

Spotting the Light on the Silent Struggle of Patients with PTSD in Gaza

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Dear Editor,

This article was written to bring attention to Traumatic Stress Disorder (TSD) as a critical yet unnoticed issue affecting the lives of children in Gaza. The mental health of the people of Gaza, especially children, is at breaking point, and they deserve the urgent consideration of international health organizations (1).

The Gaza Strip is now considered the worst Palestinian refugee area (2). The United Nations Relief and Works Agency for Palestine Refugees (UNRWA) outlined conditions in the shelters as “inhumane”(3). Most of the water supply (97%) is undrinkable, less than 4% of people have access to fresh water, and more than twenty-five percent of diseases in Gaza are caused by dirty water (2). The international community has failed to do enough to protect the dignity, freedom, human rights, health, and education of 2.3 million Palestinians in Gaza, a place described as a big open prison (2).

The Ministry of Health in Gaza reported on February 2 that 26900 Palestinian people died in the ongoing war, including over 12345 children and 339 medical care providers, keeping in mind that the numbers are increasing (4). Healthcare workers in Gaza, including Médecins sans frontières and doctors without borders, have reported a significantly high number of children arriving without any surviving family members. This situation has led to the creation of a new acronym, “WCNSF” (Wounded Child No Surviving Family) (2). The wars may end despite the current heart-breaking tragedy and sorrow, but the scars remain. A child of Gaza said:” At night, I can never sleep due to intense fear and pain. And if I try to sleep for a moment, I am haunted by terrifying nightmares that remind me of those horrifying moments during the bombardment”(5).

“Shake like a leaf” is a term describing the children who survived Israeli bombardment and exhibited involuntary trembling, a response believed by some researchers to be an attempt of the mind to alleviate the intense psychological pressure from the fear after the threat has passed (6).

The Guardian newspaper reported that children had developed severe trauma symptoms such as convulsions, bed wetting, fear, aggressive behavior, nervousness, and remaining attached to their parent’s side (7).

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Financial support/ funding source: None- Conflict of interest: No conflict of interest.

Availability of data and material: All data generated or analyzed during this study are included in this published article.

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Around 91% of children in Gaza were diagnosed with TSD after the Israeli attack (8). These symptoms include intrusive experiences (flashbacks and nightmares), avoidance, mood, and hyper-arousal symptoms that can persist long after guns fall silent (9). The continuous thread of violence, loss of loved ones, immediate risk of life, loss of a family member, and struggle for necessities are substantial risk factors for TSD and create an environment where mental health concerns are inevitable (10). Sadly, In Gaza, all children aged fifteen or above have experienced five periods of bombardment in their lives: 2008, 2012, 2014, 2021, and now 2023 (7).

Furthermore, around 91% of children had sleep problems during the last conflict. 94% slept with their parents, 85% reported changes in appetite, 82% felt anger, 97% felt insecurity, 38% experienced shame, 47% engaged in nail-biting, and 76% reported feeling unwell (7).

Multiple studies showed that people who have experienced trauma may exhibit TSD and other psychological symptoms either immediately or over time (2). Therefore, a longitudinal study was conducted in Gaza and the West Bank to see the impact of chronic war trauma exposure on TSD diagnosis and symptoms from 2006 to 2021, as TSD symptoms were categorized into four groups and revealed the following: acute group 52% (people who developed high TSD symptoms in 2006 and 2021), delayed group 33.6% (people who developed high TSD symptoms in 2021 but not in 2006), remitters 8.9 (high TSD symptoms in 2006 but not in 2021), and resilient 4.6(people who did not show TSD symptoms either in 2006 or 2021). Sadly, remitters and resilient groups constitute a small percentage of the community. Psychologists attribute the ability of the people of Gaza to overcome mental illnesses to a healthy belief system, ideological and political commitment, strong family support, positive personality traits such as ambition and hope, determination and will, and courage and boldness, which can empower them to accept the trauma as part of their daily living and endure the desire for life (2).

Finally, the enduring impact of TSD in Gaza underscores the urgent need for comprehensive and sustained mental health support. There should be a unified effort from the international community, local authorities, and mental health organizations to address the mental health crisis. Through increased awareness, destigmatization of mental health issues, and offering accessible and culturally sensitive interventions, it is possible to foster healing resilience and hope for a brighter future. The journey toward recovery

requires a collective commitment to prioritize mental well-being, ensuring that individuals can rebuild their lives and communities and can thrive despite suffering and struggles.

ACKNOWLEDGMENTS

This research was mentored and supervised by the Mutah Research and Audit Society (MRAS).

AUTHORS CONTRIBUTION

MAN the principal author and made a final review before submitting the paper. MAN, MAJ and MAJ participated in the discussions, drafting and critically reviewed the article.

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