STARVING A GENERATION:



ISRAEL'S FAMINE CAMPAIGN TARGETING PALESTINIAN CHILDREN IN GAZA





June 24, 2025

Acknowledgements

Producing this report would not have been possible without the invaluable work of a number of individuals. Defense for Children International - Palestine's monitoring and documentation team of field researchers, coordinators, and office staff gather information integral to exposing the intentional starvation campaign against Palestinian children in Gaza. For all their efforts, DCIP expresses its deepest appreciation. DCIP would like to extend particular gratitude to the victims and victims' families who willingly shared their testimonies.

Miranda Cleland and Kathryn Ravey, advocacy officers, wrote and edited this report based on evidence collected by DCIP's documentation unit. Malak Saeed, advocacy officer, contributed writing and research. Ayed Abu Eqtaish, accountability program director, edited the report.

The Doctors Against Genocide medical team wrote the section titled "Medical, developmental, and psychological impacts of starvation on children." DCIP is grateful for their contributions to this report.

Defense for Children International – Palestine is an independent, local Palestinian child rights organization dedicated to defending and promoting the rights of children living in the West Bank, including East Jerusalem, and the Gaza Strip. Since 1991, we have investigated, documented and exposed grave human rights violations against children; held Israeli and Palestinian authorities accountable to universal human rights principles; and advocated at the international and national levels to advance access to justice.

Table of contents

Introduction	4
Methodology	
Israel's siege of the Gaza Strip and the starvation of Palestinian children	
Palestinian child fatalities from starvation in north Gaza	11
Legal analysis	15
Medical, developmental, and psychological impacts of starvation on children	18
Conclusions and key findings	21
Recommendations and demands:	22
Reference List	23

Introduction

Palestinian children in Gaza are starving. This declaration has been shared repeatedly, with growing urgency, by Palestinian human rights organizations since the very early days of Israel's campaign of genocide. As of June 2025, the daily intake of food in Gaza has fallen below a survivable level (UN News, 2025). Now, since no one has stopped Israeli forces and authorities from carrying out genocide, Palestinian children and families continue to suffer from starvation as the world watches. At least 58 Palestinian children have died of starvation since the beginning of the most recent blockade on March 2, 2025 according to records from the Ministry of Health.

We must acknowledge this number is a colossal undercount: In fact, we must assume that every child in Gaza is suffering from malnutrition and dehydration as Israel continues to block safe and abundant access to humanitarian aid and basic essentials. Due to the scale of Israeli aerial and ground attacks, repeated forcible displacement orders, and siege, it is impossible to document each case of child starvation. Defense for Children International - Palestine staff have put forth their best efforts to ensure as many children's cases as possible are thoroughly documented, even as field researchers themselves seek safety for their families.

A child does not die of starvation by accident. In fact, it is one of the most preventable deaths on the planet.

Israeli authorities have deliberately weaponized access to food and water as a key tenet of their campaign of genocide against Palestinians in Gaza. Their intent has been clear from the very beginning. On October 9, 2023, Yoav Gallent, former Israeli Minister of Defence, ordered a complete siege on Gaza, saying "I have ordered a complete siege on the Gaza Strip. There will be no electricity, no food, no fuel, everything is closed. We are fighting human animals and we are acting accordingly."

A week later, Itamar Ben Gvir, Israel's Minister of National Security, stated, "the only thing that needs to enter Gaza is hundreds of tons of explosives by the Air Force, and not an ounce of humanitarian aid" (NoCommentTV, 2023). This sentiment was echoed by Revital Gotliv, Member of the Israeli Knesset, who declared that success for Israel would not be possible "without hunger and thirst among the Gazan population" (Shaul, 2023).

For the next 19 months, Israeli decision makers, forces, and government officials ensured that Palestinians' access to food and potable water was withheld. Through the withholding of aid, the deliberate targeting of food sources like bakeries and flour mills, blocking and destroying aid convoys, and destroying agricultural land. Israeli authorities have intentionally engineered the famine and starvation that have impacted every Palestinian in Gaza, especially children.

The first deaths from starvation occurred in north Gaza in early 2024 as Israeli forces closed off the north from the rest of the Strip. Four-year-old Musab Salem Abu Asr died in Kamal Adwan

Hospital, located in Beit Lahia, on February 11, 2024. His mother said, "Because of the famine, Musab became a skeleton." Musab was the first child fatality due to starvation documented by DCIP field researchers.

Musab's death, and the children whose deaths followed soon after, indicates that famine had already taken hold in north Gaza, according to Special Rapporteur on the Right to Food, Michael Fakhri who wrote in his July 2024 report (United Nations, 2024, April 2), "the death of the first child from malnutrition and dehydration is the clearest indication that a community's core structures have been critically attacked, that there is a famine and that the right to food is grossly violated."

The world has watched Palestinian children starve to death in real time, broadcast to every cell phone in the world. World leaders' lack of action, and lack of recognition of Israeli authorities' intent to carry out a genocidal starvation campaign, have directly led to the painful deaths and ongoing suffering of Palestinian children in Gaza.

The morning of this report's publication, two-year-old Hasan Mahmoud Yousef Barbakh died of starvation, one day away from his third birthday. He received treatment in Nasser Hospital beginning in April 2025, but it wasn't enough. "There is a complete lack of baby formula, clean drinking water, therapeutic nutrients, and hospitals capable of treating a malnourished child," Hasan's mother told DCIP.

Hasan's death illustrates the urgency of this report's findings and demands. Using Fakhri's definition of famine, this report asserts that Israeli forces and officials have carried out a starvation campaign in Gaza by design, specifically targeting an entire generation of Palestinian children, with the intent to complete a campaign of genocide. Grounding its analysis in verified first-hand accounts, international human rights and humanitarian law frameworks, and medical research on the lasting impacts of starvation, this report aims to spur world leaders to finally, and decidedly, take every action necessary to save Palestinian children's lives.

Methodology

This report is based on 33 cases collected by DCIP's field researchers in the Gaza Strip between October 7, 2023, and May 21, 2025. In nine of these cases, the child died. These children, all of whom died of malnutrition, ranged between the ages of one week and 10 years old. Of the other 24 cases, documenting children still suffering from the effects of starvation, 14 are under one year of age, five are toddlers, and five are school age. Five of the children are suffering from chronic diseases.

DCIP's field researchers collected affidavits from child victims, their parents or guardians, and eyewitnesses in accordance with UN standards and are trained to ask a series of non-leading questions. In addition to eyewitness and victim statements, DCIP field researchers review medical reports and interview doctors and medical staff, when possible. DCIP field researchers also confirm the child's date of birth by obtaining a copy of their national identification card or birth certificate, when available.

DCIP's field researchers are based throughout the Gaza Strip and their ability to collect evidence greatly varied during the reporting period as Israel's aerial attacks, ground invasion, and siege remain ongoing, with the security situation changing on an hourly basis. The scale of the ongoing genocide makes it impossible for field researchers to document every case of child starvation, and as such, the cases in this report represent only a portion of the horror endured by Palestinian children and families throughout Gaza.

Israel's siege of the Gaza Strip and starvation of Palestinian children

December 28, 2023

Two-month-old Hoor Saber Zuhair Dawas begins receiving treatment after losing 5kg of weight.



January 10, 2024

Two-week-old Saeed Mohammed Hashem Abu Talib begins receiving treatment after losing 4kg of weight.



July 1, 2024

Three-month-old Atef
Ahmed Atef Taieh and
six-month-old Anas
Moamen Ayman Haniya
begin receiving
treatment after losing
2kg and 4kg of weight,
respectively.



August 17, 2024

Six-year-old Rahil Ahmad Ibrahim Abu Hilal begins receiving treatment after losing 4kg of weight.



October 7, 2023

"Gaza started a war with Israel today...When you are at war with another state you don't feed them, you don't provide them with electricity or gas or water or anything else" (Mako, 2023).

Giora Eiland, Former IDF Major General & the former head of Israeli National Security Council & special advisor to Yoav Gallant

From the start of October 2023, Israeli officials imposed a full blockade on Gaza, cutting off food, water, humanitarian supplies, fuel and electricity. While Israel has utilized its complete control over any movement into and within Gaza to enforce several crippling blockades against the Palestinian people since 2007, this blockade was different in its nature and intent: designed to ensure that Palestinians within Gaza did not have enough food to continue surviving.

Israeli political rhetoric and military policy made no distinction between combatants and Palestinian civilians, including children, casting every man, woman, and child as an enemy, and justifying collective punishment on a catastrophic scale. Israeli officials made it clear that no food or aid should be allowed into Gaza, as a form of collective punishment against all Palestinians.

Israeli forces began attacking all forms of life-sustaining resources for Palestinians: bombing bakeries and flour mills, targeting fisheries, destroying agricultural land, cutting electricity to crucial desalination plants that are a vital resource for obtaining potable water, restricting aid from entering Gaza, and targeting aid workers. Not only were the people of Gaza facing deliberate attacks that sought to end their lives and the lives of their entire family line, but the conditions of their survival were being deliberately removed.

Palestinian children bear the brunt of the effects of starvation. The children, highlighted on the left, received or are receiving treatment at the Nutrition Department at Nasser Medical Complex, one of the last remaining functioning hospitals in Gaza. All of these children were forcibly displaced by Israeli forces multiple times, and many of their families are now living in tents.

August 23, 2024

Eight-month-old Odai Mohammed Jamal Abu Shanab begins receiving treatment after losing 3kg of weight.



August 29, 2024

One-year-old Mahmoud Ibrahim Hamdi Shaer begins receiving treatment after losing 2kg of weight.



October 13, 2024

One-year-old Ro'aa Amin Ibrahim Mashi begins receiving treatment after Iosing 4kg of weight.



November 13, 2024

Ten-month-old Saadallah Ismail Fouad Al-Balaawi begins receiving treatment after losing 5kg of weight.



November 19, 2024

Eight-month-old Ibrahim Jihad Shaaban Baraka begins receiving treatment after losing 4kg of weight.



November 25, 2024

Five-month-old Watin Jihad Jamal Zaqout begins receiving treatment after losing 2kg of weight.



In February 2024, Bezalel Smotrich, Israel's Minister of Finance, stated that there was "a consensus inside the Israeli cabinet of the need to prevent the aid from reaching Hamas" and that he would "use [his] authority to make sure this is the case" (Knight, 2024). Two weeks later, on February 29, 2024, a crowd of starving Palestinians gathered around an aid truck to collect flour. Israeli forces fired upon the crowd, killing 112 people and injuring some 760, in what has since become known as the Flour Massacre.

A month later, on April 1, 2024, Israeli airstrikes hit a World Central Kitchen aid convoy, resulting in the deaths of seven humanitarian workers. As a result, major aid organizations halted their activities in Gaza at a time when about half the population was facing extreme hunger. At this point, at least 28 children had already died from starvation, according to the Ministry of Health.

Palestinians in Gaza who have been detained in Israeli prisons, including children, also face a deliberate lack of sufficient food in Israeli prisons. In June of 2024, reports began highlighting testimony of the atrocious conditions of the Israeli prisons and detention facilities, specifically the Sde Teiman military base detention facility, where reports of soldiers torturing, starving, and raping Palestinians continued (United Nations, 2024, August 5; B'Tselem, 2024).

July 2, 2024

"Everything that was published about the deplorable conditions of these vile murderers in prison was true. [...] The conditions of the terrorists in prison were reduced to a minimum: we [...] stopped the terrorists' promenade, dramatically, reduced the terrorists' stay in the showers, [...] stopped the indulgent food menu that was replaced with a minimal menu, and in short - we completely stopped the conditions of the camp" (Thakker, 2024).

Itamar Ben Gvir, Israel's Minister of National Security

Amid continuing bombardment, which continues to destroy the environment and air quality, contributing to the equivalent carbon output as that of ten countries, Palestinian children continue to starve. Most suffer from drastic weight loss, weakened immune systems, recurring intestinal and chest infections, muscle weakness, alongside diarrhea and dehydration. Several of the children also developed meningitis, inflammation of the membranes surrounding the brain and spinal cord. Due to Israel's siege of the Gaza Strip, prices for what little food is available have skyrocketed, and families cannot afford food for their children. In many cases, the family's breadwinner was killed by Israeli forces, further hindering their ability to provide necessities.

December 5, 2024

12-year-old Rahaf Rani Mohammad Ayyad begins receiving treatment.



December 11, 2024

Ten-month-old Ali Abdel Nasser Juma Abu Azra begins receiving treatment.



January 9, 2025

Two-month-old Joan Muhammad Othman Farwana begins receiving treatment after losing 1kg of weight.



January 13, 2025

Four-month-old Nevin Haitham Mohammad Abu Daqqa begins receiving treatment after losing 2kg of weight.



February 8, 2025

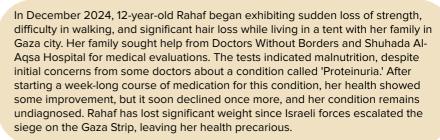
One-year-old Hadeel Akram Mahmoud Abu Hnaideq begins receiving treatment after losing 2kg of weight.



One-year-old Ayham Momen Atef al-Arja begins receiving treatment.

March 4, 2025

One-month-old Mohammad Hasan Samir Abu Sal begins receiving treatment after losing significant weight.



Ten-month-old Ali was born with Sanjad-Sakati syndrome, a genetic condition characterized by low calcium levels that cause seizures. Ali has lost approximately two kilograms of weight and has been receiving treatment for severe acute malnutrition at Nasser Medical Complex since December 2024, though his health is continually declining.

In October 2024, Israel conducted another massive siege on north Gaza, in which thousands of Palestinians were displaced yet again, and the entry of humanitarian aid was once again heavily restricted. These restrictions continued throughout the winter months. With very little food, flooded refugee camps, and low temperatures, many children experienced hypothermia, some perishing.

In March 2025, Israel imposed yet another full humanitarian blockade on Gaza. The blockade was maintained for over 11 weeks, despite repeated warnings by the UN and international aid organizations, highlighting the presence of extreme hunger throughout Gaza. Upon its incredibly minuscule renewal of aid, Israel decided to enforce and manage aid delivery using private military contractors. The U.S.-registered Gaza Humanitarian Foundation (GHF) began operating aid distribution hubs in southern Gaza. These sites are not protected by neutral humanitarian actors but by Israeli forces and armed American private contractors from firms such as Safe Reach Solutions and UG Solutions, founded by former CIA and military personnel. These contractors, many trained for combat, are now deployed in a war zone under the guise of humanitarian relief, yet their presence has not brought safety, but further bloodshed.

One-year-old Ayham was admitted to the Nutrition Department of the Nasser Medical Complex, associated with Doctors Without Borders, on the morning of February 24, 2025. After enduring multiple forced displacements with his family, Ayham's health declined progressively, leading to malnutrition, weakness, intestinal and chest infections, lack of blood, muscle relaxation, and weakened immunity. Ayham has lost one kilogram of weight. He is receiving treatment for severe acute malnutrition in addition to recurrent chest infections, muscle weakness, and frequent diarrhea. Ayham's condition is exacerbated by an allergy to wheat, meaning the specialized food he requires is extremely difficult to acquire due to the Israeli forces' closure of the Gaza Strip.

April 16, 2025

Five-year-old Rital Nader Mahmoud Adini begins receiving treatment.



April 23, 2025

Five-year-old Osama Kamal Abdel-Khaleq al-Raqab begins receiving treatment after losing 5kg of weight.



April 24, 2025

Five-month-old Siwar Saleh Osama Ashour begins receiving treatment after losing 5kg of weight.



May 6, 2025

Two-year-old Mayar Deif Allah Ibrahim Al-Arja begins receiving treatment after losing 2kg of weight.



May 21, 2025

Five-year-old Nour Al-Hoda Abdurraouf Ali Hajjaj begins receiving treatment.



June 24, 2025

Two-year-old Hasan Mahmoud Yousef Barbakh dies from severe malnutrition.



Five-year-old Rital suffers from congenital insensitivity to pain with anhidrosis (CIPA), a genetic condition that is deteriorating her limbs and skin. She is unable to walk and talk. Her health has rapidly declined since Israeli forces stopped allowing food to enter Gaza, and doctors have informed her family there is nothing they can do for her condition in Gaza's hospitals. Rital lives with her family in a displacement camp in Deir Al-Balah, where her health continues to deteriorate.

Since these so-called "secure" hubs opened, hundreds of Palestinians have been shot by Israeli forces while trying to access food. Over 245 people have been killed and more than 2,100 injured near GHF aid sites. Aid is now being distributed at gunpoint, guarded by foreign mercenaries, under the surveillance of a military occupation that has already proven its willingness to starve an entire population.

May 9, 2025

"I call on Prime Minister and my fellow ministers to reverse the disastrous decision to renew aid to Gaza during the next Cabinet meeting; a decision I voted against in the previous session" (Anadolu Agency, 2025).

Itamar Ben Gvir, Israel's Minister of National Security

At a time when every Palestinian child is facing starvation, rather than upholding humanitarian principles of neutrality and impartiality, this new aid regime reinforces apartheid, undermines international law, and deepens the machinery of genocide. Aid is not being delivered to Palestinians, it is being weaponized against them.

Five-year-old Nour suffers from pemphigoid, a rare autoimmune disorder that requires her to receive ongoing intensive medical care and specialized nutrition. The condition causes ulcers, skin lesions, blisters, and severely hinders her ability to walk or talk. Her family has not been able to obtain the specialized food or medicine she needs due to the ongoing genocide, and she is now enduring malnutrition alongside her chronic illness.

The day of this report's publication, DCIP was informed that Hasan, one day away from turning three, had died after the failure of several of his major organs, accompanied by severe malnutrition. On April 23, 2025, Hasan was admitted to the Nasser Medical Complex for malnutrition. This admission followed a notification from Israeli forces compelling residents to evacuate the area, forcing his family to flee and exposing Hasan to multiple displacements over 15 months without basic life necessities. Hasan's malnutrition led to the progressive decline in his health, until he was admitted to a field hospital for severe acute malnutrition. "From the very first week of the siege, [his weight] began to drop daily, and his voice grew weaker. I sensed he was slowly fading away," said his mother.

Palestinian child fatalities from starvation in north Gaza

Young children were the first to die of starvation in Gaza in early 2024, according to documentation collected by DCIP. During this period, Israeli forces had completely closed off north Gaza, refusing to allow any goods, services, or people in or out of north Gaza. Israeli forces would later use this approach to seal off the entire Gaza Strip: first, the closure of the southern Rafah closing in early May 2024, forbidding any Palestinians in Gaza to escape to Egypt, and now, after the collapse of the January 2025 truce agreement, as Israeli authorities refuse to allow humanitarian aid to safely flow to Palestinians in need.

From February 11 to April 3, 2024, DCIP field researchers in north Gaza documented the deaths of eight Palestinian children from starvation at Kamal Adwan Hospital, located in Beit Lahia. The children range in age from one week to 10 years old. The youngest, Abdul-Aziz Abdurrahman Salem, was born in Kamal Adwan Hospital and died seven days later.

"The hospital receives around 70 to 100 children every day suffering from malnutrition," Dr. Hussam Abu Safiya, director of Kamal Adwan Hospital, told DCIP field researchers in early 2024. "There are three levels of child malnutrition: mild, moderate, and severe, and most of the cases admitted to the hospital are of the moderate level, while the severe ones represent five to seven percent of the caseload. This percentage may increase if starvation continues and food supplies are not brought in."

"The spread of hunger in north Gaza and the resulting deaths of children due to malnutrition have become a stark reality. Over 25 children have died at Kamal Adwan Hospital due to hunger, with additional deaths reported in shelter centers and homes. Many were unable to reach the hospital due to the ongoing Israeli siege and aggression," Dr. Abu Safiya added.

On December 27, 2024, Israeli forces carried out a massive raid on Kamal Adwan Hospital after months of direct attacks. Israeli soldiers ordered everyone to leave, demanded that men strip down to their underwear, and completely shut down the hospital. Dr. Abu Safiya was detained by Israeli forces, and remains imprisoned at the time of publication.

Musab Salem Abu Asr, four



At approximately 4:30 a.m. on February 11, 2024, four-year-old Musab Abu Asr died in Kamal Adwan Hospital due to malnutrition. "Because of the famine, Musab became a skeleton," Musab's mother said. "The prices were crazy, and no one could afford to buy anything. Musab was admitted to Al-Ahli Arab Hospital on February 3, before he was transferred to Kamal Adwan Hospital as the ICU was shut down due to power outages. His health deteriorated and he lost weight until he became a skeleton due to the lack of food and medicine. My son Musab was the first child. He was smart and bright in kindergarten. All his teachers praised him. He was sociable and joined his classmates in playing. He loved riding his bike. He loved strawberries and bananas a lot. May God feed him with the birds of Paradise. He was the joy of my heart."

Anwar Mustafa Al-Khudari, three months

At around 3:45 p.m. on February 14, 2024, three-month-old Anwar Al-Khudari died in Kamal Adwan Hospital due to malnutrition. "I was displaced in Al-Shifa Hospital, along with my husband, and my only son, Anwar. There was no formula milk due to the army's siege, and there was no milk in my breasts due to the lack of nutrition and the prevention of the entry of aid. My son cried all night from hunger. His temperature rose and he started having convulsions as a result of that. He passed away four days later," said the mother.



Sahar Tawfiq Al-Zabda, one month

At around 4:50 p.m. on February 28, 2024, one-month-old Sahar Al-Zabda died in Kamal Adwan Hospital due to malnutrition. "Sahar was not breastfed because there was no food or baby formula in all of northern Gaza. She became dehydrated, so I took her to Kamal Adwan Hospital,

and she was admitted to the ICU where she remained on respirators for 10 days until she passed away. I still haven't got her a birth certificate," said her father.

Jude Ahmad Al-Barsh, one week

At around 7:30 a.m. on March 2, 2024, one-week-old Jude Al-Barsh died in Kamal Adwan Hospital due to malnutrition, as her mother was unable to breastfeed her as a result of the mother's malnutrition. Jude was placed in the hospital's nursery for a week in light of a severe shortage of milk and formula. "Jude died of hunger, and I am left with her twin sisters, whom God gave me after 10 years of marriage," said her mother.

Abdul-Aziz Abdurrahman Salem, one week

At around noon on March 2, 2024, one-week-old Abdul-Aziz Salem died in Kamal Adwan Hospital due to cardiac arrest and lack of oxygen. The infant was born at Kamal Adwan Hospital without the help of doctors due to the lack of medical staff, and his mother had only her husband beside her. Abdul-Aziz stayed for a week in the hospital nursery, as his mother's condition was critical due to lack of nutrition during pregnancy and her suffering from jaundice. Abdul-Aziz was the second child of the Salem family, who was displaced more than six times during the mother's pregnancy. "I couldn't breastfeed my son because I had no food and I became sick. The hospital had no oxygen or baby formula. My son died of suffocation and hunger," Abdul-Aziz's mother told the fieldworker.

Mila Saleh Younis Abdulnabi, three



At around 5:10 p.m. on March 2, 2024, three-year-old Mila Abdulnabi died in Kamal Adwan Hospital due to malnutrition. "I am an ICU nurse at Kamal Adwan Hospital," Mila's mother said. "My daughter died in front of my eyes and I could not save her. I left work after her death. I went to work that day and my colleagues closed the door to stop me from coming in. But when I got in, I found my daughter dead and covered in a shroud," said the mother. "When the Israeli forces entered the northern region and deprived us of food, my daughter suffered from a deficiency of potassium and magnesium and remained on respirators from February 29 until the day she died. Mila was very smart and attached to me, as she was my only daughter. Because of her death, I decided to pursue a master's degree in nutrition."

Karam Mohammad Adel Qadada, 10



Karam was trapped for a week along with his family in Al-Shifa Hospital amid a severe shortage of food supplies caused by the Israeli siege on the hospital. During the siege, the child was allowed to evacuate from Al-Shifa Hospital and was transferred to Al-Ahli Arab Hospital. Karam's condition worsened due to the lack of food, medical treatment, and antibiotics at Al-Ahli Arab Hospital. His health deteriorated significantly, leading to severe weight loss. He was then transferred to Kamal Adwan Hospital. A week later, Karam died on March 30, 2024 due to malnutrition and elevated salt levels in the blood.

Nahed Othman Haboush, two months

At around 8:40 a.m. on April 3, 2024, two-month-old Nahed Haboush died in Kamal Adwan Hospital due to malnutrition. "My son was admitted to the hospital twice. The first time was because of severe crying and dehydration, and his condition improved with solutions and treatment. However, his health deteriorated a few days later because of severe crying and dehydration, and he was placed in the ICU where he remained on respirators for three days until he passed away. Nahed was my second son to die of starvation due to lack of breastfeeding because there was no food for the mother or baby formula because of the Israeli siege," said the mother.



Legal analysis

Israel's use of starvation against Palestinians constitutes multiple, overlapping violations of international law and must be recognized as a central tool of a deliberate state policy to collectively punish, persecute, and commit genocide against the Palestinian population. Israel's genocide was put before the International Court of Justice (ICJ) in December 2023 and remains before the Court. Yet, the Court has already recognized the actions of Israel in implementing conditions of starvation and famine within Gaza and ordered provisional measures to be immediately implemented. In January 2024, the Court unanimously decided that Israel must take all necessary and effective measures to ensure the unhindered provision at scale by all concerned of urgently needed basic services and humanitarian assistance, including food and water, to Palestinians throughout Gaza (ICJ, 2024, para. 51). This was reaffirmed in both March and May 2024.

Starvation is expressly prohibited under both international humanitarian law (IHL) and international human rights law (IHRL). As an occupying power, Israel holds binding obligations under the Fourth Geneva Convention (GCIV) to ensure the provision of food, medical supplies, and public health systems to the population under occupation (1949, arts 55 and 56). These are not discretionary obligations but affirmative duties, reflecting the principle of humane treatment central to the law of occupation. The GCIV further mandates that occupying powers must permit and facilitate humanitarian relief when a population is inadequately supplied (1949, art 59). In Gaza, Israel's sustained and comprehensive obstruction of aid, including food convoys, water, fuel, and medical supplies, constitutes a grave breach of the Geneva Conventions (1949, art 147).

Under Article 54 of Additional Protocol I (API) to the Geneva Conventions (API, 1977), the starvation of civilians as a method of warfare is prohibited, including the destruction of objects indispensable to survival such as foodstuffs, agricultural areas, water sources, and medical supplies. This prohibition is considered customary international law and applies regardless of whether a state is party to the protocol. While Israel is not a party to API, the prohibition on the use of starvation as a method of warfare has attained the status of customary international humanitarian law and is therefore binding on all states, including non-signatories. This position is affirmed by the International Committee of the Red Cross in its Study on Customary International Humanitarian Law, Rule 53 (2005), which unequivocally states that "[t]he use of starvation of the civilian population as a method of warfare is prohibited." Customary norms apply equally to all parties in armed conflicts, including occupation contexts, and are enforceable regardless of treaty ratification.

Under international criminal law, the Rome Statute of the International Criminal Court classifies the use of starvation of civilians as a war crime and when implemented in a widespread or systematic manner, such conduct also constitutes a crime against humanity, especially when combined with persecution or extermination (1998, arts 8(2)(b)(xxv) and 7(1)(k)). Crucially, Israel's actions, including the deliberate obstruction of humanitarian aid, indiscriminate siege tactics, and

purposeful destruction of civilian infrastructure, are not incidental but reflect an intentionality to destroy the Palestinian people, a necessary element to prove criminal liability.

Israel is bound by core international human rights treaties, which continue to apply extraterritorially in occupied territory, including ensuring the right to adequate food and the fundamental right to be free from hunger (ICESCR, 1966, art 11). As elaborated in General Comment No. 12 of the Committee on Economic, Social and Cultural Rights (1999), states must respect, protect, and fulfill the right to food, including during armed conflict and occupation. Israel's systematic targeting of Gaza's food systems and its obstruction of agricultural and fishing activities directly contravene these obligations. Similarly, Israel must guarantee the inherent right to life, and the prohibition of torture and cruel, inhuman or degrading treatment (ICCPR 1996, arts 6 and 7). These rights are *non-derogable*, even in times of emergency or armed conflict. The deliberate imposition of conditions leading to starvation constitutes a violation of IHRL, particularly when used as a coercive tool of domination. The Convention Against Torture likewise prohibits the intentional infliction of severe physical or mental suffering for purposes of punishment or coercion, acts that are clearly implicated in starvation policies targeting civilians (1984).

Children are afforded additional protections under the Convention on the Rights of the Child, which guarantees their right to life, survival, and development, and affirms their right to the highest attainable standard of health and access to adequate nutrition (1989, arts 6 and 24). By dismantling Palestinian food systems, blocking humanitarian access, and rendering survival impossible, Israel engages in what the UN Special Rapporteur on the Right to Food has called an "extermination policy" consistent with the elements of genocide under Article II of the Genocide Convention.

FIAN International's 2025 report, *Beyond Number Rethinking Food Security Monitoring In Conflict And Crisis* highlights that famine and starvation have devastating and often irreversible effects on children, causing intergenerational trauma, chronic malnutrition, and developmental damage. Israel's denial of adequate food and healthcare access for children, particularly in Gaza, represents a gross violation of these obligations. The report emphasizes that starvation is not a natural consequence of war, but a political act, a method of control and oppression rooted in structural violence and longstanding patterns of marginalization.

Importantly, the prohibition on starvation, torture, and collective punishment are all peremptory norms (jus cogens), meaning that no derogation is permitted. They trigger universal jurisdiction, obligating third states to investigate and prosecute perpetrators, regardless of where the crimes were committed. The UN Security Council's Resolution 2417 (2018) also recognizes the use of starvation as a weapon of war as a violation of international law and calls on all parties to armed conflict to respect their obligations under IHL.

The Convention on the Prevention and Punishment of the Crime of Genocide (Genocide Convention, 1948) both defines and confirms that the act of genocide is a crime under international law, and obligates its signatories to not commit, prevent from occurring, and punish

genocide when committed. Ratified in 1950 by the state of Israel, the creation of this Convention emerged in the aftermath of the Holocaust, where members of the UN agreed that such genocidal barbarity must never happen again. Despite this, Israel's blatant actions and intention to destroy a part of the Palestinian population, including destroying the conditions required for the sustainment of life in Gaza, amount to the crime of genocide. Israel has blatantly and openly violated the Genocide Convention and stands before the ICJ for this crime, while the states that have allowed and contributed to the maintenance of Israel's impunity have also violated their obligations under the convention.

Israel's starvation policies must therefore be understood not merely as war crimes or isolated humanitarian failures, but as grave and systemic violations of international law, encompassing human rights violations, war crimes, crimes against humanity, and acts of genocide. The legal framework obliges the international community to take immediate action: to halt the starvation of Palestinians, to prosecute those responsible, and to ensure reparations for victims.

Medical, developmental, and psychological impacts of starvation on children

Starvation is defined medically as a severe form of under-nutrition resulting from prolonged inadequate intake of calories and essential nutrients from food. It leads to significant weight loss, wasting (low weight-for-height), and stunting (low height-for-age), and can result in multiple serious medical complications that can be fatal.

Clinically, starvation is diagnosed by assessing parameters such as mid-upper arm circumference (MUAC), weight-for-age, weight-for-length, and body mass index (Hulst et al., 2022; Mehta et al., 2013).

Acute starvation in children triggers rapid metabolic changes, beginning with glycogen storage depletion followed by increased fat breakdown and ketone production to fuel the brain ((Dipasquale et al., 2020). This leads to starvation ketosis, which may cause vomiting, lethargy, hypoglycemia, and seizures, particularly in children under 10, due to their limited energy reserves and higher metabolic demands and especially if they have underlying medical conditions.

After these rapid metabolic changes, protein breakdown follows, resulting in muscle loss, weakened immunity, and greater infection risk. Multisystem complications can arise quickly, including cardiovascular instability, electrolyte imbalances, and potential organ failure. The gut is also impacted, with reduced nutrient absorption and mucosal atrophy leading to diarrhea.

Cognitively, acute starvation impairs attention, memory, and psychomotor function, especially in nutritionally vulnerable children. Behavioral symptoms like irritability and apathy are common, and children become sluggish and obtunded (unresponsive) rapidly.

Infants and young children, especially those who are very thin (wasted), sometimes have swollen bodies from lack of protein (kwashiorkor), or are shorter than normal for their age (stunted).

Long-term effects of childhood malnutrition are profound and often irreversible (Suryawan et al., 2022). Malnutrition in early life, especially during the critical first 1,000 days from conception to age two, can lead to permanent stunting and impaired linear growth, with only partial catch-up achievable even with later nutritional rehabilitation. The neurodevelopmental consequences are especially severe: children who suffer early malnutrition frequently exhibit lower IQ scores, poor academic achievement, and persistent behavioral difficulties.

These achievement gaps and persistent behavioral challenges are often linked to changes in brain structure and function that have been documented through neuroimaging and cognitive testing. These include reduced brain volume, impaired neural connectivity, and abnormal myelination. Early malnutrition can cause long-term epigenetic changes that interfere with the expression of genes essential for attention, learning, and executive functioning. The impact of these deficits extends beyond the individual, contributing to lower economic productivity, increased healthcare burdens, and the continuation of intergenerational cycles of poverty.

Malnutrition and starvation can seriously affect a child's mental health, both in the short term and over the long run. In the short term, children may become irritable, uninterested, have trouble paying attention, and struggle with memory and learning (Weinreb et al., 2002). Even without other life stress, malnourished children are more likely to experience anxiety and depression. The long-term effects are even more serious. Children who experience early malnutrition often have lower IQs, poor school performance, and trouble with focus and decision-making. They are at greater risk for emotional and behavioral problems that last into adulthood. Furthermore, these changes frequently reduce self-confidence and make it harder for children to succeed later in life.

Malnutrition and starvation seriously weaken a child's immune system, both in the short and long term (Morales et al., 2023). In the short term, important immune organs like the thymus are damaged and the number and strength of immune cells reduced, making it much harder for the body to fight infections. The gut becomes more vulnerable, allowing harmful germs to enter the bloodstream more easily. As a result, malnourished children are more likely to get sick and respond poorly to vaccines.

Even after recovering nutritionally, some damage to the immune system may last a lifetime. Children who were malnourished early in life may continue to have a weaker immune response, a higher risk of infections, and may develop chronic or autoimmune diseases. Deficiencies in key nutrients like zinc, vitamin A, and iron make these problems worse. This ongoing cycle of poor nutrition and repeated illness can lead to stunted growth and even more serious health problems over time.

Malnutrition and starvation in children can lead to long-term health problems (Martins et al., 2011). Insufficient food and nutrients can cause poor organ development, and increased risk of illnesses such as high blood pressure, metabolic syndrome, diabetes, and other lifelong conditions. Children who don't have reliable access to healthy food are more likely to grow slowly, fall behind in development, and, due to weakened immune systems, get sick more often, especially with infections like diarrhea and lung illnesses.

Malnutrition in pregnant women is associated with multiple harmful effects including intrauterine growth retardation (IUGR), low birth weight, and premature birth (Belkacemi et al., 2010). Additionally, there are long term metabolic consequences of under-nutrition during this pivotal growing period (Jyoti et al., 2018). For instance, in response to the nutrient-poor environment, the fetus adapts by reducing insulin and glucose production. This can lead to permanent changes in glucose and insulin metabolism throughout life which increases the risk for adult diseases such as type 2 diabetes, ischemic heart disease, hypertension, and obesity. Individuals who were in early gestation during the Ukraine famine of 1932-1933 had a two-fold likelihood of developing type 2 diabetes as adults compared to their unexposed counterparts (Lumey et al., 2024). Similarly, fetal exposure to famine in Biafra during the Nigerian civil war of 1967-1970 increased the prevalence of adult hypertension from 9.5 to 24% (Hult et al., 2010).

The treatment of children with malnutrition requires comprehensive care by trained medical staff. The World Health Organization (WHO, 2013) has comprehensive guidelines with clear recommendations for this management, including admission and discharge criteria, use of antibiotics for weakened immune systems, vitamin supplementation, and stepwise therapeutic feeding protocols.

Refeeding after prolonged starvation poses serious risks (Corsello et al., 2023). Refeeding syndrome is a potentially life-threatening condition that occurs when nutrition is reintroduced after a period of starvation or severe malnutrition. It is characterized by rapid shifts in fluids and electrolytes—most notably hypophosphatemia, hypokalemia, hypomagnesemia, and thiamine deficiency—which can precipitate cardiac arrhythmias, heart failure, respiratory compromise, seizures, and neurologic deterioration. The American Society for Parenteral and Enteral Nutrition defines refeeding syndrome as a measurable reduction in one or more of these electrolytes or the manifestation of thiamine deficiency within five days of reinitiating or substantially increasing energy provision, with severity stratified by the degree of electrolyte decrement and presence of organ dysfunction. Six-month mortality rates increase significantly for those with refeeding syndrome, so rapid identification and treatment are essential to prevent lasting harm or death (Bioletto et al., 2021).

Conclusions and key findings

The evidence of Israeli officials' intent to starve Palestinians in Gaza has been clearly articulated by the officials themselves since the day of the October 7 attacks in 2023. Since then, Israeli policy has matched their words, consistently denying Palestinians in Gaza access to food, water, electricity, fuel, medicine, humanitarian aid, and other goods and services. These policies, accompanied by relentless aerial and ground attacks, are deliberate violations of international law, and have taken place in full view of the world.

World leaders have failed to take meaningful action to protect Palestinian children and families from starving in the famine manufactured by Israeli authorities. Every moment that this failure continues will impact an entire generation of Palestinian children for years to come. The impact on children's physical and psychological health, in addition to their development, will resonate for decades. This starvation campaign's mark on Palestinian society in Gaza is indelible.

This report's key findings are as follows:

- 1. Famine has been present in the Gaza Strip since at least early 2024, when the first Palestinian children died of starvation due to Israel's closure of north Gaza.
- Starvation of children is a key mechanism in Israel's campaign of genocide and has been from the beginning, targeting existing and future generations of Palestinian children and families.
- Refusal by the international community to declare famine, acknowledge Israeli officials' genocidal intent, and break Israel's siege has paved the way for the starvation of more children.
- 4. Palestinian newborns, infants, and children with chronic illnesses are among the most vulnerable to the effects of malnutrition and dehydration.
- 5. Starvation occurring in Gaza now will negatively impact Palestinian children and families for generations to come.

Recommendations and demands:

The following urgent actions are directed at states and governing bodies with the capacity to influence the situation in Gaza. Civil society organizations, humanitarian actors, and international institutions are urged to support and amplify these demands.

- 1. Break the Siege: End the illegal blockade imposed on the Gaza Strip to allow for the free movement of people and goods.
- 2. Unimpeded Humanitarian Aid: Ensure the immediate and sustained entry of substantial humanitarian aid, including food, water, fuel, and medical supplies, with safe and equitable access for all individuals across Gaza.
- 3. Medical Evacuations: Facilitate the urgent medical evacuation of all patients requiring specialized care unavailable in Gaza, alongside their caregivers, with guaranteed rights of return.
- 4. Comprehensive Embargo: Impose an arms, financial, and diplomatic embargo on Israel to prevent further violations of international law and human rights.
- 5. Targeted Sanctions: Enact targeted sanctions against individuals and entities responsible for crimes under international law.
- 6. Support International Justice Mechanisms: Provide full support for the investigations and proceedings at the International Criminal Court and the International Court of Justice.
- 7. End the Genocide: Take all necessary measures to bring an immediate end to the ongoing genocide against the Palestinian people.

Reference List

<u>Images</u>

Cover photo - AFP. Palestinian children wait for food at a distribution point in Nuseirat, in the central Gaza Strip, on June 11, 2025. Photographed by Eyad Baba. Accessed June 16, 2025.

Image 2 - AFP. Palestinian boys carry pots as the queue at a hot meal distribution point in Nuseirat in the central Gaza Strip, June 4, 2025. The US and Israeli-backed Gaza Humanitarian Foundation (GHF) group operating aid sites in the Gaza Strip announced the temporary closure of the facilities on June 4, following a string of deadly incidents near the distribution sites it operates that have sparked condemnation from the United Nations. Photographed by Eyad Baba. Accessed June 16, 2025.

Social Media and Web Sources

Anadolu Agency. (2025, May 10). Far-right Israeli minister demands complete halt to Gaza aid until hostages released.

https://www.aa.com.tr/en/middle-east/far-right-israeli-minister-demands-complete-halt-to-gaza-aid -until-hostages-released/3562728

Knight, B. (2024, February 13). Israel held up U.S. flour shipment to Gaza for weeks. *Axios*. https://www.axios.com/2024/02/13/israel-gaza-flour-shipment

Mako. (2023, October). 'There's no innocent civilians in Gaza': Israeli official remarks spark outrage. https://www.mako.co.il/news-columns/2023_q4/Article-fcf787ad0ba0b81027.htm

NoCommentTV. (2023, October 10). Israeli Defence Minister Yoav Gallant on Monday said Israel is imposing "a complete siege" on the city of Gaza. [Video]. *YouTube*. https://www.youtube.com/watch?v=ZbPdR3E4hCk

Shaul, Y. [@YehudaShaul]. (2023, October 25). As long as Hamas does not release the hostages it is holding - the only thing that needs to enter Gaza. [Post]. *X.* https://x.com/YehudaShaul/status/1717219201096499426

Shaul, Y. [@YehudaShaul]. (2023, November 11). COGAT continues to determine what humanitarian aid can go into Gaza. [Post]. *X*. https://x.com/YehudaShaul/status/1723375950673449198

Thakker, P. [@prem_thakker]. (2024, July 2). Israeli National Security Minister Itamar Ben Gvir on reports of detention camps where soldiers have tortured, raped Palestinians. [Post]. X. https://x.com/prem_thakker/status/1808157930589413396

UN News. (2025, June 5). *In Gaza, daily food intake has fallen well below 'survival' level*. United Nations.

https://www.un.org/en/gaza-daily-food-intake-has-fallen-well-below-%E2%80%98survival%E2%80%99-level

Reports

B'Tselem. (2024, August). *Welcome to hell: Testimonies from the Gaza Strip.* https://www.btselem.org/sites/default/files/publications/202408_welcome_to_hell_eng.pdf

FIAN International. (2025). *Beyond numbers: Rethinking food security monitoring in conflict and crisis.* https://www.fian.org/files/files/Beyond_Numbers_FIAN_2025.pdf

United Nations General Assembly. (2024, April 2). Report of the Special Rapporteur on the right to food, Michael Fakhri (UN Doc A/79/162). https://undocs.org/en/A/79/162

United Nations. (2024, August 5). Israel's escalating use of torture – UN experts. https://www.un.org/unispal/document/israels-escalating-use-of-torture-un-experts-5aug24/

UN Treaties and Legal Instruments

Additional Protocol I to the Geneva Conventions of 12 August 1949 (Protocol I), 8 June 1977.

Committee on Economic, Social and Cultural Rights. (1999). *General Comment No. 12: The right to adequate food.*

Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, 10 December 1984.

Convention on the Prevention and Punishment of the Crime of Genocide, 9 December 1948.

Convention on the Rights of the Child, 20 November 1989.

Geneva Convention relative to the Protection of Civilian Persons in Time of War (Fourth Geneva Convention), 12 August 1949.

International Committee of the Red Cross. (2005). *Customary International Humanitarian Law, Rule 53: Starvation as a method of warfare.*

https://ihl-databases.icrc.org/customary-ihl/eng/docs/v1_rul_rule53

International Covenant on Civil and Political Rights, 16 December 1966.

International Covenant on Economic, Social and Cultural Rights, 16 December 1966.

International Court of Justice. (2024, March 28). Application of the Convention on the Prevention and Punishment of the Crime of Genocide in the Gaza Strip (South Africa v. Israel), Order.

Rome Statute of the International Criminal Court, 17 July 1998.

United Nations Security Council. (2018). *Resolution 2417 (on armed conflict and food insecurity).* https://undocs.org/S/RES/2417(2018)

Medical Papers

Belkacemi, L., et al. (2010). Maternal undernutrition influences placental-fetal development. *Biology of Reproduction, 83*(3), 325–331. https://doi.org/10.1095/biolreprod.110.084517

Bioletto, F., et al. (2021). Impact of refeeding syndrome on short- and medium-term all-cause mortality: A systematic review and meta-analysis. *The American Journal of Medicine*, *134*(8), 1009–1018.e1. https://doi.org/10.1016/j.amjmed.2021.03.010

Corsello, A., et al. (2023). Refeeding syndrome in pediatric age, an unknown disease: A narrative review. *Journal of Pediatric Gastroenterology and Nutrition, 77*(6), e75–e83. https://doi.org/10.1097/MPG.000000000003945

Dipasquale, V., et al. (2020). Acute malnutrition in children: Pathophysiology, clinical effects and treatment. *Nutrients*, *12*(8), 2413. https://doi.org/10.3390/nu12082413

Hulst, J. M., et al. (2022). A practical approach to identifying pediatric disease-associated undernutrition. *Journal of Pediatric Gastroenterology and Nutrition*, *74*(5), 693–705. https://doi.org/10.1097/MPG.000000000003437

Hult, M., et al. (2010). Hypertension, diabetes and overweight: Looming legacies of the Biafran famine. *PLoS ONE, 5*(10), e13582. https://doi.org/10.1371/journal.pone.0013582

Jyoti, S., Kaur, V., & Kaur, J. (2018). Effect of prenatal malnutrition on fetus and newborn baby: A comprehensive review. *International Journal of Science and Research (IJSR), 7*(6), 150–156. https://doi.org/10.21275/ART20183042

Lumey, L. H., et al. (2024). Fetal exposure to the Ukraine famine of 1932–1933 and adult type 2 diabetes mellitus. *Science*, *385*(6709), 667–671. https://doi.org/10.1126/science.adn4614

Martins, V. J., et al. (2011). Long-lasting effects of undernutrition. *International Journal of Environmental Research and Public Health, 8*(6), 1817–1846. https://doi.org/10.3390/ijerph8061817

Mehta, N. M., et al. (2013). Defining pediatric malnutrition: A paradigm shift toward etiology-related definitions. *JPEN*, *37*(4), 460–481. https://doi.org/10.1177/0148607113479972

Morales, F., et al. (2023). Effects of malnutrition on the immune system and infection. *Nutrients,* 16(1), 1. https://doi.org/10.3390/nu16010001

Suryawan, A., et al. (2022). Malnutrition in early life and its neurodevelopmental and cognitive consequences. *Nutrition Research Reviews, 35*(1), 136–159. https://doi.org/10.1017/S0954422421000159

Weinreb, L., et al. (2002). Hunger: Its impact on children's health and mental health. *Pediatrics*, 110(4), e41. https://doi.org/10.1542/peds.110.4.e41

World Health Organization. (2013). *Updates on the management of severe acute malnutrition in infants and children*. https://apps.who.int/iris/handle/10665/95584