A call to ensure dignity in every season:
A fourth winter of airstrikes, inadequate shelter, no blankets, and no hope

Context

After three years of war, mass destruction of infrastructure, and repeated displacement, families in Gaza are entering another winter in even worse conditions than in previous years. By August 2026, an estimated 82% of the structures in Gaza were damaged, and two thirds of them destroyed.[1] Many of the forcibly displaced live in worn-out tents or makeshift shelters with little protection from cold, rain, and flooding. Children, especially newborns and infants, are the most vulnerable.[2] With no better options, many families are sheltering in hundreds of damaged buildings assessed as unsafe, which are at greater risk of collapsing during heavy rain and flooding, often with fatal consequences. [3] As the "yellow line" (the boundary of the area under Israeli military control) continues to shift and shrink the area where people can live (approximately 35%), families have even fewer options to move away from flood-prone areas.[4]

Israel's so-called "dual-use" policy, which treats civilian goods as potential military-use items, continues to block items essential for survival. The deliberate and sustained obstruction of aid has created an engineered scarcity of food, water, medicines, fuel and fuel-related supplies and the basic items people need for hygiene and dignity. Winterization must be treated as a life-saving humanitarian and public-health priority, first and foremost by Israel as the occupying power.

Funding shortfalls are also limiting partners' ability to procure, pre-position, and deliver shelter assistance at the scale required. Essential items such as tents, children's winter supplies and clothing are available at less than 34% of required levels, leaving a funding gap of USD 186.6 million required for basic winterization materials and delivery.[5] At the same time, many displaced families have exhausted their savings and cannot afford even the most basic means of staying warm.

Given that this is the fourth winter in Gaza since the start of the war, it should not come as a surprise that there is **a sharp increase in shelter needs and public health risks**. Lessons from last winter should have resulted in better preparation from Israel, as the occupying power, the international community, and humanitarian actors alike. Without immediate action, people in Gaza will be forced to spend another winter paying the highest price.

Deteriorating living conditions

Shelter needs remain severely unmet in Gaza, with the majority of the population living in flimsy tents not meant for long-term use. A recent Shelter Cluster assessment reported that an estimated 1.98 million people, or 94% of the population were classified in Shelter Severity Phases 3 (Crisis), 4 (Critical), or 5 (Catastrophic).[6] Many shelters do not provide adequate protection from weather and external conditions. According to a recent report from the

[1] Daily Press Briefing by the Office of the Spokesperson for the Secretary-General | UN Meetings Coverage and Press Releases, https://press.un.org/en/2026/db260807.doc.htm
[2] Gaza: Winter puts babies at even greater risk | MSF UK, https://msf.org.uk/article/gaza-winter-puts-babies-even-greater-risk
[3] Shelter Severity and Household Needs Across Accessible Areas of Gaza, https://www.sheltercluster.org/palestine/documents/shelter-severity-and-household-needs-across-accessible-areas-gaza
[4] Ibid.
[5] Ibid.
[6] Shelter Severity and Household Needs Across Accessible Areas of Gaza, https://www.sheltercluster.org/palestine/documents/shelter-severity-and-household-needs-across-accessible-areas-gaza

Shelter Cluster, 59% were often too hot or too cold and 54% leaked during rainfall.[7] 64% of households could not adequately store sufficient food and water, while 89% of households surveyed reported rodents inside their shelter. Some of these households reported that food was sometimes contaminated because rodents were consuming household food, which can increase the risk of disease. In the same report, 71% of those surveyed had been affected by flooding since the onset of last winter. A father told our teams from Al Mawasi health facility about his experiences in winter:

"When it rains, the water flows around us and through the place where we live. Last year I even took pictures because the flooding was so severe. My children and I were surrounded by water. This is not proper shelter. People outside may call it a tent, but if they saw it with their own eyes, they would be shocked. "

One patient from Al-Zawayda health facility shared some of the challenges of living too close to the sea:

"I am living with my family in extremely harsh conditions near the beach, where winter is not just uncomfortable — it is dangerous. Last year, the tent collapsed on me four times. It was old and rotten, and every storm made us fear that it would fall again. Living by the sea means the wind, dampness, and cold reach us directly. There is no real protection there, especially for children."


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While living conditions in tents are extremely harsh, those living in buildings are not much safer. More than 4,000 unsafe buildings across Gaza require full or partial demolition. Nevertheless, over 2,300 are currently sheltering nearly 44,000 people.[8] On September 16, 2026, a war-damaged residential building in Gaza City collapsed, killing 21 Palestinians (including 12 children), and trapped over 100 people under the rubble.[9] Shortly after, partners carried out a risk assessment for a total of 1,764 displacement sites. The assessment revealed that approximately 989 sites are currently located within areas classified as at medium or high flood risk and are hosting an estimated 956,389 people (approximately 60 per cent of Gaza's displaced population). Among these, at least 451 sites are located in high flood-risk areas, and are hosting more than 400,000 people, who may require relocation.[10] While partners have assessed possible relocation sites for people who choose to move from flood-prone areas or war-damaged buildings at risk of collapse, they stressed that explosive ordnance contamination and many other safety concerns needed to be addressed before any voluntary relocation could happen at scale.[11]

[7] Ibid.
[8] Humanitarian Situation Report, 2 October 2026, https://www.ochaopt.org/content/humanitarian-situation-report-2-october-2026
[9] Gaza building collapse kills at least 21, including 12 children, https://www.aljazeera.com/news/2026/9/16/gaza-residential-building-collapses-six-families-reportedly-trapped
[10] Gaza Flooding Risk Assessment: Phase One Outlook For Rainy Season 2026-27, https://www.cccmcluster.org/resources/gaza-flooding-risk-assessment-phase-one-outlook-202627-rainy-season
[11] Today's top news: Ethiopia, Yemen, Occupied Palestinian Territory, Haiti, Ukraine, Central Emergency Response Fund, https://www.unocha.org/news/todays-top-news-ethiopia-yemen-occupied-palestinian-territory-haiti-ukraine-central-emergency

Poverty, hunger and coping mechanisms

At the same time, limited humanitarian funding and insufficient winter supplies entering Gaza through aid channels are placing an increasing burden on households to purchase essential items themselves. This is particularly concerning given that many families are already highly vulnerable and struggling to afford basic needs, including food. **Purchasing power is limited by a 200% inflation rate compared to pre-October 2023 levels**.[12] A monthly market study by WFP in August reported that one in five families could not afford food and were forced to adopt coping mechanisms, **such as eating only one meal a day**, and 50% of these families reported that they completely ran out of food at least once in the past month.[13] While the supply of food has increased and prices have decreased since October 2025, access and affordability remain challenging. For example, at Al Mawasi health facility, a displaced mother shared:

"Hunger is one of the hardest things we are facing. When we leave the house, there is often nothing to eat. There is no oil, no flour, and no basic food in the house. My children need food and warm clothes more than anything. I do not have a stable income. I do some cleaning work when I can, and sometimes my family helps us with food, but this is not enough. We are living day to day."

Shortly after this testimony was taken, **WFP announced further major funding cuts in October 2026, including removing food and cash assistance for 500,000 people**, some of whom are already considered among those most vulnerable; reducing hot meals provided from 250,000 to 150,000 meals a day; and cutting food rations in half, meaning that families receiving assistance will now only receive one food parcel instead of two, and a smaller bag of wheat flour. As winter approaches, more resources – not less – need to be allocated for food security, especially to prevent the risk of malnutrition among young children and pregnant and breastfeeding women.

A recent MSF market assessment found that winterization items in Gaza are available on a highly unstable and intermittent basis, with quantities and prices fluctuating depending on the entry of humanitarian aid and limited commercial shipments. **Commercial stock remains scarce and prohibitively expensive, while key shelter materials such as heavy tarpaulins, timber, ropes, fuel, and plastic sheeting are often unavailable or unaffordable**. At the time of the assessment, the average market price was around 30 NIS (10 USD) for one blanket, 70 NIS (23 USD) for a sleeping mat, 220 NIS (72 USD) for a plastic sheet, 90 NIS (30 USD) per litre of petrol, and 90 NIS (30 USD) per kilogram of cooking gas, with sharp fluctuations linked to supply shortages. Last winter, MSF reported that firewood, gas, or warm blankets could cost up to 200 USD, when available in local markets.[14]

Continued supply restrictions and "dual use" policies

Aside from the time it would take to procure and ship the stock, current entry bans and worsening restrictions on the entry of aid make it impossible to ensure that items will arrive in time. **Israel's so-called "dual-use" policy, which treats civilian goods as potential military-use items, continues to block items essential for survival**. This list includes tents, tarpaulins, and temporary shelter materials. For example, Norwegian Refugee Council reported that Israeli authorities approved 36,960 pieces of timber and 660 emergency shelter kits in August but rejected their entry on 26 August and 2 September.[15] This is one of countless examples where lifesaving items are being

[12] Humanitarian Situation Report | 2 October 2026 | United Nations Office for the Coordination of Humanitarian Affairs - Occupied Palestinian Territory, https://www.ochaopt.org/content/humanitarian-situation-report-2-october-2026
[13] WFP Palestine Food Security Analysis Gaza Market Monitor August 2026, https://docs.wfp.org/api/documents/WFP-0000175624/download/
[14] Gaza: Winter puts babies at even greater risk, https://msf.org.uk/article/gaza-winter-puts-babies-even-greater-risk
[15] Gaza building collapse exposes human cost of shelter restrictions, https://www.nrc.no/news/2026/gaza-building-collapse-exposes-human-cost-of-shelter-restrictions

denied. In addition, in August limited humanitarian supplies were entering Gaza, with only 3,784 aid trucks, compared to 6,537 commercial trucks, and in September, there were 3,033 aid trucks versus 6,216 commercial trucks. **Restrictive and unpredictable entry processes, combined with funding shortfalls, have limited the ability of the aid response to deliver assistance at the scale required.** Furthermore, restrictions by Israeli authorities also limit the possibility for any kind of recovery efforts as they prohibit entering additional machines to clear rubble, or materials such as timber, iron, cement, or other basic construction tools. As a result, humanitarian actors are unable to invest in long-term solutions which could allow people in Gaza to live in dignity.[16]

Finally, at the start of 2026, the Israeli authorities revoked the registration of 37 international humanitarian organizations, including MSF, to effectively operate in Gaza and the West Bank. As a result, these organizations can no longer bring supplies into Gaza, and many are now bearing the cost of relocating stock that was intended for Gaza. While needs in Gaza continue to rise and remain significantly unmet, just over 930 cubic meters of MSF supplies are waiting to be relocated from Jordan to other contexts in urgent need.

Winter is also a mental health crisis

Hundreds of thousands of families have been displaced multiple times, repeatedly lost loved ones and livelihoods, and exhausted their coping capacity. In this context, winter does not only worsen physical hardship; it also deepens feelings of helplessness, fear, and despair. A displaced mother from Al-Zawayda told us:

> ***"I have no proper bed, not enough blankets, and no fuel. Sometimes we have had no choice but to sleep outside at night. We try to survive with almost nothing. We use what we have to cover ourselves and even to cover the tent, but it is never enough. Winter enters everything — the shelter, the clothes, the bodies, and the mind."***

Caregivers speak of constant fear: fear that tents will flood at night, fear that children will become wet or sick, fear that they will not be able to keep infants warm, and fear of being unable to provide even the most basic protection. These pressures also increase family tension and distress, particularly when parents cannot secure food, clothing, blankets, or shelter. The inability to obtain even basic winter items contributes to the psychological burden, especially for caregivers who feel powerless to protect their children. A displaced mother shared her testimony at Al-Zawayda health facility:

> ***"We have no real support, and I feel alone trying to protect my children in conditions where I cannot even provide the basics. I am ashamed that I cannot care for them the way they deserve. Even their clothes are not enough."***

A mental health staff member from Khan Younis shared that during the previous two weeks, many of the cases coming to mental health services are about winter. The staff member explained that providing psychosocial support is not enough, and that mental health support must be accompanied by practical support:

> ***"We can teach stress management, emotional regulation, and coping skills, but if a mother or father returns to a tent where there is no safe shelter, no blankets, no clothes, and no food, the intervention will have limited effect."***

WASH

[16]Gaza_Shelter_Cluster_Winterization_Needs_2026_2027, https://s3.eu-west-1.amazonaws.com/shelftercluster.org/public/docs/Gaza_Shelter_Cluster_Winterization_Needs_2026_2027_1_0.pdf

Families face sewage exposure, lack of toilets, lack of hygiene items, and impossible conditions for infection prevention. According to a recent site assessment by the Shelter Cluster, close to 50% of households surveyed bathed in a toilet or latrine space, because private bathing spaces were widely unavailable.[17] Families also often rely on outdoor toilets and poorly drained camp environments, forcing children and caregivers to move through cold, mud, and stagnant water, including at night.[18] Patients have told our staff that they are reducing how much their children drink in the afternoon or evening, so they do not have to leave the tent to use the bathroom in the cold at night. One mother from a health facility in southern Gaza shared a similar concern:

"The bathroom is outside the tent, so when someone is warm and has to go out into the cold, they can get sick again. In winter, even going to the toilet becomes an ordeal."

Access to water also remains precarious and woefully inadequate, with current **household water insecurity rates at 84%.**[19] **Households have an average drinking water access of 4.3L/person/day, falling below minimum thresholds of 6L/person/day.** In September, only 124 of 283 WASH appeals (44%) were addressed, mainly due to insufficient resources. In addition, 645 water sites are expected to lose funding by mid-October, with further significant drops expected in November.[20] More resources need to be invested in water security to ensure access to adequate drinking water and minimum hygiene standards.

Winter in Gaza is a health emergency

- **Hypothermia and cold exposure:** During previous winters at Nasser Hospital, there were cases of hypothermia among children, some resulting in death. Last winter our facilities treated 15 cases of hypothermia, 10 of which were babies less than 1 month old. According to UNICEF at least 11 children reportedly died from hypothermia during the same period, including a two-month-old baby and a one-year-old child.[21] **No child should die from cold-related illness, exposure, or other preventable winter-related conditions because minimum survival conditions were not secured in time.** While deaths linked to hypothermia are often connected to other health vulnerabilities, exposure to cold can exacerbate underlying conditions and result in an increased risk of death. Finally, as prices of fuel and engine oil continue to climb at unprecedented rates, the cost to keep hospitals functioning is already a challenge. Finding the additional resources needed to heat these facilities and prevent hypothermia among patients during winter, in combination with all the other factors, remains a challenge.

- **Burns:** During the winter months, most of the burn cases our facilities receive come from camps and displacement areas. Because cooking gas is unavailable or unaffordable, families often rely on open flames, wood fires, burning plastic, or waste for heating and cooking. Some patients have told us that they light fires inside tents, because they have no safer alternative to keep warm. A displaced mother from Khan Younis shared:

  "What I need most in winter is the basic things that allow us to live with some dignity and safety. I need wood because I do not have gas, and we light fire inside the tent just to stay warm and cook. This is dangerous, but what else can we do? We are forced to choose between cold and risk. I also need blankets

[17] Shelter Severity and Household Needs Across Accessible Areas of Gaza, https://www.sheltercluster.org/palestine/documents/shelter-severity-and-household-needs-across-accessible-areas-gaza
[18] Ibid.
[19] WASH Light Touch Monitoring (LTM) - Gaza, Round 6 – September 2026, https://drive.google.com/drive/folders/1EwS0xjeFd5HS8uyzmqSJq5Jxd2BtB1F2
[20] Ibid.
[21] UNICEF in the State of Palestine Humanitarian Situation Update, Reporting Period 5 February 2026, https://www.unicef.org/sop/reports/unicef-state-palestine-humanitarian-situation-update

and proper bedding. Even when there are some blankets, they are not enough for all the children, and we are still cold."

During winter (December, January, and February) 2024-2025, MSF treated a total of 3,558 cases for burns, including 792 cases for children under 5 years old. During the following winter, MSF treated 973 burn cases, including 175 children. The numbers were slightly lower during the second winter because MSF was working in fewer facilities treating burns. This winter is anticipated to be much worse, given that families in Gaza are forced to live in even more overcrowded conditions compared to the previous year, as the yellow line continues forcibly to shrink the space people are able to live in.

- **Access to care:** Flooded roads, mud, long distances, lack of transport, and high travel costs make it difficult to access care in the winter. Some families are forced to walk two to three kilometers or more, often while carrying sick children in the cold. These barriers are especially severe for older people, wheelchair users, amputees, and patients who need regular treatment or medicines for hypertension, diabetes, and other chronic illnesses. In many cases, treatment or follow-up is delayed or missed altogether because the journey is simply too difficult, dangerous, or costly. According to an MSF staff from Gaza City, when patients come back after missing follow-up care, sometimes an infection or complication has already developed.

- **Skin disease, scabies and lice:** Winter conditions in Gaza significantly increase the risk of skin diseases and parasitic infestations, particularly where families are living in overcrowded conditions and unable to wash clothes, bedding, or their bodies regularly. During winter 2024–2025, some MSF facilities treated 5,414 patients for skin diseases; in the following year, this rose to 10,877 patients. Within these cases, 688 patients were treated for scabies in one winter season, compared with 3,160 in the following year. Limited access to water, soap, and the ability to dry clothing increases the risk of skin and other diseases.
  One displaced mother described the situation this way:

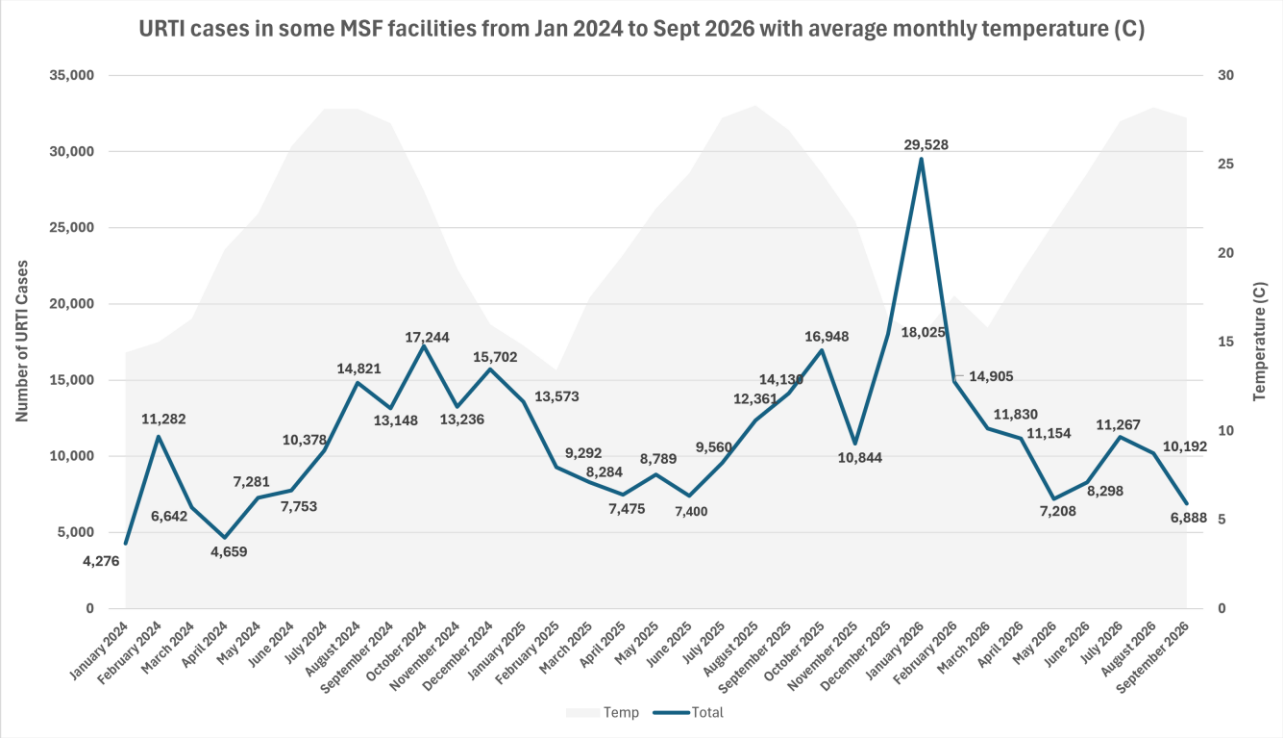
  "In winter, everything stays damp. We cannot properly wash the children's clothes, blankets, or bedding, and we do not have enough soap or spare clothes to change them. The children sleep close together under the same covers, and when one starts itching, soon all of them are scratching. The skin disease does not go away because we are treating it in the same conditions that caused it."

  Unless people living in camps have access to hygiene items, water, clean clothes, and dry bedding, the transmission of scabies, lice and other skin conditions will continue within households and across camps, and the cycle of disease will continue.

- **Respiratory illness:** According to MSF medical staff, during winter teams see sharp increases in **upper and lower respiratory tract infections**, including influenza-like illnesses, bronchitis, bronchiolitis, and pneumonia, particularly among children. Cold exposure, damp conditions, overcrowding, poor ventilation, and repeated exposure to smoke from indoor fires all contribute to illness. Last winter, one staff member reported that there were so many admissions for respiratory cases in the pediatric department that the situation in the wards became very difficult and services were under extreme pressure. The children who came in were facing severe respiratory infections, pneumonia, and other complications linked to cold exposure and poor living conditions. Medical staff at another facility also identified a recurring pattern among children: *"Children improve temporarily in hospital but return to the same cold, damp, unsafe conditions and become sick again."*

  MSF data from several facilities between January 2024 and September 2026 (see graph below) show that upper respiratory tract infections peaked sharply last winter. Cases reached 29,528 in January 2026, nearly

double the highest monthly figure of the previous winter (15,702 in December 2024). As more buildings have been destroyed and more families forced to live in tents, the winter burden of respiratory illness has grown.



Calls to Action

MSF reiterates that winterization preparedness is a life-saving intervention, and the collective failure of Israel as the occupying power, the international community, and humanitarian actors must be immediately addressed. Without immediate action, more people - especially children and other vulnerable groups - will face preventable illness, injury, and death. To quote one MSF medical staff from Al Mawasi:

"We can provide medical care, but prevention is the most important *intervention. Families need the basic conditions that allow them to stay healthy in the first place: proper shelter, blankets, winter clothes, safe heating options, water, food, and hygiene supplies such as soap and shampoo.* ***These are not luxury items.*** *They are essential for survival and for public health. [...] If these needs are not met before winter deepens, we will continue to see preventable illness, avoidable suffering, and deaths that should never happen."*

MSF calls on Israeli Authorities to:

- **Urgently expedite the unhindered entry and delivery of life saving humanitarian supplies**, at sufficient scale, needed for winter response, including blankets, shelter materials (ex: weatherproof tents, tarpaulins, timber, tent poles and plastic sheeting), medical supplies, fuel, and WASH items.
- **Comply with International Law, including obligations as an occupying power**, to ensure and facilitate the unhindered provision of urgently needed supplies essential to the survival of the Palestinian civilian population, in line with the 2024 International Court of Justice ruling.

MSF calls on all States, especially actors with close economic, political, and security relationships with Israel, notably the United States, the European Union and its Member States, the United Kingdom, and influential Arab States to:

- **Respect their obligations under international law by pressuring the Israeli authorities.** They must use all available political, economic, security, and legal means, to ensure the basic needs of the population of Gaza are met. This includes **rejecting the normalization of the so-called "dual-use" restrictions** as applied to goods indispensable for healthcare, water production, sanitation and humanitarian transport, and which are preventing the entry of vital winterization and shelter supplies into Gaza, resulting in the serious risk of preventable illness and cold-related deaths.
- **Advocate for winter response that goes beyond seasonal item distribution** and includes safe shelter, flood protection and mitigation, warm clothing and bedding, fuel, electricity, healthcare, water, sanitation, and protection.
- **Provide immediate, flexible funding** for winterization and health response, while humanitarian actors prioritize winter preparedness, contingency planning, and coordination across food, shelter, health, WASH, and protection.
- **Ensure access to safe fuel and safer cooking and heating options** so families are not forced to rely on open fires or burning waste and plastic inside tents.