

# Health and mental health services in Gaza: A system under siege

## Gazze'de sağlık ve ruh sağlığı hizmetleri: Kuşatma altında bir sistem

### Abstract

Gaza's health care and mental health systems have faced long-standing challenges due to years of political instability, continuous Israeli military wars, and a crippling blockade that has been in place since 2007. These factors have severely hindered Gaza's ability to provide primary health care, resulting in a system that struggles to meet the needs of its population. Even before October 7th, 2023, Gaza's healthcare infrastructure was on the brink of collapse, and mental health services were unable to meet the growing needs of the population. The October 3rd, 2023, Israel's war in the Gaza Strip with its 'systematic violations of human rights' has led to the catastrophic deterioration of Gaza's health infrastructure to date. This Israeli war with its 'systematic violations of human rights', marked by intense Israeli military operations and massive destruction, pushed an already fragile healthcare system into a severe crisis. This paper examines the state of healthcare and mental health services in Gaza. It evaluates the impact of the continued Israeli offensives in the Gaza Strip, particularly during the 2023-2024 Israeli war with 'systematic violations of human rights'.

**Keywords:** Gaza strip; health services; mental health services; war

### Öz

Gazze'nin sağlık ve ruh sağlığı sistemleri, yıllardır süregelen siyasi istikrarsızlık, İsrail'in aralıksız devam eden askeri savaşları ve 2007 yılından bu yana devam eden abluka nedeniyle uzun süredir devam eden zorluklarla karşı karşıyadır. Bu faktörler Gazze'nin birinci basamak sağlık hizmeti sunma kabiliyetini ciddi şekilde engellemiş ve nüfusun ihtiyaçlarını karşılamakta zorlanan bir sistem ortaya çıkmıştır. Gazze'nin sağlık altyapısı 7 Ekim 2023'ten önce bile çöküşün eşiğindeydi ve ruh sağlığı hizmetleri nüfusun artan ihtiyaçlarını karşılayamıyordu. İsrail'in 3 Ekim 2023'te Gazze Şeridi'nde başlattığı ve 'sistemik insan hakları ihlalleri' içeren savaş, bugüne kadar Gazze'nin sağlık altyapısının feci şekilde kötüleşmesine yol açmıştır. İsrail'in yoğun askeri operasyonları ve kitlesel yıkımın damgasını vurduğu, 'sistemik insan hakları ihlalleri' içeren bu savaş, zaten kırılgan olan sağlık sistemini ciddi bir krize sürükledi. Bu çalışma Gazze'deki sağlık ve ruh sağlığı hizmetlerinin durumunu incelemektedir. Gazze Şeridi'nde devam eden İsrail saldırılarının, özellikle de 2023-2024 'sistemik insan hakları ihlalleri' ile yürüttüğü İsrail savaşı sırasındaki etkisini değerlendirmektedir.

**Anahtar Sözcükler:** Gazze şeridi; ruh sağlığı hizmetleri; sağlık hizmetleri; savaş

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## GAZA'S HEALTH SYSTEM UNDER SIEGE

The region, home to over two million people, has endured years of blockade and continuous Israeli military assaults, which have severely impacted its healthcare infrastructure and limited access to essential services. Since 2007, the blockade by Israel, supported by Egypt, has exacerbated the humanitarian crisis, crippling health services and contributing to a significant rise in mental health issues (1). These problems have been further compounded by repeated escalations of violence, most notably the 2023-2024 conflict, which has devastated an already fragile system. Dr. Iman Farajallah interviewed Dr. Osama Muhjez, a physician working in a shelter, he stated that *“the health situation in Gaza prior to the war, while not optimal, was relatively stable. However, several significant challenges persisted, including a high prevalence of illness among the population, inadequate hospitals, limited ambulance services, and issues with sanitation and hygiene. These factors strained the healthcare system but were manageable compared to the current post-war crisis. Vulnerabilities marked the pre-war system, but these were not on the catastrophic level that emerged later.”*

Even before outbreak of Israel's war, which erupted on 7 October 2023 and involved 'systematic human rights violations,' Gaza's health system was on the verge of collapse due to longstanding infrastructure deficiencies. Power outages and a lack of medical supplies—stemming from the blockade—had already crippled the system (2). Gaza's 36 operational hospitals and 3,412 beds were insufficient to meet the needs of its 2 million residents, offering just 1.55 beds per 1,000 individuals (3). The blockade, which has been in place for over 17 years, has restricted the entry of medical equipment, spare parts, and critical supplies, exacerbating an already precarious situation (4).

Before October 7th, 2023, the health system in Gaza faced significant structural deficiencies due to years of conflict and the blockade imposed by Israel and Egypt. The blockade severely restricted the import of medical supplies, equipment, and building materials necessary for maintaining and expanding healthcare facilities (5). By 2022, the Ministry of Health in Gaza, which coordinated services alongside UNRWA and international non-governmental organizations (NGOs), consistently reported chronic shortages of



Picture 1. Al-Aqsa Hospital (Photo courtesy of Iman Khalid).

essential medicines and medical disposables (6). Furthermore, the blockade prevents the entry of vital medical equipment and supplies, including life-saving drugs and crucial medical disposables. In 2023, WHO reported that 50% of essential medicines and 40% of basic medical disposables were at zero stock, making comprehensive healthcare nearly impossible (3). The blockade also severely limits the movement of patients who require specialized care outside Gaza, with only a small percentage of permits granted for those needing to travel to the West Bank, Israel, or abroad for treatment. As a result, many patients with chronic illnesses, cancer, and other critical conditions are left without adequate care (7,8).

Power shortages are another significant challenge. The health sector, reliant on electricity for running life-saving equipment and maintaining sanitary conditions, has struggled with frequent outages. Hospitals have been forced to rely on fuel-powered generators, which are in short supply due to the blockade. This situation makes it difficult for healthcare providers to maintain consistent services, particularly for patients in intensive care units or those dependent on dialysis machines (7).

The recurrent Israeli wars in Gaza led to the deterioration of the healthcare sector and have had a profound impact on the health and well-being of the entire population. During the 2014 Gaza war, prioritizing care for injured patients significantly overshadowed other medical conditions. Hospitals and primary healthcare centers (PHCs) were overwhelmed, with outpatient departments, emergency rooms, surgical wards, and operating theaters inundated by the influx of casualties (8). The demand for medical supplies surged, often outstripping availability in quantity and

timeliness. The shortage of hospital beds and overwhelmed emergency triage systems exacerbated the crisis, as family members, onlookers, and media further congested emergency rooms. Hygiene practices and infection control measures deteriorated under the immense workload, according to key informants from hospitals and PHCs (9).

Many patients were prematurely discharged from hospitals, negatively impacting their recovery process. The war also claimed the lives of 23 health workers, including 16 while on duty and seven at home, with 83 others injured. Ambulance drivers—working for the Ministry of Health (MoH), the Palestinian Red Crescent Society (PRCS), Palestinian Medical Relief Society (PMMS), Civil Defence, and various NGOs—made up the majority of those injured, alongside doctors, nurses, pharmacists, and laboratory technicians. Targeting health facilities constituted a blatant violation of International Humanitarian Law (10,11). Due to the ongoing siege, Gaza's hospitals were unable to provide comprehensive tertiary care, mainly because of shortages in technical equipment and inadequate training. As the number of casualties grew, secondary and tertiary care facilities in Gaza reached total capacity. Patients with complex injuries, including multiple organ trauma, amputations, severe head and neck trauma, and spinal injuries, had to be referred outside Gaza due to a lack of local resources (8).

The Mental Health Unit of the MoH reported a significant shortage of psychotropic drugs before the conflict, with 27 of 42 essential medications out of stock for over six months. This shortage persisted during and after the war despite an anticipated rise in demand for these drugs due to the conflict's psychological impact (9). Routine mental health services were also disrupted, as PHC mental health programs were suspended, and the functionality of centers diminished. Only two of six Community Mental Health Centers (CMHCs) remained operational, with others closed due to damage or the inability of mental health workers to report to work. Although the mental hospital remained open for severe cases, only 30% of the mental health workforce was available (8).

Reproductive health (RH) services faced significant challenges before and during the crisis. These challenges included shortages of drugs and medical

supplies, compounded by inadequate training and numbers of midwives. Nurses were often forced to fill midwifery positions in PHCs, contributing to overcrowding and long waiting hours for RH services. While antenatal care (ANC) services were sufficient and widely utilized by educated women of reproductive age, postnatal care (PNC) services were chronically underdeveloped (10). The ongoing Israeli blockade, coupled with a prolonged financial crisis within the MoH, led to chronic shortages of essential drugs and medical disposables in Gaza. Coping mechanisms, such as reusing disposables and prescribing second or third-line medications, posed significant risks to patients and the healthcare system. The lack of essential drugs often forced patients to seek care outside Gaza, incurring high costs for treatments that were once available locally (9).

Despite these shortages in health facilities, necessary drugs were often available on the private market, leaving patients to either accept suboptimal medications from the health facility or pay out of pocket for more appropriate treatments, exacerbating inequities in healthcare access. The proportion of zero-stock drugs—those critically low and expected to deplete within a month at the Central Drug Store (CDS)—increased over time, peaking at 58% in 2012. In June 2014, the CDS reported a stockout of 28.3% of essential drugs and 53.8% of necessary medical items (8). An assessment of 48 tracer drugs selected from the PHC essential drug list further underscored the critical drug shortages. However, this evaluation only reflected conditions in peripheral MoH facilities, excluding UNRWA and NGO-run health centers (9,12).

### **Impact of the blockade on health and mental health services**

The Israeli blockade, imposed since 2007, has significantly impacted Gaza's health system, including mental health services. The blockade restricts access to essential supplies such as medical equipment, medication, and building materials and has devastated Gaza's economy. By 2022, unemployment levels in Gaza were among the highest globally, with a rate of 46.6% in the first quarter and youth unemployment (ages 15-29) at 62.5%. Additionally, 62% of the population required food assistance (13).

The health system's reliance on foreign aid makes it vulnerable to fluctuations in international support. Organizations like UNRWA, WHO, and NGOs provide critical assistance, often insufficient to meet growing needs. Gaza's healthcare providers face constant shortages of essential medical supplies, and the blockade further limits their ability to offer advanced care for chronic illnesses, mental health disorders, and trauma recovery (14).

The restrictions on movement under the blockade also hinder the professional development of healthcare workers and the delivery of mental health services. The blockade prevents professionals from traveling outside Gaza for training or collaboration, and international humanitarian workers often face difficulties entering the area to provide mental health support (7).

### **Mental health in crisis**

Before October 2023, Gaza's mental health system was already under extreme pressure due to decades of violence, poverty, displacement, and loss. The psychological burden on the population was staggering, with rates of mental health disorders such as depression, anxiety, and post-traumatic stress disorder (PTSD) far exceeding those of other conflict zones. In a 2022 Palestinians' Psychological Conditions Survey (PPCS) conducted by the World Bank in collaboration with the Palestinian Central Bureau of Statistics. The survey revealed that 58% of all individuals aged 18 and above exhibited symptoms consistent with depression, with a higher prevalence in Gaza (71%) compared to the West Bank (50%). Additionally, about 7% of adults screened positive for post-traumatic stress disorder (PTSD). The prevalence of post-traumatic stress symptoms (defined as a score greater than one) is notably higher among individuals in Gaza compared to those in the West Bank. Adults residing in Gaza face an elevated risk of mental health challenges and report lower levels of life satisfaction. On the other hand, aggression levels are observed to be higher among individuals in the West Bank than in Gaza. The repeated exposure to traumatic events like bombings, demolitions, and the loss of loved ones had a long-lasting psychological impact on both adults and children in Gaza (15).

Children were especially vulnerable. Research highlighted that 95% of children in Gaza exhibited

symptoms of anxiety, depression, and trauma. Gaza's children exhibited PTSD symptoms, including flashbacks, nightmares, and behavioral issues. (16) Many had lived through multiple conflicts, exacerbating their trauma. Women were also disproportionately affected, as they often carried the emotional burden of caring for traumatized children while grappling with their mental health struggles (17).

Despite the urgent need for mental health services, Gaza's system was ill-equipped to meet the demand. With fewer than 30 psychiatrists serving a population of over two million, most of these professionals were concentrated in urban areas, leaving rural communities severely underserved. This shortage, coupled with the blockade's restrictions on professional development opportunities for local mental health workers, severely limited the quality of care. By mid-2023, mental health resources were concentrated in urban areas, leaving rural communities largely neglected (18). Cultural stigmas around mental health, particularly for women, further reduced access to care.

The mental health crisis in Gaza is exacerbated by a shortage of specialized mental health clinics and insufficient training among primary healthcare providers. Barriers to accessing mental health services include a lack of trained staff, limited facilities, poor quality of services, affordability issues, under-resourcing, stigma, and discrimination (19). Organizations like the Gaza Community Mental Health Programme (GCMHP) and Médecins Sans Frontières (MSF) were crucial in providing community-based mental health interventions. Still, their efforts were hampered by financial constraints and cultural stigmas associated with mental health. MSF has reported that healthcare workers in Gaza experience constant fear, stress, and anxiety, which hampers their ability to provide adequate care (20).

The psychological toll of Gaza's crisis is immense, and access to mental health services is minimal. PTSD, depression, and anxiety are widespread, particularly among vulnerable populations such as children and women. GCMHP studies show that nearly 60% of Gaza's children have PTSD, a result of repeated exposure to violence, home destruction, and family loss (7). The trauma from the Israeli war of 2023–2024 which involved 'systematic human rights violations', com-



pounded the suffering of children already affected by previous conflicts in 2008–2009, 2012, and 2014.

During the 2012 war, approximately 46% of public health facilities could not operate at the height of the conflict, and there was a significant reduction in hospital beds and operating theatres. Damage assessment estimated that reconstructing the destroyed health infrastructure would cost over 12 million USD, excluding medical equipment. The timeline for reconstruction depends on access to building materials, which is limited due to the blockade. Many facilities reopened after the ceasefire, though often with reduced capacity. The conflict severely disrupted healthcare services, reducing outpatient, ICU, laboratory, and surgical capacities. (12).

### **The October 7, 2023, conflict and its immediate impact on healthcare Destruction of health infrastructure**

The current war by the systematic human rights violator İsrail, starting on October 8th, 2023, has had a catastrophic impact on Gaza's health infrastructure. The bombing campaigns and ground incursions have destroyed many hospitals, with Al-Shifa Hospital, one of Gaza's most extensive facilities, suffering significant damage. Medical teams struggled to treat thousands of wounded civilians and combatants, and critical resources, such as medical supplies and fuel for generators, became even scarcer. By the end of 2023, 80% of Gaza's hospitals were either non-operational or functioning at severely reduced capacity (13). Routine medical procedures were often delayed, and life-saving surgeries were sometimes canceled due to a lack of medical supplies or available operating rooms (22). The Israeli attacks on Gaza's healthcare infrastructure, starting on October 8th, 2023, crippled the region's already fragile inadequate healthcare system. Airstrikes and ground incursions destroyed hospitals, clinics, and ambulances, reducing the capacity to treat patients. Numerous hospitals and clinics were damaged or destroyed, including Gaza's only COVID-19 testing center, significantly disrupting emergency medicine, trauma care, and maternal health services (23,24). Within weeks of the conflict, over 50% of Gaza's hospitals were damaged or destroyed, overwhelming the remaining facilities. The few operating



Picture 2. Patients at Al-Aqsa Hospital (Photo courtesy of Iman Khalid).

hospitals functioned far beyond their capacity, lacking critical medical supplies, electricity, and staff. The impact of these attacks is compounded by the loss of vital medical personnel, with approximately 4% of Gaza's specialist doctors being killed during the conflict, further impairing the healthcare system's ability to function (22). These attacks on healthcare infrastructure have long-lasting consequences for the population's access to essential medical services.

The blockade, tightened after the conflict, severely restricted the flow of humanitarian aid, further aggravating the situation. Despite limited humanitarian corridors, medical relief organizations such as the International Committee of the Red Cross (ICRC) struggled to deliver essential supplies, including medical equipment and medications (25,26).

Dr. Osama Muhjez, a physician working in a shelter, spoke about the impact of the The current war by the systematic human rights violator İsrail on Gaza's health system and the challenges it faces, "The ongoing war has exacerbated the existing health challenges in Gaza, pushing the system beyond its breaking point. What was once manageable problems have escalated uncontrollably. The destruction of critical infrastructure,

*including hospitals and medical facilities, has worsened the situation dramatically. Essential resources, such as medicine and medical supplies, have become scarce, further complicating the ability to provide care. Consequently, the healthcare challenges have intensified to the point where they are beyond resolution under the current circumstances.”*

As for the challenges he witnessed, he stated, “As a physician working in a shelter, one of the most pressing issues is the severe shortage of essential medications, which is compounded by the overcrowded conditions within the shelter. The lack of hygiene and sanitation exacerbates the spread of diseases, creating an environment where even basic healthcare is a struggle. These conditions make it difficult to manage the displaced population’s health needs effectively.”

In terms of the limited medical resources, he added, “Given the severe shortage of supplies and medicines, it is impossible to address all medical cases adequately. For patients with serious conditions, such as kidney disease, who require hospital-based treatment, the lack of facilities makes proper care unattainable. Pain relief can be provided if medication is available for those with less severe conditions. In this context, maintaining hygiene has become a priority to prevent the spread of further illnesses. However, the ability to manage medical needs is critically compromised.”

## **1. Mental health crisis in the aftermath of October 7, 2023**

### **1. The escalating mental health crisis**

The ongoing 2023–2024 Israeli military operations against Palestinians in the Gaza Strip have exacerbated an already fragile mental health landscape. The continuous exposure to bombings, displacement, and the breakdown of social systems has intensified the demand for mental health services. The resulting psychological trauma has particularly impacted children, who are left without access to essential support systems, facing homelessness, starvation, and thirst amidst relentless bombing. The loss of life, severe injuries, and tragic loss of loved ones have deepened the collective psychological wounds of the population (24).

The psychological toll of the conflict has been immense, with widespread destruction and displacement leaving much of Gaza’s population in severe distress.

Mental health professionals report a sharp rise in cases of post-traumatic stress disorder (PTSD), depression, and anxiety, especially among children and women. Many individuals who were already struggling with mental health issues due to previous conflicts have found their conditions worsening, while others have developed new symptoms in response to the traumatic events (24).

Children are particularly vulnerable to the psychological impacts of the conflict. A survey by the GCMHP found that over 80% of children in Gaza exhibited symptoms of PTSD, including intense fear, sleep disturbances, and hypervigilance. Many have witnessed violence firsthand, lost family members, or been displaced from their homes, leaving them in extreme psychological distress. The destruction of schools, which often serve as safe spaces for children, has further disrupted their sense of security and normalcy (24).

Women have also borne a significant emotional burden. As primary caregivers, many are managing their families’ trauma while coping with their own grief and loss. Studies conducted by mental health organizations in 2024 indicate a dramatic increase in anxiety and depression among women in Gaza. Many report hopelessness and profound fear for their children’s future (27).

### **2. The breakdown of mental health services**

Mental health services, already limited before the conflict, became even more inaccessible in the months following the escalation. Several mental health clinics were destroyed or severely damaged, and the remaining facilities were overwhelmed by the sheer number of people seeking help. Mental health professionals, already working under extreme conditions, found themselves stretched to the limit. International aid organizations, including the World Health Organization (WHO), called for urgent psychosocial support, but the blockade and security hindered the delivery of necessary resources (28).

The destruction of health facilities further debilitated the mental health infrastructure in Gaza. Airstrikes targeted residential areas, hospitals, and health centers, leading to the destruction of vital mental health services. According to MSF, many mental

health centers in the Gaza Strip were damaged or became inaccessible due to the military bombardment. This destruction drastically reduced the already scarce number of operational facilities.

In addition to infrastructural damage, power outages and disrupted transportation networks hindered access to mental health services. Patients and health-care workers found it increasingly difficult to travel to mental health centers, and many facilities were forced to shut down due to security risks. Healthcare providers themselves were often targeted through physical attacks, arrests, or the loss of loved ones, adding to their psychological distress and reducing their ability to provide care (28).

### **3. The escalating psychological toll**

The intensity and scale of the violence in October 2023 left tens of thousands displaced, with many families losing homes, livelihoods, and loved ones. Preliminary assessments by the GCMHP in 2024 indicate that symptoms of PTSD and acute stress have skyrocketed across all age groups, with more than 80% of children exposed to the conflict showing signs of severe psychological distress. For many, this Israeli war which involved 'systematic human rights violations', marks the third or fourth major military offensive in their lifetime, further complicating recovery.

Women, already facing high levels of mental health challenges, have been particularly affected. Alongside the trauma of losing family members and homes, many women have reported increased anxiety and depression due to their roles as primary caregivers in a war zone. The psychological toll of managing household responsibilities amid violence and economic insecurity has further deteriorated their mental well-being (26). Furthermore, the massive displacement caused by the conflict has forced many women into overcrowded shelters with unsanitary conditions, increasing the risk of infectious diseases and adding to their psychological distress (30). The compounded effect of these factors has led to a significant deterioration in the mental health of Palestinian women living in Gaza Strip, underscoring the urgent need for targeted mental health and psychosocial support interventions (31).

The destruction of clinics and the displacement of healthcare workers have incapacitated Gaza's already

limited mental health services. The few operational facilities have been overwhelmed, forcing mental health providers to shift their focus to crisis intervention rather than long-term care. Despite international organizations such as the WHO highlighting the urgent need for psychosocial support, delivering these services remains challenging due to ongoing security (27).

### **Mental health recovery and ongoing challenges**

The international community has recognized the urgent need for mental health support in Gaza. The United Nations (UN) and other international agencies have launched programs to provide psychosocial support to children, women, and families affected by the conflict (27). These initiatives include trauma counseling, group therapy, and community-based mental health programs designed to address acute mental health needs while fostering long-term resilience.

Despite these efforts, the mental health system in Gaza remains critically under-resourced. The destruction of mental health clinics during the conflict and a shortage of trained professionals have left much of the population without adequate care. In 2024, the World Health Organization (WHO) and UNICEF introduced training programs for local healthcare providers in trauma-informed care, focusing on children and adolescents (32). However, these initiatives are unlikely to meet the overwhelming demand for mental health services without substantial international funding and a political resolution to the blockade.

### **Community-based interventions and resilience**

Local organizations have played a crucial role in addressing Gaza's escalating mental health needs. The Gaza Community Mental Health Programme (GCMHP) has developed community-based interventions focused on trauma recovery, psychosocial support, and resilience-building for children and families (16). The GCMHP's culturally sensitive approach integrates mental health care into primary health services. They also provide trauma-informed care training to local healthcare workers and offer community outreach programs aimed at reducing the stigma around mental health.



Culturally relevant approaches are essential in Gaza, where religion and spirituality serve as fundamental coping mechanisms for many Palestinians. Incorporating these elements into therapeutic practices has improved outcomes (34). For instance, therapy sessions that incorporate prayer, religious narratives, and community-based healing traditions have helped build trust among patients who may be hesitant to engage with conventional mental health services.

### **The role of international aid in Gaza's**

International aid plays a crucial role in supporting both health and mental health services in Gaza, though it remains insufficient to meet the population's growing needs. Organizations such as Médecins Sans Frontières (MSF) and the International Committee of the Red Cross (ICRC) provide emergency medical and psychological services, yet these interventions are often short-term (35). For example, MSF has delivered trauma surgery and psychological support to victims of violence, while the ICRC has focused on rehabilitating some of Gaza's damaged healthcare facilities.

However, the effectiveness of international aid is hindered by political constraints, restricted access, and a lack of coordination among organizations. Furthermore, many international efforts are centered on emergency responses, which do little to address the long-term mental health challenges faced by Gaza's population (27). The World Health Organization (WHO) and other agencies have stressed the need for a more integrated approach that concurrently addresses both physical and mental health needs. However, this requires sustained commitment and resources, which are often unavailable due to the political complexities of the region.

The international humanitarian response to Gaza's health and mental health crisis, particularly following the Israeli war which involved 'systematic human rights violations, on October 8, 2023, has been substantial but inadequate, given the scale of devastation. International organizations such as MSF, the ICRC, and the WHO have spearheaded efforts to deliver medical supplies, provide trauma care, and offer mental health support. Nevertheless, their operations have been restricted by security concerns, logistical challenges, and the blockade's limitations (35).



**Picture 3.** The Israeli Occupation Military attacking the shelter at Al-Aqsa Hospital (Photo courtesy of Iman Khalid).

The WHO has taken the lead in coordinating efforts to restore some functionality to Gaza's healthcare system. Yet, the destruction of hospitals and the shortage of medical supplies have significantly hindered recovery initiatives. MSF continues to provide emergency medical care, including trauma surgeries, but its facilities are overwhelmed by the vast number of casualties. The ICRC has also worked to rehabilitate damaged health infrastructure in Gaza, though reconstruction efforts have been slow due to ongoing conflict and restrictions on importing construction materials (35).

Humanitarian organizations have highlighted the critical need for mental health support, launching initiatives to provide psychosocial assistance to those affected by the conflict. However, the mental health crisis in Gaza is so severe that the resources provided



by international organizations merely scratch the surface of what is required. Mental health professionals in Gaza have called for a more sustained and coordinated global effort to address the long-term psychological effects of the conflict, particularly on children and women (36).

### **The collapse of the health system and its implications**

The ongoing Israeli military operations have directly targeted medical infrastructure. Hospitals have been bombed or forced to evacuate, leading to reduced services and significant loss of life (38). Targeting health workers and ambulances has further exacerbated the humanitarian crisis (9). The destruction of Gaza's health system is an integral part of Israel's military strategy, violating international laws, such as the Fourth Geneva Convention, which mandates the protection of medical personnel and facilities during armed conflicts (35).

The collapse of Gaza's health system has dire implications for public health. Non-communicable diseases (NCDs), such as cardiovascular diseases, cancers and chronic respiratory diseases, were already a significant burden even before the last war, during which Israel committed 'systematic human rights violations'. The lack of essential medicines and medical care has worsened these conditions, with more than 80% of patients unable to access crucial treatments (4). Furthermore, the war, in which Israel committed systematic human rights violations, increased the spread of infectious diseases due to overcrowded shelters, lack of sanitation and limited access to clean water (37).

The psychological toll of the war, in which Israel committed systematic human rights violations, has been catastrophic, particularly for children and women. Gaza's only psychiatric hospital has been destroyed, and community mental health services are inaccessible. Post-traumatic stress disorder (PTSD) and other mental health issues are expected to become widespread as the population endures ongoing trauma (34). Without proper mental health interventions, these psychological scars will likely have long-lasting effects on Gaza's population.

When Dr. Farajallah asked Dr. Osama Muhjez about the prospects for overcoming current challeng-

es, he said, "At present, overcoming these healthcare challenges seems impossible. The situation has become catastrophic, with the continued destruction of medical facilities leaving much of the population without access to treatment. The shortage of medicines is particularly critical, making it difficult to provide even basic care. Until there is a cessation of hostilities and an influx of medical supplies, these obstacles remain insurmountable."

### **Conclusion and recommendations**

In conclusion, Gaza's healthcare and mental health systems are in a state of a catastrophic crisis, exacerbated by years of continuous Israeli wars and an enduring blockade. The devastating impact of the war, in which Israel committed systematic human rights violations, that escalated on October 8, 2023, has further decimated an already fragile infrastructure, leaving the population vulnerable and in desperate need of support. There is an urgent need for comprehensive international intervention to address the humanitarian catastrophe unfolding in Gaza. The public health crisis in Gaza demands urgent international intervention. Several critical actions are necessary to address the situation effectively:

1. Immediate cessation of hostilities: An urgent halt to Israeli military occupation hostilities and systematic human rights violations is essential to prevent further destruction and loss of life, as well as to allow the safe passage of humanitarian aid into Gaza.
2. Unrestricted humanitarian access: It is crucial to ensure the unimpeded entry of essential medical supplies, fuel, food, and water to meet the immediate needs of Gaza's population, which is facing severe shortages of necessities.
3. Rebuilding health infrastructure: International efforts must prioritize the reconstruction of Gaza's severely damaged healthcare system while simultaneously providing psychological support services to address the widespread mental health crisis.
4. Protection of fundamental rights: The international community must ensure that Gaza's population, particularly vulnerable groups such as women and children, have access to healthcare, clean water, and safe shelter in alignment with international humanitarian law.

5. Resolution of political conflict: Long-term stability requires addressing the root causes of the crisis, including an end to the Israeli occupation and recognition of the Palestinian right to live in freedom and dignity.

These actions are imperative not only to alleviate the immediate suffering of the population but also to promote long-term peace and well-being in the region.

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