectors. This was formerly evident in the engineering professions and various educational specializations. Today, it is more prevalent in the health professions. This raises salaries, revenues and standards of living in the homeland.
- Expatriates (permanent emigrants) might build commercial or investment relations with investors residing in the homeland, raising the volume of trade with the host country, as well as increasing the volume of (foreign) capital invested in the national economy.

3.4 Creating a National Strategy for External Migration

Before setting policies related to the issue of external migration, a national strategy must first be drawn up, including short- and long-term goals. This should be facilitated through a comprehensive, national discussion in which experts, academics, politicians and emigrants themselves participate - whether they have returned or continue to reside in the Diaspora. It is also necessary to examine relevant international experiences. However, in the Palestinian case, it is not possible to develop a national strategy for external migration without taking into account the Israeli occupation, and resistance to it in various forms.

In light of the particularities of the Palestinian case, a strategy can be formed that is based on well-considered selectivity, controlling matters in certain sectors more than others, and dealing with the negative consequences of emigration on basic public services and the labor market (in certain categories). Detailed studies are also required to identify the limits of this strategy, the requirements for its implementation and its potential impact. In addition, it must be noted that it is important to provide detailed data on Palestinian migration overseas and its evolution over time, in addition to developing a comprehensive database of the detailed characteristics of migrants, and motivators that drive them to emigrate. It is also necessary to maintain effective channels of communication with emigrants in the country of destination, and/or upon their possible return to the homeland.

4. Internal Migration

The internal migration of Palestinians was strengthened by the emergence of the PA, and subsequent fundamental changes in the structure of the Palestinian economy towards the services' sector. Initially, Palestine was considered a 'country' that relied mainly on agriculture, which accounted for approximately 37% of the GDP in the mid-1970s (Al-Rantissi, 2020). This stands in stark contrast to its current contribution of 6% in 2022 (MAS, 2022). The State of Palestine was established along with various ministries and public service departments (social services, security services and public administration). This required the employment of many employees from different governates in government and/or public jobs, in addition to managing public services and implementing various tasks assigned to the state. This led to a jump in internal migration, especially towards the adjacent cities of Ramallah and Al-Bireh, the seat of government, the executive, the legislative and the judiciary (Al Malki and Shalai, 2000; Al Malki, 2012; PCBS, 2020a). In order to address the topic of internal migration in Palestine, this Section covers the size and characteristics of internal migration, and its most prominent impacts.

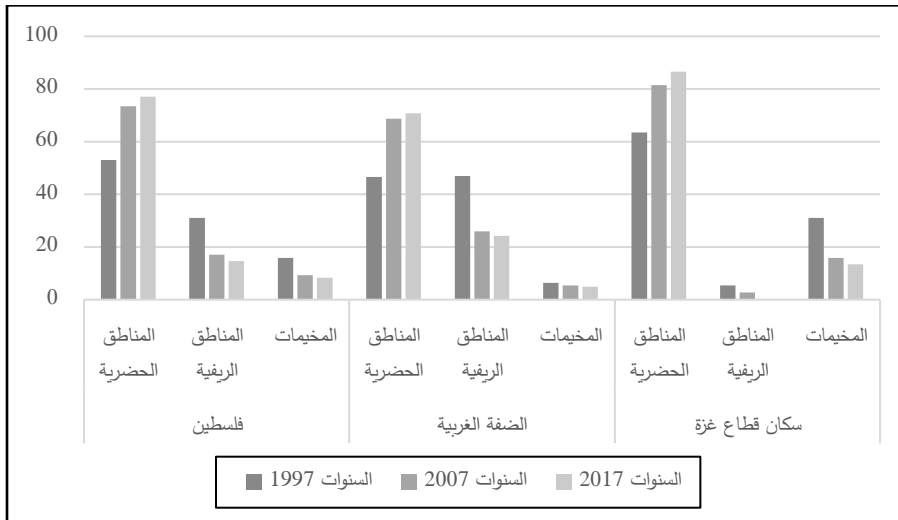
4.1 Size of Internal Migration and its Most Prominent Characteristics

Available statistical data on internal Palestinian migration provides the following insights:

- After the signing of the Oslo Accords, many Palestinians preferred to work in government jobs than agricultural ones, which contributed to increasing rates of internal migration from rural to urban areas, strengthening the status of urban areas at the expense of the countryside, and remote areas far from urban centers. Most of the Palestinian population currently lives in urban conglomerations (PCBS, 2020a). According to the results of the 2017 census, the percentage of the urban population in Palestine reached 77.2%, compared to 14.5% in the countryside and 8.3% in the camps (PCBS, 2020b - see Figure 2). Al-Malki (2012) also confirmed that part of the internal migration in the West Bank was from within the same type of community i.e., urban to urban.
- The case of the Palestinians is best characterized by the predominance of political motives over economic ones in terms of factors of attraction and repulsion, especially those resulting from the occupation's measures towards the city of Jerusalem. This forced many residents to migrate to the governorates of Ramallah/Al-Bireh and Bethlehem, or what has become known as the (urbanite) periphery of the Jerusalem Governorate, located west of the Separation Wall. About a third of J2 residents in Jerusalem immigrated in the period between 2007-2017 according to the general census data for 2007 and 2017, while approximately 4,829 individuals reported that they had immigrated

from Jerusalem (Area J1) during the same period (This data was collected using the short surveys for the 21 localities in the J1 area of Jerusalem and was not included in the Migration Atlas analysis) (PCBS, 2020a).⁹

Figure 2: Percentage Distribution of the Population in Palestine by Type of Locality (1997-2017)



Source: PCBS (2020b). *Sustainable Housing Development in Palestine 2007, 2017*. Ramallah - Palestine.

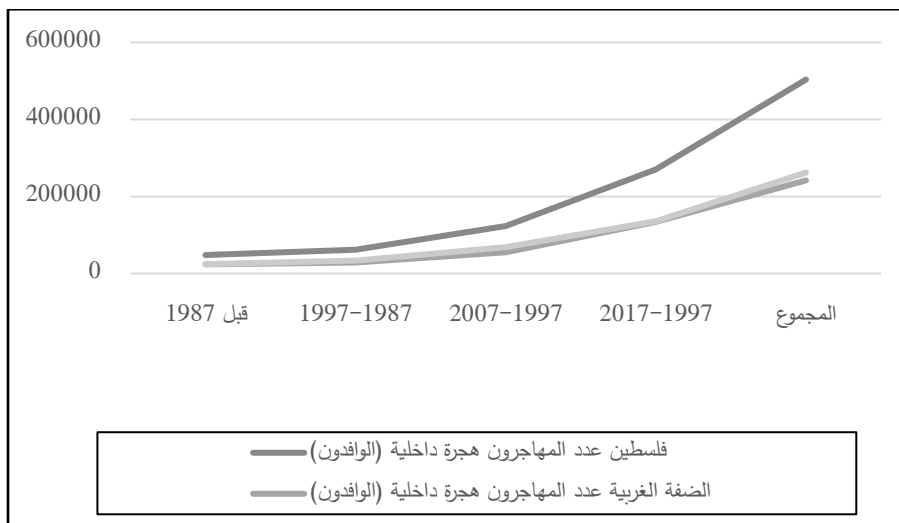
- The colonial and occupation reality imposed a tripartite geographic division on the Palestinian territories: the West Bank, Jerusalem and the Gaza Strip. This is evident (with some reservations) in internal migration statistics. During the period 2007-17, the number of internal migrants reached about 270,000 citizens, of whom 134,400 reside in the West Bank and 135,700 in the Gaza Strip (PCBS, 2020a). Internal migration departing the West Bank is a “local, regional” phenomenon, as 99% of these flows are within the West Bank itself. Only 572 individuals moved from the West Bank to the Gaza Strip. The same applies to the Gaza Strip, where 98.3% of internal migration was within The Strip itself. Less than 2,000 individuals moved from the Gaza Strip to the West Bank (PCBS, 2020a).

⁹ The Jerusalem Governorate is divided into:

1. Jerusalem (Area J1): annexed by the Israeli occupation after 1967. It includes: Kafr Aqab, Beit Hanina, Shuafat Camp, Shuafat, Al-Issawiya, Sheikh Jarrah, Wadi Al-Jouz, Bab Al-Sahira, Al-Suwanah, Al-Tur (Mount of Olives) Jerusalem (Bait Al-Maqdis), Al-Shiyah, Ras Al-Amud, Silwan, Al-Thawri, Jabal Al-Mukaber, Al-Sawahra Al-Gharbiya, Beit Safafa, Sharafat, Sur Baher, Umm Tuba.
2. Jerusalem (Area J2) and refers to the following localities: Rafat, Mikhmas, Qalandia refugee camp, Qalandia, Beit Duqu, Jaba', al-Judaira, al-Ram, Dahiyat al-Barid, Beit Anan, al-Jib Bir Nabala, Beit Ijza, al-Qubeiba, Khirbet Umm al-Lahm, Biddu, Nabi Samuel, Hizma, Beit Hanina Al-Balad, Qatna, Beit Surik, Beit Ikasa, Anata, Al-Ka'abneh (Bedouin community), Al-Za'em, Al-Eizariya, Abu Dis, Arab Al-Jahalin (Salamat), Al-Sawahra Al-Sharqiya, Sheikh Saad.

- Social factors (marriage and companionship) are the main reasons for internal migration in both the West Bank and Gaza Strip (PCBS, 2020a).
- One of the most prominent features of internal migration is the phenomenon of internal migration among refugees (PCBS, 2020a) (this is not referred to forced migration), given their lack of ownership of land and real estate in areas where they previously resided. This facilitated the process of relocating, in order to improve their living conditions.
- The majority of internal migration (immigrants) in the West Bank are females, with a percentage of approximately 42% in 2017. This can be explained by the fact that most internal migration results from marriage (PCBS, 2020a).
- Most internal outflows occur within the borders of each governorate. Outflows to a place of residence in a governorate different from the previous governorate accounted for less than 34% of total outflows in the West Bank (PCBS, 2020a).
- The Ramallah/Al-Bireh Governorate continued to be the only one in the West Bank that received immigrants from all governorates. The North Gaza Governorate continued in the same capacity in the Gaza Strip (PCBS, 2020a).
- The Attraction Index for the Ramallah/Al-Bireh Governorate during 2007-17 reached 106 new residents per 1,000 habitual residents (PCBS, 2020a).
- Palestinian internal migration differs from its counterparts in other countries, due to its lack of concentration in migration from rural to urban areas. The main reason is that Palestinian workers are forced to work in the Israeli labor market despite its difficult circumstances and conditions. On the other hand, due to the absence of this type of internal migration, slums or so-called shantytowns did not appear, as in major cities in developing countries and others.

Figure 3: Internal Migration (Immigrants) in Palestine by Period and Region (1987-2017)

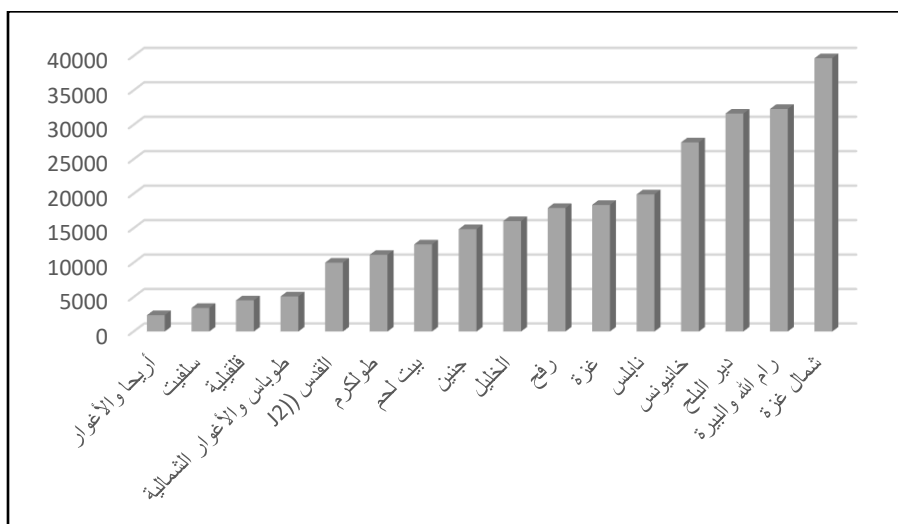


Source: PCBS (2020a). Migration Atlas. Ramallah - Palestine.

The graphics above presents a set of statistics on internal migration. PCBS statistics show a clear increase in the number of internal migrants over the years, as shown in Figure 3.

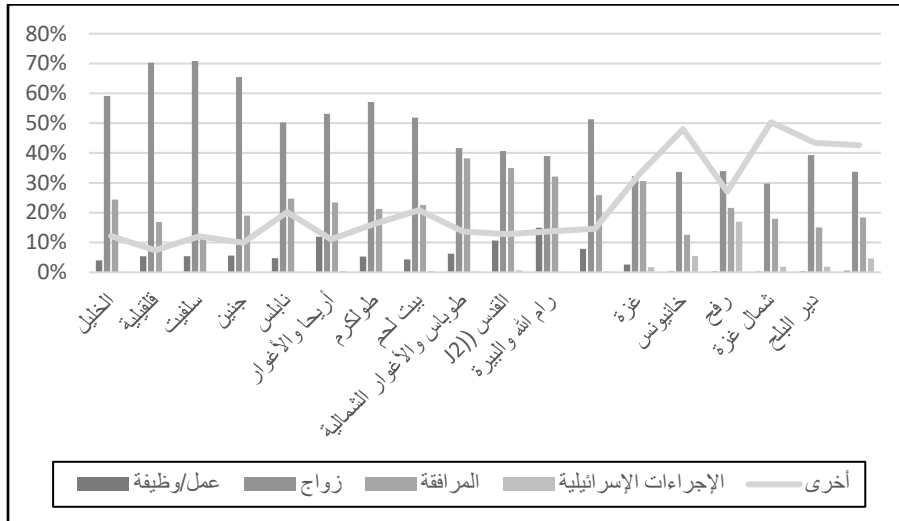
Figure 4 shows the number of internal migrants during 2007-17 by governorate, with the Ramallah/Al-Bireh governorate having the highest percentage on the internal migrants' index. Motives for internal migration also vary between the West Bank and the Gaza Strip, as marriage is considered the primary motive for internal migration for females in the West Bank (Particularly in the governates of Qalqilya, Salfit, Jenin, Hebron, Tulkarem, Jericho and the Jordan Valley) in contrast to the low rate of job search as a motive for migration. For males, the search for a job is one of the most important reasons for migration in the western governorates of the West Bank (especially in Jericho and the Jordan Valley), in addition to the Ramallah/Al-Bireh governorate, and to a lesser extent, Bethlehem (PCBS, 2020a). As for the Gaza Strip, marriage is considered an important motive for internal migration, but it is not the primary reason for it. As with marriage, job search is also not considered a primary reason for internal migration. Israeli measures are, however, a reinforcing motive due to instability in the Strip governates, as shown in Figure 5 (PCBS, 2020a).

Figure 4: Number of Internal Migrants by Governorate in the West Bank and Gaza Strip (2007-17)



Source: PCBS, 2020a. Migration Atlas. Ramallah- Palestine.

Figure 5: The Most Important Causes of Internal Migration by Governorate (2017)



Source: PCBS, 2020a. Migration Atlas. Ramallah- Palestine.

4.1.1 Migration from Area B, Area C, Area H2 (Hebron), Jerusalem (isolated villages west of Separation Wall)

The number of Palestinians in the West Bank and Gaza Strip reached approximately 5.4 million at the end of 2022 (PCBS, 2023). More specifically, according to the division of the West Bank’s land by the Oslo Accords, Area A in the West Bank constitutes 17.7% of the total lands of the West Bank, covering all Palestinian cities and their surrounding areas, with the exception of Jerusalem (J1, J2). As for Area B, it constitutes 18.4% of the West Bank. This area covers numerous Palestinian towns and villages (Ministry of Local Government, 2017). More than two million Palestinians reside in Areas A and B, or about 83% of the population of the West Bank (PCBS, 2021).

As for Area C, characterized by full security and military control by the Israelis, this constitutes about 60% of the lands of the West Bank, including all areas of Jerusalem (J1). Palestinians are prohibited from exploiting more than 70% of its area. The population of Area C lands exceeds 500,000, representing about 21% of the population of the West Bank, in addition to about 4.3% of the lands of the West Bank, including natural reserves, Area H2 (Hebron) and others (Ministry of Local Government, 2017; PCBS, 2021). With regard to residents of the Jerusalem areas, their number reached approximately 487,000 at the end of 2022, including 65% of those residing in Area J1 in Jerusalem (PCBS, 2023).

By virtue of military force, the Israeli occupation controls everything related to people's lives in Area C, including movement, granting construction and infrastructure permits, structural planning for villages and residential sites, as well as land use and investment. The occupation seeks, through these measures, to empty (most of) Area C of its inhabitants, in order to expand settlements and steal agricultural lands. The occupation authorities also demolish Palestinian homes in large numbers, under the pretext of the lack of a building permit or building outside the area of the master plan. This leads to the forced displacement of Palestinians from their place of residence. Since 2017, over 650 donor-funded structures have been demolished (238 in the past year alone), and over 15,000 demolitions are pending solely in Area C, causing the forced displacement of many Palestinians (OCHA, 2021). Israeli policies are also based on disrupting access to public services and to economic and social infrastructure, causing Palestinian residents of the region to leave, or move to other locations in Area C, in a manner consistent with the Zionist vision of the demographic, economic and geopolitical arrangement of the region.

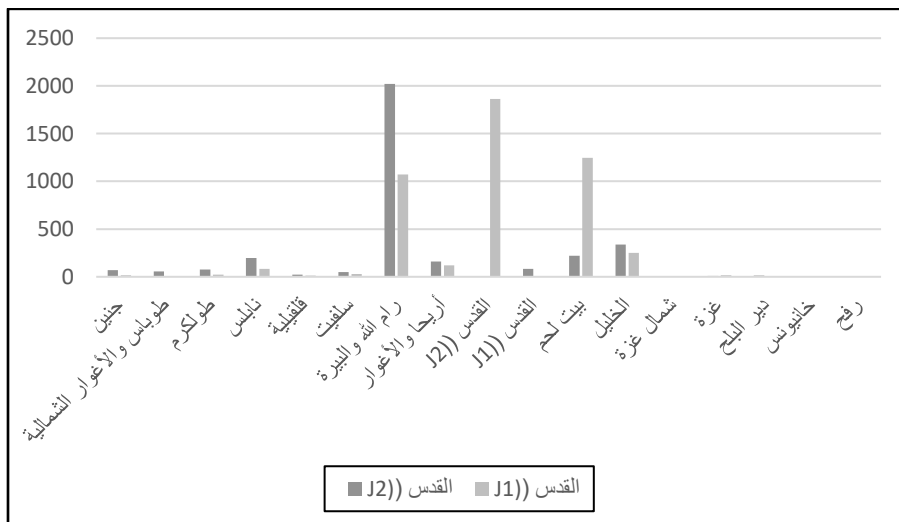
Estimates by the PCBS (2021), based on the data from the General Census of Population, Housing and Establishments for 2017, illustrated that there are 528,000 residents living in 412 residential areas in Area C, including the J1 Area in Jerusalem, subject to full Israeli civil and security control. This covers just over 60% of the West Bank, which suffers from significant restrictions on construction; the Separation Wall and limited access to land, water and basic services; annexation plans; and violence and harassment by the army and settlers that enhances citizens' feelings of a lack of security and stability (OCHA, 2011).

As for the areas of Jerusalem, the colonial division of land created a demographic crisis, characterized by the confining of Palestinians in East Jerusalem into 13% of its total area, increasing the burden imposed on available resources and facilities. Since Israel's occupation in 1967, it has carried out a set of practices that aim to reduce the number of Palestinians residents in Jerusalem, including the imposition of legal conditions for retaining "permanent residence" status and accessing civil rights (national insurance, property taxes, municipal services, etc.). Moreover, the Separation Wall severs Jerusalem from the rest of the West Bank, further suffocated by the building of settlements in East Jerusalem. All of this leads to an increase in the migration of Jerusalemites to other governorates. According to revised estimates based on the final results of the 2017 Census, the Jerusalem area has the largest number of Palestinians living in Area C: about 52,800 for Area J2, about 280,000 in the J1 area in Jerusalem, while another 65,557 Palestinians live in Area C of the Hebron governorate (PCBS, 2021). Statistical data sourced from PCBS for 2007-17 (see Figure 6) shows that migrants leaving Jerusalem (Area J2) mostly resettle in the Ramallah/Al-Bireh governorate, followed by the governorates of Hebron, Bethlehem, and to a much lesser extent, the other governorates.

Concerning Area J1, migrants leaving this area typically relocate to Area J2, followed by the Bethlehem governorate and the Ramallah/Al-Bireh governorate. This is mainly due to political and economic reasons: forbidding construction, colossal taxes, and other factors mentioned previously.

Despite the lack of accurate data on the Palestinian population for all of Area C, as a result of the restrictions imposed by the Israeli occupation on the official historical records of the population, the number of Palestinians residing in the Jordan Valley before 1967 was estimated at 250,000 people, which decreased very dramatically to reach 53,562 only in 2018 (Al-Haq, 2018), bearing in mind that 88% of the Jordan Valley lies within Area C, and the Jordan Valley itself occupies nearly one-third of the area of the West Bank. Although a large number of the citizens of the Jordan Valley were forced to emigrate as a direct result of the 1967 war, Israeli practices over the past 50 years have played a major role in preventing a large number of them from returning to their homes, forcing them to migrate to more urban areas. Indeed, the residents of the Jordan Valley have long suffered from numerous challenges that has increased their rates of migration to other areas, largely due to Israel’s policy to reduce the size of the Palestinian population in this area, long before the Oslo Accords, when large firing zones and nature reserves were established therein (OCHA, 2014).

Figure 6: Internal Migration from Areas J1 and J2 in Jerusalem to other governorates (2007-17)



Source: PCBS (2020a). Migration Atlas. Ramallah- Palestine.

Under occupation, the ability of the Palestinian economy to stimulate job creation will remain low, limiting demographic gains. A World Bank study showed the losses incurred by the Palestinian economy because of the occupation preventing

the Palestinians from developing and exploiting Area C in the West Bank. The study estimated that resultant losses amounted to 23% of Palestinian GDP for 2011, amounting to \$2.2 billion annually (World Bank, 2014). Within the same context, an assessment recently revealed the economic cost of additional restrictions imposed by the Israeli occupation of the Palestinian Territories (Area C) revealed shocking numbers: \$50 billion between 2000 and 2020, or \$2.5 billion annually (UNCTAD, 2022).

4.2 Impact

In international experiences (Vignoli, 2017; Vargas-Lundius et al., 2018) internal migration leads to changes in population density in both the areas of departure and arrival. This leads to changes in the volume of demand for social and public services (health, education, water, electricity, sanitation); security services (police, judiciary, crime prevention); infrastructure (roads, traffic, transportation, communications and public places); as well as demand for housing, land, and various other services (restaurants, recreational facilities). Consequently, the demand for various services increases in the receiving cities and decreases in the sending places. An increase in the rate of demand leads to an increase in prices and a lengthening of the waiting period for obtaining required service. It may also lead to a decline in the quality of provided public service, leading to the emergence of private-sector service providers operating on the basis of commercial profitability. Thus, two forms of public services will emerge in recipient cities: high quality services and poor-quality services. The former is consumed by those who are more affluent and capable of paying, the latter by the less (financially) fortunate classes.

This is evident by the presence of compulsory, educational services in the Palestinian Territories, where the government's educational sector requires more response to the increase in demand. This led to high rates of overcrowding in public schools, which could lead to a further decline in the quality of government-provided educational services with the passage of time. In parallel, a private, profitable educational sector has grown and flourished in the cities of Ramallah, Al-Bireh, Bethlehem, Nablus and Gaza City, with high prices that greatly limit the number of those who are able to access it.

In addition to the educational aspect, a private, profitable health sector has also grown in recent years in parallel with the governmental health sector. The private sector exceeded the public sector in quality, speed, and attracting exceptional specialists from medical professionals, at higher rates that are not commensurate with the prevailing living standards in Palestine. It is also worth noting, the rapid rise in land and apartments in the main Palestinian cities, and the rise in the cost of living when compared to other cities and towns.

All of this leads to a widening of class divisions in Palestinian society, especially in the major cities cited above, which are the primary destinations for internal Palestinian immigration. On the other hand, the increase in population density increases pressure on existing municipal services, specifically water and electricity distribution networks (and their sources), sanitation and roads. This calls for additional investment, placing an additional burden on water and energy resources, and others.

Moreover, internal migration to these cities leads to an increase in the demand for produced or imported goods and services, constituting an important economic activity for various sectors of production and services. This constitutes promising and important investment opportunities across numerous fields, particularly construction/housing, and the production (and import) of food and clothing, in addition to various other services.

As for migrants' destinations, apart from the social and psychological consequences of the separation of families, and problems resulting from the lack of population density associated with the political aspect related to preserving the land, and facing Israeli measures in migrants' destinations (Area C, for example, or Jerusalem), the decrease in population density, combined with the decrease in demand for public services and public infrastructure, leads to two simultaneous effects, one positive and the other negative. This, in turn, leads to an improvement in the availability of these services, across both quantitative and qualitative dimensions. However, this could lead to a decrease in societal returns for these services, due to what is known as the problem of excess production capacity.

This prompts the government - and agencies responsible for providing such services - to reduce their availability in quantity, or quality, or both. For example, some regions suffer from students traveling to neighboring regions for basic education, due to the lack of schools in that region. In other regions, it can be noticed that not all governmental (or even private) healthcare services are available, or that general practitioners or specialist doctors are only accessible for a few hours a week, at specific hours of the day, and these services are not available after working hours.

These conditions governing social, security and other public services in separate areas of the Palestinian territories cannot be attributed solely to internal migration. Undoubtedly, there are many other reasons: limited government capabilities, or Israeli measures that prevent the government from undertaking development interventions specifically in area C, in addition to the State of Palestine's lack of sovereignty as a result of political and security agreements with the Israeli occupation. To find out the actual and detailed reasons, their importance and degree of significance, further extensive studies are required.

5. Conclusions: How to Manage the Demographic Shifts resulting from External and Internal Migration in order to promote Comprehensive Development

Palestine has witnessed numerous demographic shifts associated with accelerated external and internal migration, resulting from a combination of economic, social and political factors. In the midst of all this, the occupation is implementing its long-term strategy, which is to empty Area C (or most of it) of its residents and prepare housing for Zionist settlers. Permits for Palestinian construction are routinely denied, while master development plans for Palestinian communities are rejected. The occupation demolished Palestinian homes in large numbers, under the pretext of the absence of a construction permit, or building outside the master plan. This leads to the forced displacement of Palestinians from their places of residence.

The Israeli settlement policies show differences in concentration between four sections (or parts) of Area C: the Jordan Valley, Bedouin communities, rural areas and Jerusalem. The occupation's strategic goal is to empty the largest possible number of Palestinians, while dividing communities from one another by building settlements and checkpoints.

Donor countries, in cooperation with international institutions and the Palestinian government, have been implementing development programs since 2007, aiming to alleviate Israeli pressure on Palestinians living in Area C. These programs mainly focus on structural plans and economic and social infrastructure. It is not within the scope of this research to evaluate these programs, their impact, and the degree of their relevance to the developmental needs of Area C communities. Those in charge admit that it is, at best, much less than what is required, and that, at best, they face procrastination on the part of the Israeli side, and at worst, obstruction (in most cases). Indeed, numerous completed projects were subsequently demolished by Israel, which prevented their exploitation, or even access to them.

On the other hand, development programs and projects planned for Area C require Israeli approval. This is rarely granted in accordance with Palestinian requests, or the developmental needs of the region. Thus, Israeli policies work to disrupt access to public services, while the poor economic and social infrastructure in the region encourages the Palestinian population to leave, or to move to an alternative location within Area C, in a manner that is consistent with the Zionist vision of the demographic, economic and geopolitical structure of the region.

In this Section, we present a set of developmental policy proposals in order to reduce the challenges and effects resulting from migration and to enhance the political and economic steadfastness of Palestinians. This includes policies

targeting residents of Areas C, to stabilize their conditions and strengthen their steadfastness on their lands.

5.1 Proposed Policies (External Migration)

Available studies on international experience point to numerous lessons that outline strategies adopted to deal with the ‘brain drain’ syndrome in different countries. These strategies call for a measure of cooperation between “exporting” and recipient countries. Here, we summarize the most important policies (from international experience) that can be applied in the Palestinian context, extracted from the study conducted by the International Organization for Migration: IMO (Farrant et al., 2006).

- Work on developing coordination between countries, by adopting an international and national system of coding. The objective of this mechanism is to prevent the poaching of highly skilled workers and to monitor the brain drain process, while encouraging cooperation between non-governmental organizations (NGOs). This strategy calls for relying on an international organization that includes both exporting and recipient countries in its membership, working to create and develop coordination mechanisms between them.
- Work on formulating bilateral agreements with countries receiving Palestinians on a temporary migration basis. The primary objective of these agreements is to ensure that all parties benefit from migration: the immigrant and the two countries. This includes the following:
 - Provide skills’ training in using modern technology.
 - Specify provisions regulating the transfer of funds to savings’ accounts at Palestinian banks of the immigrants’ choice. These funds contribute to financing local development and strengthening the immigrant’s attachment to the homeland.
 - Obtain a commitment from developed countries to contribute to the development of the Palestinian economy, especially in developing sectors where the brain drain in skills is concentrated.
 - The Palestinian government should adopt strategies and policies that facilitate the reintegration of returnees to Palestine.
 - Cooperation between the Palestinian ministries of Labor Health, and Education (and others of interest) in the process of planning, managing and following-up on temporary migration processes, with a mechanism that adopts transparency, responsibility and equal opportunities, without prejudice to the human rights of immigrants.
- Work to retain competencies, especially in specific sectors, in order to maintain appropriate levels of services related to these competencies. Work to raise

levels of supply through the improvement of working conditions and incentives that can counter factors of repulsion, in order to reduce the external migration of Palestinians:

- Adopt a public employment policy that accommodates efficiency as the first criterion in public employment and promotions, characterized by transparency and clarity.
 - Provide incentives related to performance, and provide the appropriate environment for development, including scientific, economic and social upgrading.
 - Direct grant funding to programs dedicated to training, rehabilitation and skills' development in sectors affected by the brain drain.
 - Encourage the return of qualified emigrants and attract Palestinian scholars across various fields.
 - Focus on the advancement of education in development planning, starting from the elementary stage. Focus on teaching mathematics, science and research methods. Reconsider the "non-dropout" policy, and encourage vocational education through the adoption of special incentives. Adopt certificates for different professions as a requirement to the practice of that profession.
 - Provide special budgets to non-profit universities that are not linked to quantity (the number of students). Adopt an evaluation system for universities, through national exams for graduates from various disciplines.
 - Focus on developing the teaching profession by selecting the most qualified personnel, while encouraging the most scientifically capable students to enroll in colleges that graduate teachers.
 - Provide incentives for the private sector to invest in human capital through training and education.
 - Adopt talent exchange programs to provide opportunities for exchange between the Palestinian economy, foreign talent and Palestinian migrant talent, for the transfer of expertise and experience.
- Work to encourage the transfer of immigrants to the Palestinian economy, by providing incentives to attract savings in Palestinian banks.
 - Encourage the involvement of immigrants with large financial capabilities across various investments, especially small-scale projects, while encouraging companies that attract them.
 - Adopt a partnership program between the government and immigrants (expatriates) to encourage them to return to the homeland and invest in its economy.

5.2 Proposed Policies (Internal Migration)

This section outlines a set of proposed policies to manage issues related to internal migration in Palestine, as follows:

- Focus on providing detailed data, including data related to Area C, on the phenomenon of internal migration, by including it in various, statistical surveys, to help understand its finer details. This helps to manage its consequences.
- Take into account the challenges that accompany internal migration in the local and national development planning process, at both departure and destination areas.
- Work to reduce the degree of centralization in governmental activities, and thus reduce some of the factors driving internal migration.
- Develop educational and health services in the departure area, both in terms of number and size, to reduce their underdevelopment as a cause of internal migration.
- Encourage investment in ‘export’ areas to mitigate the obstacles resulting from occupation policies and the lack of resources.
- Conduct detailed studies of the phenomenon of internal migration, especially in the cities of Ramallah, Al-Bireh, Bethlehem and Nablus, in the West Bank; and Gaza City in the Gaza Strip.
- Continue the Palestinian government’s approach to provide financial and moral support for the residents of Area C, including Bedouin communities, in order to preserve their sources of livelihood and encourage their survival on their land, in the midst of the difficult conditions they suffer from.
- Provide the necessary infrastructure for population centers in Area C, in order to enhance the security of its residents and encourage them to stay.

In view of the specificities of Area C, strategic policies in subsequent years must be based on the following:

The Zionist occupation of the Palestinian territories is considered the first obstacle to the Palestinian development process, especially in Area C. The official Palestinian relationship with the occupation is considered the most severe restriction on governmental and popular action in Area C. Therefore, any plan for developing Area C must be based on the principle of “confronting the occupation”, in accordance with international and humanitarian law. This plan must depart from the Oslo Accords and their aftermath, and strive to impose new rules for such a relationship, characterized by the victory of the rights of the Palestinian people, their land and resources. This Palestinian strategy is justified at local, regional and international levels, especially since political and economic agreements were temporary and interim (their timeframe expired at the end of 1999). It must be noted

here that the Israeli government has not adhered to any of the agreements signed with the Palestinian government, nor the understandings brokered by the various countries since the showcase signing of the Agreement of Principles in 1993.

- At the international level:
 - Intensify diplomatic efforts to promote Palestinian rights, while marketing adopted strategies.
 - Work to pressure the occupation, through international platforms and human rights/humanitarian organizations, including international courts, to put an end to war crimes committed by the occupation.
 - Provide financial and legal support for those affected by the occupation, allowing recourse to international courts.

- At the local, community-based level:
 - Establish support groups (in the form of civil society organizations) for Palestinians who are exposed to the harm caused by the occupation.
 - Provide psychological support and mechanisms for social cohesion and solidarity.
 - Provide all public and social services across all levels (education, healthcare and social services) to all residential communities in Area C.

- Local governance and its institutions:
 - Provide technical and financial support for the development and completion of structural plans at various, local government agencies, and their approval and adoption of plans without waiting for Israeli approval.
 - Work in partnership with donor countries to put pressure on the occupation to approve structural development plans.
 - Develop approved structural plans towards the vertical expansion of construction, to provide land for agriculture and development projects and reduce unauthorized construction, which is the main pretext for the occupation's demolition policy in Area C.
 - Support linkages between villages and towns located in Area C, through the development of the road network and water and electricity networks.

- In the economic sphere:
 - Adopt a strategic plan for the development of the agricultural sector, focusing on enhancing steadfastness on the ground, in addition to economic profit.
 - Focus on the integration of the role of the government sector and the private sector. The government provides political, administrative and planning support, as well as incentives, to the private sector, which must contribute to the development of the agricultural sector in Area C, even if profitability

is low. The government has various mechanisms at its disposal to stimulate the private sector to invest in Area C.

- Tax incentives, through special treatment with investment promotion laws.
- Legal support in the face of the occupation.
- Government insurance programs across various fields, to withstand the additional risks of investment in Area C.
- Establish non-profit organizations to market agricultural products from Area C and facilitate their entry into Arab and international markets.
- Establish the necessary bodies and develop existing ones to provide agricultural extension services, planning, marketing and agricultural processing services.
- Establish cooperative societies for production inputs, sourcing these on a profitable basis to small farmers in particular.
- Provide technical and financial support for the development of agricultural technology in Area C, such as encouraging drought-facing technology and productivity enhancing technology.
 - Support local tourism in Area C.
 - Provide safe and adequate sources of water.
 - Encourage the private sector (with financial incentives) to invest in the solid and liquid waste management sector in Area C.

In addition to the above, given the importance of Jerusalem to the Palestinian cause and its currently central position in the eyes of the occupation, it is necessary to allocate appropriate levels of developmental, political and social attention to it. Adequate budgets must be allocated for a strategic plan that confronts the occupation's strategy to Judaize the city of Jerusalem and deport its people, through the formation of political, social and trade union activism. There is also a need to counter the demolition of homes under the pretext of not having a building permit, and efforts by the Municipality of Jerusalem to prevent the formulation of structural plans and grant construction permits.

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**Social Protection and Demographic Changes in Palestine
Risks of Continuing Current Indicators**

**Misyef Jamil
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Executive Summary

The purpose of this paper is to monitor the reality of social protection, in order to develop recommendations and appropriate policies in light of current and future population indicators. It provides a descriptive, analytical and statistical methodology, by reviewing Palestinian social protection programs and institutions, as well as gaps in social protection systems and mechanisms for distributing social protection assistance.

Accordingly, this paper is concerned with illustrating the importance of the centrality of social protection systems in Palestine on all aspects of social and economic life. This is evidenced by the deterioration of all Palestinian social indicators, given the predominant absence of social protection systems, and the wide dispersion of relief aid. The paper also focuses on demographic and population indicators that are organically linked to (and affected by) this form of protection. These indicators are concentrated in unemployment, poverty, multidimensional poverty, social deprivation, life security, gender equality, economic inequalities between households (income inequality), health, education and human rights across all areas of life, as well as the future of children, people with disabilities, the elderly and women.

On the other hand, the paper demonstrates the urgent need to establish comprehensive social protection systems to face future population growth and meet economic and social needs. This population growth is the motive for establishing an effective social protection system, to serve as a basic lever in withstanding the negative consequences of this growth and reducing economic gaps. This cannot be realized without real investment in all areas of social protection, as this effectiveness depends on the extent of coverage and comprehensiveness of social protection systems, especially social security. Its future vision is a crucial determinant for future generations, while reflecting anticipated demographic changes.

The paper reaches a basic conclusion: that all Palestinian social indicators are in a state of deterioration, and that the continuation of this situation (in light of population growth) will only further exacerbate social poverty in all its dimensions, given the weak resources allocated for social protection, weak investment, and the dispersion and non-sustainability of aid. This will not allow for meeting the ever-increasing needs of the future. It also appears from population data that the most-at-risk groups are the elderly, women and people with disabilities, as there has been no tangible improvement in their indicators.

The paper recommends a set of policies and measures that reduce poverty and unemployment and secure a minimum level of income for needy families, by focusing on the most important elements of social protection. In particular, it focuses on the establishment of a contribution-based social security system, while strengthening the Palestinian health system and maintaining social welfare, as well as current assistance provided by (official and unofficial) agencies. This ought to continue until effective social security and health systems are operating. These policies will solve a large part of the problem concerning workers without contracts, as well as problems with minimum wage. Moreover, the health system guarantees the provision of services to groups outside the scope of (public or private) health insurance, while paying attention to Palestinians' labor rights within the Green Line, and their application.

1. Introduction, Justifications, and Objectives

Social protection has both positive impacts (when effective) and negative impacts (when weak) on population composition, as well as social, economic, and demographic dimensions. Social protection is also inherently linked to unemployment, poverty, multidimensional poverty, social exclusion, livelihood security, gender equality, economic inequality among families in terms of income and inequality, health, education, human rights in all life domains, the future of children, persons with disabilities, elderly, and women. All these indicators are relevant to population and their current and future livelihoods.

Having a flexible and appropriate social protection system is a fundamental pillar in enhancing social stability, meeting the needs of citizens, reducing poverty, and securing a decent life for future generations, which helps communities to withstand and cope with crises (as seen during the COVID-19 pandemic). It also contributes to achieving long-term sustainable development goals. This is particularly important for countries that do not achieve comprehensive economic growth for all segments of society. In the case of Palestine, social protection, with its various components, is an essential pillar for Palestinian resilience. Therefore, it is inherently linked to Palestinian development efforts and the initiatives aimed at utilizing the demographic factor as a driver for sustainable development and enhancing the resilience of citizens in different locations in Palestine.

It is worth mentioning that the health insurance system and the contribution-based social security system are crucial and integral parts of achieving comprehensive social protection and sustainable development. They cover a significant part of these services that burden citizens, and they constitute a considerable part of total household expenditures. Additionally, government policies and interventions to ensure social protection and prevent falling into poverty are also significant. However, it should be noted that the financial burdens on the government, in light of successive and recurring financial crises and the inflation in current expenditures, have weakened the capacities of the Palestinian treasury to provide social expenditures, and thus contributed to the weakness of the current social protection system, particularly in the absence of a Palestinian social security system, which is considered a dynamic, strategic and fundamental factor for building the social protection system in Palestine. Considering these challenges, the family and community are cornerstones for social protection, especially for women, children, and elderly.

On the other hand, addressing future population growth and meeting economic and social needs is one of the most crucial justifications for establishing an effective social protection system that serves as a fundamental lever for bearing the burdens accompanying this growth and reducing economic and social gaps for future generations. It also ensures a minimum level of income for Palestinian households to protect them from poverty. However, this cannot be achieved without real investment in all types of social protection that depend on the extent of coverage and inclusiveness of social protection systems, especially social security, and their future vision for future generations and the expected demographic changes.

The need for social protection has significantly increased in the "post-COVID-19 world," especially in countries lacking an effective and comprehensive social protection system. Palestine, like other countries worldwide, has been affected by the COVID-19 pandemic, which resulted in deep and unprecedented economic and social impacts (e.g., increased poverty and unemployment

rates, lack of medical and livelihood care, particularly for the elderly and persons with disabilities). These impacts have particularly affected the poor and marginalized segments of society, who do not have any form of social protection, such as women, elderly, and persons with disabilities. The pandemic has unfolded the significant gaps in the Palestinian social protection sector and its impact on all segments of the population. Despite the near end of the pandemic, the Palestinian society still suffers from the weakness and fragmentation of social protection systems. Wide sectors and social groups still without any social safety net or social protection, which results in further vulnerability and weakness for the poor, marginalized, elderly, and unemployed segments. In contrast, experiences in other countries, including neighboring ones, have shown that communities with strong and effective social protection systems are better able to cope with the pandemic and its effects. The best example in this regard is Jordan's experience with the Social Security Law, which has significantly contributed to providing essential financial support to workers affected by the pandemic. The Jordanian government decided to pay the establishment or employer the wage for 14 working days per employee, after which the worker or employee is immediately transferred to social security. This demonstrates how social security reinforces the principles of social justice, human rights, and ensures the economic and social rights of the affected individuals (MAS, 2020).

This paper highlights the utmost importance of activating a social protection system in Palestine and expanding its coverage through examining the current situation of social protection, offering recommendations and suitable policies based on current and future population indicators within descriptive, analytical, and statistical approach. The paper presents two main tracks: the first examines the current situation and shortcomings of social protection systems by reviewing Palestinian social protection programs and institutions, identifying gaps in social protection systems and mechanisms of distributing social protection assistance, addressing the failure to establish a social security system. It also explores current and future health indicators in Palestine and their impact on marginalized groups and future generations in terms of their social needs. The second track is based on current demographic indicators and future expectations to identify future needs for social protection measures that consider population growth and future requirements, aiming to prevent the deterioration or backstepping of the current social protection system. This paper also addresses various social and economic dimensions related to social protection and the demographic composition of Palestine, with the objective of proposing strategies and policies based on a comprehensive economic and social development perspective capable of addressing demographic, social and economic challenges.

2. Overview on Social Protection Reality

2.1 At Global and Arab Levels

According to the data presented in the World Social Protection Report 2017-19, only 45% of the world's population is effectively covered by social protection benefits, while 55% (over 4 billion people) do not have access to any protection. Furthermore, only 29% of the world population has access to comprehensive social security, compared to 27% in 2014/2015 while 71% (5.2 billion people) do not have access to protection or they have access to partial protection only. The report highlights that only 35% of children worldwide have effective access to social protection, with approximately two-thirds of children globally (1.3 billion children) not covered in social protection systems, most of whom live in Africa and Asia.

The majority of social protection systems in the Arab region have suffered from low coverage. A study by ESCWA revealed that contribution-based social and health insurance systems are undermined by low coverage, fragmentation, and lack of financial sustainability. As for non-contribution-based social protection, it consists of traditional social assistance programs characterized by inconsistency, inadequacy, and inefficiency. For these reasons, these countries conduct periodic reviews of their social protection systems and sectors and undertake necessary reforms based on each country's capacities. (ESCWA, 2020)

2.2 At Palestine Level

The Palestinian society continues to suffer from a high poverty rate, with an expenditure poverty line amounted to 29.2% in the West Bank and Gaza Strip according to the 2017 statistics (PCBS, 2017). The current situation indicates that Palestine has institutionalized and non-institutionalized social protection systems since several years back. In 1994, the Palestinian government has launched its social protection programs primarily through the Ministry of Social Development, including two important cash transfer programs: Social Hardship Case Program funded by the European Union, which targets the most vulnerable groups, and Social Safety Network Reform Project funded by the World Bank (World Bank, 2010). It is worth noting that a significant portion of these systems are humanitarian and not yet sustainable development-oriented, as the transition to sustainable social development is still in its early stages.

The social protection system in Palestine is based on three pillars: social assistance programs, social security systems, and social services programs and systems. The Palestinian government is working on developing comprehensive and integrated social protection systems that respond to the Sustainable Development Agenda 2030 by "implementing appropriate national social protection systems for all," specifically in terms of poverty eradication and the establishment of suitable social protection systems and measures at the national level, setting minimum standards, and achieving wide health coverage for the poor and vulnerable groups by the mentioned year. This objective was included in the Social Development Sector Strategy 2017-2022, which is gradually and progressively being implemented. The priority is given to the elderly and persons with disabilities, in addition the provision of free health insurance to all families registered in the ministry's database (Wafa, 2013).

The social protection sector in Palestine involves a wide range of governmental and non-governmental institutions, as well as international organizations in designing social protection programs. This sector includes ministries and governmental institutions (such as the Ministry of Social Development, which is the main provider of social protection services, Foundation for Care of Families of Martyrs and Injured, and Prisoners and Ex-Prisoners Affairs Authority), non-governmental organizations (such as Zakat Committees, charitable associations, Palestinian Red Crescent Society, lending institutions, and private sector), in addition to international and UN institutions (such as UNRWA, the European Union, World Food Programme, Food and Agriculture Organization (FAO), World Bank, and other UN agencies like UNDP, UNICEF, and UNFPA, as well as international development agencies implementing various economic and social programs) (Omar, 2019). Furthermore, informal social protection plays a significant role in the social and economic network, which some refer to as "social safety nets" Almost half of the Palestinian families are dependent on informal protection channels such as family, friends, fellowship, neighbors, and local community. However, it should be noted that most of these programs are considered emergency and relief-oriented but unsustainable. It is worth mentioning that the Ministry of Social Development has attempted in recent years to reform the social protection system and transform it from a relief-oriented system to a sustainable protection system but did not succeed to present.

In general, prior to the COVID-19 pandemic, the social protection sector was suffering from weakness and fragmentation, as it is primarily relief-oriented. Additionally, the institutions of the Palestinian government were weak due to the Israeli occupation as well as weak legislations and regulations governing the social protection sector (MAS, 2022). This sector has a shortage of human and financial resources, on which governmental and non-governmental institutions rely to fund their projects through external aid (www.albankaldawli.com). The COVID-19 pandemic has further exacerbated these burdens and created significant negative repercussions, placing a large portion of the Palestinian people at health, social, and economic risks. Consequently, the level of social protection coverage, which was already very weak, unorganized, and non-comprehensive, has declined as they rely on emergency assistance and relief programs. Furthermore, demographic changes that have occurred in the Palestinian society over the past two decades, particularly internal migration, have exacerbated economic disparities between various districts, which directly affected various economic and social indicators and lead to increased poverty rates, income inequality, and a decline in the health sector in some areas.

3. Key Concepts on Social Protection

This brief section presents the definition and concept of social protection, the nature and type of social protection systems, their coverage level, shortcomings they face, and the challenges they encounter.

3.1 Definition and Concept

Comprehensive social protection is a human rights-based social concept that encompasses all measures and policies that provide cash and in-kind benefits to ensure income security and prevent falling into poverty (and achievement of rights). It includes unemployment, elderly, disability, maternity, inheritance rights, work injuries, breadwinner death benefits (ILO, 2019), as well as the provision of health services to all citizens not covered by social protection systems. In other words, the comprehensiveness of social protection extends to all those in need who are not covered by any official or unofficial protection system.

In general, the concept of inclusive social protection is based on two foundations: First, contribution-based social protection; Second, non-contribution-based social protection. Practically, any given social protection system can be classified as "comprehensive" if it is accessible to all those in need, regardless of whether it is achieved through contribution or non-contribution-based mechanisms¹. Contribution-based social protection includes social insurance and health insurance, which are primarily dependent on the employee or employer's payment of their contributions. To achieve comprehensive social protection, based on the experiences of some countries, it requires extending coverage to non-contributors through direct government support (non-contribution-based social protection system). Such a protection usually targets specific groups or geographic areas based on social criteria and specific government policies. It involves providing emergency assistance, direct financial or in-kind support, such as food baskets² and exemption of school fees for the poor as well as other exemptions, assistance, and social benefits. These benefits may be continuous or temporary but only cover a small part of economic and social life and do not prevent sliding into poverty line as social protection policies in many countries are linked to and aligned with sustainable development plans. The most common types of social protection systems include the following three main aspects:

- **Social Security:** It mitigates risks associated with unemployment, illness, disability, work-related injuries, and includes health insurance, pension benefits, and unemployment insurance. Social security systems are assistance programs that protect beneficiaries from catastrophic expenses through providing regular payments.
- **Social Safety or Welfare:** It involves providing assistance, either in cash or in-kind, to individuals or families in need. Social assistance programs are designed to help the "most

¹ The idea of establishing social security comes to cover those who do not have a guarantor, and social protection to those who do not have a protector, which requires the distribution of roles between the government to be a protector and guarantor, and the private sector and the employees' sector to be contributors to that, in order to achieve inclusiveness.

² Some definitions indicate that these temporary allocations and emergency food baskets are included in the definition of social protection, and some consider it to be at the heart of social protection, but for us this issue may not be accurate because it is temporary and emergency, and what we are looking for is comprehensive and continuous social protection within a clear system and regulations for all.

vulnerable" individuals who have no other means of support, such as single-breadwinner families, victims of natural disasters or civil conflicts, persons with disabilities, or the extremely poor. These programs encompass all forms of governmental and non-governmental work as aid to needy categories free of charge.

- Labor market interventions: These are policies and programs to promote employment, labor protection, and worker rights, such as minimum wage policies. However, there is a challenge in terms of the lack of inclusivity for informal work, especially that most informal workers are not covered by social protection systems, occupational safety, and health measures, etc.

Most social security and health insurance systems worldwide only cover formal (official) employment. As a result, workers in the informal sector are those who do not contribute to social security and/or health insurance programs or have their contributions not paid by their employers. Therefore, social safety networks and labor market interventions play a crucial role in mitigating livelihood risks.

3.2 Social Security Systems Applied in Palestine

In recent years, the Ministry of Social Development in Palestine has adopted, under the Social Protection Sector Strategy (2021-2023) the transformation from relief to development, in order to transform the social protection system into an integrated system capable of effectively addressing the causes of poverty. A set of national policies and strategies have been adopted to provide social protection in various economic and social aspects. In 2021, the Palestinian government also adopted the concept of multidimensional poverty, which goes beyond the traditional link between poverty and economic conditions to include deprivation of central services such as education, health, and employment, which has had an impact on identifying multiple and broad categories of the poor based on seven main dimensions of poverty and a wide range of measurement indicators. In addition, the National Employment Strategy (2021-2025) has been developed, which adopts comprehensive policies aimed at promoting employment and economic empowerment to alleviate poverty in the Palestinian society by creating job opportunities for various sectors, especially those vulnerable to unemployment, such as women and youth. The Ministry of Social Development has also been working on the National Social Registry since 2019 to overcome the fragmentation of the social assistance sector and it launched its plan to combat poverty in 2021 (Council of Ministers, 2021).

In general, the social protection system in Palestine consists of four systems:

1. The health insurance system, which partially relies on individual contributions, and it includes another part for comprehensive health coverage as a right for all. It is implemented through various means, tools, and specific government policies.
2. The social assistance and family transfers system, which relies on government assistance provided through the cash transfer program managed by the Ministry of Social Development for those who are unemployed or have no income. This system is based on regulating service and assistance providers, ensuring good coordination, building a database based on national standards that take into consideration the poor and vulnerable categories, the quality of services to be provided, and the adoption of the National Social Development Strategy to institutionalize work accordingly. This is being done through developing a system that takes all these aspects into account.

3. The social service system provided by the government, which mainly includes a high-quality health and education services for all, with clear, transparent procedures and without bias.
4. The (expected system to be implemented) is the social security system, which relies on individual contributions. The Ministry of Labor, in cooperation with other stakeholders (labor unions and the private sector), seeks to implement it in its modified version after a series of community-based dialogue meetings on its content. The first draft was presented for community dialogue in May 2023.

3.3 Social Protection Systems in the Public Sector

After the establishment of the Palestinian government, three retirement systems were created under the management of the Ministry of Finance and the General Authority for Retirement and Pensions to provide social services to retired employees (exceeding 160,000). These systems include the following Funds:

- Civil Servants Retirement Fund in the West Bank.
- Civil Servants Retirement Fund in the Gaza Strip.
- Military Servants Retirement Fund for Palestinian Government Military Affiliates.

3.4 Social Protection Systems in the Private and Non-Governmental Sectors

These systems primarily rely on the Palestinian Labor Law of 2000 without developing and establishing comprehensive social protection systems to date. Companies and private institutions provide severance benefits in accordance with the Labor Law. Even municipalities and local government institutions follow this approach for the pre- Palestinian government employees. As for universities, they rely on different retirement and savings systems with mandatory severance compensation.

United Nations Relief and Works Agency (UNRWA)

Over time, UNRWA has developed its social protection systems and introduced its own laws and regulations. It introduced the concept of voluntary contributions (optional savings). Since 2002, the UNRWA allowed contributors to withdraw their voluntary savings. The High Commission (the Commissioner-General) oversees the investment policy for these funds, and profits are distributed to employees. Most beneficiaries of this agency are from the education sector (70% of UNRWA employees), which employs over 20,000 employees in the West Bank and the Gaza Strip. This agency also provides permanent social assistance to the poor in refugee camps.

3.5 Unofficial or Non-contribution- based Systems (Social Assistance and Welfare)

These are systems that are not based on a legal framework but rather provide social assistance and support to disadvantaged families and individuals. They also include certain healthcare and educational programs targeting specific segments of society and they are usually classified as social welfare programs that serve a specific timeframe or emergency cases, rather than social protection. Social welfare programs can be classified into:

1. Social assistance programs of international organizations such as the European Union, the United States Agency for International Development, the United Nations World Food Programme, and the American Near East Refugee Aid (ANERA), and others that provide assistance to the poor. These organizations offer programs to support vocational and higher education, training for specific social groups. Such programs include empowering economically and socially disadvantaged families by supporting them in establishing small enterprises. They also provide cash-based social assistance programs as part of emergency and non-emergency aid. Some of these programs are implemented through the Ministry of Social Development, the Ministry of Agriculture, or the Ministry of Labor.
2. Social Solidarity Systems: They target the elderly who are not employed and do not have sufficient savings or income. These systems are based on traditional social solidarity mechanisms adopted by children and relatives who take care of their elderly. However, this mechanism is not comprehensive and is often associated with a specific social behavior.
3. Social welfare programs established through government policies and decisions. These policies target specific segments of the Palestinian society, including marginalized and needy groups, families of Palestinian prisoners and martyrs and ex-prisoners. They provide in-kind and cash assistance, and some families receive a monthly salary through coordination between the Ministry of Finance, the Ministry of Social Development, the Ministry of Labor, and the Ministry of Prisoners' Affairs. These ministries identify and categorize eligible beneficiaries to reach families living below the poverty line.
4. Non-Governmental Assistance Programs. This includes Zakat Committees and other organizations that focus on the most impoverished groups in specific geographic areas.

4. The Impact of the Absence of Social Protection Systems on Demographics - Facts and Figures

Despite the wide range of institutions and programs mentioned above, this diversity has been characterized by fragmentation and weakness in terms of coverage and inclusivity in the social protection sector. Additionally, there is a lack of coordination among the actors, which has led to limited effectiveness of such a development sector (ILO, 2021). More than 50% of the Palestinian population still without any form of social security and social protection. The maximum available service they receive is health insurance, which only covers 55% of the Palestinian population. This insurance is available free of charge for only 27% of the population, while the rest pay its fees (Jamil, 2018). Only 23% of workers have social security through the government pension system, leaving 77% without social security (over a million servants) (Jamil, 2018). 40.2% of workers earn less than the minimum wage, and only 25.9% of private sector workers receive severance benefits. Only 22.5% of the private sector employees have work injury insurance (PCBS, 2023). In short, over half of the Palestinian population do not have any form of social protection, and the assistance and programs provided to poor families are often temporary, relief, and instable due to political instability (MAS, 2020). Despite the broad range of assistance programs, they are not capable of eradicating poverty due to the fragmented efforts in the sector (ILO, 2021). Government assistance provided centrally under the Cash Transfer Program managed by the Ministry of Social Development is insufficient to provide a decent life for citizens, especially as it has not been fully paid since the end of 2021 due to the financial crisis facing the Palestinian government (MAS, 2021).

4.1 The Impact of the Occupation on the Social Protection System

The impact of the occupation affects all aspects of Palestinian life. This cumulative impact also affects the future of social protection, particularly for those working in Israel. A notable example is the issue of social labor rights in the occupation state (MAS, 2011).

Following the Israeli occupation of the West Bank and Gaza Strip in 1967 and the flow of workers from these areas to work in the Israeli market, the General Federation of Labor in Israel (Histadrut) became concerned that this flow would negatively impact the wages and benefits of Israeli workers. For this reason, Histadrut exerted significant pressure on the government to issue legislations that would prevent Israeli employers from benefiting from hiring workers from the West Bank and Gaza Strip instead of Israeli workers. In response to this pressure, the Israeli government issued a decision in 1970 stating that workers from the West Bank and Gaza Strip should be treated in terms of social security, health, and retirement benefits on an equal basis with Israeli workers (Mundlak, 1999). However, despite the superficial equality of this decision, it laid the foundation for discriminatory treatment against workers from the West Bank and Gaza Strip in Israel. This is because the decision has imposed equality in labor costs between employers hiring workers from the West Bank, Gaza Strip on the one hand, and the Israeli workers on the other, but it did not impose equality in the benefits the workers receive. In reality, Histadrut was interested in equal labor costs incurred by employers without concern for the actual wages and benefits that West Bank and Gaza Strip workers receive (Ben-Samhoun, 2004). As a result, a "parity tax" was imposed, equal to the difference between the amount deducted from Israeli workers and employers

for full social security coverage and the amount deducted from the wages of workers from the West Bank and Gaza Strip and their employers for the limited benefits they receive.

Workers from the West Bank and the Gaza Strip who work in Israel only benefit from three types of social security available to Israeli workers: workplace injury compensation, employer bankruptcy compensation, and maternity leaves. Other forms of social security, such as unemployment benefits, additional pension payments, child allowances, health insurance, and others, are not accessible to workers from the West Bank and Gaza Strip because they are linked to "residency" in Israel. This is the reason for which hiring workers from the West Bank and Gaza Strip is cheaper for Israeli employers, as they were not required to provide these workers with the ineligible social security benefits.

Table (A) below shows the deductions applied to the wages of workers from the West Bank and Gaza Strip currently working in Israel. These deductions are also supposed to apply to the wages of workers in Israeli settlements, following the Supreme Court decision to apply Israeli labor law to Palestinian workers in West Bank settlements.

Table (A): Employer Contributions and Deductions from the Wages of Workers from the West Bank and Gaza Strip in Israel

Security Components	Fund	Employer's Contribution	Deductions from Worker's Wage	Total
Pension		%12.0	%5.5	%17.5
Sick Leave		%2.5		%2.5
Leaves		%4.0		%4.0
Work Injury Insurance		%0.25		%0.25
Construction Development Sector*		%0.8		%0.8
Fund Total		%18.75	%5.5	%24.25
National Insurance (only three types)		%0.72	%0.61	%1.33
"Parity Tax"		%4.71	%6.39	%11
Histadrut Contribution			%0.8	%0.8
Income Tax			Based on income level and deductions	
Health Stamp/Seal			NIS 93	NIS 93
Total		24.18%		

*Deduction from construction workers only

Source: <http://www.piba.gov.il/Subject/PalestinianWorkers/Pages/sachar.aspx>

The total deductions from workers and employers' amount to 37.5% of wages, with 24.1% contributed by employers and 13.3% deducted from workers' wages. In addition, income taxes are deducted from wages, and there is a monthly health stamp/seal fee of 93 shekels.

4.2 Where do these Deductions Go?

These deductions underwent significant changes following the signing of the Paris Protocol in 1994 between Israel and the Palestine Liberation Organization. The trajectory of these deductions can be summarized as follows:

– The Period of 1970-1993

The limited available information suggests that most of the deductions stated in the table from the wages of workers in the West Bank and Gaza Strip were unjustly transferred to the Israeli treasury during the direct occupation period. This particularly applies to income taxes and the "parity tax." The parity tax was transferred to a special account at the Israeli Ministry of Finance. Despite the announced purpose of this account for "financing infrastructure and social development projects in the territories," the nature of the projects funded from this account remains unclear (Mundlak, 1999).

– The Post 1994 Period:

The Paris Protocol provided an official framework for the transformation of some deductions from workers' wages, partially addressing the significant financial depletion that occurred during the 1970-1993 period. However, the protocol has completely neglected discussing the possibility of workers reclaiming some of their rights that were forfeited in the previous period. In other words, Palestinians paid a price to halt some of the financial depletion after 1994, which involved relinquishing or postponing claims for the recovery of rights and amounts that were lost prior to 1994.

Article 7 of the Paris Protocol identified the fate of the deductions³ mentioned in the table above, but there is no confirmation that these deductions were transferred to the Palestinian government. Only a portion of them is transferred to the Palestinian government (such as some income taxes and health fees), while the rest goes to the Israeli treasury. Consequently, these deductions continue to accumulate in a dedicated account at the Israeli Ministry of Finance⁴. Palestinian workers still suffer significant financial losses, and in some cases, complete forfeiture of their retirement rights⁵. Additionally, the lack of knowledge about procedures and language, and the impossibility of accessing to Israeli institutions contribute to the loss of retirement benefits for Palestinian workers. Therefore, efforts must be made to claim these rights.

³ See the text of Paris Protocol at: <http://www.mfa.gov.il/MFA/Peace+Process/Guide+to+the+Peace+Process/Gaza-Jericho+Agreement+Annex+IV+-+Economic+Protoco.htm> See the text of Paris Protocol at: <http://www.mfa.gov.il/MFA/Peace+Process/Guide+to+the+Peace+Process/Gaza-Jericho+Agreement+Annex+IV+-+Economic+Protoco.htm>

⁴ The failure of the Palestinian government to establish a pension insurance institution for Palestinian workers has led to the loss of opportunities to invest the pension funds in the national economy.

⁵ Workers who have not reached the retirement age, or who have worked for less than 10 years, may recover what was deducted from their wages for retirement purposes, but the worker loses his right if 7 years have elapsed without claiming retirement benefits. As for those who worked 10 years or more, they are entitled to a retirement pension. See: Farsakh, Laila (1999): Labor Clauses in the Protocol on Economic Relations between the Government of Israel and the Palestine Liberation Organization.

5. Economic-Social Indicators

Based on the concept of social protection and development outlined in the National Development Strategy, the social indicators include the marginalized categories targeted by protection programs, such as the poor, persons with disabilities, youth, elderly, women, children, workers and youth. The Covid-19 pandemic has worsened the social protection, as estimated by the World Bank that poverty rate may reach 30% in the West Bank and 64% in the Gaza Strip (Monte Carlo Doualiya, 2020). This indicates the weakness, fragmentation, and absence of social protection systems and social security systems in Palestine, which poses future risks and leads to a decline in demographic and social indicators, taking into account the very limited resources available in the public budget.

For a further understanding of the social indicators of the demographic structure in Palestine, we present the following:

5.1 Category of the Poor

The COVID-19 pandemic has led to a significant increase in the number of poor and unemployed in the West Bank and Gaza Strip. It has also resulted in the emergence of "new poor" whose appearance was linked to circumstances resulted from the COVID-19 pandemic. According to the Ministry of Social Development, as stated by Deputy Minister Dawood al-Deek, "More than 100,000 Palestinian families will fall into the poverty circle due to the repercussions of the COVID-19 pandemic," (Ministry of Social Development, 2020) particularly due to work interruption of breadwinners in the West Bank and the Gaza Strip. Preliminary estimates by the World Bank indicate that the number of poor households may rise to 30% in the West Bank and 64% in the Gaza Strip (Monte Carlo Doualiya, 2020). Therefore, thousands of families remain poor due to many reasons, most importantly the long-standing unemployment, which has been exacerbated by the COVID-19 pandemic. Additionally, as a result of the assistance provided by the Ministry of Social Development from its budget being very modest, as the ministry's budget does not exceed 5% of the public budget (approximately 820 million shekels), 90% of which is allocated to assistance provided to poor families (ACAPS, 2021). However, this aid only covers 40% of poor households, which requires serious justifications for building a comprehensive social protection system that ensures security, stability, and serves the strategic plans declared in the Sustainable Development Plan 2030, aiming to combat poverty and unemployment and establish a comprehensive social protection system.

According to a survey conducted by the Palestinian Central Bureau of Statistics (2021) on the effects of the pandemic, especially during the mentioned lockdown period, with its results published in early October 2021, it was found that 42% of Palestinian households lost at least half of their income during the lockdown period, which was extended from March 5 to May 25, 2020 while one-third of Palestinian households (31%) did not have alternative income sources to cover family expenses during the lockdown period. According to the survey, 61% of Palestinian households expressed concerns about not having enough food, while 58% of households reported that they borrow money or purchase on credit to cover family expenses, including food.

5.2 Workers and Youth

Data indicates the labor sector weakness in providing social and economic protection to individuals. Despite the continuous increase in labor force participation in Palestine (with the exception of 2020, which witnessed a decrease in labor force as a result of the pandemic), it has been found that 63.1% of workers in the private sector work without employment contracts, and approximately 40% of wage-based employees in the private sector receive a monthly wage below the minimum wage (PCBS, 2023). Moreover, there is a significant number of unemployed individuals, estimated to be one-quarter of the labor force in 2022, according to the Palestinian Central Bureau of Statistics (PCBS, 2023). More importantly, the indicators for the past seven years from the Central Bureau of Statistics indicate that unemployment has increased since 2015, in which it was approximately 23% and amounted to around 24.4% in 2022. Despite the low increase over the five-year period, it signifies an increase regardless of its size, which may indicate its potential continuation in the coming years.

Unemployment is also higher among younger age groups; the youth category, in particular, suffers from high unemployment rate despite the high participation rates among those over 15 years old and under 65 years old which reaches 60.8% participation rate for the age group 25-34 years and 58.5% for the age group 35-44 years (PCBS, 2023). A significant number of workers, especially educated youth, also suffer from unemployment. For instance, the unemployment rate for young graduates holding a diploma or a higher degree is around 50% (PCBS, 2022b). Additionally, individuals with previous health history and older adults are particularly at risk, as older workers are likely to experience higher unemployment rates compared to younger workers. Moreover, the fact that 62% of private sector workers do not have employment contracts indicates a wider gap in social security and health insurance. Young women, in particular, face challenges in labor market participation, so that women suffer from unemployment in the two categories of women and youth. This weakness in the labor market and its economic impact on both employed and unemployed individuals underscores the urgent need for social protection. While economic development is a fundamental pillar for resilience and sustainability, the importance of social protection for workers and vulnerable groups to various form of unemployment such as youth and women requires providing job opportunities on the one hand and promoting the Palestinian economy simultaneously on the other.

5.3 Persons with Disabilities

Palestinian Law No. (44) of 1999 defines a disabled person as someone “who has total or partial congenital or non-congenital disability that stably hinders their ability to meet their normal life requirements under conditions similar to those of non-disabled persons.” The final results summary of the 2017 census indicates that the percentage of persons with disabilities in Palestine is 2.1%, with a total number slightly exceeding 90,000. The elderly category represents the largest group of disabled persons, intersecting two marginalized groups. The disability rate for individuals above the age of 70 is approximately 70%, while it reaches 35% for individuals aged 85 and above (PCBS, 2021b).

The Ministry of Social Development provides a set of services for persons with disabilities, including various forms of assistance such as cash, emergency, and in-kind assistance

(www.mosd.gov.ps). The Ministry of Social Development has made progress in the field of disability in recent years by developing a draft law for persons with disabilities in 2019, although it has not been enacted yet.

Despite the provisions of the Government Health Insurance System for Persons with Disabilities, No. (2) of 2021, stating that healthcare services for persons with disabilities shall be provided free of charge without any fees or financial contributions, the law is not yet enforced. Therefore, the persons with disabilities still incur medical treatment expenses like those paid by the non-disabled (Shello, 2022). In addition, the allocations for social security have remained at a fixed rate of 300 shekels per month for over ten years, with delays in disbursement (Safa, 2021). Furthermore, the identification card for persons with disabilities has not been approved yet.

5.4 The Elderly

It is well-known that the Palestinian society is considered a “youthful” society, as the largest age group in Palestine is the age group under 14 years old, constituting the base of the age pyramid (38%), followed by youth aged 15-59 (approximately one-third of the population, 56%), and at the top of the population pyramid are the "elderly" (aged 60 and above), whose percentage does not exceed 6% of the population by mid-2022 (PCBS, 2022b). However, despite the significant relative decline in the number of elderly persons in the Palestinian society (around a quarter million elderly of males and females) compared to other age or population groups and compared to many other countries, a large percentage of them do not receive a pension and do not have any form of social protection, or their protection is very limited. According to the Palestinian Central Bureau of Statistics, the poverty rate among the elderly in 2017 was approximately 27% of the total elderly population and accounted for around 5% of the overall poor people in Palestine (PCBS, 2021c). The rate of extreme poverty among the elderly reached 16%.

The Violence Survey in the Palestinian Society (PCBS, 2022c), indicates that psychological abuse from a family member is the highest percentage of violence experienced by the elderly (those aged 65 and above), as 27.8% of the elderly were subjected to it. 1.7% of the elderly were subjected to physical abuse by a family member, while 1.2% were subjected to economic abuse, which could indicate taking away property or money without consent, or destroying property belonging to the elder. There is a prevailing societal belief that "caring for the elderly is the responsibility of the state," but the official attention to the elderly is limited, which is reflected in the limited number of elderly care centers in the West Bank and the Gaza Strip, especially those run by the government. According to Dawood al-Deek, the Deputy Minister of Social Development, "there are 21 elderly care centers in the West Bank, including one government-run center, Bayt Al-Ajdad in Jericho (with a capacity not exceeding 60 residents), and 20 centers run by civil society organizations and charities" (MAS, 2020). This is despite the fact that providing welfare, care, and rehabilitation services to marginalized groups, including the elderly, is part of the Social Development Sector Strategy (2021-2023). While population projections for 2030 indicate a stable proportion of the elderly in the Palestinian society, there is a need to enhance healthcare and care, particularly by the government.

Generally, there is no specific law for the elderly in Palestine, and national policies and programs aimed at supporting the elderly have limited effectiveness, resulting in a limited outreach to the

elderly population (Ministry of Social Development and UNFPA, 2021). Social and cash assistance services for the elderly face the same limitations the national policies and programs face. Despite the existence of national cash assistance programs benefiting around 108,000 households from various marginalized groups, including the elderly, women, children, and persons with disabilities, only around 23% of the elderly (63,000 out of 269,000 elderly) in the West Bank and Gaza Strip benefit from the Ministry of Social Development's cash transfer program (Ministry of Social Development and UNFPA, 2021).

As confirmed by the statement issued by the Palestinian Central Bureau of Statistics on October 1, 2020, on the anniversary of the International Day of Older People, the situation of marginalization and suffering is evident. The statement revealed that 39% of the elderly in the West Bank and Gaza Strip suffer from at least one difficulty or disability, with mobility difficulties being the most prevalent (24%), followed by visual impairment (22%). Compounding the severity of the situation is the lack of health insurance coverage for many types of medication, including those for chronic diseases although 86% of the elderly have government health insurance (Ministry of Social Development and UNFPA, 2021).

Furthermore, more than one-third of females in Palestine are elderly, and only 48% of elderly females are married. This indicates the multi-faceted marginalization experienced by a significant proportion of the elderly (Ministry of Social Development and UNFPA, 2021).

5.5 Women

In recent years, there has been a shift in dealing with gender issues at the governmental level in Palestine. The work of the Ministry of Social Development has revolved around a new approach that incorporates the concepts of gender into the mechanisms used to empower socially marginalized groups and provide social protection and services for them. The ministry has expressed particular interest in women belonging to various marginalized groups, such as the poor, persons with disabilities, victims of gender-based violence as well as women-headed and women-funded households.

However, the latest statistics indicate that the participation rate of Palestinian women in the labor force was about 19% in 2022 (PCBS, 2023), while the participation rate for Arab women was 28% in previous years (MAS, 2020), and the global rate was around 50% (World Bank, 2022). The unemployment rate among women in Palestine reached 40.4% in 2022 (PCBS, 2023), compared to a rate not exceeding 21% among men. This undoubtedly has a strong, negative, and multi-faceted impact (MAS, 2020). The unemployment rate among women participating in the labor force continues to rise, reaching 40% in 2020 (PCBS, 2021d), and it further increased to 43% in 2021 (PCBS, 2022d). This suggests the possibility of a continued rise in the coming years if there is no change to further integrate women into the labor market. However, an increase in the participation rate of women in the labor force from the previous year does not necessarily mean an increase in the percentage of employed women in formal sectors that are, somewhat, regulated by various types of employment contracts. The percentage of women employed in the informal sector also increased and reached 25.8% of working women in 2020 (PCBS, 2020b). However, Palestinian women on average spend about four hours on unpaid domestic work compared to men who spend about an hour and a half (PCBS, 2016).

A quick survey conducted by the United Nations Office-"Palestinian Women" in April 2020, targeting a relatively large group of Palestinian women who own small and medium enterprises in the West Bank and Gaza Strip, found that 25% of women in the private sector work "without any paid protection." According to the results of this survey, only 56% of young women nationwide have a written employment contract with their employers, whether for a definite or indefinite period. Additionally, women, in general, suffer from un-institutionalized discrimination in the labor market clear laws to address this issue are in place. In 2021, nearly half of the working women in the private sector received maternity leave (PCBS, 2022d) although the Palestinian law at the time stipulates ten weeks of maternity leave (Council of Ministers, 2022). The wage gap between women and men in the Palestinian labor market has increased over the years, reaching approximately 30 shekels in 2021 (Al-Butma and Hurani, unpublished). However, this is not the central problem facing women and their opportunities to access social protection. A significant proportion of women still work in the informal sector, which increases the chances of their exploitation without any legal control. This reduces their access to various forms of social security, such as retirement benefits, severance benefits, and even health insurance.

Furthermore, Job opportunities for Palestinian women who were unemployed before the pandemic have become very limited in the post-pandemic phase due to the overall high unemployment rates and the huge impact of the pandemic, emergencies, and lockdowns on the Palestinian economy. When we talk about this category of women, we talk about approximately 40% unemployment rate among women in Palestine. This ratio is higher than the Arab women unemployment average (around 12%) (ESCWA, 2022), and higher than the global average (approximately 6%) (ILO, 2023), by 34%. These significant disparities reflect a clear weakness in the level of Palestinian women participation in the labor force and economic activity. According to the statistics of the Palestinian Central Bureau of Statistics, 12% of households in Palestine are led by women (PCBS, 2021d), and at least 21.2% of households receiving assistance from the Ministry of Social Development are headed by women (mothers, daughters, or grandmothers), either due to the absence of husband or his suffering from health difficulties such as physical or mental disabilities (MAS, 2020).

In addition, the survey on violence in the Palestinian society conducted by the Palestinian Central Bureau of Statistics in 2019 indicates that 20.5% of women who are married or have been married (15-64 years) have experienced economic violence by their husbands at least once; , which may indicate cases of "asking the wife to tell how the money is spent, controlling her personal assets, preventing her from working, or disposing of her inheritance without her consent, and forcing her to resign.. etc." In addition to economic violence, women in Palestine suffer from various forms of violence; 59.3% of women have experienced violence from their spouses at least once, of whom about 18.5% have experienced physical violence. However, in 2021, only 93 women and 14 children resorted to safe houses (Watan, 2020). So far, only three safe houses have been established in Palestine in three cities: Jericho, Bethlehem, and Ramallah (Yousef, 2021). If the number of safe houses is compared to the percentage of women who experience violence, it does not reflect widespread protection for women who are exposed to violence. Therefore, there is a need to provide further protection for women who are exposed to various forms of violence.

6. Health Sector Indicators

- The number of primary healthcare centers in Palestine reached 765, including 491 centers affiliated with the Ministry of Health, 65 affiliated with UNRWA, 192 affiliated with non-governmental organizations, and 17 affiliated with the military medical services (Ministry of Health, 2022).
- The number of operating hospitals in Palestine in 2021 was (89), with 54 operating in the West Bank, including East Jerusalem, representing 60.6% of the total operating hospitals in Palestine, and the remaining (35) hospitals operate in the Gaza Strip. The total number of hospital beds, including beds in psychiatric and neurological hospitals and beds in East Jerusalem hospitals, is 7,769, which is an average of 14.9 beds per 10,000 persons of the total population (Ministry of Health, 2022).
- The Ministry of Health operates 29 government hospitals with a total of 4,693 beds, representing 60.4% of the total beds in the country. Out of these government hospitals, there are 16 in the West Bank with 1,869 beds, and 13 hospitals in the Gaza Strip with 2,824 beds (Ministry of Health, 2022).
- The number of non-governmental hospitals, including civil society and private hospitals, including East Jerusalem hospitals, is 60, with a capacity of 2,821 beds. The private sector owns 19 hospitals with a total capacity of 536 beds, while civil society organizations operate 38 hospitals with a capacity of 2,061 beds. The UNRWA operates a hospital in Qalqilya with a capacity of 62 beds.
- There are more than 11,313 physicians, 14,593 nurses, 1,528 midwives, 4,354 dentists, 8,997 pharmacists, 6,131 workers in assistive medical professions, and 12,061 administrative staff in the health sector in Palestine (Ministry of Health, 2022).

Generally, Palestinian health indicators, specifically in terms of the number of health centers and medical personnel, are on the rise since recent years (2017-2021) according to the Ministry of Health indicators. This could be a positive indicator in case of the expected population growth in Palestine, serving as a general positive indicator for the capacity of Palestinian health development. However, this quantitative increase alone cannot improve the Palestinian health situation, as there are other qualitative factors that need to be considered for health development until 2030.

7. An approximate reading of the future of social protection based on statistical indicators:

Based on the above, it is evident that social indicators, including those related to social protection and social security, particularly for wide portion of populations such as women, elderly, and people with disabilities, are deteriorating. There have been no positive changes in these indicators between 2017 and 2021, except for some health indicators. This leads us to the main assumption of this paper, which is that if the indicators remain unchanged in 2021, how will the situation of social protection in Palestine be in 2030? And what is the impact on the population and demographic composition?

Table (1) below estimates the size of changes in these indicators based on the stability of their ratios in 2021. Significant changes can be noticeable compared to population, labor force, and unemployment estimates. These potential changes are deeply concerning, especially regarding poverty, women, healthcare coverage, private sector employment, and the inclusiveness of social security. It is unreasonable and unacceptable that only 23% of the population is covered by social security, and that more than 2.3 million Palestinians suffer from poverty. For more details, refer to Table 1 and Figures 1.1 and 1.2.

Table (1) Demographic and Population Social Indicators in 2030 compared to 2021

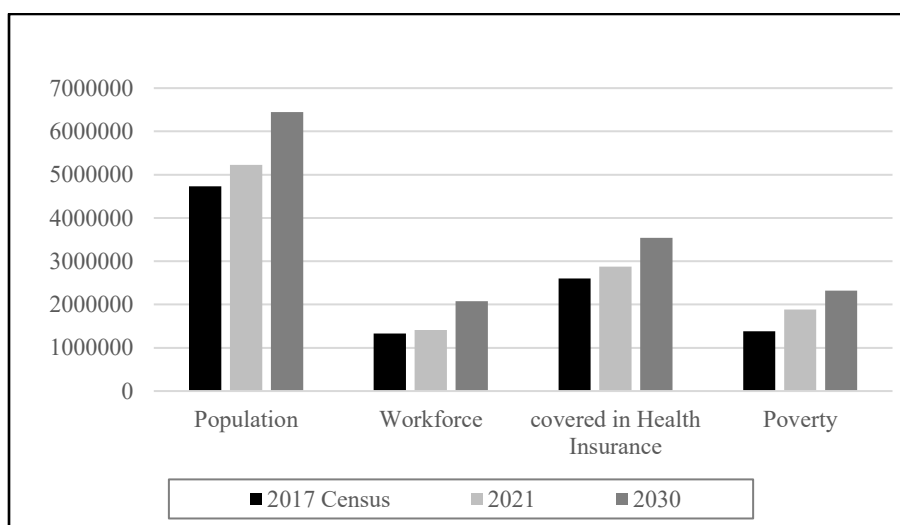
Indicator		Census 2017	2021	2030
Population		4733357	5227193	6443098
workforce (above 15-year-old)		1326000	1408000	2079180
Workers		985218	1036288	1530276
Children (0-14)	Percentage from the population	38.9	38	35
	Number	1816318	1997890	2269502
Youth (15-64)	Percentage from the population	57.9	59	60.4
	Number	2706186	3114016	3895453
Elderly (65+)	Percentage from the population	3.2	3	4.3
	Number	151413	179019	278,143
Women	Percentage from the population	48.2	49.1	49.2
	Number	2348052	2601808	3173264
Poverty	Percentage from the population	29	35.6	36
	Number	1382140	1881789	2319515
Unemployment⁶	Percentage from workforce	25.7	26.4	26.9
	Number	340782	371712	485453
Women unemployment	Percentage from unemployed	47.8	43	43
	Number	145855	159464	154024
Disabled	Percentage from the population	2	2	2

⁶ The number of unemployment and women unemployment were calculated on the assumption that unemployment percentages would remain as they were 2021.

Indicator		Census 2017	2021	2030
	Number	99400	104544	128862
Covered in health insurance	Percentage from the population	55	55	55
	Number	2603346	2874956	3543704
Covered in social security	Percentage from the population	23	23	23
	Number	226600	238346	351964

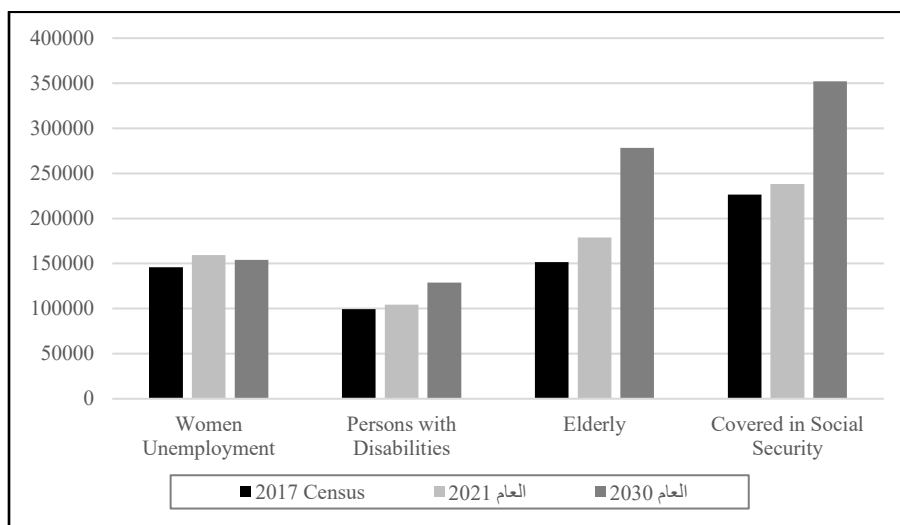
Source: Calculations by the researcher based on data from the Palestinian Central Bureau of Statistics, as well as some proportions from previous referenced studies in this paper.

Figure (1.1): Changes in social and demographic indicators



Source: Table (1)

Figure (1.2) Changes in Social and Population Indicators



Source: Table (1)

8. Key Findings

- It is evident that the social indicators related to social protection in the population composition in Palestine
- ne have not reached the desired level, on the contrary they are lower than those of neighboring countries. This can be attributed to the fragmentation and lack of law-based social protection system. The Social Security Law has not been enacted yet. The law will solve many of these dilemmas and improve all social indicators for the most vulnerable population categories.
- The decline of social indicators and the increased deterioration in social protection are attributed to several factors, including limited resources of the Palestinian Authority, fragmented and weak social protection and social security systems and their reliance on emergency aid and temporary relief with unclear role of the private sector as well as weak coordination between official and unofficial institutions in support and relief efforts. The only permanent program in this field is the program of the Ministry of Social Development, but it is insufficient and does not meet the increasing needs. Additionally, the rights of the private sector workers are being lost due to the lack of effective enforcement of law and lack of effective control as well as the spread of informal labor.
- The Data show that most vulnerable population groups are the elderly, women, and people with disabilities, and there hasn't been any positive improvement in their indicators.
- Therefore, it is crucial to establish and institutionalize comprehensive social protection systems, both contribution and non-contribution-based, to achieve inclusiveness, especially that the existing social security system, which is a contributions-based, benefits only those who contribute. Therefore, the social protection system should include the four above-mentioned systems, including the activation of the Palestinian social security system.

The Best and Shortest Ways for Social Protection

In general, it is difficult in the Palestinian case to achieve comprehensive social protection to address the deteriorating population composition indicators. However, a significant portion of social needs related to social security by focusing on key components of social protection, especially establishing a contribution-based social security system and enhancing the Palestinian healthcare system. It is also important to maintain social care activities and assistance provided by official and non-official entities until the effectiveness of the social security system and healthcare system is ensured. A well-functioning social security system guarantees coverage for contributors and those who are without coverage (i.e., those outside the official systems) and addresses issues related to informal employment, minimum wages, and healthcare to provide services for those not covered by public or private health insurance.

The establishment of the social security foundations, in addition to what is currently available in terms of various systems, necessarily leads to a change in the population's social and economic indicators, guarantees the future of next generations, and dispels the future fears of marginalized population groups.

In this context, we present the proposal and recommendations for the development of social security and the mechanisms that enhance building the health system, according to the studies of

the Palestinian Economic Policy Research Institute (MAS) and other studies related to the health system that were developed in favor of the Palestinian Ministry of Health.⁷

First- Regarding the Development of the Social Security System and other Social Protection Systems

The Social Security Law, even after the amendments introduced to it before its suspension by the President of the State of Palestine, President Mahmoud Abbas, still faces numerous challenges. The amendments, approved by Decree Law No. (19) of 2016⁸, which revoked the original version of Law No. (6) of 2016, addressed some issues, including good ones, such as adjusting the deduction rates, raising the minimum retirement wage from eight times of the salary to ten times, and amending maternity leave and women salary inheritance rights. However, these amendments were not convincing to some, as they did not achieve the social justice aspirations of different segments of society. This calls for the following actions to be taken:

1. Reaffirming the vision and mission that have been agreed upon, expanding this vision to include the concept of social protection, which is one of the most important components for development and resilience.
2. Addressing the concerns related to the management of the Social Protection Systems Institution, particularly by reviewing its governance and management mechanisms.
3. Reproducing the social security law in a thoughtful and consensus-driven manner, while rephrasing and amending its controversial provisions.
4. Developing a clear structure for social protection systems, issuing regulations and rules for all, adopting the principles of transparency, dialogue, information dissemination, and engaging all stakeholders to ensure social oversight. International experiences indicate that the absence of governance principles, transparency, disclosure, conflicts of interest, and weak accountability are among the main factors contributing to the failure of social security systems in developing countries. These factors erode confidence in the institution officials. Disputes regarding contribution rates and deductions can be resolved as mere calculation issues. Overcoming these factors would facilitate dialogue, negotiation, and achieving the desired goal of social security.

Second- Regarding Healthcare System Enhancement

Paragraph (5) of Article (2) of the Public Health Law No. (20) of 2004 in force stipulated the commitment of the Ministry of Health to provide health insurance for the population within available resources. Article (4) of the Law affirms the Ministry's commitment to give priority to healthcare of women and children which shall be inseparable part of the Palestinian National Authority Development Strategy. It should be noted that the proposed mandatory health insurance law that has not been enacted because it is not considered of urgent laws because of the absence of the Legislative Council and due to objections (Mousa and Alawneh, 2009) related to the treatment of refugees and the responsibilities of the United Nations Relief and Works Agency

⁷ MAS held the "Consultive Forum on Comprehensive Social Protection in Palestine" whose papers dealt with several issues regarding social protection such as social security and the impact of its application in macroeconomy, the need to develop the social protection sector, and comprehensive health coverage and a health insurance system in Palestine.

⁸ The Decree-Law on Social Security No. 19 of 2016 was published in the Palestinian Official Gazette (Al-Waqaea') On 20/10/2016, currently the draft law has been re-presented since May 2023, as part of a set of amendments, and the dialogue is still ongoing to bring the draft law to its final form...

(UNRWA) for Palestine Refugees (UNRWA) regarding the provision of health services to registered refugees in the West Bank and the Gaza Strip.

The proposed model is based on several reasons, including: this model is partially applied in the current health insurance system, which is mandatory for government employees and optional for other citizens and residents. In addition, making health insurance mandatory would achieve equity among all citizens regarding this social system that provides the right to health with minimal financial burdens on families, without overburdening the state budget or making it dependent on foreign aid. It would also provide the necessary self-financing for the development of health infrastructure, improvement of the quality of provided health services, and the development of the workforce in the health sector.

A successful health insurance system should be based on fundamental strategic principles, including:

- ensuring sufficient funding for all services the citizen needs, of acceptable quality, according to clear quality standards.
- Being mandatory for everyone based on the principle of social solidarity.
- Being of inclusive coverage, including all risks and compensations.
- The government should cover contributions for those unable to pay.
- Imposing taxes on luxury goods to meet the financing needs of the health insurance system and develop its necessary infrastructure.
- Enhancing cooperation between the public and private sectors, particularly in hospitals and healthcare financing.

Achieving these objectives requires the adoption of the following policies:

1. Reviewing the study developed by the national team according to the decision of the Council of Ministers dated May 27, 2019.
2. Drafting a Health Insurance Law as a basis for issuing mandatory health insurance legislation and developing the necessary mechanisms to oblige everyone to have appropriate insurance coverage, including the informal sector, social cases, unemployed and the elderly.
3. Following-up the establishment of a National Health Insurance institution, administratively and financially independent, responsible for managing health insurance funds and utilizing available funding to purchase required healthcare services from government and non-governmental health centers and hospitals.
4. Developing formulas for partnerships or contracts with healthcare service donors, including organizations like the United Nations Relief and Works Agency (UNRWA).
5. Developing mechanisms for further investment in the healthcare sector, including the enhancement and rehabilitation of existing healthcare institutions to ensure the right to access quality healthcare services.

– Third, Regarding Social Protection Systems

The above information illustrates the state of weakness and fragmentation in social protection programs in Palestine and that all the made and ongoing efforts are still below the required level and do not provide protection for the poor and marginalized groups. In this context, and based on this reality, there is need for intensifying and coordinating government efforts towards creating a comprehensive social protection system that responds to the needs of all segments of society through the following:

1. Benefiting from the experience of the economic-social shock of the COVID-19 pandemic and the global reconsideration of the role of governments and public resources in ensuring the social needs and rights of all citizens. This includes learning lessons on the importance of establishing systems and laws that ensure the citizens health, protect the vulnerable, care for the elderly, compensate the unemployed, and consider them as essential pillars for the rule of law and creating public opinion supportive for this fundamental vision.
2. Considering the interests of the poor and marginalized groups in overall economic and social policies to prevent adding new poor. This requires changing the perception of the social protection sector from a relief sector dependent on donations and seasonal support to an empowering sector that ensures the basic rights of these groups.
3. Framing government-led social protection programs within an integrated system that covers all areas of protection and all segments of society, with a special focus on the poor and marginalized groups. This can be achieved by improving the governance and coordination of social protection programs, unifying and directing funding sources towards the neediest groups in different areas of the West Bank and the Gaza Strip, updating the social registry, and building a database that includes the livelihood conditions of all the poor, which will help direct assistance to those who deserve it transparently and fairly.
4. It is also important to review the gaps and problems that the previous draft of the social security law faced as a significant part of comprehensive social protection. This includes rebuilding trust among the three production parties, clarifying the mechanisms for the Fund management and agreeing on the entity that will run it as well as enforcing the Minimum Wage Law firmly to activate the Social Security Law.
5. There is a need for national-level policies to link the minimum wage to annual cost of living rates to ensure that those receiving the minimum wage do not fall below poverty and extreme poverty rates.
6. There is a need to provide higher levels of protection for persons with disabilities in various fields, including:
 - Enacting a special law for persons with disabilities that considers their specific social protection requirements.
 - Developing systems and standards that ensure protection for persons with disabilities against all forms of psychological, economic, and physical violence and exploitation.
 - Despite the affirmation of the law on the rights of persons with disabilities regarding the need to develop regulations and standards that ensure protection from all forms of violence and exploitation, no regulation has been enacted. Therefore, it is necessary to enact these regulations and activate the disability card.
 - Reviewing the comprehensive and free healthcare insurance for persons with disabilities to accommodate their specific healthcare needs.

- Encouraging their inclusion in education and the labor market.
7. Reviewing the size of public spending and the allocated budget for vital sectors in social protection, including:
- Providing government healthcare insurance at a level that competes with private insurance and ensures healthcare protection for all individuals in society, especially vulnerable groups such as the elderly, persons with disabilities, and women.
 - Encouraging employment projects, particularly for groups most vulnerable to unemployment, such as women (including women exposed to violence) and youth.
 - Increasing allocations for the Ministry of Social Development and its programs that aim to transition from relief-based to development-based programs, such as the national registry as well as increasing the budget for cash transfer programs to ensure timely and increased financial disbursements that correspond to the cost of living in order to provide social protection for individuals.
 - Encouraging greater cooperation between the Ministry of Women's Affairs and the Ministry of Social Development by allocating funds for programs that protect women exposed to violence and their children and increasing the number of safe houses to have at least one in each governorate, ensuring protection and confidentiality for women residing in these houses, in addition to supporting projects to integrate women into the labor market at later stages.
 - Recommendations related to other sectors such as education and labor, for example, there is a need to review labor and civil service legislations, eliminate widespread discrimination, and ensure clear, detailed, and specific legislative measures to address discrimination.
8. Regarding the social rights of Palestinian workers in Israel, the following actions should be taken:
- First, advocating for reopening negotiations to refund the deducted amounts from workers' wages during the period prior to the Paris Agreement.
 - Second, documenting detailed information about workers in Israel and settlements, as well as the deducted amounts, to monitor and follow the accuracy of the figures provided by the Israeli side, ensuring the recovery of deductions for the benefit of workers and the Palestinian budget.
 - Third, the Palestinian government should establish a pension fund for workers to be able to recover the accumulated retirement funds in Israel and manage the pension funds in favor of the Palestinian economy and Palestinian workers.

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**Demographic Transitions as a Potential Catalyst
for Higher Female Labor Force Participation**

**Samia Al-Botmeh
Raheeq Hurani**

Executive Summary

This paper examines the correlation between demographic transition in the West Bank and Gaza Strip, and the economic role of Palestinian women in fostering a deeper understanding of potential opportunities created by this demographic change in the State of Palestine. In order to enhance the possibility of leveraging demographic returns, Palestinian women are expected to contribute to local development. This paper investigates the causes of low female participation in the Palestinian labor market, and available means to increase this participation through both micro and macroeconomic policies. It also addresses structural gaps such as women's unemployment and employment segmentation, where women are concentrated in specific sectors and income brackets. Through data sourced from the Palestinian Central Bureau of Statistics (PCBS), this paper explores the requirements (or determinants) for leveraging the demographic transition, as it relates to Palestinian women's contribution to the labor market and entrepreneurship.

The paper argues the case for adopting policies that help to overcome existing constraints and optimize Palestinian women's developmental returns over the medium and long terms. Similarly, the paper contends that empowering women to participate in the labor market relies substantially on the improvement of the demand efficiency of women's labor, rather than simply adopting policies for improvements in supply, working to boost women's educational and training qualifications. This research sheds light on the need to revitalize productive economic sectors via all-encompassing policies, especially agriculture, industry and technology.

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1. Introduction

Palestine has witnessed considerable demographic growth: the population of the West Bank and Gaza Strip reached 5.3 million in 2021, with 3.2 million (59.6%) residing in the West Bank and 2.1 million (40.4%) in the Gaza Strip. The economically-active population brackets (age 15-65 years) account for approximately 59% of the total population. Under-15s comprise around 37.7% of the total population (PCBS, 2021). This reflects a complex demographic reality. On the one hand, a youthful and economically-promising age structure holds great potential (decreasing dependency ratio). On the other hand, it necessitates the provision of expanded education and healthcare services, exerting significant pressure on the labor market in terms of creating employment opportunities for young individuals (Courbage, 2020).

As this paper demonstrates, the current situation in Palestine (as with the rest of the Arab world) reflects a direct relationship between the gains of demographic transition (primarily determined by fertility rates in a society), and women's participation in the labor market. Therefore, it is essential to study the intricate interplay between demographic developments and the integration of women into the labor market, to take advantage of opportunities associated with shifting demographics in Palestine.

Although they account for slightly more than half of the population in the West Bank and Gaza Strip, women's economic participation, their contribution to economic growth and overall wellbeing fall significantly short of their full potential. These persistent disparities have severe economic repercussions. While tangible progress has been made in the past few decades in terms of empowering Palestinian women in the labor market, especially after the signing of the Oslo Accords in 1994, these labor markets in the West Bank and Gaza Strip remain sharply segmented by gender. Women's overall participation in the labor market remains below that of men, with the burden of unpaid work predominantly falling on women's shoulders. However, within the informal sector and among the impoverished population, women's representation far outweighs that of men, particularly in employment for wages (PCBS, 2020).

Inequities and discriminatory practices are prevalent in the labor market. These act as barriers to women's access to paid employment, with the low representation of women in high-ranking positions and entrepreneurial pursuits. There is strong interplay between growth challenges, job creation and gendered inclusion. While both growth and stability are vital for providing the necessary opportunities for women, their participation in the labor market is also an integral part of the growth and stability equation. For example, a rise in women's participation in the

labor force engenders growth, improves gender opportunities and reduces poverty rates, among other results.

A wealth of research has underscored the fundamental correlation between empowering women to unlock their potential in the labor market; and the substantial economic gains that can be realized within an economy (Bloom et al., 2009). For example, Katrin Elborgh et al. (2013) explain that the per capita losses in GDP due to labor market gender gaps exceed 25% in some countries. In other words, the enhancement of female workforce participation to levels on par with their male counterparts can substantially augment the overall GDP of several nations. According to a study by David Cuberes and Marc Teignier (2012), by bridging the gender gap in workforce participation, Egypt and the UAE could realize a 34% and 12% percent surge in their respective GDPs.

This paper examines the correlation between demographic transitions in the West Bank and Gaza Strip and the potential for revitalizing Palestinian women's economic roles, in order to realize the gains of this wave of demographic change.

In order to enhance the possibility of leveraging demographic returns, Palestinian, this paper investigates the causes of low female participation in the Palestinian labor market, and available means to increase this participation through both micro and macroeconomic policies. It also addresses structural gaps such as women's unemployment and employment segmentation, where women are concentrated in specific sectors and income brackets. Through data sourced from PCBS, this paper explores the requirements (or determinants) for leveraging the demographic transition, as it relates to Palestinian women's contribution to the labor market and entrepreneurship. It also places a niche focus on the role of development plans in activating this women's labor force participation rates within current demographic changes and proposed economic policies, to ensure sustainability and optimize gender benefits.

In so doing, this paper devises an exploratory methodology that focuses on the alignment between economic conditions, demographic developments, and women-specific, labor market indicators, in order to garner a deeper understanding of the potential in boosting Palestinian women's participation in employment. In exploring this relationship, it relies on micro and macro data, as well as PCBS indicators.

The first part of this paper examines demographic indicators in the West Bank and Gaza Strip, and the anticipated role of demographic shifts. It then delves into a detailed discussion of the intricacies of women's participation in the labor market, and the barriers they face. The second part of the study provides an analysis of macro and sector-specific development plans, to assess their potential

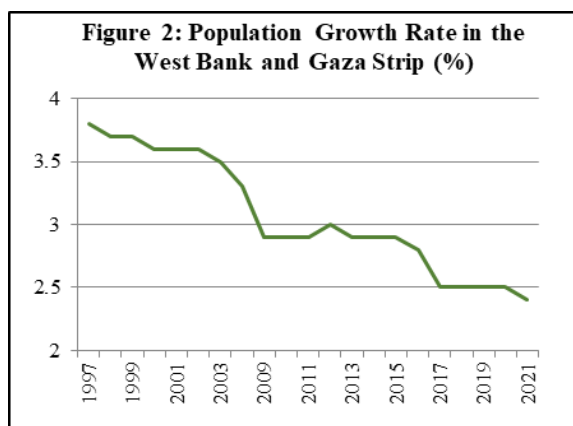
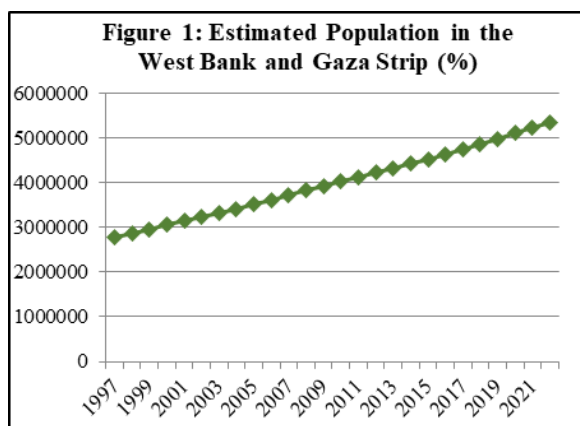
in promoting women's participation in the labor market. The third and last part explores proposed policies to increase women's labor supply and address structural, work-related challenges, including unemployment, inequality and decent work conditions.

2. Demographic Indicators in the Occupied Palestinian Territory

Demographic indicators in the occupied Palestinian territory (oPt) serve as a reminder of the ongoing conflict with Israel, a colonial power that uses demography to extend its dominance and territorial control over the oPt (Courbage, 2005). Israelis consider the rise of the Palestinian population in the 1948 Palestinian lands and the oPt as a time bomb directed against Israel (Zuriek, 2003). At different stages of the Palestinian struggle, the Palestinian leadership has highlighted the instrumentality of demographic growth to resist colonization and reinforce presence on their ancestral land. The manifestations of the political impact on the developments of the Palestinian demography over the past few decades will become evident later.

Population growth is typically driven by birth, death and migration changes. Fertility, or the number of births among women of childbearing age, is an immediate indicator and a crucial element in understanding the past, present and future of population growth in different societies. As shown in the figure below, the population in the West Bank and Gaza Strip reached 5.3 million in 2021, and the Palestinian population inside the Green Line (1949 Armistice Border) grew to 1.67 million in the same year (PCBS, 2021).

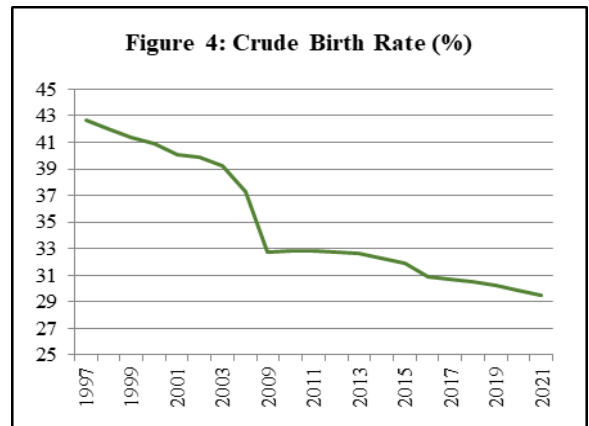
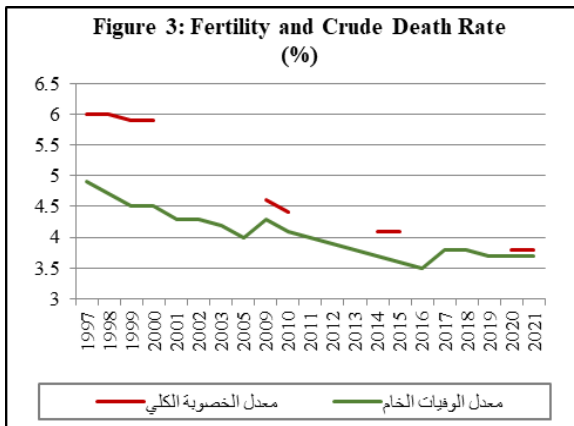
The population growth rate in the West Bank and Gaza Strip has steadily declined over the past decades, dropping from 3.8% in 1997 to 2.9% in 2009. It remained stable at that rate for over eight years until 2017, when it started to decrease again, reaching 2.4% in 2021. Historically, population growth in the Gaza Strip (2.8%) has been higher than in the West Bank (2.2%). While these rates are still relatively high compared to other developing countries (particularly some Arab countries such as Tunisia at 1%), the downward curve of these rates over the years can be considered significant demographic progress (World Bank, 2021).



Source: PCBS, Estimated Population in the Palestine Mid-Year by Governorate, 1997–2026 (2021).

More importantly, fertility rates have decreased in both the West Bank and Gaza Strip since the beginning of the 1980s. A noteworthy shift in the oPt’s demographic landscape can be observed as the total fertility rate has substantially decreased from six births per woman in 1997 to 3.8 births per woman in 2021 - a noteworthy fall of around 40%.

The crude death rate, the second component of population growth, decreased from 4.9 per 1,000 individuals in 1997 to 3.7 per 1,000 individuals in 2021. The same trend applies to the number of crude births, which has steadily declined in both the West Bank and Gaza (see figure below).



Source: PCBS, Population Statistics over several years.

When exploring the factors driving population growth in the oPt, economic research canvasses the intricacies of individual fertility decisions, placing particular emphasis on the interplay between fertility rates, income dynamics, and women’s active engagement in the labor market. Economists have presented two main explanations for the relationship between these variables.

Some schools of economic thought argue that there is a trade-off between quantity and quality in the correlation between fertility and income. For example, as parents’ economic capacity improves, they invest more in their children’s education and health. Since these investments are costly, parents choose to have fewer children as their income increases. Historically, there has been a negative relationship between fertility rates and GDP per capita across countries and over different periods (Deopke, 2022).

Highlighting the time and effort childrearing requires, the second school of thought intends that as wages rise, the time for childcare (time that could have been spent working or the opportunity cost of childcare) becomes more costly for parents, especially mothers. As a result, fertility declines, and female labor force

participation increases. According to applied research, there is a high correlation between women's labor force participation and fertility rates.

Furthermore, economic theories on the link between fertility and female labor force participation show a U-shaped relationship between an individual's share of income and labor force participation. With lower levels of individual income, women tend to have higher labor force participation rates, yet if family income rises, women may withdraw from the labor market in favor of domestic work and childcare. However, as income levels increase in a country, women's participation in the labor market also increases due to higher education levels, labor-saving technology availability in households and lower fertility rates. Numerous studies have highlighted the stability of this relationship in many countries (Duflo, 2012; World Bank, 2011).

These economic concepts and explanations highlight the crucial interplay between women's fertility rates, the overall standard of living and the economic potential for growth within a nation. Changes in fertility have ramifications for population growth, income levels, and quality of life, especially for women. Besides, the significance of fertility in demographic transition and its economic and social repercussions is further explored in the following sections.

2.1 Demographic Indicators Improvement: Implications for the Palestinian Population

The improvement in demographic indicators has had a significant impact on vital indicators that reflect the Palestinian population's quality of life. As the table below shows, the life expectancy of both women and men in the West Bank and Gaza Strip increased. Moreover, the median age rose from 16.4 years in 1997 to 21 years in 2021. It is perhaps fitting to note that this rise is closely linked to the actual lifespan of the population rather than life expectancy.

Moreover, the average Palestinian household size decreased from 6.4 individuals in 1997 to 5.1 in 2020. This decline is more pronounced in the West Bank (6.1-4.7 individuals) vis-à-vis Gaza (6.9-5.7 individuals).

The increase in the median age at first marriage among men and women has had a profound impact on the timing of childbearing, reducing fertility rates. On November 3, 2019, Palestinian President Mahmoud Abbas issued a decree setting the legal marriage age for both men and women at 18 (Palestinian Official Gazette, 2019).

Table 1: Quality of life demographic indicators, the West Bank and Gaza

	1997	2000	2005	2010	2015	2020	2021
Average life expectancy (male) (years)	70.2	70.7	71.7	70.8	72	73	73.1
Average life expectancy (female) (years)	71.7	72.2	73	73.6	75	75.3	75.3
Average household size	6.4	6.1	5.9	5.5	5.2	5.1	-
Median age (years)	16.4	16.4	16.7	18.5	19.8	20.8	21
Median age at first marriage (female) (years)	-	18.9	19.4	19.9	20.3	20.7	21.1
Median age at first marriage (male) (years)	-	24.1	24.21	24.6	24.7	25.7	25.9

Source: PCBS, Population Statistics over multiple years.

The decreasing fertility, birthrate, and mortality rate are all signs that the standard of living has improved in the West Bank and Gaza. The population is increasingly living longer in smaller family units, delaying the burdens of marriage. These demographic changes have several benefits, including benefits for women's empowerment and participation in the labor market. The subsequent section of this paper is dedicated to the economic implications of the demographic transition in the West Bank and Gaza Strip, particularly with regard to women's empowerment and labor force participation.

3. Demographic Transitions in oPt: Theoretical Framework

Demographic transitions can engender economic benefits, especially when a larger proportion of the population falls within the economically-active age group (between 15 and 65 years' old). The demographic transition, characterized by declining fertility and mortality rates, leads to a fundamental change in population structure. Before the onset of the demographic transition, the population exhibits high fertility and mortality rates. However, with the advent of the demographic transition, driven by advancements in healthcare and cultural and knowledge changes, the number of deaths starts to slope, meaning that the number of children who will live in each family is higher than before. There is usually a period that passes before families change their fertility patterns. In this phase, the child and youth age segments experience an upsurge in numbers. The working class will feel the effects of this hike more keenly (Courbage, 2020; Economic and Social Commission for Western Asia - ESCWA, 2016).

During the intermediate stage of demographic transition, fertility rates begin to decline, negatively impacting population growth. At this stage, the proportion of the economically-active population increases while dependency ratios decrease, and the number of older adults remains low. The final stage of demographic transition begins when fertility and mortality rates take a steep downward curve. The proportion of the economically-active segment of the population ceases to grow, and starts to age.

The relationship between the population's age structure and economic performance arises from the different economic roles of varying age groups. Children require support for education and healthcare, while older adults need robust healthcare and retirement systems. Economically-active individuals, on the other hand, focus on work and savings. During the intermediate stage of demographic transition, as the economically-active segment grows while the older adults' segments remains low, and the contribution of children decreases. This reduced burden on the economically-active segment can lead to increased savings and investment in development. Governments and households can access more economic resources, contributing to economic growth and higher per capita income.

Bloom et al. underline that the key determinants of reaping the advantages of demographic transition are increased labor supply, increased savings and accumulation of human capital or education (2003). As the economically-active population rises to constitute the bulk of the population, the size of the labor supply (or participants in the labor market) peaks. Subsequently, when the average family size decreases along with the fertility rate, more women will be

able to enter the labor market. To rephrase, changes in the age structure of the population engender an increase in labor supply, but the liberation of women's potential - owing to lower fertility rates and smaller family sizes - also plays a role. Hence, women have greater opportunities to access the labor market.

Several variables influence a population's engagement in the act of saving. However, it is safe to say that as families have more resources, the likelihood of saving and investment increases. If the government invests in healthcare, it can lead to improved opportunities for children in life and potentially reduce the size of families due to a decrease in the number of children per family. With a lower number of children and an increase in life expectancy, families are encouraged to invest more in the healthcare and education of their children, which can further reduce fertility rates. When the workforce is healthier and better educated, productivity improves, leading to higher income, given the positive correlation between education and wages.

Although a shift in the population's structure may not immediately cause higher productivity or faster economic development, it does pave the way for these outcomes. Realizing the benefits of demographic transition through restructuring age groups requires social and economic policies that stimulate investment. When labor demand and supply are in balance, workers are more productive. Achieving this balance needs macro and micro policies that resolve imbalances in the labor market and stimulate savings, especially via monetary policies and a banking system that encourages saving and investment. Of note, investment in the healthcare and education of children is only possible through necessary infrastructure. To fully reap the advantages of the demographic shift, policymakers should generally offer opportunities for youth and women, especially jobs. The effects of the demographic shift will be muted if economic policies do not create conditions that encourage higher levels of productivity. Human capital and healthcare are the most important investments you can make for today's young.

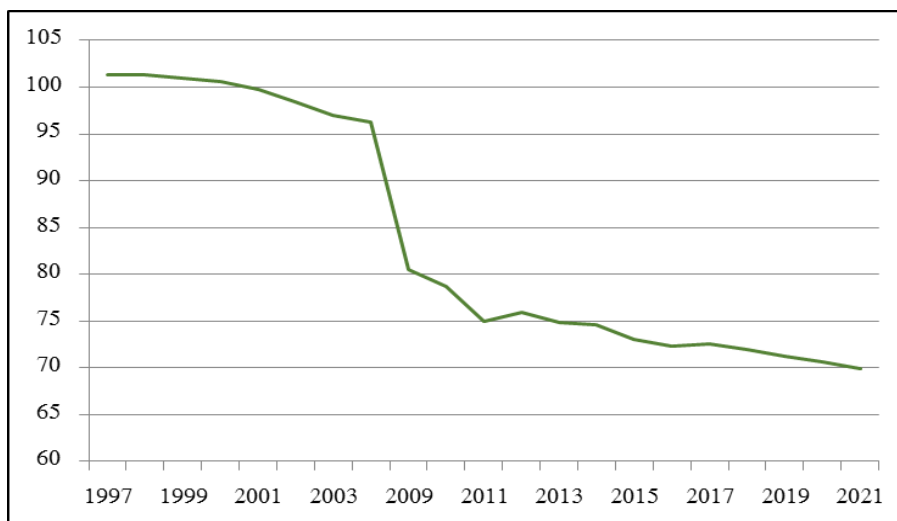
The second phase of demographic transition comes into play when the younger generation makes prudent savings through the agency of retirement plans and real-estate investments, to ensure a dignified old age. These savings can positively impact economic growth, both in the short and long term.

3.1. Gains of Demographic Transition in the West Bank and Gaza Strip

In the West Bank and Gaza Strip, the dependency ratio (the percentage of the population younger than 15 years and older than 64 years) has declined by 30%, as shown in Figure 5 below. The level of decline in both regions was similar: from 95 to 65 in the West Bank and from 115 to 78 in the Gaza Strip. The drop in

these ratios is an encouraging sign of the demographic transition, even if they are still higher than in other countries.

Figure 5: Dependency Ratio, the West Bank and Gaza Strip



Source: PCBS, *Palestinians in Years*, (report).

As the population structure moves towards increasing the economically-active age group (aged 15-65 years), the tendency toward demographic transition rises. Working-age individuals, who are economically engaged and supportive of other age groups, grew from 55.6% of the overall population in 2001 to 59% in 2021, as table 2 shows.

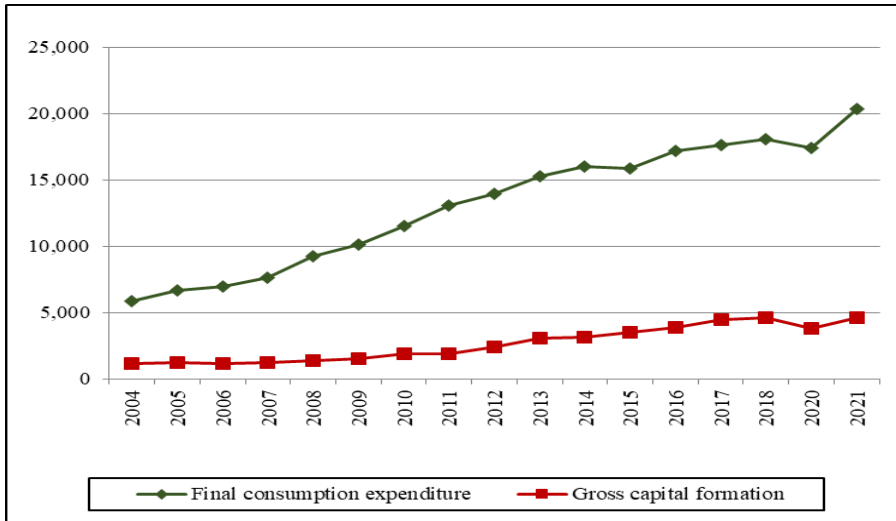
Table 2: Population distribution by age group

Age group (years)	% of total population (2001)	% of total population (2021)
Below 15 years	41.3	37.7
Above 65 years	3.2	3.3
Between 15 and 65 years	55.6	59

Source: PCBS, *Palestinians in Years*, (report).

The drop in the dependency ratio and the growth of the economically-active age group (aged 15-65 years) gives an opportunity to boost both savings and investment. These ratios are now affected by low investment and high consumption (see Figure 6), prompting macro and microeconomic policies that encourage savings and investments and direct them toward high-yield investment

Figure 6: Consumption and investment in West Bank and Gaza Strip



Source: PCBS, National Accounts, multiple years.

A recent study by the ESCWA determined the window of opportunity afforded by the Arab world's demographic transition (2016). In Palestine, the demographic transition started in 1982 and is predicted to continue until 2050. Therefore, it is crucial to take advantage of this opportunity, by adopting macro and micro policies that galvanize the economically-active population, increase labor supply, reduce unemployment, enhance productivity, encourage savings and stimulate effective, long-term investments.

As one of the essential variables for leveraging the advantages of demographic transition, expanding labor supply is strongly tied to leveraging demographic transition gains that generate greater economic development, and better living standards for the public. In the following section, the paper explores the intricacies of labor supply for women. Through the prism of this understanding, a set of policies are proposed that aim to activate women's participation in various economic activities.

4. Women in the Palestinian Labor Market

A key indication of a country's economic health is the percentage of working-age women who participate in the labor market. It sheds light on a country's level of development, by gauging the economy's capacity to utilize available human resources. In a similar vein, the female labor force participation rate reflects the economy's efficiency and resilience in responding to economic shocks with the least-severe social impact (Verick, 2014). Lastly, women's engagement with economic life, especially in terms of the quality of their work, mirrors the level of social justice in a country and its respect for women's free role in society (ILO, 2010).

In 2021, the labor force participation rate for Palestinian women was 17.2%, one of the lowest percentages in the world (see Table 3 below), particularly in light of Palestinian women's high levels of educational attainment at school and university levels. According to data from the UN Educational, Scientific and Cultural Organization (UNESCO), the enrollment rates of Palestinian girls in primary education are higher than those of boys. Moreover, at the university level, the enrollment rates of Palestinian women are not only higher than their male counterparts, but also higher than their counterparts in neighboring Arab countries (UNESCO, 2020).

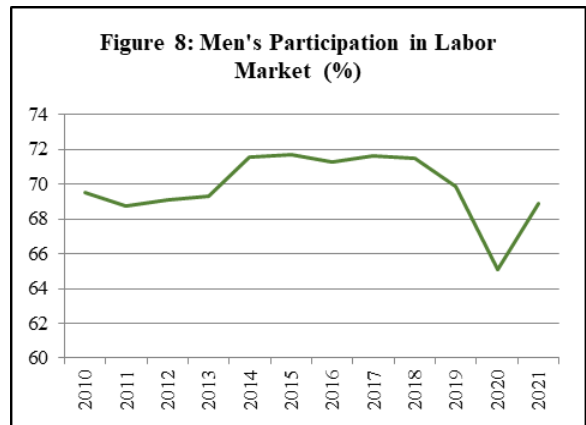
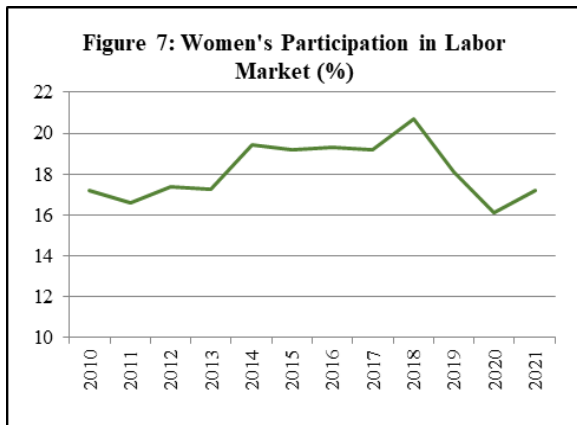
Table 3: Male and female labor force participation rates in Palestine compared to the Arab world and global average

Country/region	Male labor force participation (%)	Female labor force participation (%)
Palestine	74	17
Lebanon	71	23
Egypt	74	22
Saudi Arabia	78	22
Turkey	72	32
Arab World	74	21
Sub-Saharan Africa	74	63
Latin America	77	52
World	75	49

Source: PCBS, Labor Force Survey (2022), and World Bank statistics (2021).
<https://data.worldbank.org/indicator/SL.TLF.CACT.FE.ZS?view=chart>

The labor force participation rate of Palestinian women appears surprisingly low, especially when juxtaposed with other Arab countries in the Gulf region. These countries are known for their conservative societies, yet women participate in the

labor market at higher rates. This prompts the question of why women in the Palestinian labor market are under-represented (see the figures below). Moreover, this question invites another: how to activate women's participation in the Palestinian labor market to benefit from the current phase of demographic transition.



Source: PCBS, Labor Force Survey, multiple years.

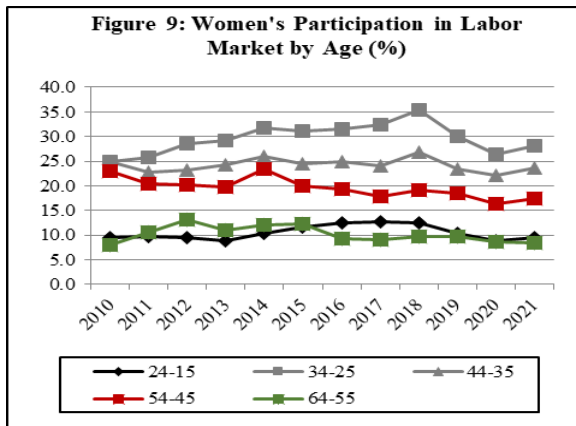
A careful breakdown of age groups and qualifications in the Palestinian labor market reveals that men's participation is significantly higher than women, yet, the male segment itself is divided into two categories: youth and men above 55 years, the latter characterized by low participation rates.

This situation resonates with the younger generation's keen interest in education, and higher education in particular. Along the same lines, employers (especially in the public sector) encourage those above 55 years to seek early retirement, to make room for younger cohorts in the labor market.

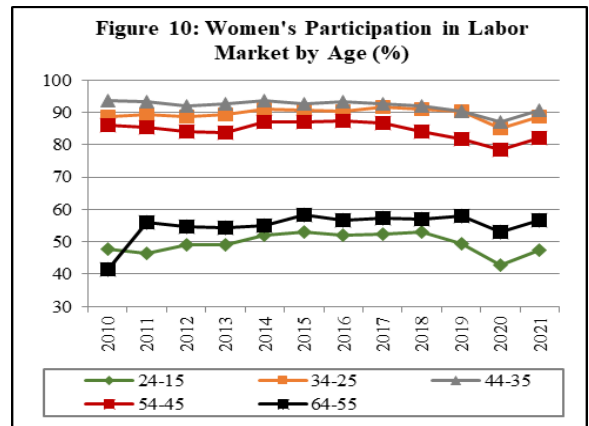
For women, the highest (albeit limited) rate of participation in the labor market is for those who are 25-35 years' old i.e. young adults. However, this rate drops dramatically for middle-aged women (35 to 55 years' old). Owing to childbearing and raising responsibilities, numerous women withdraw from the workforce. After they have children, these women never return to the workforce due to a lack of opportunities, and inherent challenges in going back to employment.

The clear majority of Palestinian women labor works in the Palestinian labor market, with only 4% employed in Israel and the settlements (compared to 26% of Palestinian male labor). Economic research suggests that Palestinian women's low participation in the Israeli labor market and settlements is attributable to the nature of such work: long hours and the logistical complexities of traversing Israeli checkpoints (travel complications). That is in addition to the nature of

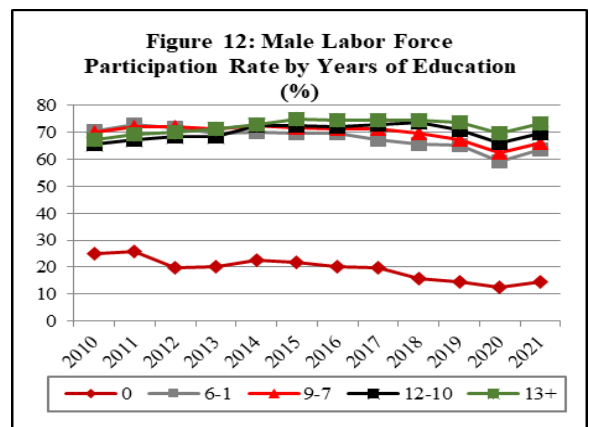
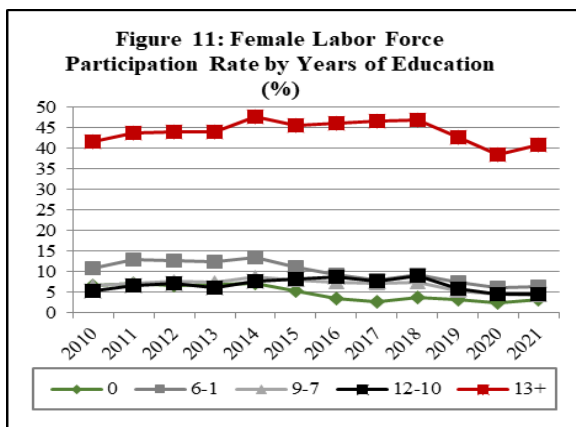
economic sectors in Israel that the Palestinian labor is active in which does not correspond to the nature of Palestinian women labor (Hammami, 1997).



Source: PCBS, Labor Force Survey, multiple years.



When examining the educational background of labor market participants, distinct disparities emerge in the participation patterns of men and women, contingent upon their level of educational attainment. Women's labor force participation rate is strongly influenced by their educational background, as evidenced by the notable participation rate of 45% for women with 13 years or more of education. Conversely, women with lower qualifications (less than 13 years) exhibit significantly lower participation rates (less than 15%). For men, however, the situation is different: participation rates are comparable across educational groups, with the exception of those with no formal schooling at all.



The source is the PCBS Labor Force Survey, conducted over multiple years.

The mismatch between education and labor market requirements is a matter that constricts women's labor force participation and entrepreneurship. Women's high rates of participation in higher education, whether academic or vocational, does

not seem to help them join the workforce in sufficient numbers. Women's education, mostly concentrated on traditional subjects, may be to blame for this issue, as the skills and choices women develop through their immersion in these traditional subjects limits their potential to engage in other economic sectors and professions.

Data indicates that women's involvement in the Palestinian labor market is severely distorted and inadequate, as the possibilities for women with fewer than thirteen years of education to join the job market are limited. This indicates that women's prospects are restricted to a single group, rather than their distribution across all segments of women.

4.1 Determinants of Women's Participation in the Labor Market

There are two main conceptual approaches to understanding women's participation in the labor market. The first approach places a niche focus on individual factors in interpreting female labor force participation. These factors include education, expected wages, and the number of children in the family (especially those under 6 years). In addition to these variables, factors such as place of residence and the overall financial status of the family are also taken into consideration. The second theoretical method looks at the economy as a whole and the labor market's absorptive capacity within it. This is determined by the size and quality of labor demand, prevailing wages, the distribution of women across different sectors and working conditions. All these serve as factors of attraction.

Multiple studies undertaken in the Palestinian context show the favorable effects of education on women's work and family income (Dawood, 1999; Al-Botmeh, 2013). This research also demonstrates that a higher fertility rate in Palestinian society would further hinder women's participation in the labor market. However, it is worth mentioning here that there is a clear difference between the experiences of Arab countries in general, and Palestine. While Palestinian indicators are similar to many countries in the region, the participation of Palestinian women is lower than in those countries. To complete the picture, it is necessary to explore the determinants proposed by the second approach, focusing on the economy's structure and the labor market. According to this approach, the limited absorptive capacity of women in the labor market negatively affects their participation rate.

4.2 The Absorptive Capacity of the Palestinian Labor Market for Women

The Palestinian labor market's absorptive capacity for women increased in the past two decades, with women's participation rising from 11.2% in 1995 to 17.2% in 2021. Despite this notable increase in women's involvement, it mostly translates into a rise in female unemployment rather than an increase in

employment levels. The unemployment rate among women increased from 12.4% in 2000 to 50% in 2021, compared to a rise from 14.6% to 23.9% for men during the same period.

Furthermore, women's unemployment is disproportionately high among young women, particularly those with academic qualifications. This indicates that women in the Palestinian economy have poor job prospects. This, in turn, discourages them from entering the labor market, since they do not perceive the advantages of doing so in light of growing unemployment rates.

Palestinian youth, like those in other Arab countries, have higher unemployment rates compared to older age groups. This is especially true for women, with the unemployment rate among young women being four times that of older women (over 25 years), and twice that of young men. By the same token, young women (under 25 years) with a high-school diploma or higher education suffer from four times the unemployment rate as older women with the same qualifications.

The distribution of women across economic sectors, as well as the contribution of these sectors to their employment in substantial numbers, serves as an indicator of a given labor market's absorptive capacity and potential. In the Palestinian context, the services' sector emerges as the dominant economic sphere for women, as evidenced by the substantial presence of over 75% of working women in this sector.¹ This concentration in one sector restricts job prospects and employment chances for women in other industries, reducing their motivation to participate in the labor market.

Aside from the concentration of women in one sector, another key reason explaining low female labor market participation in Palestine is the decreased contribution of productive sectors, such as agriculture and industry, to GDP and employment. In fact, productive industries and services are critical for women's employment globally, both in advanced and developing nations. Thus, rising female labor force participation correlates consistently with higher rates of total employment, and with women's employment in economically-productive sectors (Standing, 1999). The economic contribution of these sectors to GDP is small and shrinking further. In 2021, the agricultural sector accounted for 3.2% and the industrial sector for 13.3% of GDP. Moreover, the contribution of these sectors to women's employment in Palestine decreased over the past two decades, indicating the weakened capacity of the economy to absorb women in the labor market. Currently, only 10% of women work in the agricultural sector, compared to 29% in 1996; while 12% work in the industrial sector, compared to 16% in

¹ In the broader sense, the term "services" here encompasses various sectors: hotels, restaurants, commerce and other service-related industries.

1996. This is a contributing cause to the low rate of female labor force participation. The protracted downturn in these sectors negatively pressures (persistently) on employment prospects, and by extension, women's chances of entering the labor market.

Pay is a major factor for women in deciding on whether to enter the workforce. Thus, closing the pay gap is critical. While both genders have experienced salary increases, women have seen a fall in real wages and the gender wage gap has become wider. In 2021, the real wage for women participating in the labor market reached ILS 76.50, while men earned ILS 107.40.² The wage gap became worse with time, from ILS 10 in 2009-12 to ILS16 in 2016-21. It is important to note that this disparity is more pronounced in the private sector. These factors (drop in real wages and widening pay gap) significantly inhibit women's willingness to enter the labor market. Furthermore, there has been no significant change in women's access to senior positions in various sectors where they remain underrepresented; such positions typically come with higher salaries.

Moreover, women's access to - and retention in - the workforce are profoundly impacted by the political and colonial context. Constraints, territorial restrictions, the military closure of villages and cities, and the erection of a myriad of separation walls all make it harder for women to enter the labor market and make economic and investment decisions. Increased travel durations between various parts of the West Bank are a direct consequence of these obstacles, making it difficult to estimate when (and how often) women may leave the house. In other words, Israel's numerous restrictions diminish women's opportunities to engage actively in the labor market.

In terms of entrepreneurship, there has been limited progress in recent years. The percentage of women who are self-employed - or who hire others - does not surpass 14%, according to PCBS statistics, and has not risen at all over the past two decades.

Studies undertaken in neighboring countries that carefully examined women's entrepreneurship confirmed the existence of considerable obstacles in acquiring finance when compared to males, for a variety of reasons. Some women, as a result of inherited social norms, do not receive their inheritance, thus, have fewer assets to use as collateral for loans. Training opportunities for women are likewise restricted (and often only available) in traditionally female-dominated occupations such as tailoring, clerical work and beauty care. They lack training in fundamental accounting, pricing, marketing, production factors and reinvestment. Israeli products, on the other hand, flood the Palestinian market, undermining the success

² Based on 2010 data as the baseline year.

of Palestinian women's initiatives, particularly in agriculture (e.g. animal husbandry). This issue has had a disastrous impact on Palestinian society's entrepreneurial spirit, especially women entrepreneurs.

In a similar inhibiting manner, the dominant patriarchal system in Palestinian society significantly shackles extensive female labor force participation. The institutional framework governing the labor market, such as labor laws, entails several challenges. For instance, it excludes significant categories of working women: including the self-employed, unpaid family work and domestic workers. The labor law does not cover women working in Israel or the settlements. Interviews with the Ministry of Women's Affairs confirmed the effect of the patriarchal system in terms of limiting women's labor force participation. Therefore, it is vital to address and challenge patriarchal notions in society via education and the elimination of stereotypical views of women's roles.³

4.3 Population Projections and Women's Economic Role

As indicated above, micro and macroeconomic policies that prioritize labor and employment are instrumental in capitalizing on the demographic transition following the decline in fertility rates and the structural changes in the population. Youth has become the largest segment in Palestine, as is the case in most Arab countries. These policies must focus on expanding labor demand to increase participation in the labor market, and thereby employment. Expanding demand is expected to lead to increased participation of underrepresented groups, such as women, as well as increased participation by men. This, in turn, is likely to result in higher incomes and reduced dependency rates.

In spite of a gradual drop in dependency rates over the past eight years, Palestinian society's savings' rate has been very unstable. The savings' rate is low, hovering between 9% and 19% of GDP (PCBS, 2022, 2023). This suggests that the existing correlation between these variables is weak and dependent on a highly volatile investment rate. Furthermore, interviews with public sector representatives reveal the lack of a cohesive vision or strategy to promote savings for the purposes of investment.⁴ This also indicates that a key factor in leveraging the economic advantages of the demographic transition has not been fully addressed, even at the strategic level.

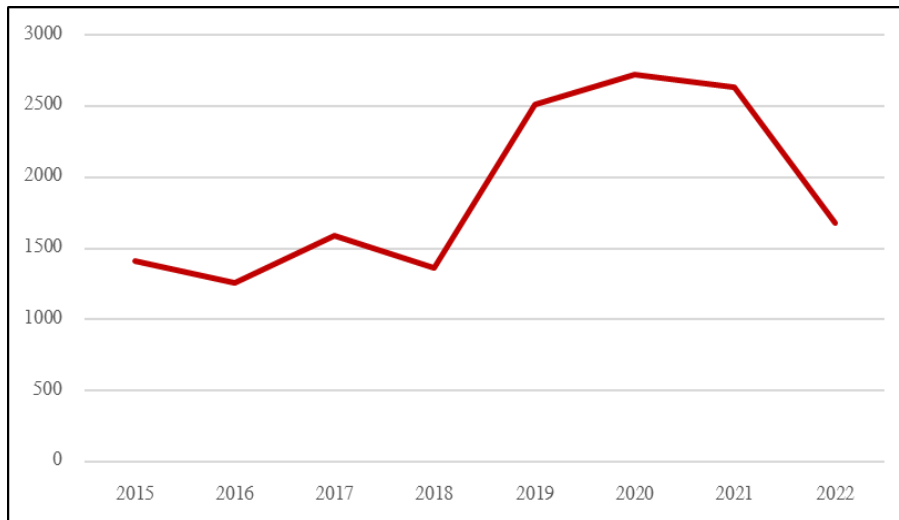
The Palestinian economy is characterized by high borrowing rates, which can be considered an indicator of savings. In 2020, the volume of credit facilities (loans, overdrafts and lease-to-own) amounted to USD 10.7 billion, accounting for

³ Interview with a representative from the Ministry of Women's Affairs, May 25, 2023.

⁴ Interviews with representatives from the Ministry of Labor and the Ministry of Women's Affairs, May 15 and May 25, 2023.

approximately half of the Palestinian banking sector’s assets. These substantial amounts are invested by households and business owners in non-productive sectors. According to the Palestine Monetary Authority (PMA), the breakdown of these credit lines was as follows: 21.3% for real estate and construction, 1.2% for agriculture and animal breeding, and 17.1% for consumer goods and automobiles. Data indicates a low level of investment in productive sectors and a high level of investment in the non-tradable, construction sector, meaning its investment impact remains limited in terms of sustainability (PMA, 2021).

Figure 13: Savings at Constant Prices (USD millions)



Source: PCBS (2023), Palestinians at the End of 2022. PCBS (2022), National Accounts Indicators in Palestine.

Should the female labor force participation rate remain as low as it is now throughout the demographic transition period, women's economic roles will continue to be marginalized, as would the chance for potential positive impacts resulting from structural demographic changes. The same holds true for unemployment, reflecting the Palestinian economy’s limited absorptive capability. The consequent increase in the youth population will further increase unemployment rates.

If women’s labor force participation rate remains low throughout the demographic transition, as it is now, it will compound Palestinians’ economic challenges. Specifically, women’s qualifications will continue to be under-utilized, particularly in the Gaza Strip: the number of people without employment is expected to increase, in spite of relatively constant unemployment rates. This means that economic dependency ratios, which measure the proportion of people engaged in economic activity, will thus be rather high. Most crucially, there is a

risk that this demographic transition becomes a burden, rather than an economic and demographic opportunity, if the advantages it presents remain unrealized. Poverty and domestic violence tend to increase in tandem with population growth in economically depressed regions, particularly those with poor labor markets. In other words, failing to engage at this point of the demographic transition will have serious ramifications for the economy and society in terms of increased poverty and increasing domestic violence in the future.

Table 4: Participation and Unemployment Scenarios from 2021 to 2030
Labor force participation rates and unemployment rates based on (i) 2021 stability, (ii) increased labor force participation rates (25% for females, 74% for males) and decreased unemployment rates (10% for males, 20% for females), by 2030

Scenario	Projected Year	Individuals aged 15 and above						
		West Bank		Gaza Strip			oPt overall	
		Males	Females	Males	Females	Males	Females	Total
Labor force participation	*2030	938,566 ***(73.6)	212,715 (17.2)	513,239 (16.2)	142,384 (17.3)	1,451,804 (68.7)	355,099 (17.2)	1,806,903 (43.3)
Unemployment	*2030	116,382 (12.4)	61,475 (28.9)	215,047 (41.9)	92,549 (65)	331,429 (22.8)	154,024 (43.4)	485,453 (26.9)
Labor force participation	**2030	943,667 (74)	309,180 (25)	620,583 (74)	205,757 (25)	1,564,249 (74)	514,937 (25)	2,079,186 (49.8)
Unemployment	**2030	94,367 (10)	61,836 (20)	62,058 (10)	41,151 (20)	156,425 (10)	102,987 (20)	259,412 (12.5)

* Assuming stable participation and unemployment rates as of 2021.

*** Assuming reduced unemployment rates in the West Bank and Gaza: 10% for males and 20% for females.

** Assuming increased participation rates to 25% for females and 74% for males.

*** Assuming reduced unemployment rates in the West Bank and Gaza: 10% for males and 20% for females.

(The figures within parentheses represent participation rates and unemployment rates.)

The advantages of the demographic transition for Palestinian society can be maximized by the implementation of economic policies that increase the absorptive capacity of the Palestinian economy, which in turn increases female labor force participation rates. The following part of this paper focuses on these policies. If female labor force participation rates were to rise to 25% and male and female unemployment rates dropped to 10% and 20% respectively, more people would be employed, and women's social roles would be given a boost. It is also projected to reduce poverty and other social issues in Palestine.

As part of the ongoing discussion on unlocking women's roles in the context of the demographic transition, during interviews with representatives from the Ministry of Labor and the Ministry of Women's Affairs (MoWA), representatives stressed the instrumentality of expanding productive sectors in increasing women's employment. These critical sectors may help increase female labor force participation and minimize unemployment rates.⁵

⁵ Interview with representatives from the Ministry of Labor and the Ministry of Women's Affairs, May 15 and 25, 2023.

5. From Demographic to Developmental Dividends: Investment Requirements to Enhance Inclusive and Gendered Development

Over the past two decades, female educational attainment has risen dramatically. In the academic year 2021/22, female students accounted for 62% of all enrolled students in Palestinian higher education institutions.⁶ Based on this data, it is clear that Palestinian society places a high value on female education. Thus, it is crucial to capitalize on this expanding pool of human capital to spur economic expansion and development.

However, women experience a decline in their status in the local labor market - a situation characterized by high unemployment and low rates of labor force participation compared to men. Thus, tapping the demographic dividend of women's education in Palestine includes both economic returns (e.g. economic growth, reduced unemployment rates, etc.) and social returns (e.g. minimized poverty rates, food security, improved health and well-being, social and political empowerment). With the predicted increase in the total number of educated women, specifically by 2030, effective policies are required to improve women's labor market position, otherwise the envisaged advantages of the demographic transition (and accompanying economic gains) will not be realized. Instead, economic dependency ratios will grow.

According to labor market projections in Table 4 above, given the percentage (17.2%) and number (275,672) of women participating in the labor market in 2021, the Palestinian economy needs to create approximately 80,000 job opportunities for women who will be entering the labor market by 2030 (assuming that the participation rate remains constant at 17.2%). This is in addition to the 157,000 women who are currently now jobless (female unemployment stood at 42.9% in 2021). Assuming that the women's participation rate will rise to roughly 25% (514,937 women) by 2030, the local economy will need to create around 240,000 new, job opportunities for women, in addition to opportunities for the currently 157,000 jobless women. It is vital to remember that the figures above are for oPt as a whole. However, reality in the Gaza Strip is far more difficult, owing to worsening economic circumstances. This has severely and adversely affected female labor participation, especially given Israel's ongoing economic blockade, imposed since 2006.

To avoid a difficult reality in which women's high rates of education and labor force participation become a significant demographic burden, a comprehensive set of policies and interventions from all relevant stakeholders are required to

⁶ https://www.al-ayyam.ps/ar_page.php?id=15dcd53by366794043Y15dcd53b

increase women's labor force participation, and create decent job opportunities for them.

5.1 Labor Market Interventions

Future demographic indicators call for several labor market interventions, especially on the demand side, to alleviate current and new distortions. Key interventions include:

- *Public fiscal policy utilization.* Tax incentives can be used to encourage women to join the labor force. Tax incentives (reductions or waivers) encourage women to accept jobs, as this increases their net income. After encouraging women to enter the labor market, governments typically phase out tax incentives gradually, as household income increases. This policy is preferred by governments worldwide to enhance women's participation in the labor market, as the marginal tax rate applied to secondary income (women's income is often considered secondary) remains low, thus encouraging women's participation (Elborgh, 2013). On this note, MoWA representatives emphasized the importance of providing tax exemptions for women-led projects, to encourage and sustain their participation in the labor market.⁷
- *Women's empowerment through greater access to financing.* Despite the law guaranteeing women's inheritance rights, the number of women who do not receive their rightful inheritance should not be underestimated. Women face significant challenges in accessing the financing they require, especially the need to provide collateral and guarantors. Microfinance institutions (MFIs) were advised to finance women-led projects. The interest rates that these institutions charge are excessively high, making it difficult for women to benefit from such loans. To support the production and distribution process, and thereby ensure higher profits, it is crucial to provide low-interest loans to women, particularly across the productive sectors.
- *Expenditure.* Allowances for families encourage women to join the workforce if they are structured correctly. Paid maternity leave is one of the most essential tools that help families balance work and family life. According to Palestinian labor law, maternity leave is only ninety days, shorter than in many countries. However, more importantly, the law imposes the total cost of maternity leave on employers, leading employers to shy away from hiring women, due to the high cost of such leave. As in other countries, employers and the state must share the cost of this leave, to encourage employers to hire women.

⁷ Interview with a representative from the Ministry of Women's Affairs, May 25, 2023.

- *Comprehensive, affordable and quality childcare services* can free up some of women's time, enabling them to participate more easily in the labor market. Global research shows that flexibility in women's labor supply directly correlates to the high cost of childcare services. If the price of childcare service decreases, the supply of maternal labor will increase significantly.
- *Enhance collaboration with the private sector to adopt initiatives that promote gender equality.* Encourage the recruitment and promotion of women, and provide an inclusive and equitable work environment.
- *Devote concerted efforts to increase the relevance of women's education and training to the requirements of the labor market,* by expanding education to include technology, business management and entrepreneurship. Women's education currently focuses on services such as healthcare, education and social care. The number of women specializing in fields such as industrial engineering or computer programming is low. Therefore, it is necessary to expand the scope of women's education past traditional fields.
- *Challenge traditional gender roles within society,* as proposed by the MoWA, through policies that encourage male involvement in household chores, both in routine household chores and in childcare. This saves women time, enabling them to engage in the labor market. The Ministry also suggested licensing women-led, home-based projects to increase women's economic empowerment. This includes culinary, baking and embroidery projects.⁸
- *The adoption of policies that address distortions in the labor market,* as well as supporting gender equality, while creating equal conditions for all. This can increase demand for female labor force participation. This can be achieved through incentivizing sectors where women are engaged economically, including agriculture, industry and technology. As previously mentioned, these productive sectors have experienced a significant decline since 1967 in terms of their contribution to GDP, employment and productivity. As women's employment is primarily limited to services, agriculture, industry and technology across the globe, Palestinian women resultantly have only one option: the services' sector. This sector is the only one experiencing continuous growth and higher employment rates. Investing more effectively in productive sectors is necessary to increase women's labor supply.
- *Concerning agriculture, it is crucial to reconsider the concept of profitable agricultural production and move away from traditional models.* This requires increasing land productivity to make it economically viable for farmers. This

⁸ Interview with representatives from the Ministry of Women, May 25, 2023.

can be achieved by improving knowledge about modern farming techniques, regulating water usage, and enhancing the productivity of small agricultural areas.

- *New intervention strategies for the agricultural sector.* This should cover the marketing and distribution of agricultural products, in addition to inputs and technologies. These are required to create a possibility for the development of the agricultural sector. Israeli agricultural goods, backed by the Israeli government, pose a serious threat to Palestinian exports and flood Palestinian local markets. As a result, it is critical to defend Palestinian goods against unfair competition that seeks to undermine agriculture and citizens' ties to the land for colonial ends.
- *Assist farmers in marketing their products.* Systemic trade and industrial strategies must be implemented, either via exports or by adapting products for export without spoilage. Delicate agricultural products can be transformed into industrial ones, preserved, and then sold in the local economy. Manufacturing agricultural products plays a role in increasing employment, while contributing to creating transformative industries. It is essential to adhere to quality production standards and achieve competitive standards, as the potential for exporting (or even consuming) high-quality products is much higher. Thus, a significant part of the success of the agriculture sector relies heavily on the government's trade policies.
- *A comprehensive trade policy must protect local agricultural products.* Furthermore, deliberate policy interventions are required to channel lending and investment into productive sectors, rather than the existing scenario in which consumer goods, general commerce, and automobile purchases form the bulk of borrowing. According to the PMA's data, the volume of credit facilities reached over USD 10 billion in 2021, yet, the proportion of borrowing for investment in agriculture and industry amounts to only 1.2% of this amount (PMA, 2022).
- *The ICT Industry.* The same can be said about the ICT industry, which is failing and shrinking. In order to encourage investment in this sector, it is necessary to emphasize the competitive advantages available in the West Bank and Gaza Strip. The technological industry is strongly reliant on Israel, with Israeli firms doing "secret work with Palestinian enterprises" by delivering software codes for Palestinians to distribute. This indicates that the Palestinian technology industry serves as a distribution channel for Israeli technological software, which has minimal economic returns compared to the design phase. Israeli firms retain the lucrative and highly technical components of planning and design. This brings to mind the 1980s clothing

industry when several Palestinian businesses were actively engaged in the processing phase for Israeli end products. Israeli enterprises, on the other hand, kept their design and production in-house, reaping huge profits while leaving the Palestinians with the leftovers.

- *Establishing direct links between global tech firms and Palestinian enterprises*, without using Israeli corporations as intermediaries, is vital to address challenges in the ICT industry and promote women's involvement in this domain. By following this path, Palestinians will create more jobs and be able to innovate, design, develop and implement their own digital software, without relying on Israel.

5.2 Government's Strategic Planning Interventions

There is an urgent need to continue this approach of strengthening the role of developmental and governmental strategic planning in increasing women's labor force participation and reducing unemployment rates. This can be accomplished by incorporating additional policies addressing women's challenges in the labor market into the government's strategic plans. This step is crucial for achieving gender equality and promoting women's role in economic development. The government's strategic plans (sectoral plans, sustainable development objectives, multidimensional poverty strategy, national policy agenda, etc.) should include specific and tangible objectives to enhance women's participation in the labor market and empower them economically and socially. Clear and effective mechanisms for monitoring and evaluating performance must be established, requiring coordination among relevant ministries.

Since the Oslo Accords, the consecutive Palestinian governments have released a comprehensive system of sectoral and developmental plans to direct the economy on a course of economic growth that takes into consideration social developmental concerns. These plans also seek to address the severe economic impacts of Israeli occupation, especially in Area C and other marginalized localities. These development plans aim to tackle gender issues in the labor market, including an increase in women's participation rates, reduced unemployment rates (particularly for women), promoting decent work conditions and wage equality. These plans also take into account the 2030 Sustainable Development Goals (SDGs), with their provisions including the need to address gender-based challenges in the labor market. Annex A presents a detailed set of proposed policies and interventions, across a comprehensive range of sectoral developmental plans, with a particular focus on women. In summary, these plans aim to:

- Address the legal and regulatory framework to encourage labor force participation, while providing a suitable, legal and legislative environment, including the protection and regulation of work in the informal sector, through licenses and permits that allow these businesses to become legally recognized entities, subject to laws and regulations to protect workers. This includes providing long-term assistance and support, emphasizing the need to achieve gender equality in employment opportunities and wages through rigorous monitoring by the Ministry of Labor's inspectors.
- Provide administrative and professional consultations for project owners, especially small businesses, as they constitute the majority of economic establishments in Palestine, focusing on women across various economic sectors. (Different plans prioritize managerial, financial and legal training for business management and development, aiming to disseminate information on success in economic projects, rather than just establishing these.)
- Ensure access to loans and financial facilities for different projects, particularly women-owned projects and women-led cooperatives. Alternatively, provide support services to women's businesses.
- Focus on the marketing of local production, whether in domestic markets or through exports. Dedicate concerted efforts to replace Israeli goods with Palestinian ones, particularly in the agricultural sector.
- Emphasize the importance of providing financial, administrative and marketing facilities for marginalized areas, and those threatened by annexation (e.g., Area C and the Jordan Valley).
- Highlight the importance of decent work conditions, wage equality and protected employment rights. Develop an education and employment infrastructure that emphasizes justice and dignity for working women.

In light of the proposed policy actions above, which are detailed in the Annex to this paper, it is evident that interventions aimed at promoting women's participation in the labor market and economic entrepreneurship in the oPt have primarily focused on the supply side, specifically women's participation in the labor market itself. These policies revolved around empowering women through education and skills' development. Along these lines, policies were postulated to increase girls' school enrollment and reduce dropout rates. Additionally, these policies addressed some issues related to the institutional framework governing the labor market.

While these policies and strategies are significant, they do not address the root cause of women's absence from the labor market and economic entrepreneurship, corresponding to a drop in general employment demand, including women's employment. In response, policymakers should pay increased attention to demand in the labor market, while encouraging various economic sectors to play a more active role in boosting employment demand. In a nutshell, the underlying structural issues within the economy - and the insufficient capacity of different economic sectors to generate job opportunities for women - are key factors influencing women's low rates of participation in the economic landscape.

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Annex 1: Evaluation of the Significance of Strategic Planning in Development Plans that aim to Promote Higher Female Labor Force Participation

The table below presents sets of proposed policies - in groups - based on the extent to which they seek to promote labor market participation, lower unemployment rates, while ensuring that all workers enjoy decent working conditions.

Sectoral and cross-sectoral strategic objectives to enhance female labor force participation are outlined and evaluated in the table below.

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
The National Strategy for Gender Equality and Equity and Women's Empowerment (2017-22)	<ul style="list-style-type: none"> • SDG No. 5 has been adopted by the MoWA as part of its strategy: to promote women's full and effective involvement; and equal opportunities for leadership at all levels of decision-making in political, economic and public life. • Increasing women's economic participation and job opportunities across different sectors by encouraging financial and civil society programs targeted at the economic empowerment of women and youth. • To increase women's participation, financial and financing firms must offer Islamic finance and loans to entrepreneurs and cooperatives. NGOs should concentrate on enhancing the capacity of women's organizations and entrepreneurs in project setup and development, by providing business 	<ul style="list-style-type: none"> • In pursuit of the fourth sectoral strategic objective: to enhance women's participation in the economic sector, the following interventions should be implemented: • Adopt laws encouraging and protecting small businesses and working women. • Establish a gender-responsive TVET system that effectively supplies the labor market with skilled and semi-skilled workers of both genders. • Further empower women in establishing their own projects: the MoL should focus on equipping women with the required skills, especially through vocational training. • The General Cooperation Directorate at the MoL should empower cooperative societies by providing them with the knowledge and necessary organizational tools for effective management. • The National Fund for Employment and 	<ul style="list-style-type: none"> • To reinforce compliance with laws and executive regulations in pursuit of the fourth sectoral strategic objective (i.e. enhance women's participation in the economic sector): • The MoL should proactively supervise the monitoring of private sector enterprises, especially those that violate labor regulations, such as minimum wage and safety at work. • The MoL should develop a labor rights awareness program for both male and female workers to mainstream decent work standards for women in the public, private, civil-society sectors and international institutions operating in Palestine. • Supervision of occupational safety requirements should be activated. • Support should be extended to trade

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
	development services and market access assistance.	<p>Labor Protection should fund women’s cooperative societies and entrepreneurial endeavors.</p> <ul style="list-style-type: none"> • The Ministry of Agriculture should foster entrepreneurial opportunities for women in the agricultural sector. • The Ministry of Culture should support women working in the handicrafts’ sector. • During 2017-19 budget programs, the MoWA established an organizational structure within the Ministry to support women entrepreneurs and associations, enabling them to achieve sufficient income and project sustainability, mainly through fair marketing. • The General Cooperation Directorate should develop mechanisms for the fair marketing of rural and cooperatives’ products. • The Ministry of Economy should facilitate national and international agreements for marketing rural products. • The Ministry of Finance and the Ministry of Justice should review laws related to investment, taxation, and the protection of national products to create a conducive environment for small businesses and cooperative work. • The Standards and Meteorology Department should improve specifications for rural products and for handicrafts. • Capacity building for women producers and 	unions, labor-related organizations, and women’s organizations that are active in sensitizing workers about their rights, unionizing women workers, encouraging them to establish labor committees and unions, and filing labor-related complaints with relevant authorities.

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
		<p>rural women’s associations.</p> <ul style="list-style-type: none"> • Civil society organizations should provide business development services and offer management, financial, and legal consultations for women entrepreneurs, including training and continuous education. • Marketing companies should also develop their methods to promote women’s products. 	
<p>The Sectoral Gender Strategy (2021-23)</p>	<ul style="list-style-type: none"> • To achieve the fourth strategic objective (to enhance women's participation in the economic sector), the first outcome has been designed to ensure that “private sector establishments are committed to a legal framework that enshrines decent work for all workers, especially women with disabilities”. The outcome require several interventions: • The private sector should be encouraged to retain female workers during and after the Covid-19 pandemic. • In response to the challenges posed by the pandemic, gender-responsive business policies should be implemented to provide new opportunities for women as employees and entrepreneurs, promote flexible work arrangements, expand social services to alleviate the caregiving 	<ul style="list-style-type: none"> • To achieve the fourth strategic objective (to enhance women's participation in the economic sector) the second outcome has been designed to ensure that 1000 women-led economic initiatives are supported in organized sectors, as well as the self-employed sector. 30% are dedicated to threatened areas. The outcome involves many interventions, including: • License home-based projects. • Expand educational and training options for women to help them transfer from unsafe professions to more secure and safer careers. • Broaden the marketing scope of women's goods; the ministry has staged three two-day bazaars for women's goods in marketplaces in significant foot traffic areas. • Develop former prisoners’ technology capabilities and skills to ensure their long-term employment. This entails providing 	<ul style="list-style-type: none"> • In order to achieve the fourth strategic objective (i.e. enhance women's participation in the economic sector), the first outcome has been designed to ensure that “labor sector establishments are committed to a legal framework that enshrine decent work conditions for all employees, particularly women with disabilities”. This outcome comprises several interventions, including: <ul style="list-style-type: none"> - Strengthen the Ministry of Education’s involvement in monitoring preschool compliance with minimum wage requirements. - Close the wage gap between men and women, especially in private sector institutions. This would be of great benefit to women and encourage them to

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
	<p>burden on women, and allow them more time for paid work and leisure.</p> <ul style="list-style-type: none"> • To achieve the fourth strategic objective (to enhance women’s participation in the economic sector) the second outcome has been designed to ensure that 1,000 women-led economic initiatives are supported, with 30% earmarked for threatened areas. The outcome involves interventions that include: <ul style="list-style-type: none"> • Develop a designated program to economically-empower women through sustainable production and consumption projects, optimal use of resources, and renewable energy. • Promote leadership topics in educational curricula. • Build leadership capabilities in management and life skills for women in all fields of work and in student councils. Make women more aware of the role of security institutions, how important they are, and why they need their support and involvement. • Building a program for women workers to share their work experiences with international and Arab organizations. 	<p>professional instruction in photography, editing, and directing to 43 former female prisoners, preparing them to work in the media or in wedding and event photography. Six former inmates are also given six income-generating business ventures based on certain requirements and methods.</p> <ul style="list-style-type: none"> • Enact a law guaranteeing rights in movable property and the establishment of a specialized electronic registry allowing small, medium, and micro-sized businesses to access loans using these assets as collateral. • Enhance women’s skills in managing healthy school cafeterias. • Issue and renew licenses for 180 kindergartens. • To achieve the fourth strategic objective (i.e., enhance women's participation in the economic sector), the first outcome was designed to ensure that “labor sector institutions are committed to laws, executive regulations, and relevant decisions, ensuring decent work for all employees, particularly women with disabilities”. This outcome comprises several interventions, including: <ul style="list-style-type: none"> • Regulate informal labor protection by establishing the necessary frameworks for work licensing in small enterprises and households. 	<p>deliver high-quality services and skills.</p>

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
		<ul style="list-style-type: none"> • Encourage nontraditional agricultural and renewable energy programs for women. • Empowerment programs for sustainable production and consumption projects, particularly in the agricultural sector. 	
The Labor Sector Strategy (2021-23)	<ul style="list-style-type: none"> • To achieve the first strategic objective (to develop employment opportunities and services) the policy intervention of the relevant national policy agenda is as follows: <ul style="list-style-type: none"> • Adopt measures to speed up the creation of permanent jobs through public-private partnerships, giving everyone decent work, supporting the Employment Fund and helping it grow, and getting entrepreneurial projects up and running faster to help male and female graduates get back on their feet and find jobs. • To achieve the second strategic objective (to train and build the qualifications of a skilled professional workforce in line with the needs of the labor market) the policy intervention of the relevant national policy agenda is as follows: <ul style="list-style-type: none"> • Gender equality should be promoted, and women empowered to establish the basis of the Palestinian economy. • Specialized training and continuing 	<ul style="list-style-type: none"> • To achieve the second strategic objective (to prepare a skilled professional workforce in line with the needs and demands of the labor market), the policy intervention of the relevant national policy agenda is as follows: <ul style="list-style-type: none"> • Improve educational access and retention, as well as the transition from education to employment (aligning education and TVET with development needs and the labor market, ensure equal opportunities, and develop the infrastructure and facilities for TVET). • Provide the community with a trained, competent workforce, technicians, and qualified professionals capable of contributing to infrastructure development and maintenance as well as the industrial, agricultural, and services' sectors. 	<ul style="list-style-type: none"> • To achieve the third strategic objective (to promote the implementation of decent work principles in Palestine), the relevant policy intervention in the national policy agenda aims to: <ul style="list-style-type: none"> • Ensure a safe and inclusive work environment that complies with occupational safety and health standards.

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
	education programs to increase the likelihood of securing permanent work, in order to address labor market shifts caused by economic volatility.		
The National Employment Strategy (2021-25)	<ul style="list-style-type: none"> • To achieve the first strategic objective (to strengthen labor market governance and develop active labor market policies and programs to enhance linkages and boost the supply and demand effectiveness in aligning supply and demand) the following should be accomplished: <ul style="list-style-type: none"> • In collaboration with the Palestinian Fund for Employment and Social Protection, boost the use of matching services offered by multifunctional employment agencies. • The integration between employment programs and social protection programs should be achieved to meet the needs and rights of women, youth and persons with disabilities who are beneficiaries of social assistance programs, albeit not engaged in work or education or subject to employment or facing involuntary unemployment. • To achieve the third strategic objective 	<ul style="list-style-type: none"> • To achieve the second strategic objective (to train and build the qualifications of a skilled professional workforce in line with the needs of the labor market) the policy interventions of the relevant national policy agenda is as follows: <ul style="list-style-type: none"> • Align the TVET system with labor market demands in terms of both quantity and quality via strong collaboration between the public and private sectors. • Promote TVET, especially for women. • To achieve the first strategic objective (to reinforce labor market governance and develop robust labor market policies and programs to enhance linkages and increase the efficacy of aligning supply and demand) the following should be accomplished: <ul style="list-style-type: none"> • Develop more employment initiatives in partnership with labor institutions. • Guarantee that evidence-based analysis of the relevance, efficacy, and impact of employment initiatives is provided and increase the number of employment programs being assessed. 	<ul style="list-style-type: none"> • Alongside the promotion of legal compliance, the inspection system should be bolstered to eliminate informal work, especially among women and youth. • Businesses should be encouraged to migrate to the formal economy, and employees and jobseekers should be further educated on labor rights. • The institutional framework for social dialogue and social protection should be enhanced. • Regardless of gender, concerted efforts should be made to reduce the proportion of employees earning pay below the minimum wage.

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
	<p>(to enhance the resilience and capacity of the private sector to grow productivity and create decent employment opportunities for job seekers, especially youth and women) the following should be accomplished:</p> <ul style="list-style-type: none"> • The legal and regulatory environment that facilitates business practices and promotes private investment should be fostered. • The capacity of private sector institutions should be enhanced, including cooperatives in priority sectors in Gaza, Jerusalem and areas under complete Israeli control. This is essential to maintain their operational and competitive capabilities and improve their working conditions. • A system of business and supportive financing services should be developed for the benefit of small-scale entrepreneurship and self-employment to promote job creation. • The market control system should be enhanced to ensure fair competition for local products. 	<ul style="list-style-type: none"> • Create a networked, labor market information system to keep job seekers, employers, and policymakers abreast of labor market trends and employment-related developments (classified by gender and age, linking job seekers with employers). • Enhance the use of employment services by job seekers through multifunctional employment offices (including collaboration with the Palestinian Fund for Employment and Social Protection). • To achieve the first strategic objective (to reinforce labor market governance and develop robust labor market policies and programs to enhance linkages and increase the efficacy of aligning supply and demand) the following should be accomplished: <ul style="list-style-type: none"> • Bolster labor directorates' support for employment service delivery through centralized service offices and multifunctional employment offices. 	
The Social Development	<ul style="list-style-type: none"> • Economic empowerment programs for low-income families, including the 	<ul style="list-style-type: none"> • TVET programs should be in place for young men, women, and persons with 	<ul style="list-style-type: none"> • The minimum wage policy should be respected and enforced.

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
Sector Strategy (2021-23)	<p>establishment of new startups and the development of existing businesses for impoverished households.</p> <ul style="list-style-type: none"> The formation of corporations and businesses that market the goods of impoverished and small-scale producers, making use of global solidarity marketplaces in this sector. 	<p>disabilities from low-income families.</p> <ul style="list-style-type: none"> The Ministry of Labor’s role in providing empowerment and employment programs for the unemployed. Collective empowerment programs for low-income families and small-scale farmers. The Ministry of Agriculture’s role in providing collective and individual empowerment programs for farmers. The Ministry of Local Government and the Ministry of National Economy’s roles in fostering the empowerment of disadvantaged groups, such as the development of regular fairs and bazaars for local women’s products. This includes organizing popular markets in conjunction with-civil society organizations. The Ministry of National Economy’s role: Policies and legislation that promote the marketing of small-scale producers’ goods and the development of specifications for traditional and women’s food industries. 	
The National Economic Development Strategy (2021-23)	<ul style="list-style-type: none"> To achieve a set of development objectives associated with industrial economic development, a range of projects has been proposed within the industrial cluster, including: <ul style="list-style-type: none"> Enhance specialized and modern TVET by establishing a vocational training center with specialized and 	<ul style="list-style-type: none"> To achieve a set of development objectives associated with industrial economic development, a suite of projects has been proposed within the industrial cluster: <ul style="list-style-type: none"> Construct and develop industrial zones via the establishment of a business development center and the implementation of advanced training 	

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
	<p>innovative programs. This initiative intends to provide professional staff with the essential skills, promote entrepreneurship and build linkages with local universities, including hands-on updates and innovative ideas that match demands in priority sectors.</p> <ul style="list-style-type: none"> • Build the capacity of workers in planning, management, marketing and export preparation. • In pursuit of the strategic objective to establish a leading and competitive Palestinian industry linked to the SDGs: <ul style="list-style-type: none"> • Increase the market share of Palestinian products in the local market. 	<p>programs.</p> <ul style="list-style-type: none"> • Pursue the value chain project for food production, which includes the development of a national agricultural manufacturing hub. Improve agricultural products and value chains. This initiative aims to enhance and empower farmers in marginalized areas. It also helps to leverage the potential of farmers to overcome obstacles related to production quantity and limited land availability. • In pursuit of the strategic objective to establish a leading and competitive Palestinian industry linked to the SDGs: <ul style="list-style-type: none"> • Support should be provided to startups and the development of micro, small, and medium-sized enterprises. • Digital and technological industries should be supported and promoted, including digital content. • In pursuit of a leading and competitive Palestinian industry linked to SDGs: <ul style="list-style-type: none"> • National products should be protected, and their competitiveness should be boosted. • Productive sectors should be reconstructed, particularly in the southern governorates. 	
The Agricultural Sector Strategy	<ul style="list-style-type: none"> • To achieve the fourth strategic objective (to enhance the production, 	<ul style="list-style-type: none"> • To achieve the fifth strategic objective (to provide farmers with responsive services 	

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
(2021-23)	<p>productivity, diversity, and competitiveness of the Palestinian agricultural sector) the following outcome has been designed:</p> <ul style="list-style-type: none"> • A favorable business climate for both male and female entrepreneurs and business owners in the agricultural sector. In pursuit of this objective, predicted outcomes include an increase in land allocation for youth agricultural investment and the availability of zero-interest loans specifically designated for this purpose. 	<p>that support value chains in terms of quality, cost, and time). Several outcomes are required, including:</p> <ul style="list-style-type: none"> • Training courses should be provided to enhance the capabilities of all veterinarians, including training in diagnostic procedures, risk analysis, registration of veterinary products, product safety control and veterinary work management. • Entrepreneurial courses should be delivered to develop the skills of all agricultural extension officers, including courses on plant fertilization and nutrition, pest and insect control, fresh produce handling, and managerial skills. • Agricultural marketing services should be developed, including information provision, marketing guidance, transportation, and wholesale market management. New information centers should be established. 	
The Public Works and Housing Sector Strategy (2021-23)		<ul style="list-style-type: none"> • To achieve the fifth objective (to support, develop, and regulate the construction sector to contribute to the national economy), a policy has been established to support and protect local construction products with the following interventions: <ul style="list-style-type: none"> • A database for local construction industries should be developed, 	

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
		<p>updated and circulated.</p> <ul style="list-style-type: none"> • Compliance with the use of locally-produced construction materials should be monitored. • Investment in construction industries should be promoted, and locally-produced alternatives that meet international standards should be used. 	
<p>The Education Sector Strategy (2021–23)</p>	<ul style="list-style-type: none"> • To enhance the quality of general education, human resources in the education system, particularly teachers, are under development to increase their capability of fulfilling their vital role in teaching and nurturing children. • In order to improve the transition from education to work, the following interventions should be undertaken: <ul style="list-style-type: none"> • The outputs of education, TVET programs and higher education should be aligned with developmental needs and the needs of the labor market, ensuring equal opportunities and access for everyone. • Technical education streams should be promoted. • The level of scientific research should be enhanced. • The foundations and system of educational evaluation should be developed, including updating and 	<ul style="list-style-type: none"> • The following interventions should be implemented to improve the transition from education to work: <ul style="list-style-type: none"> • Develop the TVET system and expand its scope to become aligned with the government's development agenda. • Enhance the education of science, technology, engineering and mathematics (STEM), as it has an indirect impact on the labor market. 	<ul style="list-style-type: none"> • To increase enrollment and retention in education, it is essential to ensure that school infrastructure and facilities are suitable for both genders. Provide professional specializations for both genders in vocational education pathways. Integrate gender issues into curricula, and hold teacher training and student activities. • To compensate for their lower salaries compared to the cost of living in the Jerusalem governorate, additional incentives should be offered to instructors of adult education and adult literacy in the governorate.

Plan	Participation in labor market/labor force participation	Unemployment reduction and revitalization of economic sectors	Working conditions and wages
	streamlining the general secondary education system to become more inclusive for both genders, more flexible, and more empowering for enrollment in higher education, technical education and vocational training. It should also be more in tune with the needs of the labor market, now and in the future.		

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Annex 2: The Alignment of Development Plans: Enhancing Productivity, Promoting Competitiveness, and Ensuring Protection in Key Economic Sectors, with a Niche Focus on Female Labor Force Participation

Given the interplay between gender equality, female labor force participation and the protection and development of specific economic sectors (agriculture, industry, ICT), as well as the promotion of competition in local markets to increase productivity, a review of relevant strategies to study priority items and policies aimed at increasing and safeguarding productivity has been undertaken.

(A) The Agricultural Sector Strategy (2017–2022)

The Ministry of Agriculture (MoA) seeks to achieve several strategic objectives to protect farmers and producers in the agricultural sector, enhance their productive growth, and more. The objectives and policy interventions were as follows:

To achieve the first strategic objective, i.e., to improve the resilience and steadfastness of farmers, both male and female, and their commitment to the land, the following priority interventions are proposed:

- Provide direct assistance to farmers and producers impacted by occupation practices in order to increase their resilience. This comprises interest-free loans, government backing for lending operations by the Palestinian Agricultural Credit Institution (PACI), and compensation for losses caused by the Israeli occupation.
- Provide necessary support to farmers affected by natural disasters and market crises to ensure their ability to adapt, sustain their work, and thrive.
- Encourage young female entrepreneurs and women to participate in agricultural activities and initiatives (MoA, 2020).

To achieve the second strategic objective, i.e., to enhance self-reliance in food provision and break free from Israeli dominance in trade and markets, the following interventions are proposed:

- Increase the market share of the Palestinian agricultural sector in the local market.
- Reduce imports from the Israeli market (MoA, 2020).

To achieve the third strategic objective, i.e., sustainable and climate-adaptive management of agricultural natural and genetic resources, the following interventions are proposed:

- Increase the available water resources for farmers by improving the efficiency of traditional and nontraditional water management practices.
- Protect arable lands from degradation and expand the cultivated land area.
- Facilitate farmers' access to their land by opening and rehabilitating agricultural roads (MoA, 2020).

The fourth strategic objective, i.e. to enhance the productivity, diversity, and competitiveness of the Palestinian agricultural sector, can be achieved through the following policy interventions:

- Expand the area of strategic crops (e.g., wheat) and high-value crops (e.g., table grapes, avocados, strawberries, and zucchini).
- Increase intensive livestock farming.
- Allocate tax refunds to farmers to enhance competitive prices of animal- and plant-based agricultural products (MoA, 2020).

(B) The Industrial Cluster (2021-2023)

The Ministry of National Economy (MoNA) aims to foster industrial clusters and raise productivity growth via a variety of policies and interventions that strengthen and support the competitiveness of many productive sectors. These interventions are linked to the following strategic objectives.

To achieve the first strategic objective (developing value chains and inter-sectoral networking to maximize production and enhance competitiveness), the following interventions must be implemented in the concerned sectors:

- Footwear and leather value chain, furniture and furnishings value chain: develop capabilities and foster collaboration and networking at various levels, to ensure quality and efficiency in achieving competitiveness, branching out into targeted local and regional markets.
- Footwear and leather value chain: Maximize operations and income for all industry components as a strategic source to contribute to socioeconomic stability in Palestine.
- Food and pharmaceutical manufacturing value chain: Focus on quality improvement and specification compliance (food protection) in production and packaging, emphasize innovation in production and the continued development of new products to enhance the sector's competitiveness and improve its production capacities, quality levels and market expansion. This includes land reclamation, developing high-value agricultural products, establishing silos, specialized and accredited laboratories for quality improvement and product development, and the National Agricultural

Manufacturing Center to enhance and empower farmers in marginalized areas (among others).

- Food manufacturing, paper, nylon and printing industries value chain: Emphasize innovation in production and skills' development in design, especially for packaging products, while taking into consideration global standards. Adopt principles of circular economy (employing outputs and surpluses in production) to enhance the sector's competitiveness and improve its production capacities, quality levels and market expansion potential. This includes introducing modern technology, such as machines and new designs.
- Plastic industries value chain: Direct production towards innovation, environmental standards and optimal resource utilization in accordance with the demanding requirements of health, safety and the environment in global markets. This aims to enhance the sector's competitiveness and improve its production capacities and quality levels.

To achieve the second strategic objective of supporting and investing in promising sectors, the following interventions should be implemented in each of the specified sectors:

- Gold industry: Focus on innovative product development and renewable energy to enhance this sector's competitiveness, responsiveness to market demands through creative designs, improved quality levels and market expansion. This includes developing and expanding current production lines and deploying modern technology.
- Stone and marble sector: Develop stone and marble production, enhance the competitiveness of quarries and crushers, focus on product innovation and implement circular economy principles to develop, and build upon the competitive advantage of, the Hebron and Nablus stone and marble sector. This warrants the utilization and integration of available modern technology for raw stone examination prior to quarrying, enhancing this process with new tools, and providing necessary training for operation.
- Construction industries: Substitute away from imports and empower the construction sector, including the establishment of a high-capacity cement mill with storage silos.
- Feed industry: Attract strategic investments (substitute away from imports and increase employment opportunities).
- ICT industry: Empower and integrate technology in industrial sectors to maximize performance and productivity by launching entrepreneurial programs targeting youth and women (the fourth industrial revolution).
- Energy for industry: Increasing energy sources and ensuring their continuity in line with the developmental needs of the industrial sector.

To achieve the third strategic objective of supporting heritage and cultural industries, the following interventions must be implemented:

- Craft industries value chains: Emphasize innovation in production and develop new products with renewable identities by enhancing this sector's competitiveness. Improve its production capacities, quality levels and market expansion. This includes enacting a law to protect craft products based on an approved mechanism.

To achieve the fourth strategic objective (supporting and empowering comprehensive and sustainable industrial development), the following interventions are to be implemented:

- Enhance industrial infrastructure through the establishment and development of industrial zones.
- Develop quality infrastructure.
- Develop specialized and modern training, qualification, and vocational education systems through the establishment of vocational training centers with specialized and up-to-date programs, aiming to enhance the human capacity of required human resources. Promote entrepreneurship and establish connections with local universities to generate practical updates and ideas that respond to the needs and demands of priority sectors (Ministry of National Economy, 2020).

(C) Sectoral Strategy for ICT (2021-2023)

The Ministry of Communications and Information Technology has a set of overarching goals that it hopes to accomplish, in order to protect and improve the competitiveness of the telecoms and IT industry.

- Strategic Objective 4: Foster leading and competitive digital industries by supporting entrepreneurial initiatives and promoting creativity and innovation.
- Strategic Objective 5: Develop qualified, competent and productive human resources by providing training activities to create a technically-skilled workforce for the sector.
- Strategic Objective: Develop modern and comprehensive infrastructure and a regulated and advanced communications' market where fair competition thrives. This can be achieved through the following interventions:
 - Modern and advanced communication services.
 - Support and encourage digital and technological industries while boosting digital content.
- Strategic Objective 2: Establish a modern, comprehensive legislative and regulatory environment by implementing the following interventions:

- Ensure fair prices for telecommunications' services and consumer protection.
- A licensed and protected Palestinian market.
- Developing plans, policies and mechanisms to regulate and develop the sector.
- Strategic Objective 3: Advanced and efficient electronic services (communications, information technology, mail) by introducing modern technologies to keep pace with technological advancements.
- Strategic Objective 5: Develop qualified, competent, and productive human resources by improving productivity and enhancing the Ministry's staff performance. This requires the development and adoption of a new, modern organizational structure, the automatization of ministry operations, providing specialized training courses and presenting an approved staffing plan for the coming years (Ministry of Communications and Information Technology, 2020).

(D) The National Policy Agenda (2017–2022)

The national vision of the National Policy Agenda is based on three pillars: “The Path to Independence,” “Reform and Enhancement of Public Services,” and “Sustainable Development”.

An effective government is a priority within the second pillar, achievable through implementing policies that promote accountability and transparency. The plan is to execute this policy through various measures, including the integration of gender equality into government policies, programs and budgets. This entails evaluating government policies in terms of their impact on women and girls, and their contribution to promoting gender equality. In this regard, efforts will be made to enhance and implement a gender mainstreaming strategy and provide the necessary tools to ensure the integration of gender equality principles in public policies, legislation, and relevant plans and budgets. To fully harness the potential and capabilities of the civil service sector in Palestine, it is essential to provide every opportunity for women to empower themselves and realize their full potential. To achieve this objective, barriers that hinder women’s employment, promotion and retention in the workforce must be eliminated. In particular, ensuring women’s capacity to reach high-level positions and critical roles in decision-making bodies is crucial (Prime Minister's Office, 2016).

The third pillar of this agenda (Sustainable Development) encompasses most of the reform agenda adopted by the State of Palestine. This pillar will be implemented through five national priorities and 19 national policies. It includes the priority of achieving economic independence by providing decent employment opportunities for all. This involves:

- Adopt measures to expedite the creation of permanent employment opportunities through public-private partnerships.
- Adopt measures to accelerate the launch of entrepreneurship projects for the rehabilitation and employment of graduates from both genders.
- Support and further develop the Palestinian Employment Fund.
- Ensure a safe and health-conscious work environment that meets occupational health and safety standards (Prime Minister's Office, 2016).

Population Growth in Palestine and the Urgent Need to Promote Sexual and Reproductive Health for Women and Youth as part of the Sustainable Development Goals

**Dr. Bassam Abu Hamad
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List of abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal Care
ARI	Acute Respiratory Infections
BCG	Bacille Calmette-Guérin
CD	Communicable Diseases
COC	Continuum of Care
CS	caesarean section
CT	Computerized Tomography
DM	Diabetes Mellitus
FP	Family Planning
GAD-7	Generalized Anxiety Disorder 7 scale
GBV	Gender based Violence
GPD	Gross Domestic Product
GS	Gaza Strip
HH	Households
HIV	Human immunodeficiency Virus
HTN	Hypertension
ICU	Intensive Care Unit
IMR	Infant mortality rate
IVF	In Vitro Fertilization
KSA	Kingdom Saudi Arabia
MENA	Middle East and North Africa
MICS	Multiple Indicators Cluster Survey
MMR	Maternal mortality ratio
MNM	Maternal Near Miss
MOSD	Ministry of Social Development
MRI	Magnetic Resonance Imaging
NCD	Non-Communicable Diseases
NGO	Non-Governmental Organizations
OCHA	Office for the Coordination of Humanitarian Affairs
OECD	The Organization for Economic Co-operation and Development
PA	Palestinian Authority
PCBS	Palestinian Central Bureau of Statistics
PHC	Primary Health Care
PHQ-8	Patient Health Questionnaire 8
PLO	Palestine Liberation Organization
PMO	Palestinian Prime Ministers' Office
PNC	Postnatal care
PNIPH	Palestinian National Institute of Public Health
PWDs	Persons with Disabilities
RH	Reproductive Health
SDGs	Sustainable Development Goals
SRHR	Sexual and Reproductive Health and Rights
STIs	Sexually Transmitted Infections

UK	United Kingdom
UNDP	United Nations Development Programme
UNFPA	United Nation Population Fund
UNICEF	United Nations Children's Fund
UNRWA	The United Nations Relief and Works Agency for Palestine Refugees in the Near East
USA	United State of America
VAW	Violence against Women
VAW	Violence against Women
WB	West Bank
WHO	World Health Organization
WRC	Women's Refugee Commission

Abstract

This paper focuses on an important pillar for national resilience, and thus, development. It focuses on health, with special focus on sexual and reproductive health and rights, with a particular emphasis on exploring the implications of demographic changes in the Palestinian community on health status and health services. The paper begins by exploring contextual issues affecting the socioeconomic determinants of health, then moves to population projections for the year 2030, taking into account both size and structure, and then investigated health status outcomes and health services using the World Health Organization (WHO, 2011) six building blocks as a frame for discussion. Following, the paper presents a thorough analysis of SRHR in Palestine. Recommendations were presented in each section, addressing key gaps and needs in the health sector, while also considering population growth until 2030 and its implications on the health sector and growing population needs. The paper provided detailed recommendations for each specific area of the Palestinian health sector, such as recommendations and implications for NCDs and CDs, service provision and health providers in relation to population growth and density, key determinants of health, and recommendations related to demographic dynamics changes. Furthermore, the paper highlighted the importance of a more systematic line of work to ensure constant updates to the databases of human resources in order to identify needs and inform future decision-making, based on a recommended setting of national standards that identifies resource density based on the population and services as well as the Ministry of Health's role in leading the efforts to improve the sector and its services.

1. Introduction

This paper is part of a larger endeavor managed by the Palestinian National Population Committee at the Palestinian Prime Ministers' Office (PMO), as a part of advocating for the population development agenda in the State of Palestine, hereinafter referred to as 'Palestine'. The plan is to organize a conference on population dynamics and development in mid-2023. The conference aims at initiating a national dialogue and reflections on population dynamic, demographic changes and implications on the political, and socio-economic sectors in the country, including health sector. The conference also aims at adopting evidence driven policies to support resilience of the Palestinian population, development and economic growth and optimal utilization of the Palestinian resources with the vision to realize the agenda leaving no one behind.

This paper focuses on an important pillar for resilience, and in turn development, for any nation; health with particular focus on exploring the implications of demographic changes in the Palestinian community on health status and health services. Because sexual and reproductive health and rights (SRHR) are crucially important for social and economic development given their link to demographic change, and in turn present assessment for their projected future needs are within high importance, this theme has been given special attention. That is not to mention the importance of vulnerable groups' welfare, especially women welfare, is essential to empowering women and other groups socially and economically is much needed as a key pillar to development and resilience. The paper starts by exploring contextual issues affecting the socioeconomic determinants of health, then moves to population projects by 2030-considering both size and structure- and then the paper explores health status outcomes and health services using the World Health Organization (WHO, 2011) six building blocks as a frame for discussion. After that, the paper provides detailed analysis of SRHR in Palestine. To make the reading of this document more friendly, the authors provided concluding remarks with policy and programming recommendations for each section in boxes. Such recommendation concludingly aim to transferring the demographic dividend to a developmental dividend using health as a concrete pillar for development.

1.1 Context negatively impacts determinants of health

The determinants of health for any population are broad: they include peace and security, economic resources, education, democracy, equity, women's empowerment, appropriate housing, access to clean water and nutritious food, and a safe and healthy environment (WHO, 2017). All these health determinants are negatively affected by the protracted Israeli occupation of Palestine since 1948-

more than 7 decades ago-which has resulted in increased vulnerability and ill-health among Palestinians, particularly women and children. Palestine, is regarded as a fragile context (Fund for Peace 2019) that faces significant structural difficulties, not least political unrest, ongoing protracted conflict, economic collapse, and chronic displacement. For these reasons, it falls within the most vulnerable third of the Fund for Peace's Fragile State Index (ibid). Despite that Palestine is considered by the United Nations Development Programme (UNDP) to fall in the high human development category (0.715-rank 106 on the Human Development Index), due to favorite number of schooling years and reasonable life expectancy, the Palestinian people remain highly vulnerable (UNDP, 2022). The literacy rate among Palestinians (15 years old and above) is very high (only 1.2% of males and 3.5% of females 15 years and above are illiterate in 2021(Palestinian Central Bureau of Statistics-PCBS 2021). Population Density (Capita/km²), at the end Year 2021 was 878, with huge variations between the West Bank (WB) and the Gaza Strip (GS) (557 versus 5,855 retrospectively). However, females' participation rate in labor force is low and not significantly increasing in the past seven years; currently it stands at 18.9% (PCBS, 2022a). Findings from the PCBS labor survey in 2022 show that one-fourth (25.4%) of the participants in the labor force were unemployed, of which 13.9% in the WB and 46.6% in the GS which reached up to around 70% among young people and women (PCBS, 2022a). PCBS (2022c) reports a poverty rate among Palestinians- according to consumption patterns- at 29.2% (13.9% in the WB and 53% in the GS). The same source indicates that about 16.8% of the individuals in Palestine suffered from deep poverty in 2017 (ibid) (5.8% in the WB and 33.8% in GS). The Gross Domestic Product (GPD) per capita in Palestine in 2019 was \$ 3378; \$ 2922.5 in 2020 (PCBS, 2021b, 2022 c), with great variations between the WB and the GS (in 2020, \$ 4,197.1 in the WB and 1,207.6 in the GS). Israel's protracted occupation, characterized by ongoing military violence and severe restrictions on the movement of both people and goods, has resulted in highly fragmented and distorted local economies that are overwhelmingly dependent on external aid. In addition, it weakened social networks, increased psychological and emotional difficulties, and resulted in high poverty rates (Samuels, Jones and Abu Hamad, 2017). Also, internal division between Fateh and Hamas has put additional stress on Palestinian society.

In 1993, the Government of Israel and the Palestine Liberation Organization (PLO) signed the Declaration of Principles on Interim Self-Governing Arrangements of 1993, initiating a process whereby Israel ceded administration of the most populated areas of the territory (Area A) to Palestinian security and civil control while leaving the issues of Jerusalem, refugees, settlements, others areas in the WB (especially area C) and borders to final status negotiations. The Palestinian Authority (PA) was established in 1994 to administer those areas (Area A and B with the exception of East Jerusalem) and manage the economic

relations of the WB and the GS until talks finalization. However, a final agreement between the parties was never concluded, and the second Intifada erupted in September 2000, resulting in sweeping incursions and a major Israeli military operation into the WB cities during late March through early May 2002. Area C covers 60% of the WB and is home to an estimated 180,000-300,000 Palestinians and the area is also occupied by a settler population of at least 325,500 living in 125 settlements and approximately 100 outposts (B'Tselem-The Israeli Information Centre for Human Rights in the Occupied Territories, 2013). Although there are specific provisions in the Oslo Accords related to access and provision of health care, on the ground the Palestinian population and resources in Area C are directly controlled and administered by the Israelis.

In 2003, Israel started building a separation wall in the WB or along the Green Line between the WB and Israel with a total length of 708 kilometers, with 15% of the barrier's length running along the Green Line, while the remaining 85% is inside the WB going up to 18 kilometers from the WB border, isolating about 9.4% of the land and 25,000 Palestinians from the rest of WB, even to the rest of the world (B'tselem, 2013). The separation wall severely restricts the travel of many Palestinians, and impairs their ability to commute to work, to cultivate their agricultural land or to access health and education services within the WB. In addition, it broke up contiguous Palestinian urban and rural blocs, severed inter-community ties forged over generations, and abruptly imposed an arbitrary reconfiguration of space based on settlement boundaries and to suit the convenience of Israeli security forces and settlers (B'tselem, 2017). However, Israel has installed 84 gates in the completed sections of the wall to theoretically enable the owners' access to their lands. In practice, however, the gates obstruct access to the land, only nine of these gates are opened daily; ten are opened only for few days a week and during the olive harvest season (B'tselem, 2017; Office for the Coordination of Humanitarian Affairs-OCHA, 2011). The International Court of Justice and the UN General Assembly considered the separation wall a clear violation of the international law (The International Court of Justice, 2004).

In September 2005, Israel withdrew its military forces and evacuated Israeli settlements from the GS. While agreements governing the movement of people and goods, in and out of the territory were signed, these were superseded by a closure of the territory that remains in place and severely limits access till now. Israel has since undertaken six major military operations against the GS, the last one was in August 2022, these operations resulted in killing thousands of Palestinians, massive displacement of civilians and destruction of housing units, economic resources and institutions.

To sum up, the key socioeconomic and environmental determinants of health for the Palestinian population have been negatively affected by the ongoing

occupation, protracted conflict, and economic collapse long-standing poverty, which has increased health-related vulnerabilities, particularly for disadvantaged subgroups such women, children, elderly, people with disabilities especially people who are economically disadvantaged. Disease development and control are linked to determinants of health, therefore, improving health and wellbeing requires concerted multi-faceted actions at different levels to address determinants of health and proactive targeting of particularly vulnerable categories affected more than other categories by the deterioration of key determinants of health.

Box 1: Policy recommendations to address key determinants of health

- It is essential to develop health services that go beyond biomedical approaches and to consider the social and economic determinants of health and address health needs holistically particularly for vulnerable and left behind categories through multisectoral initiatives.
- It is crucially important to launch a dialogue among health and social actors to develop a common conceptualization about what vulnerability practically means in the Palestinian context, which subgroups should be regarded as vulnerable and entitled for more protection. It seems a crucial policy issue that necessitates increased and focused discussions in Palestine is the vulnerable subpopulations and the necessity of having a “safety-net” function to promote effective identification and targeting of vulnerable subgroups to ensure effective coverage of essential health services during all circumstances.
- It is important to identify data needs at the national level, particularly the need for disaggregated data, according to the agreed vulnerability frame and to monitor key determinants of health and status of vulnerable subgroups and to promptly respond to their needs at all times alike (crises and regular times).

1.2 Demographic context and population dynamics

In mid-2022, the total number of Palestinians all over the world was around 14.3 million, of whom, about 5.35 million in the WB and the GS (PCBS, 2022d), nearly with equal gender distribution (2.72 million males and 2.63 million females). The estimated population of the WB is 3.19 million (1.62 million males and 1.57 million females), while it is 2.17 million in the GS in the same year (1.10 million males and 1.07 million females). Palestine is going through a demographic transition particularly its fertility component. Fertility, which was extremely high in the 1970s, and declined currently to 3.8 with being slightly higher in GS than in the WB (3.9 and 3.8 retrospectively). It is anticipated that fertility will further decline to 2.91 children per women in 2030 (UNFPA, 2016) with being slightly higher in GS (3.23) than in the WB (2.67). UNFPA study

(2016) suggests that the total size of the population in Palestine would be 6.9 million in 2030 (3.8 million in the WB and 3.1 in the GS); however, PCBS projection (2022e) suggests lower estimates especially in the GS (6.44 million in Palestine, 3.76 in the WB and 2.68 in the GS), the population in the GS will remain younger on average. By 2030, according to PCBS projection, the population size will increase by 20% in Palestine (18% in the WB and 24% in the GS). The population in all age groups will generally increase, however, their proportions of the entire population will vary. The average size of a household in Palestine is 5 individuals (PCBS, 2022d), higher in the GS (5.6) than the WB (4.7), 11% of households (HH) are female headed HHs and 6% of the population are having a sort of difficulty or disability (using the broad Washington definition of disability) as reported by PCBS (2018).

Registered refugees constitute a very important segment of the Palestinian population in Palestine and represent 41% of the population, with higher concentration in the GS (64% of the population are refugees) than in the WB (26%). The total number of registered refugees in Palestine will increase to three million in 2030 according to the projection calculated in the UNFPA study (2016). This has significant implications on social services and humanitarian aid that refugees receive.

Demographic transition is also manifested in the change of the structure of the population with decreasing share of children and an increase in the share of elderly. According to the projection made in the UNFPA study (2016), the proportion of youngsters below age 15, is expected to decrease from 39% in 2015 to 35% in 2030, and most likely to 25% in 2050. The proportion of elderly will double over the same period, from 2.9% in 2015, 3% in 2019, to 7.7% in 2050 according to UNFPA (2016). PCBS (2022e) estimates suggest less dramatic change in the population structure by 2030, children 0-17 will constitute around 41% in Palestine; 39% in the WB and 44% of the population in GS. By 2030, the proportion of people older than 65 years will increase from 3.4% in 2022 (WB, 3.87% and 2.91% in the GS) to 4.3% of the population (4.8% in the WB and 3.5% in the GS). Although the number of women at reproduction age will increase, their share in the population will remain constant and stands at around 23% of the population. Adolescents aged 10-19 years represent 22% of the population.

This change has its implications on demand and supply of health services with older people are more vulnerable to non-communicable diseases (NCD) services which constitute greater burden on the system on terms of mortality, morbidity, disability and costs of health services and also on social protection system. However, although the change towards aging between now and 2030, is minimal, this is progressive process and the implications will be more noticeable

in 2040s and 2050s. More positively, the increase in the working age population (15-64 years old) from 58% in 2015 to 61% in 2030 and possibly 67% in 2050, opens a window of opportunity for economic and social gain if invested well in youth and women's empowerment.

Box 2: Policy recommendations related to demographic dynamics changes

- Demographic changes need to be crucially considered when planning health services. This calls for strengthening information-based decision making and planning for health services, informed by effective monitoring and surveillance system.
- The population in all age groups will generally increase by around 20%, however, their proportions of the entire population will vary. Population growth directly affects the health sector through an increase in demand for services, need for extra hospital beds, need for extra human and non-human resources. The projected population growth in Palestine calls for an increase in efforts to meet the needs for healthcare together with other related social services such as education, social protection and economic welfare. Also, beside the need to expand health services, health services need to respond to change in the population structure.
- Ensuring adequate access to preventative, curative and tertiary health services is essential for people of all ages. Changes in population imply changes in the healthcare services that will be needed in the years ahead, especially among those most at risk: children, women of reproductive age, and the elderly.
- The change in the population structure implies that youth and adolescents should be better served through adapting a scaled-up package of health services to meet their needs which is not the case now. Health care providers especially Ministry of Health (MoH) and The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) need to re-structure the provision of services in order to proactively target and serve youth and young people. This will have significant positive effects at the short and long term as most of health-related attitudes and behaviors (good and bad) are developed during adolescence and continued throughout the life course.
- Gradual but progressive increase in the proportion of people who are elderly calls for scaling up services for geriatrics, NCDs and disability. Plans for investing in services for elderly should start very soon to be able to cope with the demand for services for this category of people.
- Better investments in health promotion for youth and adolescents through better policies and programming for preventive services, life style modifications, health awareness, diet are top priority.

2. Health status in Palestine

Compared to other countries at a similar level of economic development, the Palestinian population's overall health outcomes are relatively good, partly due to strong performance of most basic public health and primary health care (PHC) functions (Abu Hamad, Jones, and Gercama, 2021). For example, on key indicators, the infant mortality rate (IMR) and maternal mortality ratio (MMR) are reasonably low-as discussed latter on- and immunization coverage is high; at 95% for most vaccines (ibid) and reasonable accessibility to basic health services.

Currently, alongside the demographic transition, Palestine is also going through epidemiological transitions. This refers to the change in disease patterns from mostly infectious diseases to non-communicable diseases (NCDs) such as cancer, heart disease, stroke, injuries, Diabetes Mellitus (DM) and hypertension (HTN). Away from Covid-19 related mortalities, in both the WB and the GS, NCDs including heart diseases, cancer, HTN and cardiovascular diseases and DM are replacing the traditional enemies of infectious diseases as the leading causes of death (MoH, 2021a). Also, NCDs are the major causes of mortality (82% of deaths are attributed to mortality) and morbidity in Palestine, resulting in a high direct cost of care, high indirect cost in loss of production, disability-adjusted life year, and much societal stress. NCDs have a heavy shadow on total morbidity and mortality in Palestine with nearly 75% of disease burden (MoH 2020; MoH, 2021). The crude death rate in Palestine is 2.6/1000 (ibid), where in 2019-before Covid-19 is reported, cardiovascular diseases was responsible for around 30% of deaths, cancer for 16% of deaths, and stroke for 11.3% of deaths. Complications of DM also represents 12% and pulmonary diseases represents 5% of all deaths. The picture didn't differ significantly in 2020 although Covid-19 emerged as the fifth leading cause of death (see Table 1). Figure 1 shows that in 2021, deaths attributed to Covid-19 constituted the first killer in the WB and the second most common killer in GS, the other usually reported causes of death continue to exist especially cardiovascular diseases, cancer, cardiovascular diseases, DM and injuries (MoH, 2022)

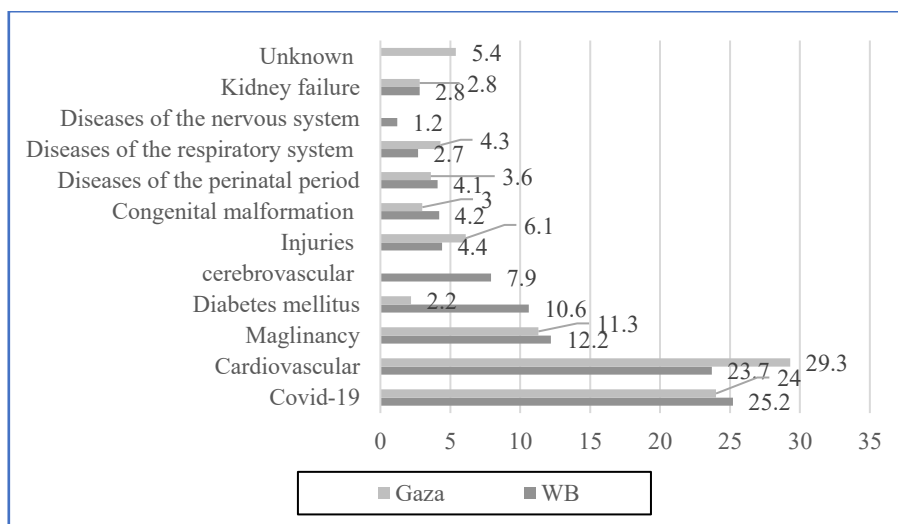
Table 1: Leading causes of death in Palestine (WB and GS) in 2019 and 2020

Disease	2019	2020
Cardiovascular diseases	29.9	24.7
Cancer	15.5	14.1
DM	12.1	14.6
Cerebrovascular disease	11.3	11.7
Covid-19 virus	-	11
Conditions in the perinatal period	9.0	4.7

Disease	2019	2020
Pulmonary diseases	5.3	5.5
Accidents	4.0	3.7
Congenital anomalies	3.2	2.7
Chronic renal failure	3.2	3.4
Digestive and liver disease	2.0	-*

* Not reported (Source: MoH, 2020b, 2021a)

Figure 1: Major 10 causes of death in Palestine in 2021



2.1 Prevalence and burden of NCDs

According to latest statistics, the number of NCD patients in Palestine continues to increase. UNRWA reports an annual increase in NCDs of 3.5% (UNRWA, 2020) and prevalence of HTN among Palestine refugees aged 40 years and older of 27.1% in the GS and 18.7% in the WB (UNRWA, 2021). Abu Hamad et al (2022) reports a higher prevalence of HTN among people 40 years and more reaching up to 56% in GS; 28% of them were undiagnosed. The UNRWA report flags that DM increases by an average of 3% every year (UNRWA, 2019). In 2020, according to UNRWA statistics (2021)-based on health facility data-the prevalence of DM stands at 17.2% in the GS and 18.7% in the WB among refugee clients >40 years (UNRWA, 2021). A recent community-based study conducted in the GS suggests that the prevalence of DM stands at 19.1% among people aged more than 25 years old, 26.7% if age is adjusted above 40 years (Shahwan et al, 2019) and among residents 40 years or older, it stands at 25.8% as reported by Abu Hamad et al (2022).

There is a dearth of research around the prevalence of heart diseases, however, the available evidence indicates that its prevalence in the GS stands at 9.7% according to data collected in 2017 (Shahwan et al, 2019). Likewise, in mid-2020, when surveyed, people aged 40 years and older from the GS, the prevalence of ever experiencing heart attacks was 9.3% and stroke was 4.6% (Abu Hamad et al, 2022), with being higher among males. Cardiovascular diseases represented more than 31% of complications among diabetic patients who visited governmental PCH centers in the WB during the year 2019 (MoH, 2020). Similar to the prevalence of heart disease, information about the prevalence of pulmonary diseases among adults in Palestine is scarce. Some recent data from the GS indicate that prevalence of these diseases stands at 10% (Abu Hamad, et al 2022) among people 40 years and more.

With regard to cancer, which is a key challenge in morbidity and mortality, in 2019, in the WB, cancer annual incidence rate was 117.8 per 100,000; it was 83.8 in 2015 (MoH, 2020). In the GS, the cancer registry center indicates an increase in the cancer annual incidence rates from 87.9, in 2015 to 90.1 per 100,000 persons in 2019 (MoH, 2020). Distribution by cancer type in the GS follows the same pattern as the WB, with breast cancer and colorectal cancer being the most frequently reported ones. The remarkable increase in mortality and morbidity related to NCDs in Palestine is most likely attributed to the abundant NCDs risk factors.

Studies confirm the interplay among contextual, social, economic and life style factors as well as service provision related factors. Occupation, stress, lower economic conditions, lower education, and social inequalities all increase the likelihood of developing more influential risk factors for NCDs (MOH, 2017). In addition, smoking, as well as insufficient physical activity, high obesity rates and sedentary life style. The urbanization and continuing nutritional change from a healthy Mediterranean diet to an increasingly western-style diet is associated with reduced activity, obesity, and a loss of the protective effect of the traditional diet is also playing a role (Shahwan, et al 2019). With change in the population structure manifested in increasing the proportions of people who are above 65, the burden of NCDs is mostly likely will increase assuming that the orientation of service provision remains the same, curative rather than preventive oriented and little is invested in health promotion such as life style modifications.

Box 3: Policy implications for NCDs

- NCDs are the major causes of morbidity and mortality in Palestine, resulting in a high direct cost of care, high indirect cost in loss of production, and much societal stress. With aging, and continued contextual and structural challenges, most likely a greater proportion of people will suffer from NCDs and the healthcare system will be faced with greater numbers of people with NCDs who require secondary and tertiary care. Therefore, an effective comprehensive NCDs control strategy should be developed to prevent/reduce, screen/identify, monitor and manage these diseases.
- The Palestinian health care system should be more prepared to cope with the increasing number of people with NCDs through greater investments in equipping health services with skilled/specialized human and material resources such as drugs.
- Developing feasible surveillance system to assess patterning and trends of major NCDs disaggregated by vulnerability parameter, is essential. Ideally, regularly conducting HH surveys on NCDs prevalence and risk factors (such as WHO STEPS) is essential to estimate effective coverage based on scientifically-based prevalence rates.
- In Palestine, NCD services are medically-oriented, curative rather than preventive. It is important to ensure that non-pharmaceutical interventions are also given priority, such as counselling and provision of information, life style changes and primary prevention. Investing in designing and implementing health promotion policies programs targeting youth and adolescents' life style, awareness, nutrition and tobacco control is crucial to control NCDs at the long run.
- To control NCDs in Palestine, it is essential to strengthen multi-sectoral collaboration among relevant sectors to address risk factors for NCDs, design and implement policies and programs aiming to prevention, early detection and management of common NCDs. For example, it is essential to launch multisectoral programs in collaboration between different sectors including health, education, economy and trade, social protection, civil planning, transportation, media and many others.
- Scale up screening programs aiming to promote early detection, including incorporating additional marker conditions (other than HTN and DM) including heart and pulmonary diseases and cancer. It is important to extend outreach screening programs to reach more people in the community, including those who don't physically visit health facilities.
- Expand the outreach modality for service provision, particularly targeting people who face restrictions on their movement due to political, economic or social factors.
- Advocate to include NCDs community screening in the PCBS periodic HH surveys in order to identify undiagnosed cases and also to be able to precisely estimate coverage for NCD services

2.2 Incidence and burden of communicable diseases

For several years, communicable diseases (CDs) were the main cause of death in developing countries including in Palestine, however, these are mostly under control currently and these contribute less as leading causes of death, but still represent a burden in term of costs and hospitalization. Reviewing the available evidence suggests that there is a significant decline in the incidence of the vaccine preventable diseases and an increase of CDs related to environment conditions such as diarrhea and respiratory infections. Respiratory diseases and diarrhea are still contributing somewhat to mortality among children however, their morbidity burden is larger due to admissions to hospitals and costs implications. According to the PCBS-MICS (2021), 14.5% of children under 5 (13% in the WB and 16.7% in GS) experienced an episode of diarrhea in the past two weeks and 6.7% experienced symptoms of acute respiratory infections (ARI) (5.7% in the WB and 8.1% in GS), figures reported about diarrhea in 2014 were lower, 11% reported experiencing diarrhea, nevertheless a higher proportion indicated experiencing ARI (10.7%) in that year. Unsafe water supply, improper sewage and solid waste disposal, crowdedness and poor housing conditions are key risk factors for environmental related diseases.

A number of vaccines preventable diseases are controlled as Diphtheria, while Polio and Tetanus are eradicated. No cases of poliomyelitis and diphtheria were reported since 1988. In 2020, 16 cases of acute flaccid paralysis were reported, of which 12 cases were reported in the WB and 4 in the GS, all of which were polio-free; in 2021, also 16 cases were reported (MoH, 2021; 2022). In 2020, 6 cases of measles were recorded, all from Jenin Governorate, however, in 2021, no measles cases were reported. Few cases of tuberculosis are annually reported, 11 cases in 2020 (4 cases in WB and 7 in GS); 15 cases in 2021 (MoH, 2022). Regarding Tetanus, no cases have been reported since 2007 and also no cases of neonatal Tetanus has been reported since 2017, in addition to high coverage among pregnant women for Tetanus vaccination. Nevertheless mumps, it is still reported, in 2020, 239 cases of mumps were reported, 374 were reported in 2021 being more frequently reported in the GS (MoH, 2022). Viral meningitis is one of the endemic diseases in Palestine, in 2020, there were 361 cases of Viral Meningitis reported in Palestine, 281 in 2021 with being much higher in GS (191) than the WB (90). In 2004 and 2014, GS has witnessed epidemic in both mumps and viral meningitis (reaching 327 per 100,000 in 2004). Moreover, in 2020, 111 cases of bacterial meningitis were reported, 23 in the WB and 88 in GS; in 2021, 141 cases were reported (MoH, 2022).

Hepatitis 'A' remains a public health problem in Palestine but with a declining trend. In 2020, 350 cases of hepatitis were reported with an incidence rate of 7.3 per 100,000 populations, of which 90 cases in the WB at an incidence rate of 3.3

per 100,000 population and 260 cases in the GS at an incidence rate of 12.7 per 100,000. In 2021, 431 cases were reported, the incidence of hepatitis A is declining in general since 2005 as it was at that time 85 per 100,000 (MoH, 2022). Regarding hepatitis B, it shows a declining trend, in 2020, 18 cases were reported; in 2021 13 cases were registered. With a constantly declining trend since 2005, the number of Hepatitis B carriers reported in 2020 was 380 cases; 284 in 2021 (MoH, 2022). Regarding hepatitis C which is a dangerous disease, 2 cases were reported in 2020 and 3 cases in 2021 (MoH, 2022). The number of carriers was 77 in 2020 and 70 in 2021. Brucellosis is endemic, especially in the WB with 862 cases in 2020, and 654 in 2021, almost all cases were from the WB (MoH, 2022).

Palestine, like other Arab and Mediterranean countries, has low Human immunodeficiency Virus/ Acquired Immune Deficiency Syndrome (HIV/AIDS) infection rate. MoH report (2022) shows that the cumulative number of HIV/AIDS reported positive cases from 1988 till 2021 is 125 cases (in 2020, the figure was 115), of which 95 were AIDS cases and 35 cases were HIV; 75 from the WB and 50 from GS; 54 cases are still alive.

Under reporting is a serious concern for most of Sexually Transmitted Infections (STIs). Using the WHO classification “Etiological Diagnosis” in 2020, there were 4,824 cases among females in the WB, in 2021, 4236 cases, diagnosed according to the causes (MoH, 2022). The number of registered cases among males in 2020 was 91; in 2021, 2 cases were recorded. On the other hand, using the ‘Syndromic Diagnosis’, in 2020 were reported 15,866 new female cases of STIs were recorded in WB, which were diagnosed using syndromic approach; 14,324 were recorded in 2021 (ibid). On the other hand, the number of cases among males in 2020 was 171, 14 in 2021. Epidemiological surveillance system of STIs in Palestine is still in need of further improvement. In this regard, there is a need for more community awareness and the development of the capacities of the human resources working in this field, especially in GS.

2.3 Covid-19

On March 5th 2020, immediately after the first reported cases of Covid-19 in the WB, the President of the country declared a state of emergency in the Palestine, closing schools and other education facilities, restaurants, cafes, hotels, markets, wedding halls and religious places in both the GS and the WB. Lockdown measures included periods of 24-hour curfews with closure of PHC centers, sometimes for several weeks, and later on (as of December 2020) night curfews, restrictions on movement within and across governorates, and strict penalties for those who do not adhere to social distancing polices (WHO Health Cluster, 2021).

As in other contexts, the overwhelming burden of Covid-19 morbidity and mortality has rested with older persons in Palestine. Since the beginning of the pandemic, as of October 30th 2022, 703,036 cases have been reported in Palestine, among them, 38% registered in the GS (MOH, 2022), 696,878 recovered. The total number of deaths in Palestine till the end of October 2022 is 5,708, with 2004 of these in the GS and 3704 in the WB (case fatality is around 0.8%) (ibid) which is reasonable in comparison to other countries with similar socioeconomic conditions. Palestine did well in responding to Covid-19, however, the performance in vaccination wasn't satisfactory. Covid-19 vaccination programme started in late February 2021 in the GS, and in March 2021 in the WB. Among the targeted population, 51% are fully vaccinated with being significantly higher in the WB 63% than in the GS 36% (MoH, 2022).

Box 4: Policy implications for CD

- Although CDs are not key leading causes of death in Palestine, still these constitute a burden in terms of morbidity and health costs. Measures to control CDs should be strengthened including better surveillance system, identification and management. Strengthening the epidemiology department at MOH is a priority
- Immunization program contributes significantly to CDs control, therefore should be promoted and expanded to cover other categories other than children, particularly elderly
- Reinforce regulations and policies to implement the CDs related articles in the Palestinian Public Health Law, particularly the articles related to controlling CDs
- Support multisectoral interventions to improve the environmental conditions mainly securing safe water, sewage and garbage disposal systems and improving environmental conditions of public places and houses for the entire population during emergencies and regular times alike.
- Promote emergency preparedness plans to be able to effectively tackle emerging epidemics

MoH, UNRWA and non-governmental organizations (NGOs) adopted proactive responsive measures including applying a triage system, at the entrance of health facilities, measuring temperature, isolating suspected cases, launching telemedicine and hotline services, and establishment of quarantine centers (OCHA, 2020; Juzoor, 2020; UNRWA, 2020). Most health facilities suspended non-Covid-19 services, except emergency services, increased the interval between follow up consultations, utilization of telemedicine and delivering NCDs medications to patients at their homes. However, public health response to

Covid-19 was associated with a reduction in access to non-covid-19 services for example, the percentage of change in the number of individuals with DM served between 2019 and 2020 is -25.2% in the WB and -14.6% in the GS and the percentage of change in the number of hypertensive patients served between 2019-2020 is -16.3% in the WB and -9.2% in the GS. Also, non-Covid-19 hospital services have been negatively affected for example although cardiac catheterization is usually an emergency procedure, in March 2020, there was 38% reduction percentage in comparison with the same month 2019, the reduction percentage reached up to 85.6% in September 2021.

3. Health services in Palestine-a mixed equation

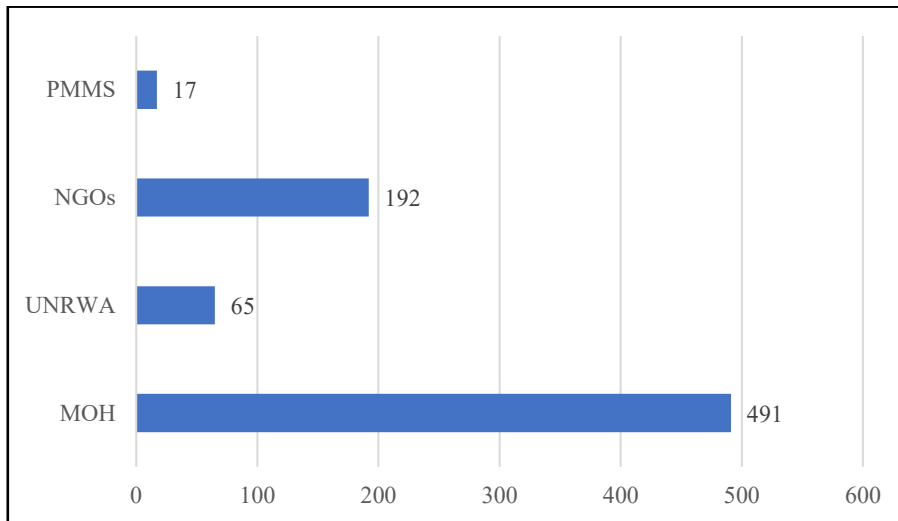
3.1 Health care providers in Palestine

The four major health care providers in Palestine are the MoH, the UNRWA, NGOs and private for-profit operators (Abu Hamad, Jones, and Gercama, 2021). The Ministry is responsible for a significant portion of primary, secondary and tertiary health care delivery, including NCD services (MoH, 2017), and is also the regulator and supervisor of all health services in Palestine. UNRWA plays an important role in providing PHC services through its centers and financially supporting secondary and tertiary services for registered Palestinian refugees (UNRWA, 2021). Through a large network of health centers, NGOs also play a complementary role in supporting vulnerable groups with health needs. The private sector is largely unregulated, and tends to focus on obstetrics and surgical intervention (UNFPA, 2016). NGOs play a complementary role in supporting vulnerable groups, particularly people with disabilities and youth, and providing women's health services. The private sector is largely unregulated, and tends to focus on curative services that generate high revenues, such as obstetrics and surgical interventions (Abu Hamad, Jones, and Gercama, 2021). The private sector follows direct, market-based, non-contractual interactions between beneficiaries and providers; it lacks accountability and beneficiaries are often exploited financially (ibid).

3.2 Primary Health Care

Currently, there are 765 PHC centers in the GS and the WB managed by MOH, UNRWA, NGOs and other governmental bodies, of which 159 are based in the GS. UNRWA operates 65 PHC centres (22 in the GS and 43 in the WB), 491 belong to MoH (from which 58 are based in the GS) and 192 centres managed by NGOs, which are mainly concentrated in the WB. The ratio of population per PHC center is higher in the GS (nearly 13,000 persons per center) than in the WB (6000) (MoH, 2022). However, this large number of health facilities, comes up with many caveats. For example, at MoH, 65% of the PHC centres are level I or II, mostly in rural areas in the WB, with limited ability to provide comprehensive services, as they lack resources such as sufficient staff and laboratory services. Because the WB is larger than the GS with many rural communities, availability of services can be compromised for certain subpopulations especially in area C, seam zones and H2. In addition, the political context adds another layer of complexity even when health facilities are physically available as checkpoints, settlements and the separation wall, which can restrict access even to nearby health facilities (Amnesty International 2021). The delay at checkpoints can be three hours long or more in some cases.

Figure 2: Distribution of PHC Centres by ownership in Palestine



3.3 Hospitals

At hospital level, the total number of hospitals in 2021 is 89 (MoH, 2022), and the total number of beds is 7769; of which 54 hospitals in the WB (4182 beds) and 35 hospitals in the GS (3587 beds). MOH operates 29 hospitals (16 in the WB and 13 in the GS), nearly it manages 31% of the total hospitals and hosts 53% of the total hospital beds (4693 beds; 1869 in the WB and 2824 beds in the GS) (ibid). The same source indicates that the NGOs manage 42.5% of hospitals, which contain around 30% of the total beds. The current overall bed population rate is 1.49 per 1,000 inhabitants (1.3 in the WB and 1.6 in the GS) (MoH, 2022). This rate is less than the reported rate in Jordan (1.9), Turkey (3) and Israel (2.9) and less than the average the Organization for Economic Co-operation and Development (OECD) country rate (4.9) (MoH, 2020;). To be able to meet the demand of the population during emergency situation and regular times, it is recommended to increase the number of beds per population to at least 2 per 1000 (UNFPA, 2016). Of the total beds available, 71% are located at general hospitals (MOH, 2022), specialized services are less likely available especially in the GS. Length of stay doesn't reach more than 3 days and occupancy rates was around 82% in 2021; reaching 100% in certain years (2019; 2018).

MoH shoulders a greater burden in the GS than NGOs do, which contribute more to service provision in the WB. Also, despite having a limited number of facilities, UNRWA covers a great deal of refugee needs, especially in the GS (ibid). The private sector is not well-regulated and most of the private clinics are not registered. In general, the contribution of the private sector is greater in the

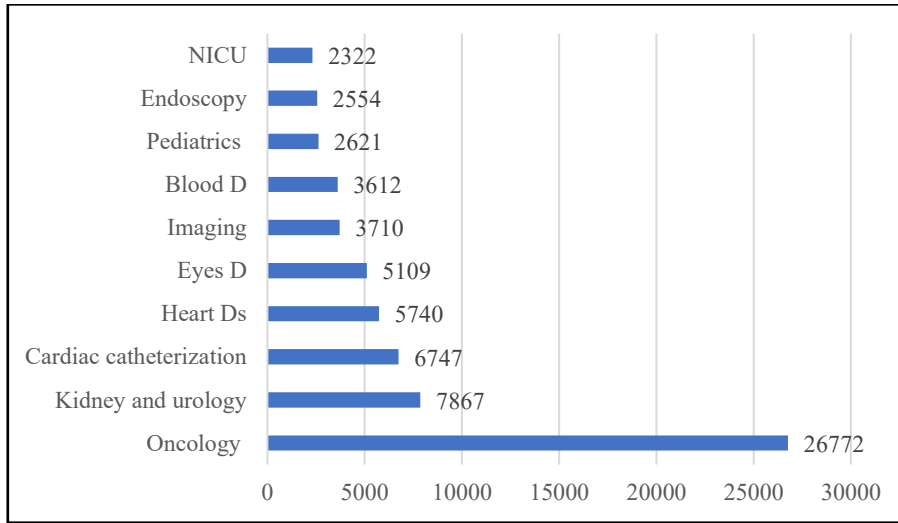
WB, than in the GS. While people are generally able to access basic secondary health services at hospitals when the area is not witnessing acute escalations of the emergency situation, access becomes very challenging during renewed outbreaks of conflicts and emergencies. In the WB, access is very difficult all the times for people living in area C, seam zones and H2. Access to advanced services (such as oncology, radiotherapy, advanced cardiac and neurosurgery) remains very challenging at all circumstances especially for people living in rural areas and for Gazans. Also, the health care system is curative rather than preventive and staff are mostly disease-oriented (Abu Hamad, Jones, and Gercama, 2021).

3.4 Referrals outside MoH premises

While basic services are mostly available in most of the Palestine governorates in the WB and the GS, specialized services are not adequately available, therefore referrals to advanced health services outside MoH premises is a crucial component of service delivery in Palestine. In 2021, MoH has issued 99064 referrals for treatment outside MoH facilities with an increase by 23.8% compared with 2020 (80,020) which costed 974,782,080 NIS (MoH, 2022). According to MoH, procurement of health services from outside MoH premises accounted for 42% of MoH expenditure (MOH, 2021, 2022) which raises important questions around efficiency and equity in resources utilization. In 12 years, the number of referrals almost increased by 100% as it was 53,025 in 2010 and constantly increased till it reached the current figure. Another equity related issue is the imbalance between the number of referrals issues to people from GS (21,246) in comparison to people from the WB (77,818). Gazans who represent around 40% of the population received only 21% of referrals which calls for the importance of having transparent equitable referral policy (MoH, 2022).

MoH report (2022) shows that the vast majority of referrals (89.8%) were made to other non-MOH facilities inside the WB and the GS, 10.2% referred to medical centers outside Palestine particularly Israeli (5.2%) and Egyptian hospitals (3.7%). The proportions of referrals issued for facilities outside Palestine has significantly increased in 2021 in comparison with 2020 (MoH, 2021; 2022). Oncology management was the main reason for referrals (27%) and also the medical conditions which consumed the highest proportion of referral expenditures. The number of people referred was 51057 (on average, each referred twice), of which 55% were males and 45% are females.

Figure 3: Number of referrals by medical conditions



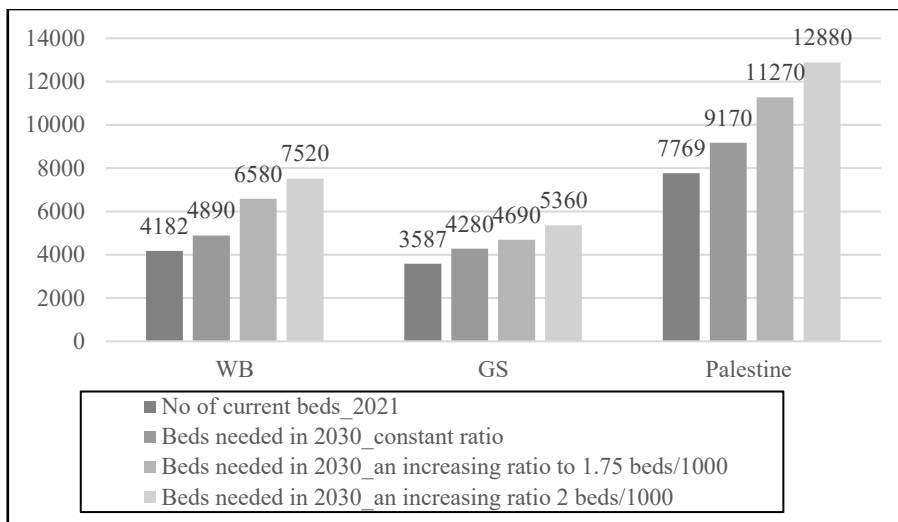
The increase in referrals reflects shifting health demand and possibly an improvement in the diagnosis of more critical medical conditions which require more advanced services that are not available within MoH premises or even in Palestine. Access to referral services for Gazans is usually restricted by the Israeli measures through denying permits to travel to the other Palestinian premises in Jerusalem or the WB; denial rate could reach more than 40% (WHO, 2021). For example, in 2019, there were 31, 859 MoH referrals for patients in the GS, this number declined to 17,574 in 2020 (reduction percentage by 45%).

3.5 Projected needs for health facilities and equipment

Health care system needs not only to address the current gaps in service provision such as the availability and access to specialized services and addressing quality related issues, but also to respond to the increase in the population size and change in the population structure particularly aging associated with greater needs for hospital services. The projection of hospital beds used three scenarios, constant rates (the current rate), an increased rate by 0.25 per 1000 (1.75 beds per 1000) and more ambitious target, an increase by 0.4 per 1000 (2 beds per 1000), which is the maximum recommended feasible threshold in the Palestinian context, given scarcity of resources (Figure 4). Using the intermediate scenario, Palestine is in need of 11,000 beds in 2030. It is worth mentioning that hospital services are very expensive and attention should be paid to the cost-effectiveness of providing extra beds. On average across the European Union member states, the number of hospital beds has fallen by close to 2% per year. These projections provide information for policy makers to inform their decisions based on the availability

of resources and other factors. Figure below shows the number of projected beds in 2030 based on the PCBS population projection.

Figure 4: Number of current beds available, and needed in 2030



NB: Constant ratio, at the current ratios 1.49 per 1000 resident for Palestine (1.3 in the WB and 1.6 in GS); increasing ratio, using two scenarios, 1,75 per 1000 and 2 beds per 1000 population

It is important to pay attention to the bed distribution by specialty and to ensure its congruence with population needs. The current gap in obstetric beds and neonatal incubators should be bridged. Meeting the population needs for tertiary care is essential. For instance, shortages in intensive care unit (ICU) beds, oncology beds and beds for geriatric care should be addressed. The table below portrays specific needs in expensive and critical beds, equipment and services. At all the Palestinian hospitals, in 2030 there is a need for 640 critical care beds (10 beds per 100,000 inhabitant is the average in most countries). The use of ICU beds is anticipated to increase with aging and/or political unrest. In 2030, at least 240 intensive care incubators are needed at a rate of 1.5 per 1,000 births in addition to intermediate and daily care incubators (five per 1,000 live births).

Table 2: Projection of the number of specialized services and resources in 2030

Specialty	Palestine	WB	GS	Rates
Critical care beds	640	370	270	10 per 100,000 inhabitants
Intensive care incubator (beside the regular incubators)	240	130	110	1.5 per 1,000 live births
MRI units	32	19	13	5 per million (Turkey 11, Israel 5, Japan 55)
CT units	64	38	26	10 per million. (Turkey 15, Israel 10, Japan 116)

Specialty	Palestine	WB	GS	Rates
Mammograms	64	38	26	10 per million people (Turkey 11, in Israel 10.8; in USA 71; in UK 11)
Radiotherapy equipment	19	11	8	3 per million. (In Turkey 2.9; Israel 4.4, in Germany 4.7; in Belgium 18)
Catheterization and angiography laboratory	16	10	6	2.5 per million people
Psychiatric beds	640	370	270	10 per 100,000 people Median global figure is 10.8

With regard to Magnetic Resonance Imaging (MRI) machines, which are a rapidly growing technique in diagnosis because they are safer than radiation, there is a need for 32 units in 2030 (at a rate of five per one million, 13 in GS and 19 in the WB). In OECD countries, the average annual MRI examination per 1,000,000 inhabitants is 30 (OECD, 2021). Regarding computerized Tomography (CT) units, using a conservative rate of 10 units per one million individuals, 64 functioning units will be needed in 2030 (see Table 2). Mammograms are important diagnostic machines for the detection of cancer breast than can be used in screening and confirming the diagnosis. Both the number of mammogram units and their use in Palestine is limited. With the high incidence of breast cancer in Palestine, it is important to invest in early detection of breast cancer, including routine mammogram screening. Using the rate of 10 mammograms per million people, there should be 64 units in 2030 (UNFPA, 2016). With increasingly higher rates of cancer and the heavy burden of referrals abroad for radiotherapy, there is a need to establish more radiation therapy units besides the units currently available. Using the rate of radiotherapy units per one million people as in Turkey (4), Palestine needs 19 units in 2030 8 in the GS and 11 in the WB. Similarly, to diagnose and treat cardiac diseases, there will be further demand to establish cardiac and angiography laboratories. Using the standard of 2.5 per million individuals (UK standard), at least 16 units are needed for the WB and GS in the year 2030 (UNFPA, 2016). Regarding psychiatric beds, using the median global figure at a rate of 10 per 1,000,00 inhabitant (Turkey), 640 psychiatric beds will be needed in 2030 (OECD, 2021). Because of the compound vulnerabilities facing Palestinians, including economic hardships, conflict, and a high level of stress and anxiety, the magnitude of the mental health problems experienced will further increase.

Box 5: Policy implication for services provision

- To promote the responsiveness of health services to the population needs, it is important to better govern and regulate health services. Being the regulator of health services, MoH needs to invest more in regulating service provision in Palestine and to ensure complementarity among providers. Conducting mapping of the available health services and resources is essential.
- MoH should lead efforts to strategically standardize the provision of health services. This should crucially include identifying a package of health services that should be provided at all circumstance to all the population. It is also essential to determine a standard for services that are applied by. Components of service package, standards for service provision, staffing level, care modalities, levelling, referral service, documentation requirements should be all standardized and applied on the ground.
- In Palestine, health services are medically-oriented, curative rather than preventive. It is important to invest more in preventive services such as counselling and provision of information, life style changes and primary prevention.
- Also, it is essential to strengthen coordination within health sector and also cross sectors to minimize duplications, and set multi-sectoral collaboration among relevant sectors
- To ensure the availability of health services, including to the vulnerable subpopulations, it is important to seriously reconsider the distribution of health services across different localities, in order to ensure adequate service for rural and vulnerable population. Population dynamics and the change in population size and structure should inform decision making process in order to allocate resources to meet the increasing demand for health services. Health facilities and service should be scaled up to cope with the increase in the population size and the change in health needs. This also include tailoring health services to meet the emerging demand as a result of the demographic change such as Persons with Disabilities (PWDs), elderly, youth and adolescents

3.6 Human resources for health

Despite the noticeable discrepancies in the reported health provider density per population, there is a general consensus in the literature that the current distribution of human resources for health per population is fairly acceptable in most health professions in Palestine in comparison with other Arab and Middle Eastern countries living with similar economic conditions (UNFPA, 2016). However, health personnel density is less than in other countries with more

developed healthcare systems like OECD countries (ibid), Lebanon and Qatar. Also, migration of skilled professionals remains a significant challenge. Interestingly, health facilities are staffed with young generations who constitute an asset in the long run. Moreover, the gender balance is less biased towards males than it used to be (females represents 20.4% of physicians, 35.9% of dentists, 63.6% of pharmacists and 56.9% of nurses) with the potential of increasing women's enrolment in the working force, especially in senior positions in the future, as their current representation in the education sector is even higher than their male counterparts (PCBS, 2021c; UNFPA 2016).

PCBS (2022f) reports that there were 14,054 **registered** physicians (8001 in the WB and 6053 in the GS) at a rate of 2.7 physicians per 1,000 inhabitants in the country as a whole, with better situation in the WB (3 per 1000) than the GS (2.5). The same source indicates that there are 22,478 registered nurses, almost equally distributed between the WB and the GS. Nurse proportions according to the population are significantly low with around 4 nurses per 1,000 people; 10 in UK and USA (UNFPA 2016). On the other hand, the mapping exercise conducted by Palestinian National Institute of Public Health (PNIPH) in 2019 shows that around 36,809 health workers (56% in the WB and 44% in the GS) are part of all level healthcare services, 91% of them employed in urban areas. According to the same source, there were 5297 doctors in 2019 (2831 WB and 2466 in GS), much less than half of what was reported by PCBS in 2022

While the number of general practitioners is adequate, specialty and subspecialty areas in medicine, nursing, and paramedical fields are greatly disadvantaged in Palestine. The need for specialized staff to work in oncology, cardiac surgery, vascular surgery intensive care, anesthesia, orthopedic, histopathology, advanced laboratory services, and palliative care is acute (UNFPA, 2016). For instance, the number per 100,000 population in Palestine is 0.7 in oncology (7 in Italy), 0.3 in psychiatry (17 in Italy, 5 in Turkey), 0.4 in chest surgery (3 in Turkey) 0.8 in respiratory diseases (6 in Italy), and 2.9 in Radiology (8 in Turkey) (Falah, Meshal, and Betawi, 2020). As a result of the change in the age structure, there will be more need for specialization in nephrology, neurology, ophthalmic, rehabilitation, palliative and geriatric care.

As a result of the population dynamics, there will be more need for specialization in nephrology, neurology, ophthalmic, rehabilitation, palliative and geriatric care. The number of physicians needed by 2030 is 19,280, and 32200 nurses are needed within the same time frame. Obstetricians and gynecologists needed at a rate of 28 per 100,000 women (comprising females in general) would be around 890 in 2030. The current shortage in midwives should be bridged by deploying 1560 midwives by the year 2030 (see Table 3). Also, policies that empower midwives should be reinforced, as the contribution of midwives to improvements

in the quality of health and reproductive services is significant. The better utilization of midwives is associated with less medicalization and less instrumentation of obstetric services, a friendlier environment, and also cost containment. To meet the need for pediatric and neonatal services in 2030, there is a need for around 510 pediatricians/neonatologists. To meet the growing needs for oncology services, 120 oncology specialists will be required in 2030. Similarly, control of cardiac diseases as the leading cause of death, requires the deployment of 510 cardiologists in 2030. Finally, the acute gap in psychiatry requires bridging by deploying around 90 psychiatrists in 2030. The increase in population size and the change in the demographic structure of the population implies that the demand for specialized staff in nutrition, paramedical staff, and anesthetists should also be considered.

Table 3: Needed human resources in selected specialties needed in 2030 according to projected population

Specialty	Palestine	WB	GS	Used rate
Physicians	19280	11280	8000	3 per 1000 inhabitants In Lebanon and Qatar 3.2, 2.6 in USA, 3.3 in Israel, 5 in Norway, 2 in Turkey
Nurses	32200	18800	13400	5 per 1000 inhabitants 5 in Kuwait, KSA, Oman, 12 in USA, 5 in Israel, 2.7 in Turkey and 18 in Norway
Midwives	1560	920	640	50 per 100,000 females 140 in Turkey, 44 in Israel, 100 in UK
Obstetrician and gynecologists	890	520	370	28 per 100,000 females 28 is the average of EOCED countries, Germany 39, Italy 40, Turkey 17, Israel 37
Pediatrician and Neonatologist	510	300	210	8 per 100,000 (at least 1 neonatologist) Australia 7, Ireland 9, UK 8 100,000 inhabitants
Oncology specialist	120	70	50	20 per million inhabitants In UK, 131 per million, 161 in USA, 115 in Germany, 7 in Turkey
Cardiologist	510	300	210	8 per 100,000 inhabitants, similar to most OECD countries
Psychiatrist	90	50	40	1.5 per 100,000 inhabitants 3 in Turkey, Germany 27, Belgium and UK 18, Norway 24

Rates were calculated based on the average OECD country in 2022

Box 6: Policy implications related to health providers density per population

- To better assess the availability of human for health, it is essential to keep an updated database of human resources to inform planning and future decision making. Currently, no valid statistics about human resources do exist.
- It is essential to set national standards for human resources density per population and services. For example, setting standards for physicians' density per population and per hospital beds. Such standards help in assessing needs, allocation and deployment of human resources and basis for strategic planning of health human
- The number of health providers should increase in coming 8 years in order to meet increasing demand for health services resulting from the increase in population size.
- Specialty and subspecialties in health care provision should be promoted especially in geriatric care, NCDs related services, oncology, neonatology, psychiatry and also in youth and adolescent health services through enhancing capacity building activities and better utilization of the human resources outside Palestine.
- It is essentially important to match supply and demand for health care through better regulation between academic institutions and service delivery and also better governance.

3.7 Health financing

Population growth, aging, and changes in disease patterns contribute greatly to rising healthcare costs. These shifts take on added importance and urgency in the context of a rapidly changing healthcare system, placing intense stress on the system as it tries to hold down expenditures and, at the same time, increase access and improve the quality of healthcare. The total expenditure on health in Palestine has increased from USD 397.2 million in 2000 to USD 1596.1 million in 2020, (around 12% of the GDP) indicating an increasing trend of spending on health (PCBS and MoH, 2022). The average health expenditure per capita in Palestine reached to USD 344 in 2018, 336 in 2019, to 332.3 in 2020. This compares to Jordan USD 334; Egypt USD 150; Turkey USD 396; and Iran USD 470, Denmark 6000, Cuba 1031 and Israel 3456. The reported 6% annual increase during the past 20 years is not observed in the past three years possibly due to Covid-19, and other factors. To project total health expenditures, the authors used the average annual per capita health expenditures of the past three years (USD 337) as the basis for the projection. According to the constant scenario (without any increase), Figure 5 shows in 2025, the total health expenditure would be \$ USA 1936 million, and in 2030, it will reach to 2171

million. However, the recurrent health expenditure per person may remain constant, or might increase to reflect national goals for improving the healthcare system. As governments attempt to improve their health systems, they may want to increase their recurrent health expenditure per person. The average recurrent per capita health spending in OECD is USD 3,453, in 2000, it was USD 1,802 with an annual increase of 6% – the same rate of increase in Palestine during the period 2004-2020. If we apply the same rate of increase (6%) at a baseline of USD 337 (The average of the past three years) in Palestine, then total recurrent spending will be USD 2470 million in 2025 and USD 3722 billion in 2030. If health spending continues to increase at the same rhythm (at around 6% annually; baseline of the past three years is 337) US\$, the average of per capita expenditures in 2025 would be USD 430, USD 576 in 2030 (Figure 6). These figures can be helpful in demonstrating the financial burden associated with high rates of population growth and also point to the financial resources that should be deployed to adequately provide health services.

Figure 5: Projected total health expenditure at the current per capita expenditure (337 average of past three years) and also by increased expenditure at rate of 6% annually (annual increase from 2004 till 2020)

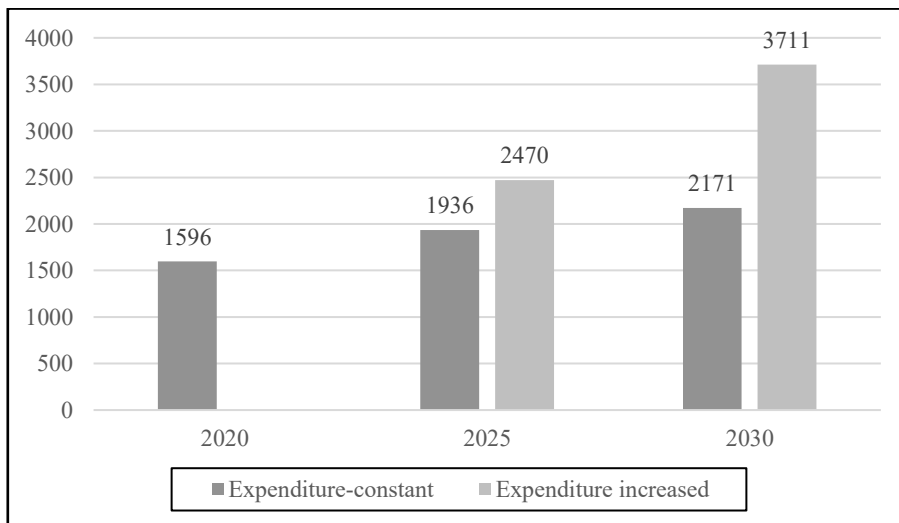
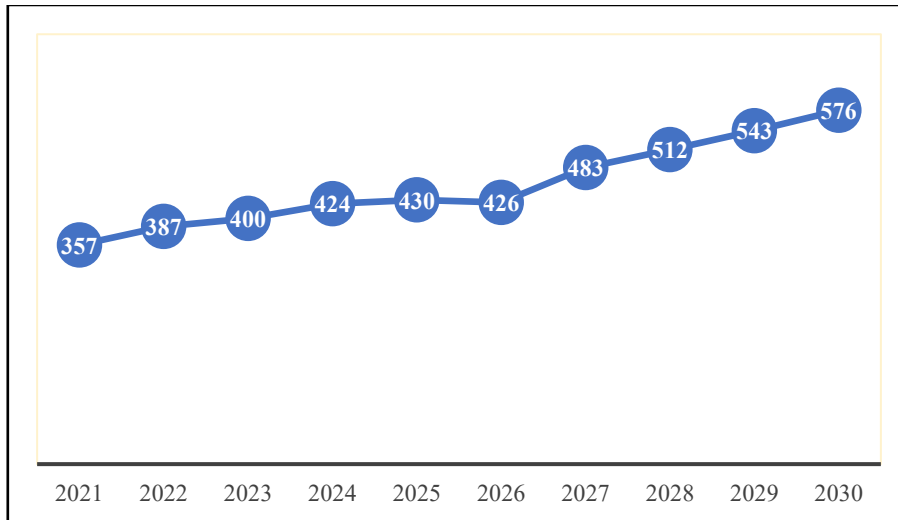
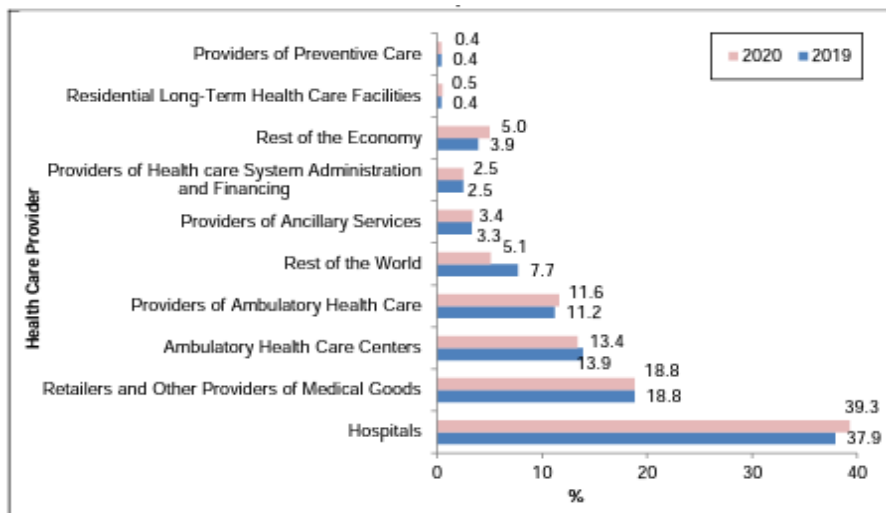


Figure 6: Projected annual per capita expenditure on health calculated at a rate of 6% increase at a baseline of USD 337 (The average of the past three years) in Palestine



The current expenditure on health, by health care provider, hospitals (general hospitals, mental health hospitals, specialized hospitals and unspecified hospitals) occupy the top of the list on current health expenditure with a percentage of 37.9% and 39.3% in 2019 and 2020, respectively. This was followed by retailers and other providers of medical goods that reached 18.8% in 2019 and 2020. The smallest contribution of providers of preventive care was 0.4% in 2019 and 2020 (see Figure 7).

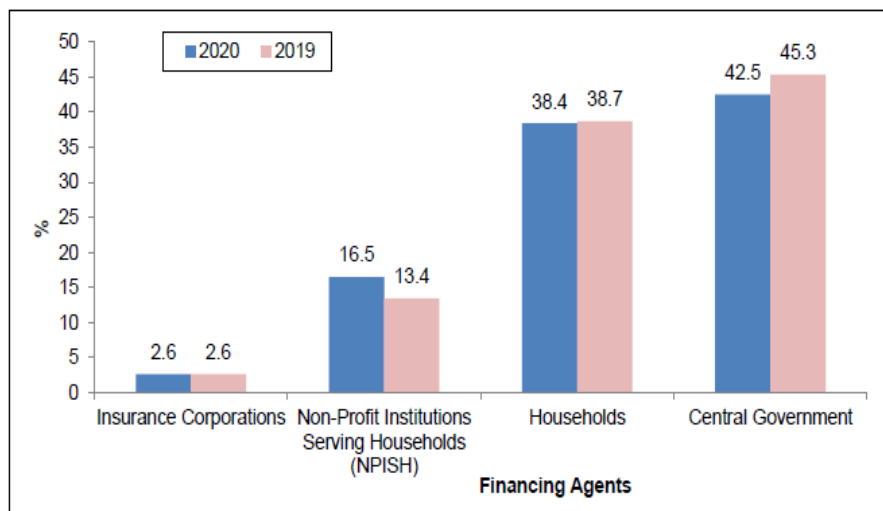
Figure 7: Percentage distribution of total current health expenditures by health care providers in Palestine, 2019-2020



Expenditure on drugs and pharmaceuticals represents a large proportion of healthcare spending in Palestine; between 19-20% of total spending, while it is only 8% in Norway and Denmark (UNFPA, 2016). The prominent irrational use of drugs in Palestine through polypharmacy, double prescribing, and overuse of medication leads to wasting of the already sparse resources and has health hazards (ibid). The PCBS and MoH Health Account Book (2022) shows that, of the total expenditure on health, 68.5% was spent on curative services (inpatients and outpatient curative services), very little is spent on rehabilitation and long-term care (1.4% for the two combined).

Regarding sources of funds for the health sector, the contribution of the government in Palestine is limited and didn't significantly change over since 1994, at around 42% in 2020 (72% in Turkey), while the contribution of HHs is around 40%, compared with 19.5% in OECD, constituting high burden on families, especially economically disadvantaged ones (PCBS and MoH, 2022). Despite the large number of families benefiting from the state health insurance scheme in Palestine, its contribution remains very limited, slightly less than \$ 100 million. However, mostly actual payments come from compulsory scheme for employees and workers in Israel, other categories like people enrolled in social protection program, their organizations like Ministry of Social Development (MOSD) doesn't actually pay the insurance fees (\$ 12 million out of the 100 million), thus their payments remain hypothetical. In GS, the situation is even worse, while most people in GS are medically insured, revenue from health insurance is not more than \$ 2 million.

Figure 8: Percentage Distribution of Total Current Health Expenditures by Financing Agents in Palestine, 2019-2020



Box 7: Implications for health financing

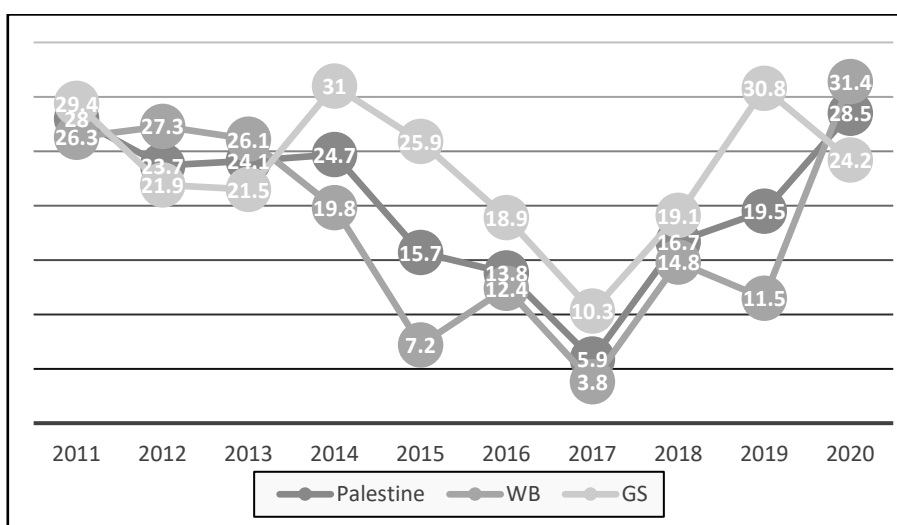
- Like most countries of the world, health expenditures in Palestine are constantly escalating, it is essential that adequate financial resources are deployed to provide responsive health services to the Palestinian population, that are able to cope with the high rates of population growth and the changing in the structure of the population.
- Salaries needed for the health-related human resources consume the highest proportion of health expenditures, and therefore matching the number of allocated human resources to the health services demand and supply chain is greatly important.
- There is a need to shift the orientation of health care services from the medically-oriented curative model, to public health oriented preventive services. This will have positive impacts not only on the health status of the population but also on costs as preventive services are much more efficient.
- The current allocation of resources at health sector needs critical revisions. For example, more resources should be invested in health promotion and public health measure.
- Improving the level of efficiency in health services is a top priority. This includes rationalizing drug use, controlling the hyper-medicalization of service, minimizing duplication in service provision, reduction in referrals outside Palestine, increasing costs consciousness among policy makers, health providers and the community.
- Serious measures are needed to ensure the financial sustainability of health services including reducing reliance on externally donated resources, reforming health insurance, and introducing costs containment strategies.
- Out of pocket spending is regarded as catastrophic, serious efforts are needed to control that including having more effective health insurance system, increasing public spending on health and filling gaps in the quality of health services.

4. Sexual and Reproductive Health and Rights

4.1 Maternal mortality ratio

Maternal Mortality Ratio (MMR) is a widely used proxy outcome indicator that reflects the interplay of many factors including socioeconomic, contextual, political, cultural and healthcare system related factors. It is well-known that maternal mortality reviews are critically useful to assess the quality of health care system, but do not necessarily reflect the scope of complications in obstetrics which are more reflected in Maternal Near Miss (MNM) reviews. The overall MMR ratio in Palestine has significantly improved from more than 32 per 100,000 live births in 2010 to around 19.5 in 2019, but then it increased again to higher rates as it reached 28.5 in 2020 and 47.7 per 100,000 live births in 2021 as reported by MoH, being much higher in the GS (60 per 100,000 live births) than in the WB (39.1), according to MOH reports (2022). MOH report in 2021 suggests that 78% of maternal deaths in the WB (25 out of 32) and 68% in the GS (22 out of 34 total deaths) were associated with Covid-19 infection. If Covid-19 cases were excluded, then, the rates will be within the reported ranges at less than 30 per 100,000 live births. Away from Covid-19, in general, Palestine achievements in this regard, is better than the acceptable global range recommended by the WHO and the Sustainable Development Goals (SDGs) (50 and 70 per 100,000 live births consecutively). Still, the analysis of MMR tells us that intensive support is needed to accelerate the reduction at the country level to achieve the SDGs recommended reduction by 2/3 by 2030.

Figure 9: Maternal mortality ratios in Palestine 2011 through 2020



As of 2008, UNFPA supported the development of a national surveillance system for maternal mortality and linked it to mainstream information system of MOH. Prior to that, maternal death reviews were sporadic, even rarely conducted. Despite the significant improvement made, the reported MMR in Palestine still varies widely due to gaps in documentation and classification of maternal deaths. Possibly, fertility reduction (from 6.5 per woman in 1994 to less than 4 currently) has directly impacted MMR in the WB and GS. It could be argued that achieving further reduction requires transformational changes in the services as the already tried improvements strategies reached its maximum capacity/threshold, it can't produce more (marginal effect), and therefore it is time now to try different intervention modalities. More worryingly, the health care system is not financially sustainable, rather it is donor's dependent which may jeopardize all the achievements made recently including the reduction in MMR. A closer look to the MMR data in Palestine shows that there is a fluctuation in the MMR in the past 12 years. This fluctuation may reflect common cause variations which indicates inherent gaps in the system, lack of standardization, system's fragility and lack of institutionalization of improvement strategies with high possibility for easy relapse and drawbacks especially during crises. For instance, the 51 days of hostilities on the GS in 2014 led to an increase in the MMR (20 women died during the war) due to disturbed capacity and deterioration of quality of care during the war (UNFPA, WHO MoH, 2014). Also, with Covid-19, maternal deaths dramatically increased in both the WB and the GS, indicating system fragility and lack of resilience at the system level.

Having said that, it could be claimed that, officially reported figures about MMR are possibly biased, as these figures are based on recording cases of maternal deaths occurring at hospitals and therefore, under-reporting can't be excluded. Possibly, the increase in certain years is due to the improvement in the reporting of cases, not necessarily an actual increase in maternal deaths; the same applies to the reduction which might reflect improvement in Reproductive Health (RH) services; but still under reporting and misclassification can't be excluded.

Reviews of maternal death certificates (MoH, 2014) indicated that the underlying cause of maternal death was inaccurate in 40.7% of death certificates, while pregnancy status was not clarified in 44.4% of the certificates belonging to deceased women. The most frequently reported leading causes of maternal deaths in Palestine include hemorrhage, hypertension, embolism, sepsis and death of associated diseases especially cardiac diseases, obstructed labor and unsafe termination of pregnancy (MoH, 2022). The highest maternal mortality was observed with increased age of mothers (above 30 years), during labor or the postpartum period, and when caesarean section was the mode of delivery. In general, 80% of deaths occur at hospitals, the rest died in their way to hospital or at home. Maternal deaths occurred more among multipara, but still prime-para or

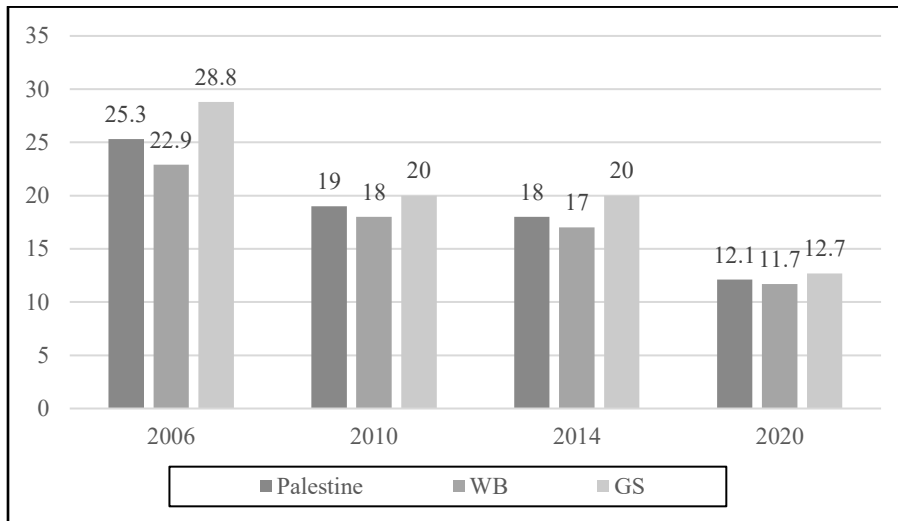
prime-gravida deaths also reported. Unfortunately, the judgement of obstetric experts indicates that almost all deaths are avoidable if adequate measures were taken, except few cases. Around one third of deaths occurred due to direct obstetric causes and the majority due to indirect causes like pulmonary embolism, heart disease, and liver disease that have been provoked by pregnancy or labor. This raises important questions related to the availability of integrated support system at maternities. Review of maternal deaths indicates that there are deficiencies in the clinical management of key pregnancy-related complications, and lack of adequate medical record keeping and supervision, which hinder the provision of standardized services according to safe protocols (MoH, 2014).

Despite the good progress made in the past decade, still safe delivery is not guaranteed, there are many caveats in maternity services which constitute a source of discomfort to women, public and policy makers. Efforts need to focus on improving the quality of services, adherence to appropriate standards and perhaps most importantly strengthening management and governance systems and enhancing supervisory and accountability practices at maternities. Also, service providers recommended securing the essential resources like equipment and drugs. Strengthening the links between PHC and hospitals and promoting Continuum of Care (COC) within an integrated RH frame is essential. It is critically important to promote documentation practices at maternities with accelerating the shift from paper-based documentation to electronic documentation as this is going to give more credible information about maternal mortality and morbidity. To avoid missing any maternal mortality, it is recommended to set a policy to regard any maternal death at the reproductive age as maternal death unless proven otherwise.

4.2 Infant mortality rate

Infant Mortality Rate (IMR) is regarded as an index which reflects the overall performance of the health system. The Palestinian health care system made great progress in reducing IMR which has been reduced from 25.3 in 2006 to 12.1 in 2020, a significant reduction in 15 years (see figure 10). Still, in developed countries it is much less, for example the average OECD figure is 4.3. PCBS 2021 report flags that higher IMRs were noticed in camps (17.5), (12.9) in rural area, 13.3 among non-educated parents, 10.8 among the educated, higher among refugees (14.2) than non-refugees (10.7) and significantly higher among the poorest quintile (14.8) in comparison to the richest one (8.5). Around 77% of them die in the first 28 days after delivery; mostly within the first 6 days of life.

Figure 10: Infant mortality rates per 1000 live births in Palestine



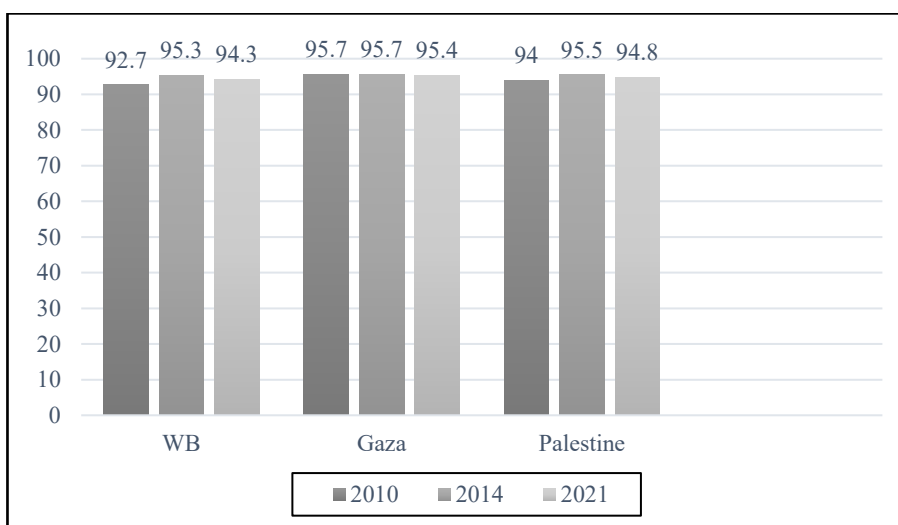
In 2021, the leading causes of death among infant, reported by MoH in the WB were found to be peri-natal diseases (58.3%), congenital malformation (31.8%) and sudden infant death (4.6%). For the same year, MoH in the GS provided a different classification of the leading causes of death among infants with congenital anomalies occupying the first rank in the list (30.9%), followed by respiratory rated conditions (20.6%), prematurity (15.6%), sudden infant death 9.4%, heart diseases 6.8% and malnutrition 4.5%. Obviously, the variations in causes of death among infants are attributed to lack of standardization and inappropriate classification of causes death. For example, prematurity, respiratory conditions-hyaline membrane disease, and perinatal conditions are all interrelated and might mislead the reader. Many of these conditions can be addressed through tackling the neonatal maternal conditions particularly addressing the structural challenges at the community level like consanguinity and also at the supply slide like improving mother child health services.

4.3 Antenatal care

Almost all (98.7%) pregnant women currently receive some sort of antenatal care (ANC), and in average, have more ANC visits than the WHO recommended 4 visits, 94.8%, have four or more visits to any provider and 72.7% have eight or more visits to any provider (PCBS, 2021). In spite of the high level of utilization of ANC in the WB and the GS, the timing of ANC visits and the quality of services is not always appropriate. Results from the PCBS survey (2021) show that women in rural areas have similar access to those in urban to ANC. However, the effect of education is vivid, 94.6% of women with secondary education and

higher made four and more ANC visits compared to 91.3% of women with basic education and less (PCBS, 2021). Also, utilization level was higher among rich families. Generally, the level of ANC utilization is improving and reaching almost universal coverage; however, quality remains an issue.

Figure 11: Percentage distribution of women who made 4 or more ANC visits during the years 2010-2021 as reported by PCBS



ANC in Palestine is mainly provided by medical doctors, nurses and midwives while a minority of women receive care from a traditional birth attendant. There is a significant improvement regarding the timing of seeking ANC after the onset of pregnancy with 87.4% of mothers seeking ANC services within the first trimester. According to PCBS (2021), the proportion of pregnant mothers from the WB (91.6%) who approached ANC services in the first trimester is higher than those from the GS (81.5%). Timely utilization was more prominent among educated, wealthy and residents of rural areas (PCBS, 2021). For instance, the timely utilization in the first trimester reached 95.2% among the richest quintile and 79.5% among the poorest one (PCBS, 2021). In average, the median duration of pregnancy at the first ANC visit is 1 month (ibid). Despite the high coverage, the noticeable quality gaps in ANC include lack of universal preconception care, weak counselling, inadequate genetic counselling, in adequate imaging services (ultrasound) and inadequate access to information. As a proxy indicator to measure the content of ANC, PCBS estimated that around a quarter of mothers didn't receive the following three designated tests combined altogether during pregnancy namely, blood pressure, urine testing and blood testing with more quality gaps in GS in the proportion of women who performed all the three tests in comparison to the WB (98.1% in the GS and 93.9% in the

WB) (PCBS, 2015). Interestingly, in 2021, the proportions of pregnant women for whom these tests were conducted were higher in the GS (95.4%) than in the WB (92.1%) (PCBS, 2021), differences may be attributed to the easier access in GS and the contribution of UNRWA which provides free of charge services in the GS to 66% of the population. In the WB, the contribution of UNRWA is much less and also the Israeli measures such as checkpoints and the wall, impairs access especially in areas C (PCBS, 2021)

High risk pregnancy represents around 25% of the total newly registered pregnant women (MOH, 2021). In the WB, the percentage of referred pregnant women to high-risk pregnancy is 20.4% of total pregnant women registered in different MCH clinics/MoH in the WB, with average number of visits of high risk pregnant was 6 visits. In the GS, there were 32% of all pregnant women registered in MoH/PHC. The average number of visits of high risk pregnant was 6 visits also (MOH, 2021). UNRWA, which uses a different classification system for estimating risks reported that agency-wide, 16.1% of women were classified as high risk (13.3% in the WB and 15.6% in the GS), while 26.9% were considered alert risk cases (UNRWA, 2018) (24% in both the WB and the GS). The differences in methods used for estimating risks is just an example of fragmentation and lack of standardization. More worryingly, there is no available data to demonstrate the effectiveness and the use of the referral system or how it works. There is no available data to demonstrate the effectiveness and the use of the referral system for high-risk pregnancies or how it works. How, and by whom, high risk pregnancies are managed is unclear.

The Palestinian Family Survey (2010) asked women if they had experienced any complications during pregnancy. Around 23% stated suffering from severe headache, 23% suffered from upper abdominal pain, and 17% suffered from urination pains (PCBS, 2013). Results show that more women in the WB suffered complications during their pregnancy more than women in the GS. Published reports indicate that the most commonly reported health problems during pregnancy are; infections (urinary tract infections and reproductive tract infections), anemia and pregnancy induced hypertension. Among Gazans refugee women served by UNRWA, 9.9% suffered from hypertension during pregnancy (4.8% in the WB according to UNRWA annual report 2022), the story of diabetes among pregnant women was different (5.6% in Gaza and 8.6% in GS).

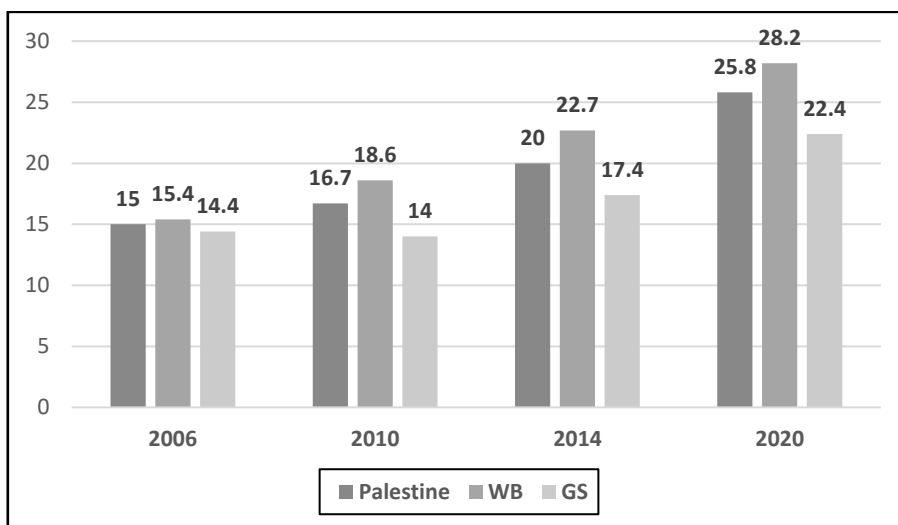
As most reproductive health services, access to ANC is usually challenged by the occupation, conflict, checkpoints which limit the accessibility of pregnant women to ANC services. In GS, the repetitive wars, political division and lack of resources such as drug shortage (40% of MCH drugs are out of stock) constitute a major challenge. While in the WB, 87% of the drugs listed in the EDL were available at the MOH central medical stores (MOH, 2021).

4.4 Natal care

Availability and accessibility of delivery services in Palestine are reasonable, but usually challenged by the occupation and the quality of service. Almost all deliveries are institutionalized and attended by skillful birth attendants. Physicians, nurses and midwives perform almost all deliveries. Unlike most EOCED countries, 22% of women delivered with assistance by a midwife/nurse and the rest were assisted by a physician (PCBS, 2021). Findings of the PCBS in 2020 showed that more than 99% of births occurred in health facilities, only 0.3% of childbirths took place at home. In the GS, women utilize MOH hospitals (78.3%) more than their counterparts in the WB (48.2%)-women in the WB utilized more the private sector (46.3% in the WB versus 15.7% in the GS) and the NGOs (0.5% in WB versus 5.1% in GS). The utilization of delivery services at the governmental sector is inversely related to economic status, education level and urbanizations (PCBS, 2021). Among the poorest on the wealth index quintile, 82% attended public places for their deliveries while only 34% of the richest quintile did that.

With regard to the mode of delivery, in 2010, 17% of births were delivered through caesarean section which has increased to 20% 2014, and to 25.8% 2021; it is more than the WHO recommended standard (15%). The rate of caesarean section (CS) deliveries is higher in the WB (28.2%) than GS (22.4%). The increasing trend in the rate of CS is un-justifiably high due to lack of clear policies and protocols, over-medicalization of the obstetric services; predisposing women to unnecessarily increased morbidity. Also, the widely available In vitro Fertilization (IVF) services increased the demand for CS deliveries.

Figure 12: Proportions of CS deliveries during the years 2006 through 2020



Poor quality of care during delivery with routine unnecessary interventions, overcrowded delivery sites, stressed obstetricians who practice in more than one institution and working women who are anxious to get back home are among the reported shortcomings (UNFPA, 2016). Lack of standardized appropriate practices, low compliance with SRH and neonatal health protocols, and shortage of skilled health providers; weak infrastructure, bad physical conditions of health facilities and shortage of needed equipment, disposables and drugs are commonly reported gaps. Shalaby (2012) assessed the quality of natal services at hospitals in GS and pointed to several gaps including high levels of obstetric interventions such as use of IVs (60% of the observed women), labor was augmented with oxytocin in 62.5% of cases, and with artificial rupture of membranes in 77.5% of cases. During the birth experience, women were not always treated with respect and their privacy was violated by many people most of the times.

Maternal mortality is known to represent the “tip of the iceberg”. Despite the reported reduction in MMR, still complications are frequently occurred during pregnancy, delivery and during the puerperium. There is a consensus that for each case of mortality, 30 cases of morbidity develop (UNFPA, 2016)⁽. There are no precise morbidity estimates for Palestinian women; which raises a big concern about the quality of obstetric care.

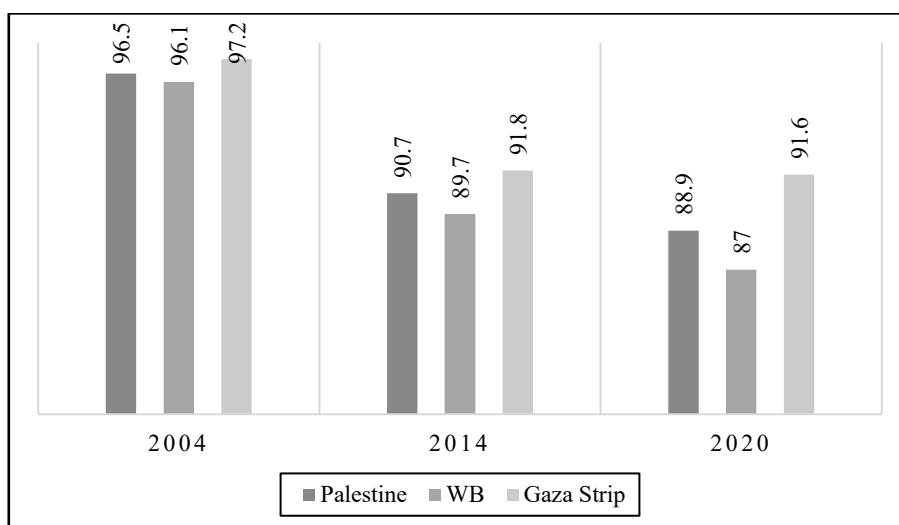
4.5 Post-natal care

According to PCBS, 2021 data, there is a difference in the coverage of post-natal care (PNC) sessions for mothers between the WB (87%) and GS (91.6%). Figures reported in 2014, were slightly higher, the proportions of mothers in Palestine who received postnatal care was 90.7%. Also, the proportion of women who received postnatal was higher in the GS than in the WB (see Figure 13). The latest PCBS (2021) MICS study shows that 88.9% of both the mothers and their newborns receive either a health check following birth or a timely PNC session. However, the level of PNC remains at an unacceptable level in terms of coverage, quality of services and the frequency of visits despite of the progress made over the last 10 years. Post-natal visits are in-frequent in number and mainly linked to the Bacille Calmette-Guérin (BCG) vaccine given to the newly born-usually only one visit is utilized, in case it is conducted. MOH, UNRWA and some NGOs implement various PNC programs but it didn't achieve universal coverage yet and mostly focused on high-risk cases.

The average stay of woman in the hospital after normal birth is usually very limited-around two hours (MoH, 2014). A missed opportunity in this regard, is providing immediate PNC and Family Planning (FP) at hospitals before the discharge of the women from the hospital. Women who stayed less than 6 hours represented 22.9% being significantly higher in the GS 46.6% than in the WB

6.3% (PCBS, 2021). Overall, 42.9% of women who gave birth in a health facility stay 1-2 days in the facility after delivery with 57.1% in the WB to 22.8% in GS (PCBS, 2021). This includes mothers who delivered via cesarean section. However, looking at the wealth of the household, there seems to be an alarmingly high proportion (44.6%) of women from the poorest of households that stay less than 6 hours after delivery. Education, age of mother didn't result in a significant difference. This indicates importance of the cultural factor. Place of living seems to affect the duration of the stay of the mother in the health facility after giving birth as 33.5% women in camps stayed less than 6 hours, compared to 25.5% in Urban areas, and only 5.9% in rural areas (PCBS, 2021). Public sector largely contributes in providing postnatal care in the WB (54%), followed by the private sector (36%). In the GS, UNRWA contributes the most, as 58% of women received services from UNRWA health centers followed by public sector (31%), the contribution of the private sector is marginal (3%).

Figure 13: Proportions of women who received postnatal care session



Strategies should aim to increase the coverage of PNC visits to include every woman passing this experience. Also, the quality of delivered care should be congruent with the protocol. The current practice of doing checking to women during the immunization session is not adequate. Instead, timely assessment and lab investigations should be performed for the mother and her baby such as Hg, sugar. Also, the mother and her baby should be assessed for danger signs. Appropriate PNC could contribute to early discovery and early interventions for complications, disability and psychosocial issues. PNC represents a missed opportunity for early discovery of maternal and neonatal complications such as

hemorrhage, infections, newborn anomalies and promoting women health and including appropriate breast feeding and family planning (to elaborate more on this issue, since it is linked to fertility trends).

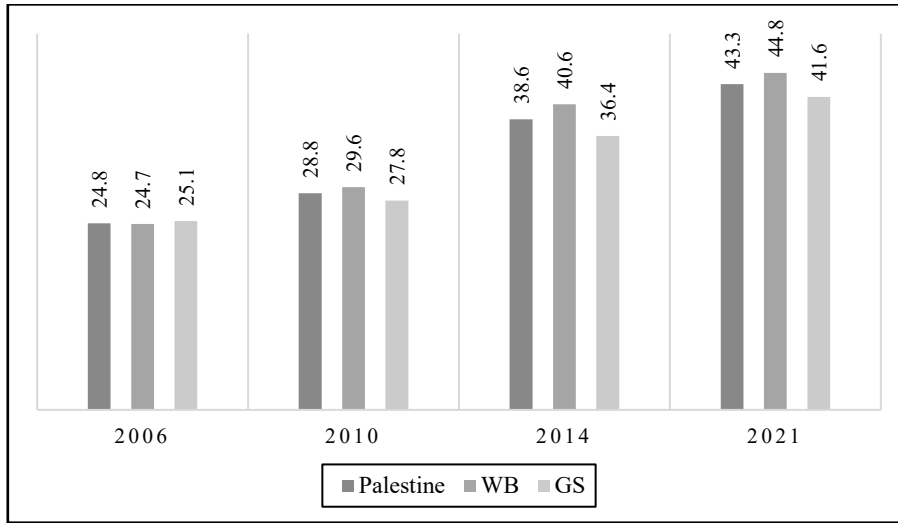
4.6 Breast feeding

Proper feeding of children increases their chances of survival; it can also promote optimal growth and development, in the critical window from birth to 2 years of age. Breast milk is best for the baby and the benefits of breastfeeding extend well beyond basic nutrition. In addition to containing all the vitamins and nutrients the baby needs in the first six months of life, breast milk is packed with disease-fighting substances that protect the baby from illness. UNICEF and WHO recommend that infants be breastfed within one hour of birth, breastfed exclusively for the first six months of life and continue to be breastfed up to 2 years of age and beyond (UNICEF, 2000). Starting at 6 months, breastfeeding should be combined with safe, age- appropriate feeding of solid, semi-solid and soft foods.

The percentage of ever breastfed babies is high, more than 95% in the past 15 years, with being slightly higher in the GS than the WB (97.8%, 94.7% respectively) (PCBS, 2021). This positive achievement comes with a number of substantial caveats; many mothers don't start to breastfeed early enough, do not breastfeed exclusively for the recommended 6 months or stop breastfeeding too soon. There are often pressures to switch to infant formula, which can contribute to growth faltering and micronutrient malnutrition and can be unsafe if hygienic conditions, including safe drinking water are not readily available especially during conflict episodes. In addition to continued breastfeeding, consumption of appropriate, adequate and safe solid, semi-solid and soft foods from the age of 6 months onwards leads to better health and growth outcomes, with potential to reduce stunting during the first two years of life (UNICEF, 2000).

Overall, 89.9% of infants' age 6-8 months received solid, semi-solid, or soft foods at least once during the previous day of the interview (PCBS, 2021). Although a very important step in management of lactation and establishment of a physical and emotional relationship between the baby and the mother, only around 40% of babies are breastfed for the first time within one hour of birth, and this didn't change in the past decade. PCBS MICS survey shows that 43.3% of children aged less than six months in 2020 are exclusively breastfed, a level considerably lower than the recommended, with some variations between the WB and the GS (44.8% and 41.6%), still a rate that is considerably higher than what was reported in 2006, the rate of exclusive breastfeeding is constantly increasing (PCBS, 2021). No consistent differences were noticed in reference to the gender of the child, wealth index, mother education and so on.

Figure 14: Exclusive Breastfeeding Rates



In 2020 the mean duration of breastfeeding is 13.3 months slightly higher in the GS (14.2 months) than the WB (12.8 months); in 2010 there were no significant differences (median was 14 in Palestine). Male babies were breastfed one month more than females but not necessarily exclusive breastfeeding. Also, mothers from urban areas breastfeed for a longer duration than rural or camps mothers and there is no significant difference between different level of educated mothers on the length of breastfeed duration (13.6 months for not educated and 12.7 months for secondary level and 13.6 for high education). In 2020, the proportion of continuing breastfeeding declines among children aged 20-23 months to 11.3% only which indicates that breastfeeding for two years is not guaranteed. The main reason for stopping breast feeding among children 6-11 is becoming pregnant and for the age group 12-23 believing that the child reached the appropriate age for weaning (PCBS, 2021). Abu Hamad and Samour (2012) found that the mean child age at which weaning occurred in the GS was 13.5 months. The majority had weaned their children abruptly (88.4%); 65.3% using traditional methods for weaning. The most popular traditional methods were putting substances with bad taste especially Aloe Vera on the nipples (39.6%), using of alternatives as pacifiers (14.7%), putting red substances (11.2%) to terrify the child and placing coffee (8.8%) on the nipples (ibid).

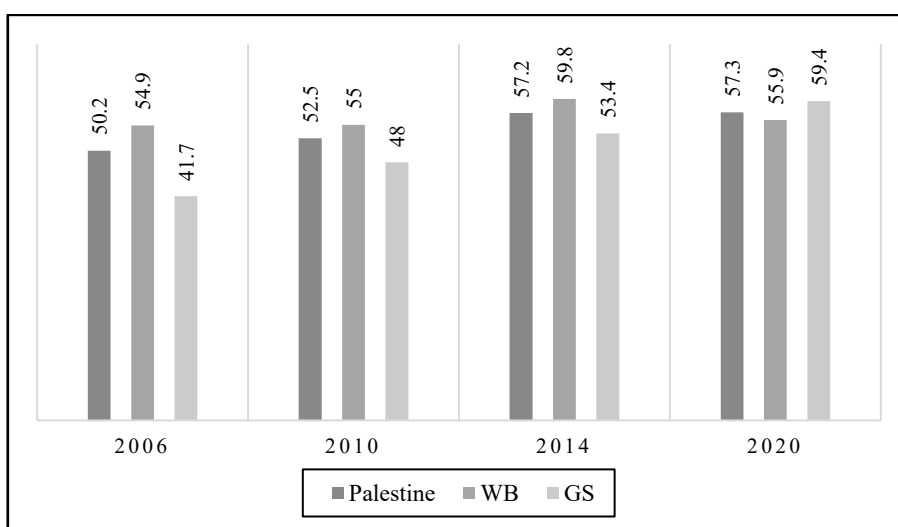
4.7 Family planning

4.8 Contraception use

Contraceptive prevalence rate is used as a proxy indicator that reflects the interplay of many factors at both the demand and supply sides, it is the most widely reported measure of outcome for FP programs at the population level.

Influenced by the described above context, trends of using FP methods in the past years show a slow increase in the contraceptive prevalence rate; 51% in 2000 which increased to 53% in 2010, 57% in 2014; the annual increase rate of contraception use of all methods during the period 2000 through 2014 is at 0.78%, being higher in the GS (1.2% annual increase) than in the WB (0.74%). In 2020, the prevalence of contraception use (modern and traditional) continued to increase slowly and reached 57.3% in 2020, for the first time the prevalence was higher in the GS (59.4%) than in the WB (55.9%). The annual increase rate of contraception use of all methods in the past 15 years (2004 to 2020) for GS is 1.8%, while in the WB the prevalence reported in 2004 is very closed to what is reported in 2020 see graph, possibly the increase in the GS is attributed to the fact that the prevalence was usually lower in the GS (marginal effect). Moreover, the use of traditional methods was higher in the WB than the GS (see Graph 5). These rates of contraceptive use are low according to international rates standards, 75% in Northern America (UNFPA, 2016) and also low in comparison with those of the Middle East and North Africa (MENA) countries (Turkey at 74% and Iran at 82%). Currently married women in camps use contraceptive slightly more than women in urban and rural areas. Worth noting that younger adolescents' women are far less likely to use contraception than older women, only about 21.8% of women age 15-19 married currently use contraception compared to 38.9% of 20-24 year, while contraception among older women ranges from 52% to 70.2% (PCBS, 2021). It could be concluded that FP usually initiated late; first contraceptive use (ever-use) tends to have begun only after the 4th or 5th child and after having a satisfactory number of children especially boys (UNFPA, 2016). Therefore, as the mother age increases, the birth interval increases. Despite the improvement in prevalence of contraception, the rate of changes in birth interval is limited.

Figure 15: Prevalence of contraception use



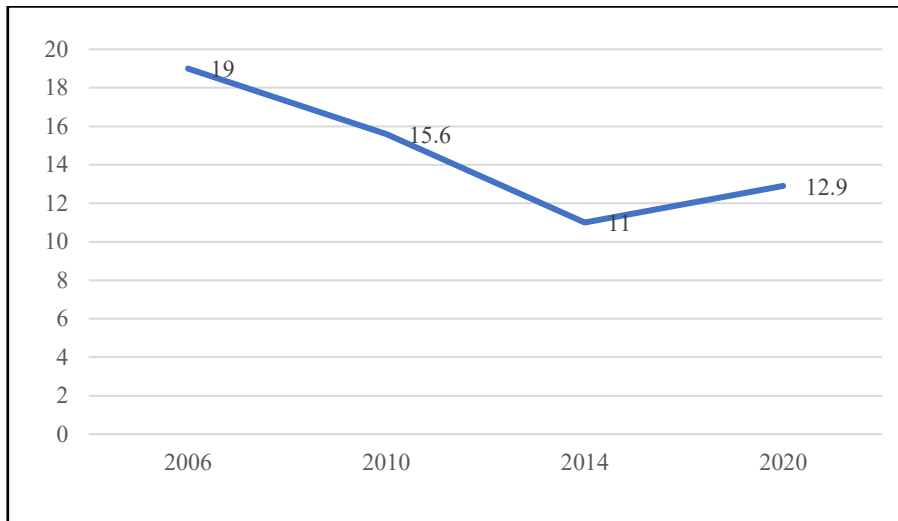
Women's education is not any more associated with higher use of contraception: 62% among those with no education to 56.8% among those with secondary education. Hence, more highly educated females' lower fertility is determined by their marriage patterns: prolonged celibacy and higher age at marriage. More in-depth analysis is needed with controlling other confounders including age, number of live births and age of marriage.

In 2014, 44.1% are using any modern method, and 13% are using traditional methods, the inter-uterine device (IUD) was the mostly commonly used method (26.2%), followed by withdrawal (9.3%) and pills 8%. The proportion of IUD use is higher in the WB (31%) than in the GS (19.1%) while pills are more used in GS (10%) than the WB (6.5%) (PCBS 2015)- these proportions are based on all surveyed married women 15-49, not among family planning users. Figures reported in 2021 didn't differ too much, 42.8% were using modern methods, 14.5% using traditional methods. The preferred modern method was the IUD (26.1%), followed by the pill (6.9%), male condom (5.3%) and 9.8% and 1.8% were using withdrawal and female sterilization as a method of contraception respectively (PCBS, 2021). Data from the PCBS survey in 2010 showed that 11% of those who don't use family planning fear of the side effects of using contraceptives. About 7% reported inconvenience of the available family planning methods, while for 5%, their husbands disagree using family planning. Gaps in family planning include limited access to information on family planning methods and weak counseling which negatively affected utilization.

4.9 Unmet needs

Unmet need is often portrayed as a problem of access, leaving the perception that women do not use contraceptives because they cannot find or afford them. Still, unmet need is at least partially attributed to poor quality of service, weak counselling and negative providers' attitudes towards FP, which combined discourage women from using FP. In 2014, unmet need was 11% (for limiting: 5% and for spacing: 6%) being similar between the WB and the GS. During the period 2006 through 2014, there was a reduction of unmet needs by around 42%, which is regarded as a good achievement that could be attributed to improvement of service delivery and commodity security. Unfortunately, MICS 2020 data suggest that the unmet need for FP is higher than what it was in 2014, and reported at 12.9% in Palestine, 13.6% in the WB and 11.9% in GS (PCBS, 2021). This figure includes both unmet need for spacing births 7.6% (8.1% in the WB and 6.8% in the GS) and for limiting births 5.3% (5.5% in the WB and 5% in GS). The same source indicates that that unmet needs were more prominent among people in rural areas (14.8%), young age (17% among 20-24 years old), and also educated (14.4%) than their counterparts.

Figure 16: Percentage distribution of women by unmet needs of FP



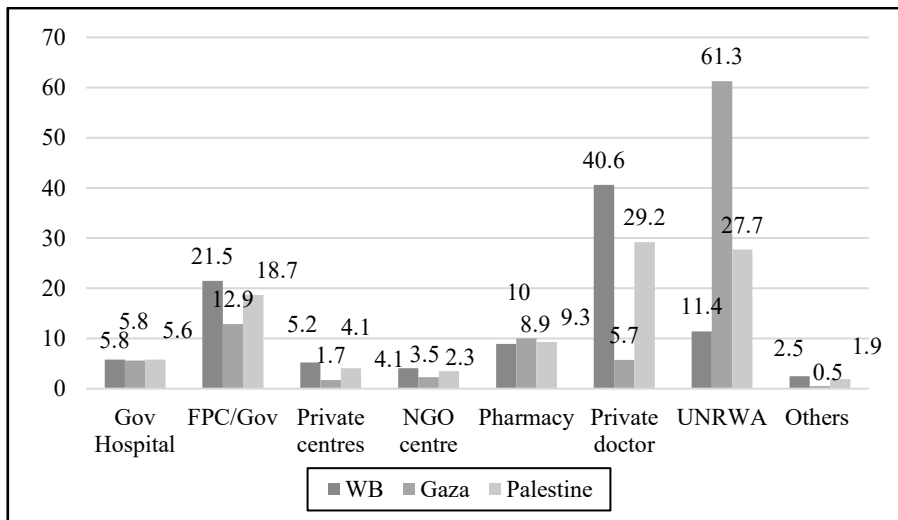
4.10 Landscape of FP services

In 2016, MoH report shows that there are 306 MOH centers providing FP services in the WB (MoH, 2017), however 2021 report indicates that 263 centers provide FP services currently. In the GS, out of the 56 MOH centers, 15-17 only provide FP services. At MOH, the FP services are provided free to all women regardless of having medical insurance or not, however, copayment is still required according to the system. At UNRWA, all the 65 agency centers in the WB and the GS (UNRWA, 2022) provide free FP services (22 in the GS). In addition, a large number of NGOs that provide FP services but not necessary regularly. Most of these NGOs rely on receiving commodities from MOH and provide FP services with minimal fees. Few of these NGOs have procurement plans for FP methods from their core resources.

Despite the large number of public and non-for-profit providers, at the national level, the main service provider for FP services is the private doctors who serve 29% of the users with being much higher in the WB (40.6%) than the GS (5.7%) (Khader and Abu Hamad, 2018). In addition, 13.5% of FP users reported receiving the services from community pharmacies or private institutions. This makes the total contribution of the private sector in Palestine to the FP up to 42.6% (ibid). Indeed, this is much worrying and raises equity issues about the ability of poor families to seek the services at the quite expensive private sector. Moreover, buy FP commodities from community pharmacies without appropriate counseling or appropriate medical checkup might be risky. Seeking private sector

could be attributed to better confidentiality, trust, respect and privacy at these private centers. Although the private sector is the main service provider for FP in Palestine, it is usually not targeted by programs aiming to improve the quality of FP services such as supervision and training. UNRWA is the second main provider after the private sector (27%) with being the main actor in the GS (61%); much more than in the WB (11.4%), possibly due to the higher proportion of refugees in GS. Despite running the largest number of clinics, the government ranked third as it provides FP services to 18.7% of the users with being higher in the WB (21.5) than the GS (12.9%). The role of NGOs was limited in both the WB and the GS (3.5%) despite the fact that they had received large number of commodities during the period 2008 through 2014. This raises important questions about where the efforts and resources aiming to promote FP services should be directed. It was noticed that the number of methods dispensed to NGOs don't match with the number of beneficiaries they serve.

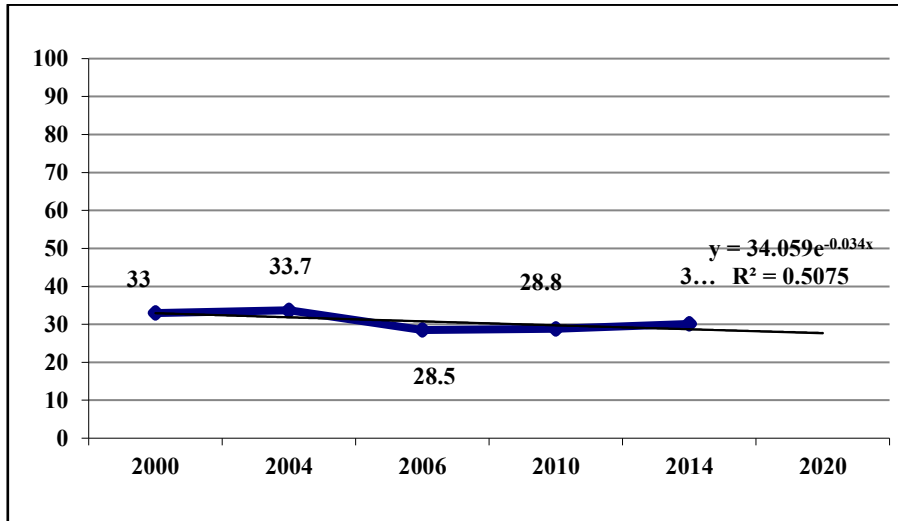
Figure 17: Distribution of FP users by service providers in Palestine in 2016



4.11 Birth interval

Birth interval is a major determinant of fertility and measures paternal investment in a child. Therefore, analyzing birth intervals will provide useful information for guiding the formulation of effective family planning programs. Spouses manage the interval for personal, cultural, psychological and economic reasons. Also, longer birth intervals of over 3-5 years are becoming necessity for parents who plan to send all their children who will be born into higher education. Moreover, adequate birth interval is necessary to ensure good health for mothers and their under-five children.

Figure 18: Birth interval by month per year



Average birth interval in 2000 was 33 months longer in the WB (34.1) than the GS (31.2) which dropped to 28.5 months (29.3 in the WB and 17.2 in the GS) in 2006. This large drop could be the result of the big shift in the intervals trends among women by age. Birth intervals of the WB women are longer than those of the GS. A slight change occurred between 2010 (28.8) and 2014 (30.1) in both the WB and the GS (PCBS, 2013; 2015). Birth intervals increased with the increase of a woman’s age, which shows that women did not have a clear understanding of the birth interval and its importance to mother’s and baby’s health especially in the first age groups. Mothers tend to have the number of children they prefer and to have them all within a limited period of time. They remain much lower than the internationally recommended period (3-5 years). Differences between the WB and the GS could be attributed to cultural factors and the higher utilization of family planning in the WB than the GS. Also, possibly socioeconomic and political factors might play a role. Differences related to place of living were minimal which could be attributed to the strong deeply rooted beliefs about fertility.

4.12 Fertility management

Worldwide, 8% to 12% of couples, experience fertility problems. However, there are controversies about the actual prevalence of infertility in Palestine. Some studies suggest that 7–8% of Palestinian couples have difficulty conceiving (Abu Hamad, et al 2019). Half of the causes of infertility are attributable to women related factors and the other half to men. Infertility and its therapies are usually associated with psychological, physical, social and economic challenges not only

for the sub-fertile couples themselves but also for their extended families. The Palestinian culture highly values having children, and some regard having male children as economic and social investments, as children provide social security in old age, making infertility a serious long-term issue related to the care of elderly family members. Today, IVF is an important method for treatment of infertility; it constitutes a treatment of choice for complicated fertility disorders.

Despite the fact that the history of IVF in Palestine goes back to early 1990s, it has not been adequately investigated. The number of IVF centers in Palestine has grown significantly in the past 20 years and the number of beneficiaries benefited from these centers has correspondingly significantly increased, but there is little knowledge about the quality and the outcomes of the provided IVF services. Although it is part of the SRHR package of services, sub-fertile couples are usually not served by the public services and most of them seek expensive poorly regulated infertility treatment at private centers. The latest available data shows that the number of licensed IVF centers in Palestine is 20; 11 in the WB and 9 in the GS (Abu Hamad, 2021). The high number of IVF centers in Palestine doesn't guarantee that all those in need for the IVF services receive them. In the GS the coverage of IVF among those who need it is around 45%. Physical access is not an issue, as all people could access and benefit from IVF services, but the main challenge is affordability and high costs. People who should cover the costs of IVF services from their own pockets may face challenges in accessing the IVF services. In the absence of formal support through an equitable health insurance scheme, benevolent/religious associations and political parties seasonally provide financial assistance for sub-fertile couples. A recent study conducted in Gaza (Abu Hamad 2021) reported that couples start seeking infertility management early, with 40% doing that within less than 1 year of marriage. On average, sub-fertile couples, approach 5 doctors for infertility management and try two IVF centers (ibid). strangely, 56.9% of the respondents in the later study confirmed visiting a traditional healer. The vast majority of sub-fertile couples reported exposure to social pressure (89.4%), especially by in-laws to conceive which increased their stress. In addition, they faced financial difficulties (91.6%), discrimination (76.6%) especially by in-laws, psychosocial stress (53.1%) and complained from the side effects of hormonal therapy (20.6%) (ibid).

4.13 Abortion and STIs

Little is known about abortion which is an important component of SRHR; there is no available credible data on unsafe abortion or cases that has been prosecuted as a result. Some women put their lives at risk by trying to terminate their unwanted pregnancies by using herbs, violent exercises and other risky methods. However, measuring the level of unsafe abortion in the GS where pertinent laws are highly restrictive remains difficult. Procedures are often carried out outside

the formal health system and are not reflected in health records. A recent study conducted in Palestine (Shahawy and Diamond, 2018) showed that the main themes arising from the interviews were; the centrality of religion in affecting women's choices and views on abortion; the importance of community norms in regulating perspectives on elective abortion. Médecins du Monde (MDM) France assessment in the middle area of GS in 2013 showed that many women faced with an unintended (unwanted or mistimed) pregnancy, and some of them had resorted to unsafe abortions exposing their health at risk such as inserting traditional concoction into the uterus, application of external force (Jar of gas on lower abdomen) or by using drugs as Misoprostol (Cytotec).

As discussed earlier in the section about CD, the prevalence of Human immunodeficiency Virus (HIV) in Palestine is low. Even though the overall prevalence of HIV in Palestine remains low, low levels of awareness, social stigma, comprehensive and age-appropriate education on SRHR and limited access to protective measures would increase vulnerability and risk in Palestine (UNFPA, 2016). UNFPA (2018) reported that 12% of the university students or any of their friends ever suffered or are still suffering from STIs particularly Hepatitis B, Candida and gonorrhea (UNFPA, 2017). The protective role of condoms in HIV prevention was not known by an overwhelming majority (64.4% for all surveyed), with youth ages 15-19 far less aware (58%) than their older peers aged 20-24 (68.1%) and 25-29 (70%) (Miftah, 2015). UNFPA reported that 25% of older (19-24) unmarried male youth in the WB and 22% of younger (17-18) male youth report having had any sexual experiences, with generally similar rates for females. Rates for sexual intercourse remain lower (9.5% of older unmarried males and 7% of females) (UNFPA, 2017).

4.14 Violence and human rights

All forms of violence including Gender based Violence (GBV) are widespread in Palestine, both within public and private spheres. The 2019 violence survey conducted by the PCBS showed that that violence and abuse are widely practiced by husbands against women, as 59.3% of the Palestinian married women (15-64 years old) had experienced violence in the past year, 52.3% in the WB and 70.4% in the GS. It seems the level of GBV is increasing especially in the GS, as it was 51% in 2011. Among women exposed to violence, 57% experienced psychologically violence (50% in the WB and 68% in the GS), 18.5% experienced physical violence (12.9% in the WB and 27.5% in the GS) and 9.4% experienced sexual violence (8.1% in the WB and 11.3% in the GS). For the same category of married women, 7.6% exposed to telecommunication related violence and 9.6% exposed to cyber violence, with the later electronic violence being practiced more in the WB than the GS. A culture of silence prevails, for instance, of those exposed to violence, 60% preferred to remain silent, those who

headed to a women institution or center soliciting advice did not exceed 7% of the victims indicating strong gendered cultural norms and also lack of proactive services. Violence against Women (VAW) in Palestine at the Household level is a social taboo, regarded as a domestic issue that needs to be handled inside the household. What lies behind this 'culture of silence' includes patriarchal and masculinist values and socio-cultural norms that are built upon them. Although significant achievements in addressing violence were realized in Palestine during the last decade with normative frameworks comprised of legislation, policies and systems addressing women's children and youth protection. Nevertheless, their endorsement and implementation are partially or entirely lacking. An inter-sectorial referral system exists, but government engagement remains insufficient and inconsistent, especially in the health sector.

When asked to describe their husbands, more than half (56.4%) of married women aged 15-64 described their husbands (frequently/moderately) as jealous and does not want them to talk with other men (50.4% in the WB and 66% in the GS), urge her/them to tell him/them about whom they are with and where they are always (33.7% in Palestine, 28.5% in the WB and 42% in the GS) and 22% described their husbands as frequently/moderately prevent them from traveling abroad.

Another form of violence women are exposed to is politically related violence. According to the United Nations Security Council Resolution 1325, women and girls are to be protected from all forms of violence during conflict. However, Palestinian women still endure violence as an effect of the ongoing Israeli occupation, which undermines women's rights and security through restrictions on freedoms and access to essential services, as well as Palestinian women experiencing verbal and psychological abuse at Israeli checkpoints and by Israeli settlers. Currently, the level of violence practiced by the Israeli soldiers is significantly increasing. In GS, during the 51 days aggression, 260 women were killed and 2,088 were injured (Miftah et al., 2015). In 2011, a PCBS violence survey indicated that more than 90% of households in Palestine reported ever being directly exposed to political violence from the Israeli occupation and two thirds reported of households were exposed to economic violence (PCBS, 2012). In 2014, during the acute stage of Israeli military operations, 28% of the population were internally displaced, staying in UNRWA schools designated as emergency shelters (Samuels et al., 2017). At these centers, girls, in particular, were exposed to different kinds of violence, in addition to overcrowding, lack of privacy, inadequate sanitation and hygiene, insufficient access to water and lack of electricity, as well as further bombardments by Israel.

There is no data specifically about adolescents' experiences, but the PCBS MICS study (2015) reveals that Palestinian parents almost universally use corporal

punishment against their children, less than 10% use non-violent disciplining practices. Although boys more commonly experience physical abuse, girls either experience or witness physical and psychological aggression that creates expectations about their own prospects as adult women. The use of corporal discipline was more common among the poorest quintile, camp residents, parents with lower education and male respondents (PCBS, 2015). PCBS violence survey (2019) suggests that among children 1-11 years old, 77.7% were exposed to at least one type of violence by one of the parents or by both during the past 12 months (74.3% in the WB and 82.5% in the GS), with girls are slightly less exposed (76%) than boys (79.4%). The majority were exposed to both psychological (75.3%) and physical (64.9%) violence. Moreover, 42.9% of this age category exposed to violence by others, non-household members (38.8% in the WB and 48.6% in GS).

As they become older, adolescents' exposure to violence slightly decreases, though still more two thirds (70.9%) of adolescents aged 12–17 had experienced violence from caregivers in the past year (PCBS, 2019) (63.3% in the WB and 81.8% in GS). Psychological violence (in Palestine 70.6, 63.2% in the WB and 81.3% in the GS) were more reported than physical one (in Palestine 34.4%, 23.9% in the WB and 49.6% in the GS). At this age, in general, females (73.2%) exposed more to violence than boys (68.8%). Other non-household members also practice violence against adolescents as reported by 41.7% of adolescents (35.5% in the WB and 50.7% in the GS), with boys (52.5%) are more exposed than girls (30.4%). The most cited perpetrators by adolescents were school teachers and peer at school, in the street and also peers and older people in their neighborhoods.

4.15 Child marriage

Child marriage – a formal or informal union between two children under 18 or one child under 18 and an adult – is ‘a harmful practice that violates human rights’ (United Nations Human Rights Council, 2015). SDGs aim to eliminate this harmful practice by 2030. Girls who married as children are very likely to be ‘left behind’ as they lack the choices and opportunities to participate in and benefit from development progress (ibid.). Despite being prohibited by international law, child marriage continues to rob hundreds of the Palestinian girls of their childhood (PCBS; 2018). In Palestine, the legal framework for child marriage used to be complex and sometimes contradictory. Centuries of occupation have created a legal framework that comprises a patchwork of laws originating from several outdated legal systems. Until recently, the legal age of marriage was open to interpretation by the judicial system, which permitted girls over the age of 16 and a half in Palestine to marry (UNFPA, 2016). The president of Palestine signed a declare (in 2019) that states that the legal age of

marriage is 18, but still exceptions are allowed in certain situations. Although marriage registration is mandatory in Palestine, failure to register a marriage does not invalidate it (ibid.).

Although child marriage is a crime under international law, the practice is widely socially accepted in many Arab countries, including Palestine. The prevalence of child marriage among women currently aged 20–24 years in the MENA region is estimated at 17% (ibid.). Although there has been substantial progress over the past 25 years in reducing the prevalence of child marriage in the MENA region – dropping from one in three total marriages involving a child to just one in five – progress has slowed over the past decade. The region is not currently on track to meet the SDG target of eliminating this harmful practice by 2030 (UNICEF, 2018). Stalled progress (or even reversal of gains) on child marriage in some countries may be attributable to conflicts in Iraq, Libya, Syria and Yemen. There is evidence that child marriage is becoming more common in some conflict-affected areas, especially Syria and Yemen, as families struggle to balance economic security and girls’ safety in contexts where rape, abduction and forced ‘marriage’ are used as weapons of war (Women’s Refugee Commission (WRC), 2016).

Although Palestine has committed to eliminating child and forced marriage by 2030, it is still widely practiced, with at least 28% of married women (aged 15–45) wed as children (PCBS, 2015), although this figure is down from 38% in 2010, and a 50% decline compared to 2004. The most recent PCBS survey indicates that 17% of women aged 20–24 years married before age 18 (PCBS, 2020). Palestinian governmental bodies and UN agencies have failed to agree on priorities and steps for addressing child marriage (UNFPA, 2016). Palestine’s personal status code is not only outdated, it is at odds with the government’s new commitments to end child marriage (ibid.). Nevertheless, the legal age of marriage has been changed recently as discussed earlier.

The literature suggests that many factors interact to place a child at risk of marriage, including poverty, fear of exposure to sexual violence, the need to protect family honor, and the desire for stability during a crisis (Presler-Marshall et al., 2020; Elarab and Sagbakken, 2019; WRC, 2016). Poverty is one of the main drivers of child marriage in the MENA region (Presler-Marshall et al., 2020), as parents consider daughters an economic burden and believe they will be more financially secure once their daughters are married off and no longer their responsibility. Child marriage tends to increase in emergency/conflict settings due to displacement, instability and poverty (ibid.). In conflict-affected contexts, weakened institutions and financial hardship leave adolescent girls vulnerable to abuse, exploitation and violence (WRC, 2016). Poor families that lose jobs or land during a crisis can see child marriage as a way out of poverty.

Child marriage is also driven by social norms. Exacerbated by the ongoing conflict in the region, studies show that conservative social norms create additional stressors for girls, including child marriage, (Presler-Marshall et al., 2020; Samuels et al., 2017). Religious affiliation, commitment and beliefs also influence norms and, subsequently, timing of marriage (UNFPA, 2016); families with stronger religiosity are more likely to marry daughters earlier, especially as sex and childbearing outside of marriage are strictly proscribed by Arab culture. Other reported drivers of child marriage include girls' low educational attainment, a hostile school environment, gender inequality, limited voice and choice for girls, and a weak legal and policy framework (UNICEF, 2018).

Child marriage can have devastating effects: it cuts short a girl's education, compromises her bodily integrity (including her SRHR), limits future employment and earnings, and perpetuates poverty (Abu Hamad, et al, 2021; Bukman, 2018). The literature shows that child brides are excluded from development priorities, particularly health, education, economic growth, and voice and agency (Elarab and Sagbakken, 2019). In the MENA region, new brides are expected to demonstrate their fertility soon after marriage by producing a male heir (UNFPA, 2016). According to the WHO (2014), 16 million adolescent girls give birth every year, and complications during pregnancy and childbirth are a major cause of death for girls aged 15–19 years. The prevalence of stillbirths and newborn deaths is 50% higher among young mothers (below 20 years) (ibid.). Married girls are exposed to the risks of teen pregnancy, childbearing and motherhood before they are physically and psychologically ready (ibid.), so can experience prolonged/obstructed labor.

Even though some parents believe that marrying their daughter early will protect the girl from sexual violence, the reverse is often true. Girls who marry before the age of 18 are more likely to experience violence, especially when the spousal age gap is large (Clark et al., 2017; Al-Modallal, 2012). Another study found that girls who were married before 18 were twice as likely to report domestic violence and also showed signs of severe depression (Gausman et al., 2020). In the GS, 63% of early-married girls were exposed to at least one type of violence, compared with 51% of older women (Abu Hamad, et al, 2021).

Married girls are also exposed to violence in their community as they may become separated from their older husband or even become widowed (Braun-Lewensohn and Al-Sayed, 2018). They are also frequently exposed to divorce when the marriage is informal ('Nikah Urfi' – a marriage conducted by a Muslim cleric in the presence of two witnesses, which is not officially registered). Girls who are married in this way can be abandoned or divorced, leaving them with little protection (Karasapan and Shah, 2019).

4.16 Youth and adolescent health

PCBS 2016 suggests that among youth (ages 15-29), 67.5% have not been married before, 28% are married, 3.9% engaged and 0.6% widowed, divorced or separated. Despite the high youth literacy rate, early marriage and high fertility rates are still common despite being gradually decreasing. According to the PCBS' youth survey, 84.6% of young women and 90% of young men aged 15-29 believed themselves to be in either excellent or very good health; the remainder judged their health status as average or poor (PCBS, 2016).

The main health-related challenges cited by youth were smoking, addiction and unhealthy behaviors (males 51.1%; females 49.0%) and psychological problems (male 32.7%; females 21.6% with being significantly higher in the GS) and chronic diseases (12.9% in the WB and 4.9% in the GS). Taking medicine without a prescription was reported by 18.6% of young women in Palestine and 13.5% of young men (PCBS, 2016) with higher rates in the GS than the WB. Indeed, studies show that the magnitude of nutritional problems among young people is much greater, 51% of female university students in Gaza are overweight or obese (Hamad 2017). Late in 2020, in the pretext of Covid-19, more than 40% of adolescents in the GS reported having been hungry in the past four weeks at least once (Abu Hamad, et al 2021). Around half (52,2%) of young people regularly (often and always) are having their breakfast daily (PCBS, 2016). Around a quarter (26.9%) of female youth and 10.7% of male youth reported a desire to reduce their weight due to perceptions that their weight is not what they prefer (ibid).

In 2016, nearly a quarter (23.5%) of youth smoked, 29.5% in the WB and 14.0 % in the GS. Gender variances were high, with 40.9% of males smoking compared to 5.4% of females – likely for socioeconomic and cultural reasons (PCBS, 2016). Older youth tend to report smoke more than younger ones (10% among 15-17 and 29.4% among 23-29 from both sexes). Increasingly, youth are exposed to drug abuse, especially hallucinogens, narcotics like cocaine and heroin, sedatives, and marijuana – especially in East Jerusalem (one-third of the estimated 80,000 substances users), particularly among youth under age 22 (UNFPA, 2017). In the GS, the use of tramadol is widespread. Youth living in Jerusalem are more socioeconomically and politically vulnerable due to unemployment, political violence practiced by Israeli settlers and the Israeli occupation, easier access to the Israeli black market, high levels of frustration, high numbers of dropouts, inappropriate housing conditions, demolition of houses, blockade and isolation and lack of protective polices and measures (Pettit, Presler-Marshall, and Abu Hamad, 2017).

PCBS youth survey (2016) indicates that a quarter of youth (24.6%) reported they exercised daily for at least half an hour, with a greater proportion of youth in the GS (32.6%) than in the WB (19.6%) exercising daily, likely due to urbanization and sedentary lifestyles. Gender variance was high, with 32% of males exercising compared to 17% of females. Generally, families are reluctant to allow females to participate in sports outside of the house. The same source indicates that nearly three quarters (73.8%) of male and female youth heard about STIs, with no significant gender differences, but regional differences were obvious, 79.3% in the WB and 65.1% in the GS did hear about STIs. Similarly, 87.9% heard about HIV with more youth heard about that in the WB than the GS (90.2% versus 84.4%).

Psychosocial challenges are more acute in the GS, nearly 32% of adolescents in the GS are in need of psychosocial support. Surprisingly alarming, 19% of adolescents in the GS are experiencing moderate-to-severe anxiety (based on Generalized Anxiety Disorder 7 (GAD-7) scale) and 9% of adolescents in the GS scored 10 or higher on the 24-point scale, indicating symptoms of moderate-to-severe depression using Patient Health Questionnaire 8 (PHQ-8) (Abu Hamad, et al 2021). More youth in the GS have reported quarrelling and feuding with other in the past year (20%) than in the WB (15%). PCBS youth survey (2016) suggests that a quarter (25.7%) of young females in the GS and 13.8% in the WB reported exposure to hazing and harassment in the past 12 months. More than one third (37%) of youth in the GS and 15.2% in the WB reported their desire to migrate with being significantly higher among males in the GS (46.7%).

UNFPA supported a recently conducted study in the GS (Al Bayoumi, Diab, and Abu Hamad, 2021) which showed that 46% of adolescent boys and 67% of girls reported being familiar with the term SRHR. Despite its particular importance, prevention of STIs was rarely cited (only by 4% of boys and 3% of girls). The same study shows that 62% of girls reported experiencing anxiety at menarche, 22% reported they had no idea about menstruation; and 19% felt embarrassed; and 43% taught themselves how to clean their bodies during a period. During Covid-19, 35% of girls in the GS who had begun menstruation admitted that they were fearful to ask family members for support with menstrual hygiene management, 56% of girls were too embarrassed to ask for supplies and support from HHs (Abu Hamad, et al 2021). Adolescents' knowledge about FP was significantly lower than adults; only 52% of boys heard of FP methods (Al Bayoumi, Diab, and Abu Hamad, 2021). Even for male related methods like withdrawal and condom, males' knowledge is significantly much less than females. Shockingly, 53% of boys and 23% of girls don't know any FP method at all (ibid). More than two thirds of adolescents, reported that they need to learn more about puberty, STIs, reproductive organs, hormonal changes, relationships, selfcare and GBV (Ibid).

According to the PCBS youth survey (2016), the prevalence of disability among youth in Palestine is 3.6% with being higher among males than females (4.9% versus 2.3% retrospectively). Youth with disabilities face numerous barriers in accessing public services such as education, health and specialized services. Only 6% of persons with disabilities older than 15 years of age are enrolled in education; 38% never ever joined education and 53% are totally illiterate (Abu Hamad, et al, 2019). Youth with disabilities are particularly disadvantaged in terms of participating in university education, joining the labor force, and fulfilling their rights as human beings. Rehabilitation services (particularly sexual rehabilitation) almost do not exist. Palestinian adolescents and youth with disabilities are also often stigmatized, which puts greater pressure upon older young people, especially girls. In some households, disability is regarded as a divine punishment which brings shame on the family and may preclude the marriage of other siblings.

Despite the many challenges faced, nearly 80 % of youth feel they are very happy or somewhat happy, slightly less in the GS than the WB (PCBS, 2016). The reported scores could be attributed to high resiliency levels and coping using spiritual values and ideologies. Also, satisfaction is a subjective feeling and reflects expectations and cultural tendencies. Statistics on happiness could be a reflection of low expectations more than factual satisfaction about life and happiness. Another related factor could be that the respondents don't blame themselves for difficulties they face and instead attribute hardship to the occupation and this gives them a sort of relief, as they are not the cause of these problems or stressors.

At the service provision front, evidence suggests that a range of socio-cultural and structural barriers prevent adolescents in Palestine from accessing quality and appropriate health care. The main challenges are the absence of preventive adolescent health services, limited information on puberty and SRHR and lack of understanding at service providers' side of the needs and perspectives of adolescents and young people (Abu Hamad, Jones, and Gercama, 2021). Rarely, adolescents are proactively targeted through programs tailored to their needs, mostly they are neglected by the health care system.

Box 8: Policy implications for sexual and reproductive health

- The high proportion of women at reproductive age implies that policymakers need to set strategies to ensure effective coverage to appropriate quality SRHR services and information to this very important segment of the community. It is important to recognize that women's health during and beyond the reproductive years is relevant not only to women themselves, but also has an impact on the health and development of next generations. Also, women's health greatly affects all household members.
- It is essential to develop and nationally adopt an integrated and comprehensive SRHR standards, services and information package that should also be available to a beneficiary during his/her visits to the health center. Therefore, the beneficiary would be able to get the full package of services from the same center and the same health care providers which would ensure better follow up and better management. The package of services should include services designated for women and men, adolescent boys and girls.
- Further efforts are needed to reduce infant and maternal mortality and its response system in a sustainable manner. Impacting perinatal health would require involvement in the promotion of safe delivery and appropriate care of the women and her newborn at the time and place of birth. Improvements are needed in the quality of antenatal and care during delivery. Life saving measure, clinical management standards and protocols for antenatal, labor and delivery and infant medical care need to be reinforced, and arrangements should be made to provide training courses in these materials for health care providers followed by appropriate follow up. Also, standards must be operationalized and refresher training courses should be offered periodically to assure good implementation of the protocols.
- There is near universal coverage of most of the elements related to maternity care such as antenatal care, and to less extent post-natal care, all Palestinian women deliver in health facilities, and there has been a noticeable reduction percentage in the fertility rate. Still, gaps in quality of maternity services needs to be addressed especially counselling, continuity of care, and providing holistic care, away from the medically-oriented model for care delivery. To ensure continuity of care, coordination among different providers at the community, primary healthcare, and secondary care level need strengthening.
- Efforts should focus on improving the quality of reproductive health services and addressing gaps especially around the perinatal period when most neonatal and maternal mortalities and morbidities develop. Also, the current shortage in specialized neonatologists, pediatric intensive care specialists and other fine subspecialties require bridging to meet the current and future needs. Delivery and neonatal sites should obtain an adequate number of obstetric beds and incubators, equipped with adequate resources and technologies in order to cope with the projected increased proportion of women at the reproductive age and the expected deliveries.

- Post-natal care is still not adequate, more investments are needed to provide quality postnatal care in term of timing, frequency and the content of care. It is important to visit women at home to ensure that all women received postnatal care after delivery.
- Significant performance gaps exist in the clinical management of maternal and neonatal services, especially for cases with complications such as high-risk pregnancies and if not solved, these will compromise efforts to improve the health and wellbeing of women for years to come.
- Gaps in reproductive health in Palestine include limited awareness about SRHR including sexual education for adolescents and youth, and addressing the root causes of stigma through community mobilization, and inducing change in social norms and changing legal frame to support such services
- The introduction of pre-conception care that is concerned with the health of women and men during their reproductive years and focuses on taking active steps to protect the health of a baby is essential.
- The reduction in the proportion of children below age five opens a horizon for improving the quality of child health services and bridging remaining gaps. For instance, initiatives to reduce deaths from unintentional injuries are vitally important. Also, the increasing trend of disability among children due to congenital diseases, birth injury and hereditary factors requires urgent interventions. Screening programs to discover disability and initiate early intervention programs are vitally crucial.
- Palestine has almost achieved universal immunization coverage – an achievement that should be maintained by deploying the needed resources to vaccinate the growing number of children. Also, child growth monitoring and well-baby services currently represent a missed opportunity to positively impact child health, especially combating malnutrition (under and over) and anemia, a major chronic public health problem. There is a need to establish a national strategy to combat malnutrition and anemia by raising health awareness, combating infections, ensuring food safety and security, increasing food fortification and appropriately monitoring growth.
- The total fertility rate in Palestine is declining, more efforts are needed to invest in women empowerment, tertiary education and employment opportunities. Also, promoting the utilization of FP is a priority.
- Women should be encouraged to have longer intervals between births – at least three to five years. More efforts are needed to promote the use of contraception focusing on both demand and supply. Unmet FP needs include limited access to information, weak counselling, and a shortage of methods that negatively affect utilization. Ensuring availability of quality family planning services with an emphasis on supporting the right of women and men to choose when and what method to use is essential.
- Healthcare providers should regard FP as a part of their essential health services package, not just annexed services requested or supported by donors. Practically, this means that MoH and other providers need to allocate funds to purchase family planning methods and not to rely entirely on donations. At the

community front, socio-cultural barriers restricting access to FP need addressing through awareness and community mobilization. There is a need to set a legal framework to protect and regulate SRHR, including family planning.

- National indicators related to SRHR should be adopted, tracked and urgent responses are taken as a part of larger monitoring and evaluation strategy with clear accountability mechanisms.
- Despite the improvement in the children feeding practices, still a lot of efforts are needed to support exclusive breast feeding for six months, continuation of breastfeeding for two years and the appropriate introduction of complementary and supplementary feeding and counseling practices. Malpractices regarding weaning expose children to risky nutritional and psychosocial consequences, therefore, it is recommended to strengthen counselling and health education.
- Adolescent and youth health is a priority area. It is essentially important to design and implementing age- and gender-appropriate adolescent services and information and promoting preventive services targeted at adolescents. The current package of services provided at health organization is not targeting them. This should also include developing standards and training providers on their use.
- Early marriage in Palestine remains a problem that needs to be addressed. Early childbearing associated with early marriage is a health and human right violation against girls in Palestine. Early childbearing increases risks for both mothers and their newborns. This stems from public health evidence proving the many-fold increase in maternal and infant mortality and morbidity associated with this violation.
- The high enrolment of adolescents in schools provides a ready forum for health promotion activities. Healthy behaviors and practices are examples of issues that can be addressed at school. Schools also represent a missed opportunity for promoting psychosocial status of adolescents through prevention, early discovery, and appropriate intervention. Focusing on school children can reduce increasing trends of violence in the community.
- To eliminate violence in the community it is important to set multisectoral interventions to address its root causes. A multimodal intervention strategy might include, strengthening social protection, meeting HHs basic needs, inducing change in social and legal norms, involving men and older boys in awareness raising programs around positive coping and non-violent masculinity. Also, training to women and children about their rights and encouraging confidential reporting about exposure to violence is essential. It is essential to provide comprehensive support to victims of violence and girls married as children.
- Psychosocial interventions and combating violence in the community require greater consideration. Unless appropriate interventions are implemented, children will grow up with aggressive behaviors and the vicious cycle of violence will continue in the community.

5. Conclusion: Transferring Health from a Demographic Dividend to a Developmental Dividend

The past few years have shown clear progress when it comes to overall health outcomes in Palestine, especially in terms of primary health care and public health, as well as sexual and reproductive health services, and when compared to countries with comparable levels of economic development. Both IMR and MMR are both quite low, and immunization coverage is high with most vaccines covering 95% of the population. Most basic health services available to citizens in most Palestinian governates, and people are overall able to access basic secondary services at hospitals. This indicates that efforts have been placed in favor of enhancing the health sector and its ability to provide quality services to citizens. Despite this, there are a multitude of socioeconomic and environmental factors that have had an ongoing negative effect on health determinants in Palestine. Additionally, there are negative effects to the ongoing effect of the Israeli occupation on Palestinian health in all its components, which weakens the MoH's ability to play a role in immunizing the Palestinian community from infection with many diseases through prevention and only providing treatment. This causes greater crises in the health sector, most importantly, the high cost of treatment.

The health care system currently upholds many gaps in terms of service' accessibility and availability especially for specialized services as well as numbers of specialized practitioners, and hospital beds. If issues in the health sector are left unresolved this poses a major hindrance to the developmental process as well as the resilience of the Palestinian community in face of the occupation. That being said, positive health indicators and recent progress, especially in light of the PA's positive role in the health sector during Covid-19, indicates a positive chance in favor of transforming Palestine's demographic dividend into a positive developmental element rather than a burden.

Lastly, the paper provided detailed recommendations for each specific area of the health sector in Palestine including: recommendation and implications for NCDs and CDs, service provision and health providers in relation to population growth and density, key determinants of health, as well as recommendations related to demographic dynamics changes. When taking into regard PCBS data and projected population growth for 2030, recommendations discuss how essential it is to develop health services that tackle socioeconomic determinants of health and health needs to all Palestinians and marginalized groups in particular, as well as supplying a safety net for vulnerable individuals and groups to ensure a wider coverage for those need. It is also important to ensure the availability of health services to vulnerable groups of the population, such services should also be

tailored to specific services required for vulnerable groups such as Persons with Disabilities (PWDs).

Demography is an essential component that needs to be considered when planning and strategizing for Palestine's future development. According to PCBS projections, the population is expected to have a 20% growth for all age groups. This Population growth implies a growth in the demand portion of the health sector, for services, beds, resources, both human and non-human, and thus development on the supply side is needed to meet those demands. That being said, population growth is not at similar percentages for all age groups, with an expected higher growth from youth and adolescents with people of working age (15-64) making up 61% of the population in 2023. This indicates a need to restructure health needs' provision based on these demographic changes.

Within this line of discussion, it is recommended that health services should be scaled up to serve youth and adolescents and their specified needs as an age and demographic group. This can be done through improving the re-structuring the work of the MoH and UNRWA to better target this group in their service provision programs. Moreover, it is recommended that further re-structuring of financial resources is done to ensure that not only the health sector is able to keep up with the projected population growth in terms of human and non-human resources and the sectors' needs, but also in ensuring an increase in investment in health-promoting policies and programming for youth and adolescents for preventive services, life style modifications, health awareness and diet. That being said, it is also important to target other vulnerable groups such as elders through policies to improve service provision in terms of immunization for CDs.

Given the expected increase for women at reproductive age by 2023, it is recommended that policymakers set strategies to widely coverage and quality SRHR services, as well as raise awareness and knowledge through developing SRHR services, standards, and information packages for women. It is also recommended to improve all health services related to infant and maternal mortality, post and pre-natal care, FP which includes but is not limited to, immunization coverage, awareness raising, promoting the use of contraceptives, adopting national SRHR indicators, enhancing the performance of clinical management of maternal and neonatal services. Recommendations are also given to develop multisectoral interventions to address the root causes of violence against women as well as developing psychosocial interventions and combating said violence.

As it stands, and while taking 2030 population growth into account there is a need for 640 critical care beds, 240 intensive care incubators to keep up with the

population growth with a rate of 1.5 incubators per 1,000 births, and in relation to the expected ongoing political unrest, the need for ICU beds is also expected to increase. In terms of specialized practitioner to meet the needs of the growing Palestinian population in 200, some 510 pediatricians/neonatologists as well as another 510 cardiologists are needed, and in addition to 120 oncology specialists. Not to mention the possible future of ongoing effects of the occupation on mental health that generates the need for 90 psychiatrists and 640 psychiatry beds in 2030 to further improve coping with increased psychological and emotional difficulties. Thus, in order to further support Palestinians in the health sector it is recommended to increase the human and non-human resource density to keep up with the population growth. That being said, a more systematic line of work is needed to ensure constant updates to the databases of human resources in order to identify needs and inform future decision-making, based on a recommended setting of national standards that identifies resource-density based on the population and services.

As the leading provider of health services in Palestine, the MoH must lead the efforts to improve the health sector and its services to ensure its availability to the entire population, especially marginalized and vulnerable groups. As a whole, these efforts and opportunities are essential in order to strengthen health resilience in Palestine and provide ground for of bettering of the health sector and its services to people in Palestine in a way that promotes health for all and leaves no one behind, especially marginalized groups in the Palestinian society.

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