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Attacks on healthcare and Impacts on Physical Rehabilitation and Mental Health Services in the Gaza Strip

The World Health Organization (WHO) has reported that at least 521 people, including 16 medical workers, have been killed in 137 “attacks on health care” in Gaza as of November 12.

On 15th October 2023, the Sheikh Hamad bin Khalifa al-Thani Hospital for Rehabilitation and Prosthetics in Gaza reported severe damage following an Israeli airstrike. The hospital is the first facility specialized in installing prosthetic limbs and rehabilitation in the Gaza Strip. The hospital had already been damaged in a previous Israeli bombardment in 2021.

Attacks on healthcare

Conflict overview

The Gaza Strip, a small enclave home to roughly 2.3 million people, has been under continued bombardment by the Israeli military since October 7th 2023, killing more than 11.000 and injuring more than 20.000 people, triggering mass displacement of the population and causing widespread destruction of civilian property and infrastructure. The bombardment began as Israel’s retaliatory response to the massive attack on Israel launched by Hamas, in which 1,200 Israelis were killed, and roughly 240 Israelis and foreign nationals taken hostage. The October 2023 outbreak of violence is the fifth armed offensive that Gaza’s population has been subjected to since 2006, with each one causing mass casualties and widespread

displacement of people. Furthermore, each renewed outbreak of violence left extensive destruction of private property and civilian infrastructure that often, if at all, can take years to repair, with restrictions on the import of construction materials becoming increasingly rigorous with time. Healthcare and rehabilitation facilities had already experienced damage and destruction in previous wars and continue to be under operational and structural duress due to the blockade inflicted by Israel since 2007.

Prior to this latest outbreak of violence, about 80% of Gaza’s population was dependent on humanitarian aid and food subsidies provided by humanitarian organizations. Since October 7th, Gaza Strip has been cut off from water and electricity

networks, while all crossings for import of fuel and goods have been closed, leaving Gaza's population without the most basic needs for survival. Without fuel, Gaza's health facilities cannot deliver lifesaving healthcare, tend to the relentless flow of patients with trauma injuries, or provide basic necessities to people who sought safety from bombardment. Fuel is running out also for ambulances, which are currently the only link to people who are trapped and injured in affected, hard to reach areas. Fuel is also needed for water desalination plants, as well as for garbage disposal, both essential to be able to maintain basic good hygiene and prevent the spread of diseases.

Latest data

In the latest provided update on 10th November by the Ministry of health (MoH) in Gaza, the Palestinian fatality toll in Gaza stood at 11,078, 4,506 of whom were children and 3,027 women. 2,700 persons, including about 1,500 children, are reported to be missing and considered to be trapped or dead under the rubble, awaiting rescue or recovery. Another 27,490 Palestinians have reportedly been injured. Since the collapse of services and communications at hospitals in northern Gaza on November 12th 2023, the MoH in Gaza has not been able to update casualty figures

Impact on healthcare

Since October 7, the healthcare system in the Gaza Strip has completely collapsed. As of November 14, as per OCHA reports, 22 out of 36 hospitals have been rendered out of service, with only one hospital still operating in the north of Gaza.

Total blackout for 34 consecutive days and absence of fuel, potable water, medicines, supplies, and heavy bombardments on hospitals are the common problems that force medical staff to discontinue services or to shut down wards or entire departments. Injured and sick people are at risk as they cannot access anymore regular health services, due to the closure of services and the continuous bombing. At the moment, in northern Gaza, doctors are only able to offer patients the most basic assistance and conduct only emergency lifesaving surgeries, often under flashlights or telephone torches and with a minimal number of anaesthetics and painkillers. Consequently, the death toll inside the hospitals continues to rise, and decent care for people who die in these conditions remains precarious and can have disastrous consequences in terms of the spread of disease and illness. In addition, ambulances and trucks delivering medical supplies have been attacked in several occasions, causing deaths and injuries

Impact on the delivery of Physical Rehabilitation and Mental Health Services



HI Staff and Volunteers assessing the needs and providing assistive devices and kits for IDPs in designated emergency shelters, Rafah, Gaza, November 2023. ©Photo by HI Palestine

Impact on rehabilitation, and mental health and psychosocial support (MHPSS) facilities and infrastructure

Significant damage has been inflicted upon critical Rehabilitation and MHPSS infrastructure and facilities in Gaza Strip at all levels of the health system. According to the data collected from Rehabilitation Task Force (RTF) actors in Gaza: 2 specialized

rehabilitation hospitals were severely damaged (Al Wafa Medical Rehabilitation and Specialized Surgery Hospital in Gaza City and Sheikh Hamad bin Khalifa al-Thani Hospital for Rehabilitation and Prosthetics in North Gaza), freezing their operational capacity to deliver early rehabilitation services for conflict-affected persons with injuries. In addition, the cut of electricity and lack of fuel made it impossible to provide

proper care both to newly injured people and to resident patients in the hospital who used to receive inpatient services (special medical care and rehabilitation services). As a result of the increased hostilities targeting the hospitals, the staff was forced to evacuate patients to their houses and to community shelters to protect them from the bombardment.

The Ministry of Health in the Gaza Strip reported that Israeli Military Forces bombed the only psychiatric hospital in the Strip, the only specialized hospital in the field of mental health in Gaza.

Impact on Physical Rehabilitation and MHPSS Patients

The conflict has led to severe injuries, including loss of limbs, spinal cord injuries, traumatic brain injury, and other physical disabilities due to the use of explosive weapons. Proper rehabilitation services, such as prosthetics, physiotherapy, occupational therapy, and mobility aids are very limited due to the huge demand and limited number of actors operating in this threatening situation. Moreover, movement restrictions and blockades impede the delivery of medical supplies, equipment, and expertise required for effective physical rehabilitation. This results in deteriorated health and functional abilities of conflict-affected persons with injuries causing life-threatening health complications and causing death in some conditions due to lack of proper medical and rehabilitation care. According to the MoH-Gaza reports, 40 persons with injuries died due to the complexity of their injuries and infection of wounds.

Persons with pre-existing functional limitations, including persons with disabilities, are negatively impacted by the ongoing conflict: their access to physical and functional rehabilitation services, including access to mobility aids, is disrupted/ stopped due to the absence of services. They are now displaced to different environments (shelters), where the lack of minimum hygiene and proper mattresses and positioning equipment lead to secondary complications, increasing the risk of exposure to infection of wounds / ulcers and limiting their functional abilities.

“As a diabetic woman with a leg amputation, I am struggling due to a shortage of supplies. The restroom facilities are unsanitary and inaccessible for me. I also require physiotherapy, but now, my main concern is finding some bread”

Manal, 67 years old, UNRWA Designated Emergency Shelter, Gaza, October 24th 2023

Besides the physical trauma, continuous exposure to violence, loss of loved ones, displacement, and insecurity has led to widespread psychological trauma among IDPs, including Post Traumatic Stress Disorder (PTSD), anxiety, and depression. MHPSS services are crucial to help conflict-affected people overcome the stressors and fears, but MHPSS providers face significant challenges due to the intensity of the ongoing conflict, restrictions on movements due to safety concerns, destruction of infrastructure, shortages of essential supplies, and a shortage of trained mental health professionals.

This has come at a time in which the mental health burden in Gaza was already

increasing. According to the report published by World Bank in June 2023, “*The intersection of economic conditions, trauma and mental health in the West Bank and Gaza*”, before this latest war 58 percent of the adult population exhibited symptoms consistent with depression according to the WHO well-being index (71 percent in Gaza and 50 percent in the West Bank). In addition, about 7 percent of adults in West Bank & Gaza screened positive for post-traumatic stress disorder (PTSD) based on their symptom score.¹

The Challenges Faced by Injured Patients Amidst Rehabilitation Shortages and Shelter Struggles

Ahmad², a physiotherapist displaced from the North, currently serving in a hospital in the South, Rafah, Gaza, says:

“Due to the high number of injuries and a severe shortage of hospital beds, medical teams in Gaza had to release patients without providing any rehabilitation services. The available rehabilitation specialists in hospitals are not enough to offer the necessary treatment and care for injured patients.

For instance, at the Indonesian Hospital, there were around six or seven rehabilitation specialists, but tragically, some were killed during bombings, some lost their homes, and



Rehabilitation sessions by HI volunteers in Nuseirat Camp, Gaza, November 2023. ©Photo by HI Palestine

others are still unable to reach hospitals due to ongoing bombardments, destroyed infrastructure, and a shortage of fuel to move. This means only one or two specialists can report to work, but the number of injured people is too high to accommodate.

Most patients leave the hospital without seeing a rehabilitation specialist, and even if they do, there aren't enough devices like crutches or wheelchairs. Before the war, there were some assistive devices, but they weren't comfortable for patients due to the severity of their injuries. The crutches and wheelchairs are uncomfortable due to sizes that don't fit many patients.

When patients leave the hospital, there are no rehabilitation centres to go to. In Gaza, outpatient departments have been closed

¹ West Bank and Gaza - Palestinians' Psychological Conditions Survey 2022 - World Bank Report generated on: April 3, 2023

² Name has been changed.

since the beginning of the escalation. People end up in shelters in UNRWA schools, but these places are not suitable for living for ordinary people, let alone for injured and disabled persons. The shelters are overcrowded, with poor conditions and no

clean toilets, medical supplies, clean water, or food. Injured patients develop infections and other problems without assistive devices to help them move, like wheelchairs, making it difficult for them to walk and exposing them to more medical complications.”

Main references in International Humanitarian Law

Hospitals and other medical facilities are civilian objects that have special protections under international humanitarian law reinforced by UNSC resolutions, such as UNSC 2286.

[First Geneva Convention:](#)

Article 12: Members of the armed forces and other persons mentioned in the following Article, who are wounded or sick, shall be respected and protected in all circumstances.

They shall be treated humanely and cared for by the Party to the conflict in whose power they may be, without any adverse distinction founded on sex, race, nationality, religion, political opinions, or any other similar criteria. Any attempts upon their lives, or violence to their persons, shall be strictly prohibited; in particular, they shall not be murdered or exterminated, subjected to torture or to biological experiments; they shall not wilfully be left without medical assistance and care, nor shall conditions exposing them to contagion or infection be created.

Article 21: The protection to which fixed establishments and mobile medical units of the Medical Service are entitled shall not cease unless they are used to commit, outside their humanitarian duties, acts harmful to the enemy. Protection may, however, cease only after a due warning has been given, naming, in all appropriate cases, a reasonable time limit and after such warning has remained unheeded.

[Fourth Geneva Convention:](#)

Article 18: Civilian hospitals organized to give care to the wounded and sick, the infirm and maternity cases, may in no circumstances be the object of attack, but shall at all times be respected and protected by the Parties to the conflict.

Article 20: Persons regularly and solely engaged in the operation and administration of civilian hospitals, including the personnel engaged in the search for, removal and transporting of and caring for wounded and sick civilians, the infirm and maternity cases, shall be respected and protected

Article 21: Convoys of vehicles or hospital trains on land or specially provided vessels on sea, conveying wounded and sick civilians, the infirm and maternity cases, shall be respected and protected in the same manner as the hospitals provided for in Article 18, and shall be marked, [...]

Article 55: To the fullest extent of the means available to it, the Occupying Power has the duty of ensuring the food and medical supplies of the population; it should, in particular, bring in the necessary foodstuffs, medical stores and other articles if the resources of the occupied territory are inadequate.

[UNSC Resolution 2286: \[United Nations\]:](#)

2. Demands that all parties to armed conflict [...] to ensure the respect and protection of all medical personnel and humanitarian personnel exclusively engaged in medical duties, their means of transport and equipment, as well as hospitals and other medical facilities;
3. Demands that all parties to armed conflicts facilitate safe and unimpeded passage for medical personnel and humanitarian personnel exclusively engaged in medical duties, their equipment, transport and supplies, including surgical items, to all people in need, consistent with international humanitarian law.

Conclusions and Recommendations

To the parties to the conflict:

- **Reach a ceasefire as soon as possible.** The safety of civilians and civilian infrastructure must be prioritized. A long-lasting ceasefire is the only way to prevent further deaths, injuries, and human suffering, and escalation of the conflict in the region.
- Do not use, under no circumstances, medical units to commit acts harmful to the enemy or to shield military objectives from attack.
- Protect health facilities, health personnel, ambulances and convoys of medical supplies
- Ensure protection and access to medical care for all the wounded and the sick, including combatants hors de combat.
- Cooperate with the Commission of Inquiry on the Occupied Palestinian Territories, encompassing East Jerusalem, and Israel, as well as with the Prosecutor of the International Criminal Court (ICC) in their investigation initiated in March 2021.

To UN member states:

- Support and call on all parties to the conflict to reach a ceasefire immediately to ensure protection of civilians and civilian infrastructure.
- Loudly and publicly condemn the continuous breach of International Humanitarian Law when it comes to attacking hospitals, medical staff and patients.
- Support and call on all parties to the conflict to open all borders (Rafah, Kerem Shalom, Erez) that can support the delivery of humanitarian aid to the entire population, both in Southern and Northern Gaza strip, prioritizing the necessary items to allow hospitals and rehabilitation centres to restart functioning normally: fuel, medicines, medical consumables, mobility aids, and the required water pumping and electrical equipment.
- Support politically, diplomatically, and financially the ICC to fulfil its global mandate effectively in relation to the current conflict.
- Commend the deployment of International independent investigative mechanisms under the supervision of the UN to investigate further serious violations of IHL and IHRL committed by parties to the conflict.

To donors:

- Ensure appropriate resources for the provision of early rehabilitation care within all health programs, including the provision of assistive products, to respond to the needs of trauma patients (to mitigate the risk of long-term impairment) and to persons with disabilities.
- Ensure disability inclusion in all health programs to ensure that they are accessible to all persons in need, whatever their abilities.

HI Physical Rehabilitation and MHPSS activities in Gaza

HI launched its first project in the occupied Palestinian territory in 1996. Over the past 27 years, HI has responded to the needs of the Palestinian community - both in the West Bank and Gaza - in several sectors: disaster preparedness and risk reduction, physical and functional rehabilitation, economic inclusion and recovery, and inclusive education. Since October 7th 2023, HI has been forced to suspend its regular provision of physical and functional rehabilitation services due to the insecurity and the challenges in transportation and communication. In parallel HI has launched a multi-sectorial emergency response in the Middle Area, Khan Younis and Rafah governorates, which includes the provision of physical and functional rehabilitation services and the distribution of mobility aids, wound dressing kits and first aid kits, for hundreds of persons with injuries and persons with pre-existing disabilities having life-threatening health conditions.