

Mental health in Gaza has been a critical concern long before the ongoing conflict. Over 16 years of blockade and repeated escalations in violence had already fueled a growing crisis, but the situation over the past two years has deteriorated dramatically. Constant attacks on the entire population, repeated displacement, famine in parts of Gaza, the spread of disease, the loss of livelihoods, loved ones, and any sense of safety have pushed mental health needs to alarming levels, affecting everyone.



WHO estimates that the number of people in Gaza requiring urgent mental health and psychosocial support has more than doubled, rising from 485,000 before the conflict to over one million today.

Factors affecting mental health

Conflict and Violence



- Continuous bombardments and airstrikes
- Exposure to death, injury, and destruction
- Loss of family members, friends, and colleagues
- Constant fear and uncertainty

Displacement and Insecurity



- Repeated forced displacement
- Overcrowded and unsafe shelters
- Loss of homes and communities
- Lack of personal safety and protection

Basic Needs and Survival



- Famine and food insecurity
- Limited access to clean water
- Spread of disease due to poor sanitation
- Scarcity of medicines and health supplies
- Loss of livelihood
- Lack of education
- Loss of family and social support systems

Health System Collapse



- Limited or no access to specialized mental health services
- Limited structured psychosocial support
- Destruction of health facilities and infrastructure
- No inpatient unit for people with mental disorders
- Loss of health workers, including mental health professionals

Mental Health Services

Before the current conflict

Even before October 2023, mental health services in Gaza were already under severe strain. Key challenges included limited human resources (very few psychiatrists and no occupational therapists), low investment in mental health, limited psychosocial rehabilitation services, frequent shortages of psychotropic medicines, and widespread stigma.

Before the current conflict, mental health service capacity was limited to the following:

- **6** Ministry of Health (MoH) Community-Based Mental Health Centres
- **1** Psychiatric hospital with 30 inpatient beds
- **14** Primary Health Care centres with integrated mental health services, with WHO support
- **4** Mental Health Units established by MoH with WHO support in across Nasser Medical Complex, Al-Aqsa, Indonesian and Shifa hospitals.
- MHPSS services were also provided by local partners such as UNRWA and Gaza Community Mental Health Programme

During the current conflict

Mental health services have been severely disrupted since October 2023.

In November 2023, the only psychiatric hospital with inpatient beds was attacked and has remained non-functional ever since, leaving people with severe mental health conditions without access to essential inpatient care. Those in urgent need of treatment for acute psychosis, severe depression, or trauma have nowhere to turn.

MPHSS services were then confined to the southern governorates of Deir al-Balah, Khan Younis, and Rafah. However, in May 2024, mental health services in Rafah were suspended following an incursion into the area.

By January 2025, the MoH, the Gaza Community Mental Health Programme, and other providers managed to reinstate services in North Gaza and Gaza City. However, due to the ongoing incursions into Gaza City, the MoH and other key providers have once again suspended most services in the northern governorates.



MPHSS services currently available



34
Partners delivering services



26
Facilities providing small scale MHPSS services

Types of MHPSS activities

- Mental health awareness sessions
- Group psychological support
- Psychological first aid (PFA)
- Referral to mental health services
- Case management focusing on MHPSS
- Support groups for caregivers
- Training and capacity building
- Follow-ups for persons with mental health conditions
- Stress management sessions
- Staff care and peer support for frontline workers
- Psychoeducation sessions
- Remote psychological support
- Child-friendly spaces
- Psychiatric consultations
- Safe spaces for women
- Psychological services for survivors of GBV
- Home visit for psychosocial support
- Specialized psychosocial therapy
- Trauma-focused interventions
- Psychosocial rehabilitation



WHO Support



WHO is supporting the Mental Health and Psychosocial Support (MHPSS) Technical Working Group in Gaza, which includes 34 partners, by strengthening coordination among partners, building capacity on Psychological First Aid (PFA) and other interventions, conducting assessments such as partner capacity (human resources) and interventions, mapping available MHPSS services, developing and disseminating key community messages on mental health, and enhancing referral pathways.



WHO has procured 23 types of psychotropic medicines and 110 mental health kits (designed to treat selected mental health and neurological conditions), which have been distributed to partners providing specialized MHPSS services, including the MoH, and UNRWA. The medicines are enough to cover the need of nearly 100 000 people, while the mental health kits are supporting the treatment of over one million people.



Around 1000 health workers trained on psychological first aid, trauma and grief management, child and adolescent mental health, clinical management of rape and care for survivors of gender-based violence and the Mental Health Gap Action Programme (mhGAP).



WHO, in coordination with the United Nations Population Fund (UNFPA) and the Health Cluster, is providing Training of Trainers (ToT) for health workers on gender-based violence (GBV) and the clinical management of rape, with a focus on mental health and psychosocial support (MHPSS). Since October 2023, around 190 health workers have been trained.



WHO is providing capacity-building on evidence-based psychological interventions for MoH and UNRWA health-care staff.



WHO has been continuously assessing the feasibility of supporting the re-establishment of an inpatient mental health unit.

Challenges

- Ongoing hostilities in Gaza continue to disrupt the delivery of MHPSS services.
- There is a severe shortage of specialized mental health services and no functional inpatient unit.
- Uncertainty and repeated displacement further undermine access to care.
- Stronger coordination among key actors and clusters is essential, supported by technical guidance and clear referral pathways.
- Sustainability of mental health services, specialized care, and MHPSS emergency teams must be ensured.
- Lack of self-care for health workers (helping the helper).
- The mental health workforce remains critically limited, with significant shortages across all specializations.
- Protection of health care is critical.



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