

Main Article

Israel's invasion of Gaza—genocide or self-defense?

Rodolfo Valentino

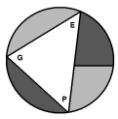
The subsequent contribution in this volume of our journal concerns the German text of the same article translated by the author himself, who works for the European Institute for Migration and Social Inclusion (IEM) and Independent European Sociological Research Institute (EUROSOR).

Introduction

This short study examines, from a sociological perspective of war, whether war crimes or crimes against humanity occurred during the invasion or offensive in Gaza launched by the State of Israel on October 7, 2023. Based on published reports, statistics and statements from international institutions and major human rights NGOs, this central question will be addressed—or at least the study will highlight the global political and sociological implications of Israel's military actions.

Reporting in Gaza: Between Information and Propaganda

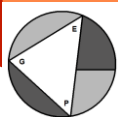
Since October 7, 2023, the fighting between Israel and armed Palestinian groups has resulted in massive civilian casualties and widespread destruction in Gaza. According to the Gaza Health Ministry—which has faced heavy criticism for its published figures because it is controlled by the terrorist group Hamas—the death toll since the start of the offensive



amounts to tens of thousands dead and hundreds of thousands wounded (OCHA 2025).¹ Numerous international actors, including UN organisations and human rights groups—whose expertise allows them to demonstrate statistical trends, if not precise figures—also estimate the extent of death and devastation in the Gaza Strip to be tens of thousands dead and hundreds of thousands wounded. Their reports are based on eyewitness accounts, satellite imagery, video analysis and interviews. It is considered certain that a large number of the victims are civilians, including many women and children, so one can—despite the debate surrounding verification and Israel's use of war propaganda to glorify the events—speak of a humanitarian catastrophe in Gaza. Among the most important sources are:

(1) The Hamas-run Ministry of Health in Gaza, which regularly provides statistics that are published in reports by the United Nations (UN) and its subsidiary organisations, such as the World Health Organisation (WHO) and UNICEF, and are considered the most reliable data sources currently available. It should be noted, however, that the data do not differentiate between civilians and combatants. Nevertheless, many UN officials and independent analysts maintain that the total death tolls reported by the Ministry in the past are relatively accurate.

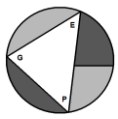
(2) The United Nations (UN), including the Office for the Coordination of Humanitarian Affairs (OCHA), UNICEF and the WHO, regularly refer to the figures from the Ministry of Health in Gaza in their reports. They analyse these data and publish their own reports, which often include more detailed breakdowns by age and gender. For example, UN analyses have shown that a large percentage of the fatalities are women and children.



(3) International human rights organisations such as Amnesty International and Human Rights Watch publish reports on specific attacks and the resulting casualty figures. Their research is based on eyewitness accounts, satellite imagery, video analysis and interviews. They have found that a large number of the victims were civilians, including many children. Amnesty International, for example, has documented the number of deaths in specific Israeli attacks in some of its reports and noted that there was no evidence of military targets.

Depending on the source, the figures show different dimensions without disregarding the war-sociological label of humanitarian catastrophe:

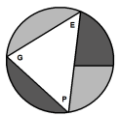
Source	Palestinians killed (total)
Gaza Health Ministry (July/August 2025)	~60.000–62.000 Palestinians killed. ²
Statista / identified fatalities (until the end of July 2025)	~ 61.158 killed. ³
Detailed victim structure	Of the identified deaths: ~ 31% were children under 18. Men aged 18-59 make up approx. 46%. ⁴
Lancet study (until the end of June 2024)	~ 64,260 deaths due to traumatic injuries. ⁵



The Israeli government and many media outlets regularly criticise the published statistics on civilian casualties, especially women and children. They counter that most official casualty figures are published by the Health Ministry in Gaza, which is controlled by Hamas. They argue that these figures are not neutral and that Hamas has an interest in inflating civilian casualty figures to gain international sympathy. Furthermore, they claim that these figures make little or no distinction between 'civilians' and 'fighters,' counting many fighters as civilians. They argue that differing age definitions for 'children' (e.g. under 18) lead to 16- or 17-year-olds, who may have been armed, appearing in the statistics as 'children.'

Neither the Israeli government nor the military denies that civilians are killed, but rather acknowledge it as an unavoidable reality. They accuse Hamas of accepting civilian casualties as collateral damage through its tactic of concealing military infrastructure in residential areas.

Although accurately verifying every single casualty figure in the war zone is extremely difficult, the estimates of tens of thousands dead and hundreds of thousands wounded in the Gaza Strip, supported by a variety of international actors, including UN organisations and human rights groups, are of strong sociological relevance to (the brutal nature of) this war. Despite the debates surrounding the precise breakdown and verification of these figures, the humanitarian catastrophe in Gaza and the large number of victims, particularly among the civilian population, is a social reality recognised and documented by experts.



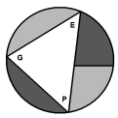
Scientific and Statistical Relevance of the Casualties

Despite the differing interests and global political constellations involved in the instrumentalisation of statistics for propaganda purposes, social research makes it possible to calculate an average statistical approximation of the number of victims in Gaza using an interdisciplinary method. This method combines eyewitness accounts, satellite images, independent NGO data and other sources to reconstruct an approximate statistic on the victims, broken down by men, women and children.

Data sources include (1) eyewitness accounts, which provide information on the number of victims and their age and/or gender. These are often fragmentary, subjective, and difficult to verify; (2) satellite images, which allow the identification of destroyed buildings, mass graves or the movements of civilians. However, these do not provide direct information on the age or gender of the victims; and finally, aid organisations (including the UN, the Red Cross, Doctors Without Borders and local NGOs)—which often provide the most reliable data as they sometimes have direct access to hospitals, morgues or affected communities.

The following reconstruction methods are used:

- Triangulation: Multiple sources (e.g. NGO reports + local health ministries + media) are compared against each other.
- Statistical estimation: If, for example, the total number of deaths is known, distributions by age group can be extrapolated based on hospital data or population structure.



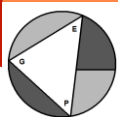
- Geospatial analyses: By comparing impact locations and population density, a probability of casualties can be modeled.

This involves facing major challenges, such as:

- Access restrictions: In conflict zones like Gaza, access to hospitals, archives or cemeteries is severely limited.
- Risk of manipulation: Official statements from warring parties may be distorted for propaganda purposes.
- Incompleteness: Many victims are never registered, especially in collapsed buildings.
- Categorisation: The term 'child' is sometimes defined differently in statistics (under 14, under 16, under 18 etcetera).

Despite significant confounding factors and attempts at manipulation, this method allows for inferences about statistical trends that can be crucial for classifying this conflict as one involving civilian casualties or one even amounting to genocide. Important institutions and organisations apply this method and arrive at similar results: UN's OCHA and UNICEF use local ministry data, verify it with hospital and NGO data, compare it with population statistics, and then publish consolidated, socially relevant casualty figures—which, however, can still fluctuate.

NGOs such as Airwars ⁶ use satellite imagery and eyewitness accounts to document and classify civilian casualties in airstrikes. This results in two of the most credible estimates or studies on casualty figures in the Gaza conflict since October 2023, with a realistic range (mean + margin of error) and based on the available data:



- A. Health Ministry (MoH) Gaza via OCHA/UN:** Between October 7, 2023, and mid-July 2025, the Health Ministry reports approximately 58,573 deaths in Gaza. By category:

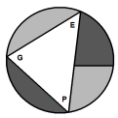
Category	Estimated death toll	Percentage of all fatalities
Children	17.921	31%
Women	9.497	16%
Men	26.655	46%
Older people	4.307	7%

Source: www.un.org/unispal/document/ocha-humanitarian-situation-update-306-gaza-strip ⁷

- B. The Lancet study (up to the end of June 2024):** This independent, scientifically based analysis estimates 64,260 deaths due to traumatic injuries:

Category	Estimated death toll	Percentage total death toll
Women, children, elderly	37.977	59%
Men	26.283	41%

Source: www.un.org/unispal/document/ocha-humanitarian-situation-update-306-gaza-strip ⁸



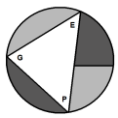
Considering that this latter figure (by Lancet) is about 40% higher than the official death toll reported by the Gaza Health Ministry (MoH) via OCHA/UN at the same time—37,877 estimated fatalities—the accusation that their figures are fundamentally falsified is no longer tenable.⁹

Sociological Analysis on the Classification of the Gaza Conflict as Genocide, Crimes Against Humanity or War Crimes

This sociological analysis attempts to investigate whether war crimes or crimes against humanity occurred during the invasion or offensive in Gaza launched by the State of Israel on October 7, 2023, or whether the military action, in whole or in part, can be defined as genocide. Do the actions of the Israeli authorities or armed forces in the Gaza conflict exhibit elements of genocide, crimes against humanity, or war crimes?

According to facts and expert opinions from UN bodies (OCHA, OHCHR), NGOs like Human Rights Watch and Amnesty International, and the ICC's ongoing investigation, there is a clear pattern. The evidence strongly suggests that several actions in the Gaza conflict could constitute war crimes and crimes against humanity. The latter charge depends crucially on whether the acts of war are part of an organised, widespread attack.

Many major human rights organisations and the UN, in their investigations, also see evidence to support the genocide charges as a possible offense—the dimensions of which, however, must be broken down into individual or collective acts. A legally binding determination of this most serious category, however, can only be made by an international or national court.



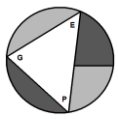
The Israeli military operation—Overreaction or Strategy?

It is undeniable that the military action in the Gaza conflict is characterised by an unprecedented intensity, resulting in high civilian casualties, the near-total destruction of infrastructure, and an acute humanitarian catastrophe. There are indications that Israel, in this conflict, no longer adheres to the principles of humane warfare, deeply rooted in Western Enlightenment thought and Just War Theory, and is operating both factually and morally outside of them. However, norms enshrined in international law (legal rules such as Article 8 of the Rome Statute or the Geneva Conventions) are universally binding and constitute the standard by which the military actions of every state—Western or not—are measured.

The discrepancy between Israel's recognised right to self-defense (Article 51 of the UN Charter) and the binding nature of international humanitarian law, particularly the principles of distinction and proportionality, clearly favours the deliberate destruction and devastation of the Gaza Strip. The question of whether the extent and nature of the Israeli countermeasures have crossed the threshold into international crimes can easily be answered by looking at the consequences for the people of Gaza.

- Mass displacement and housing situation

It is an undeniable social fact that almost the entire population has been displaced multiple times. More than 2.3 million residents of the Gaza Strip have been repeatedly 'shuffled back and forth' since the beginning of the military operation, as if moving house during wartime were a

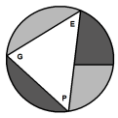


simple matter and 5 to 10 minutes sufficient to mobilise children and the sick. People are mostly driven south (especially to Rafah), which was at times declared a 'safe zone.' Another inhumane aspect of the Israeli war effort is the overcrowding of emergency shelters. The displaced are housed in extremely overcrowded temporary tents, makeshift camps and UN facilities. The camps are hopelessly overcrowded, leading to unsanitary conditions. In addition to the displacement, there is the destruction of housing, with a large proportion of all housing in the Gaza Strip (in some cases over 60%) severely damaged or completely destroyed. This makes a return to large parts of the territory impossible for the foreseeable future.

- *Collapse of the healthcare system*

It can no longer be empirically assumed that the occupying power, Israel, is prioritising the well-being of the sick and injured. The healthcare system in Gaza has practically collapsed and can no longer guarantee medical care for the population. Even the seriously ill can no longer receive adequate treatment, so many die without proper care. The hospitals are no longer functional because most of these in Gaza are no longer operational due to destruction, a lack of fuel (for generators), a lack of oxygen and a lack of medical personnel. The few remaining clinics are massively overburdened and constantly threatened by new attacks from the Israeli army.

In addition, there is a critical shortage of medications and medical equipment. Anesthetics, antibiotics and vaccines are lacking. Most operations often have to be performed under the most primitive conditions without adequate anesthesia. As a result, diseases are



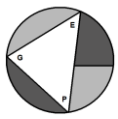
spreading. The combination of poor sanitation, overcrowding and a lack of clean water leads to a rapid spread of infectious diseases such as diarrhea, hepatitis A, respiratory infections and skin diseases, which, due to weakened immune systems, are fatal in most cases.

Although there is no conclusive evidence that the Israeli army and the state agencies involved classify Palestinians as 'unworthy of life' or 'inferior' because the ethical obligation of medical care is not applied to them, or only to a limited extent, Israel in this instance operates outside the Western Enlightenment thinking and the humane conduct of warfare rooted in Just War Theory.

- *Acute food and water shortage*

Even the acute shortage of essential goods and the resulting starvation of the population, which Israel has instrumentalised or at least accepted as a side effect, can no longer empirically suggest that the occupying power, Israel, is concerned with the protection or well-being of the civilian population. International courts have already recognised this situation as a grave violation of international law and threatened legal action.

But what is the current situation? Large segments of the population, especially in the northern Gaza Strip, are suffering from acute malnutrition and are on the brink of famine. The IPC analysis (Integrated Food Security Phase Classification) classifies the situation as Phase 5 (catastrophe) and particularly criticises the lack of adequate nutrition for infants and young children, which has drastically increased child and infant mortality. This deliberate or accepted starvation of



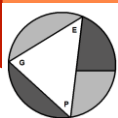
children and infants can already be classified as a war crime, a crime against humanity, and, under certain circumstances, even genocide.

In addition, the destruction or malfunction of water supply systems and wastewater treatment facilities forces people in Gaza to drink contaminated or saline water, further promoting the spread of disease. According to international assessments, access to clean drinking water falls far short of minimum humanitarian standards.

Between International Responsibility and Double Standards

Although the concrete legal classification of the evidence for war crimes and the perpetrators' intent in terms of genocide or crimes against humanity will only become fully apparent after the war, many experts believe that the international community should apply international humanitarian law and intervene in one form or another, given the irrefutable evidence already available.

The central question is whether the actions of the Israeli authorities or armed forces in the Gaza conflict must first be classified as genocide, crimes against humanity or war crimes under international law by an international court after the crime has been fully committed, or whether, based on the irrefutable evidence of the destruction of the Palestinian people's livelihoods, the starvation of the civilian population and the deliberate or at least tacit (co-)killing of civilians, military, economic and/or political action against Israel could already be initiated.

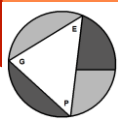


- *Moral decoupling, dehumanisation and war crimes*

The war crimes allegations against Israel in the Gaza Strip are based on national and international humanitarian law (IHR). These allegations primarily focus on alleged violations of the four fundamental pillars of IHR: the principle of distinction, the principle of proportionality, the prohibition of indiscriminate attacks and the prohibition of collective punishment, which are enshrined among other things in the Geneva Conventions and Additional Protocol I and constitute central pillars of the law of war:

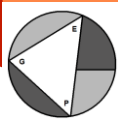
a) The **principle of differentiation** states that military targets must be separated from civilians and civilian objects:

Specific allegation	Legal basis under international law	Details of the accusation
Attacks on civilian targets	Art. 52 ZP I; Rome Statute (Art. 8(2)(b)(ii))	Deliberate bombing and destruction of civilian infrastructure such as residential buildings, hospitals, schools, universities and mosques, without these being used for direct military purposes.
Targeted killing of civilians	Art. 51 ZP I; Rome Statute (Art. 8(2)(a)(i))	Reports of the killing of civilians who had no direct participation in hostilities, including documented cases of sniper fire on unarmed persons.



b) The **allegations of blockade and starvation** relate to the conduct of the war in relation to the civilian population, on the one hand (1) the deliberate withholding of means of survival (war crimes) and on the other hand (2) collective punishment for the actions of individuals:

Specific allegation	Legal basis under international law	Details of the accusation
Starvation as a method of war	Art. 54 of Protocol I; Rome Statute (Art. 8(2)(b) (xxv))	The widespread and ongoing blockade of food, water, fuel, and medicine (especially in the northern Gaza Strip) is leading to famine. Israel is accused of deliberately slowing down or obstructing humanitarian aid.
Attacks on aid deliveries/aid workers	Art. 70 of Protocol No. 1; General protective provisions	Attacks on humanitarian aid convoys or their accompanying personnel (e.g. employees of World Central Kitchen), often despite prior coordination (de-confliction).
Penal measures against the population	Art. 33 of the Fourth Geneva Convention	The aforementioned blockades and destruction are interpreted as an unacceptable punishment of the entire population of Gaza for the actions of Hamas and other armed groups.

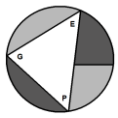


c) **Attacks on medical facilities:** Medical facilities enjoy special protection as long as these are not used to commit hostile acts outside their humanitarian functions:

Specific allegation	Legal basis under international law	Details of the accusation
Attacks on hospitals	Art. 18 of the Fourth Geneva Convention; Rome Statute (Article 8(2)(b)(ix))	Military attacks or the storming of hospitals (e.g. Al-Shifa, Nasser), where it is alleged that Hamas uses them as command centers, are unacceptable. The humanitarian exception for protection must be interpreted narrowly: Israel must issue clear warnings and present unequivocal evidence before attacking a hospital.
Lack of evacuation safety	Art. 19 IV. GC	Forced evacuations from hospitals without the guarantee of safe means of transport and admission to other protected facilities.

- *The charge of genocide*

Although genocide is a distinct crime requiring a specific intent to destroy (*dolus specialis*), many of the aforementioned war crimes are considered acts that can fall under the umbrella of genocide charges. Their legal basis under international law is enshrined in Article II of the Genocide Convention and Article 6 of the Rome Statute. This encompasses acts such as killing or causing serious bodily or mental harm with the intent to destroy, in whole or in part, a national, ethnic, racial or religious group as such. These acts (killings, mass destruction, starvation) are not only war



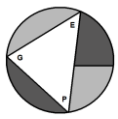
crimes but also acts carried out with the intent to eliminate, in whole or in part, the Palestinian population in Gaza.

According to the aforementioned definition, war crimes constitute grave breaches of the laws and customs of international law applicable in armed conflict (IHL, Article 8 of the Rome Statute of the ICC). The relevant elements of the offense in Gaza are:

- Disproportionate attacks (violation of the Principle of Proportionality): An attack is prohibited if the anticipated civilian loss is disproportionate to the anticipated concrete military advantage. The high number of killed civilians in Gaza corroborates the suspicion of disproportionate warfare.
- Attacks on civilian objects: The targeted destruction of residential buildings, hospitals (unless these are being used for immediate military purposes), schools and cultural institutions.
- Intentionally Starving Civilians (Art. 8(2)(b)(xxv) Rome Statute): The obstruction or blockade of essential supplies of food, water and medicine that leads to the deliberate harm of the civilian population. The ICC Prosecutor's Office has initiated investigations regarding this matter.

- *Crimes against Humanity*

This type of crime (Article 7 of the Rome Statute) is not only committed in the context of an armed conflict. To be defined as such, the acts must occur as part of a widespread or systematic attack directed against any civilian population. Crucially, the acts must be carried out pursuant to a State or (other) organisational entity and policy and not merely be



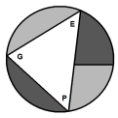
isolated acts. These manifest specifically in elements that aim at extermination and/or expulsion:

- Extermination: The intentional infliction of conditions calculated to bring about the destruction of a part of the population.
- Deportation or forcible transfer: The forced mass displacement of civilians from their area of residence without justification under international law. Israel's order to evacuate residents in the north of Gaza and the multiple displacements of hundreds of thousands of civilians in the entire Gaza Strip could fall under this element/type of crime against humanity.

Humanitarian Catastrophe and Media Representation

The massive destruction in Gaza is giving rise to violence and trauma across generations, severely undermining prospects for a peaceful resolution. Moreover, the global debate on compliance with IHL in Gaza has contributed to an erosion of international trust in the rule of law and the consistency of international norms. The conflict between Hamas and Israel has revealed the weaknesses and limitations of international institutions in monitoring, let alone protecting, the human rights situation, but also the opportunities offered by modern information and communication society to uncover possible abuses and war crimes and to publicly identify the alleged perpetrators.

At the same time, it has exposed how a heavily armed state like Israel has been able to publicly portray and 'sell' its disproportionately harsh actions against Gaza's civilian population—such as direct attacks on civilians or hospitals, massive destruction of civilian infrastructure,



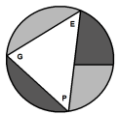
forced displacement, obstruction of humanitarian aid, killings of women and children and deprivation of essential goods—as attacks against ‘terrorists’ or ‘collaborators,’ or as unavoidable collateral damage, to most political and economic global players.

- *The State of Israel—Between political-media victim narratives and accusations of genocide*

The ongoing conflict between Israel and Hamas possesses not only a military dimension, but above all a symbolic and communicative one. Since the Hamas attacks in October 2023 and the subsequent large-scale Israeli military operations in Gaza, competing narratives, moral interpretations and emotional mobilisations have overlapped. Israel’s self-portrayal as the victim of a terrorist threat stands in tension with reports of tens of thousands of civilian casualties resulting from the ongoing attacks in Gaza.

At the same time, a global protest movement made up of private individuals, NGOs and civil-society initiatives has emerged, calling for compliance with international humanitarian law and denouncing war crimes (cf. Ambos 2024, Schulz 1976).

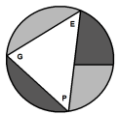
From a sociological perspective, the conflict presents itself as a struggle over interpretive authority within a mediatised, globally networked public sphere. Immediately after the Hamas attacks, the Israeli government and large parts of the Israeli media relied on a highly emotionalised narrative of victimhood and security, emphasising the traumatising of the Israeli population, the threat of terrorism and the necessity of self-defense. By selectively highlighting certain aspects—



such as the brutality of the Hamas attacks, abductions, fear and national unity—a framing is created that morally legitimises military countermeasures, even disproportionate ones. From a media studies perspective, this approach can be understood as a strategic staging of vulnerability. States use such communication strategies to generate sympathy, legitimacy and international support.

In Western states, particularly in Europe and North America, historical motives of guilt and solidarity related to the Holocaust continue to operate, further reinforcing Israel's security narrative. However, this form of self-presentation leads to asymmetric visibility: while Israeli suffering is placed at the center of Western mainstream media, Palestinian victims often appear only secondarily or within the context of military justifications. This reproduces a structural inequality in media representation, which in turn shapes global perceptions of the conflict (cf. Bartov 2024).

Parallel to Israel's portrayal of itself as a victim, a second, opposing narrative has emerged, carried by humanitarian organisations, local journalists and transnational activists. Images of destroyed neighbourhoods, injured children and overcrowded hospitals generate an emotional counter-public in which Israeli warfare is criticised as disproportionate, colonial and in violation of international law. This humanitarian counter-narrative is based on visual evidence and empathy. Digital platforms play a central role in this: videos and eyewitness accounts are circulated directly via social media, bypassing the traditional gatekeeping functions of established media. This creates a new form of global witnessing that increasingly challenges Israel's interpretive dominance.

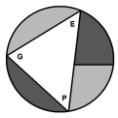


At the same time, this dynamic reflects a pattern frequently discussed in the sociology of media society: the competition for attention produces a moral economy of images in which suffering becomes a tool of political communication. This emotionalisation can, on the one hand, foster mobilisation, but on the other hand also lead to polarisation and moral exhaustion (cf. Asseburg/Busse 2024).

- *Transnational protest movements and their impact*

The global protests against the violence in Gaza mark a new phase of civil-society globalisation in which NGOs, human rights organisations, student movements and diasporic networks operate within a transnational communication space, formulate moral claims and demand political accountability. These forms of protest are characterised by their hybridity, as these combine physical demonstrations with digital mobilisation and legal interventions with symbolic actions. The protests in Berlin, London, New York and Cape Town are interconnected, sharing hashtags, visual language and moral appeals, thereby creating a “*digital public sphere of indignation*” that relies on immediate emotional responses while simultaneously articulating normative demands for accountability and international justice.

This expression of global solidarity with the Palestinian civilian population is, however, frequently confronted with accusations of antisemitism in Western states—accusations that can be used, depending on political orientation or context, to legitimise or delegitimise these protests. While Israel's self-presentation as a victim reinforces a security logic, Palestinian suffering activates a human rights logic. Both narratives are morally charged and emotionally effective, with political



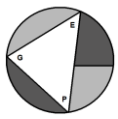
legitimacy in today's information and communication society depending largely on which interpretive framework succeeds in dominating public attention (cf. Dor 2004/2005, Hafez/Tröger 2024, Hassen 2024, Mey/Bax 2024, Swoboda 2024).

Between Rubble and Future—An Outlook

The current ceasefire in Gaza, which came into effect in recent weeks (as of the end of October 2025), is, according to the latest reports, very fragile. The ceasefire and the fragile peace in the region are based on a US peace plan that includes, among other things, an Israeli troop withdrawal from the Gaza Strip, the release of Israeli hostages by Hamas and the release of Palestinian prisoners by Israel. Hamas has already handed over some of the hostages, both living and dead, to Israel. The complete release of the hostages is a central component of the agreement. In return, Israel has agreed to release Palestinian prisoners, including those with links to Hamas or other militant groups.

Current situation

Meanwhile, the humanitarian situation in the Gaza Strip remains catastrophic. Infrastructure is largely destroyed, and the population suffers from extreme shortages of food, water, medicine and electricity. Aid deliveries have begun in recent weeks, but are often insufficient and have been temporarily halted by Israel, which claims Hamas violated the ceasefire. Indeed, the security situation in Gaza remains volatile because, although weakened, the terrorist group Hamas is still considered the strongest force on the ground. The internationally

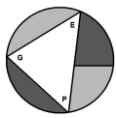


recognised goal and a key element of the peace plan is the lasting stabilisation of the coastal strip and the disarmament of Hamas. In this context, the deployment of a UN-mandated peacekeeping force is being discussed. However, crucial questions regarding the long-term future and security of the Gaza Strip remain unanswered. The situation is too dynamic and can change rapidly from one moment to the next, with the fragile ceasefire and the catastrophic humanitarian situation being the most pressing concerns.

Immediate aid and recommendations

The ceasefire opens a brief window for aid and reconstruction, but it is not synonymous with healing. Experts agree on one point, however: reconstruction is not just about building; it also requires social engineering, necessitating massive and coordinated investments in the healthcare system, psychosocial support, political participation and secure, territorially defined borders. Otherwise, the reproduction of violence and trauma is imminent. Recurring violations of the agreement, closed borders, and unresolved issues regarding disarmament, governance, and the repatriation of the dead and prisoners could again facilitate a resurgence of violence.

Both the material destruction—estimates put the reconstruction needs at \$70 billion—and the massive traumatising, with very high rates of PTSD and depression, especially among children, form the long-term foundation for a political, economic and social rift between Israelis and Palestinians. Without large-scale, politically secured, participatory and long-term measures, there is a risk of chronic poverty, fragmentation of



civil society, lasting trauma consequences across generations and a region that could become unstable again.¹⁰

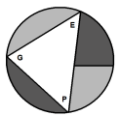
- *Psychosocial problems and their consequences*

One of the most significant consequences will be the traumatization and social reproduction of suffering; children with untreated trauma exhibit poorer learning and social skills, which in the long term exacerbates social inequality and tendencies toward political radicalisation. This is compounded by the loss of social capital, such as the destruction of neighbourhood networks, NGOs, schools and health centers, which inevitably leads to a collective erosion of trust and a loss of collective agency. All of this has repercussions for gender dynamics in a society where women already bear the brunt of care work and are perceived as not having equal rights. Although reconstruction can offer significant job opportunities, conservative backlash and violence against women could increase if safeguarding systems are not established. Simultaneously, migration and displacement will alter the demographic development of the Gaza Strip (Taha et al 2024).¹¹

- *Specific recommendations for policy & practice*

(1) Immediate action: humanitarian access and protection in the form of guaranteed, monitored corridors; demining and recovery of the dead to promote social confidence.¹²

(2) Short-term measures: mental health and rehabilitation services in the form of mobile teams, school-based programs and training for local professionals; with priority on child- and family-centered. Interventions.¹³



(3) Medium- to long-term measures: Participatory reconstruction mechanism in the form of funds with transparent conditions, mandate to involve Palestinian researchers and planners, anti-corruption mechanisms and employment programs linked to reconstruction in the form of short-term cash-for-work and training measures for skilled trades (construction, electrical, plumbing, etc.).

(4) Long-term reconciliation and education programs: trauma pedagogy in schools, cultural initiatives to reconstruct social trust, and in the area of research and monitoring, long-term cohort studies on the consequences of trauma, the impact assessment of aid programs and on transparent data platforms.

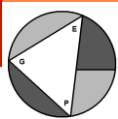
In summary, political security, financing and the integration of local expertise are the three non-interchangeable conditions for an optimistic scenario for the future of the region to be possible (WHO 2025).¹⁴

Concluding Observations: The Different Scenarios

An optimistic scenario—A path to reconstruction and resilience

This optimistic scenario is based on the successful combination of a stable ceasefire, multilateral financing and local participatory planning, with strict transparency in the use of funds, the active involvement of Palestinian actors at all levels and effective protection against political instrumentalisation of aid being the main conditions.

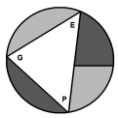
In the first phase (0–2 years), the focus is on humanitarian stabilisation, meaning that a stable ceasefire immediately provides secure humanitarian



access for aid organisations. The most urgent needs of the population are alleviated through the rapid construction of emergency shelters and the provision of basic necessities (water, food, etc.). Simultaneously, efforts begin to address the massive collective trauma by providing mobile psychological health services that deliver immediate psychosocial support directly in the devastated communities, thus enabling the first steps toward the psycho-emotional stabilisation of the civilian population.

In a second medium-term phase (2–6 years), international funding and local planning ensure the targeted reconstruction of the region and the restoration of critical infrastructure, including the repair of water and sanitation systems, the reopening and modernisation of health centers, and the construction of new schools. In the socio-economic context, the population needs a secure livelihood, which requires stimulating the local economy, establishing local employment programs (e.g. “cash-for-work”) and directly integrating job seekers into reconstruction projects. Simultaneously, psychosocial support is being expanded, with mobile services developing into large-scale post-traumatic stress programs integrated into public health and education systems to mitigate the long-term effects of the conflict and strengthen the community's social resilience.

In the final, longer-term phase (6–15 years), the success of the reconstruction approach becomes evident: the secured infrastructure and improved security situation lead to the return of many refugees to their revitalized home communities. The strengthened social resilience and the cohesion of local actors, activated through citizen participation, form the basis for a functioning society. Although a final, comprehensive political solution to the conflict remains elusive, stability and economic recovery lead to a gradual political normalisation in everyday life. This manifests itself in a reduced



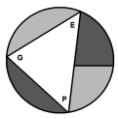
number of restrictions and increased autonomy for Palestinian civil institutions. Strict adherence to transparency and a focus on the needs of the civilian population ensure that the social and economic progress achieved is sustainable and not undermined by political manipulation.

The middle scenario—Fragile stability and chronic uncertainty

This scenario is characterised by a degree of post-conflict recovery, which is chronically hampered by persistent insecurity, a lack of political solutions and insufficient resources. It culminates in a cycle of stagnation in which the population survives but fails to achieve genuine self-determination or long-term stability.

In the initial phase (0–2 years), a lasting de-escalation proves impossible. Only a fragile calm ensues, repeatedly interrupted by episodic ceasefire violations. These recurring conflicts and battles prevent aid organizations from operating consistently and comprehensively. This results in limited and irregular aid flows, meaning the humanitarian crisis is never fully resolved and the population remains in a state of perpetual insecurity.

In a second medium-term phase (2–6 years), chronic problems prolong development. Reconstruction begins, but due to a lack of comprehensive funding commitments and ongoing logistical hurdles, it proceeds slowly, resulting in insufficient housing and a hesitant restoration of water and electricity supplies. The stagnant economy and inefficient reconstruction processes lead to high unemployment, particularly among young people, and a precarious financial situation for households. Initial psychosocial support and assistance programs also remain inadequate, allowing persistent trauma to become deeply entrenched in society. This combination of economic



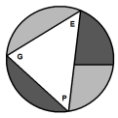
bleakness and ongoing psychosocial stress leads to growing frustration, severe social problems, and internal tensions within the population.

In the final, longer-term phase (6–15 years), social problems solidify into a chronic crisis of dependency and disintegration. The failure to revive a self-sufficient economy and the ongoing political gridlock lead to a permanent dependency on external aid—whether in the form of humanitarian aid or reconstruction funds. The lack of strong and effective state institutions results in social fragmentation: The population primarily organizes itself through informal networks such as communes and clans, which provide basic services and security, while central state authority remains absent or disintegrates. The lack of prospects, high unemployment and social hopelessness and dependency ultimately intensify the tendency of younger generations to migrate, and the country loses its most skilled workforce in the long term.

The pessimistic scenario—Return to violence

In this scenario, hope for lasting de-escalation or peace dwindles, and the region once again descends into a spiral of war and violence. The fragile ceasefire collapses under the weight of renewed military or terrorist actions. As a consequence, Israel closes the briefly opened humanitarian corridors in Gaza, exacerbating the crisis by failing to provide the civilian population with essential supplies and fueling renewed accusations of deliberate starvation.

In the medium term, the ongoing fighting and the resulting instability lead to a further, profound breakdown of state and local structures. The ability of local and national authorities to provide basic services and security is completely eroding. The resulting vacuum is being exploited by

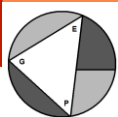


militant and rival groups to consolidate their power. The continuing violence and internal conflicts can increase the likelihood of regional escalation, potentially involving neighboring states through cross-border attacks, refugee flows, or proxy wars. Beyond expanding the immediate conflict zone, this creates a vicious cycle of generations growing up amidst hatred and destruction, with any chance of future reconciliation denied them. The region will remain unstable for decades, with cyclical outbreaks of violence becoming the norm and neither side able to achieve lasting peace or victory: a severe setback for regional peace indefinitely and the beginning of an era of chronic insecurity.

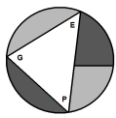
Dr Rodolfo Valentino is a Director of the Independent European Sociological Research institute (EUROSOR; www.facebook.com/eurosor), and a Director of the Spanish branch based in Santander of the European Institute for Studies on Migration, Social Inclusion and Intercultural Learning (IEM), Bonn, Germany (<https://migrapolis.de/bim-e-v/>; <https://www.linkedin.com/in/drrodolfovalentino/>). He is also responsible for his and others' IEM publications on ResearchGate and Academia (e.g. <https://independent.academia.edu/RodolfoValentino>). eurosor.iem@gmail.com psciocura.valentino@gmail.com.

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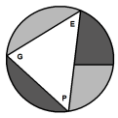
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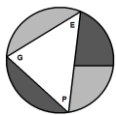
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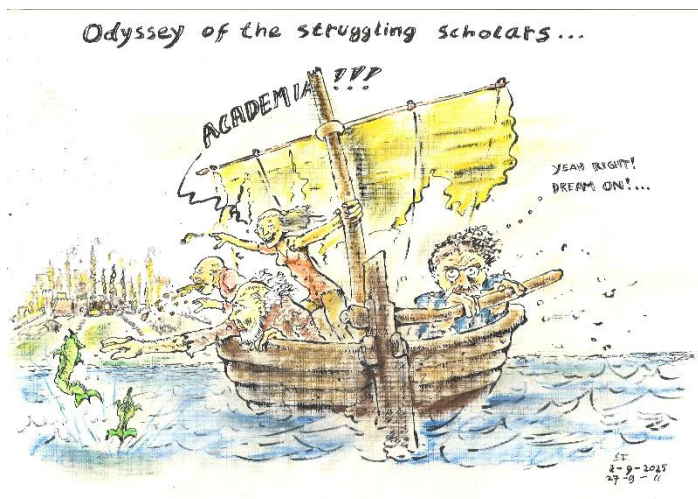
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