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Two Years of War on Gaza: Countless Stories

The ongoing crisis in Gaza remains one of the gravest public health emergencies of our time. After two years of relentless conflict, the suffering of civilians, the collapse of essential services, and the destruction of health infrastructure have created a situation of profound humanitarian distress. Yet amid the devastation, the resilience of Gaza's communities and health workers continues to shine, proving that even in the darkest moments, hope and humanity endure. This issue of the EMPHNET Emergency Bulletin builds on previous reflections, capturing the realities on the ground and the voices of those who continue to provide care under unimaginable conditions. It emphasizes the urgent need for sustained support, coordinated action, and a shared global responsibility to uphold the right to health and dignity for all.

The recent ceasefire agreement brings a moment of cautious optimism, an opportunity to halt the suffering and begin rebuilding lives, systems, and trust. However, the cessation of fire must be sustained and safeguarded through genuine international commitment. Rebuilding Gaza will require enormous resources, long-term investment, and a united effort by the international community, humanitarian actors, and development partners. Beyond reconstruction, what is needed is a renewed pledge to protect health as a universal right and to ensure that the rebuilding process lays the foundation for a more resilient, equitable, and peaceful future for the people of Gaza and the region.

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Building Community Resilience in Gaza and the West Bank: A Community-Based Model

Abstract derived from a draft contribution by Dr. Rand Salman, Director of the Palestinian National Institute of Public Health (PNIPH)

For nearly two years, Gaza has endured one of the most devastating humanitarian crises in recent history. Relentless bombardment, displacement, and the collapse of basic services have left millions in dire need. In the West Bank, escalating violence, movement restrictions, and economic decline have compounded suffering, creating a chronic state of fragility. Despite this, Palestinian communities continue to demonstrate exceptional resilience, drawing strength from solidarity, culture, and an enduring belief in justice.

A Crisis Beyond Words

The toll of the ongoing conflict is staggering: thousands killed and injured, families displaced, and health systems stretched beyond capacity. Repeated attacks on infrastructure; hospitals, water systems, and electricity networks, have left the population with limited access to essential services. Restrictions on movement and aid delivery have further deepened the humanitarian crisis, with food insecurity, psychosocial trauma, and environmental hazards threatening survival and well-being.

Resilience Rooted in Community

In such fragmented and obstructive governance environments, formal state institutions alone cannot sustain life or recovery. Instead, it is the communities themselves; women, youth, health workers, and local volunteers, who have become the first responders and the backbone of resilience. Community resilience is built through empowerment. Across Gaza and the West Bank, locally led initiatives have emerged to restore hope and functionality. These include training programs on sustainable food production, water management, and renewable energy, offering vulnerable groups practical tools to achieve self-sufficiency and stability.

Pillars for Progress

A resilient health and social system depends on interconnected pillars:

- Accessible, equitable healthcare through community-based delivery and mobile clinics.
- Mental health and psychosocial support adapted to local culture and trauma realities.
- Water, sanitation, and hygiene (WASH) infrastructure managed by local committees.
- Community preparedness and surveillance to anticipate and mitigate health emergencies.
- Inclusive governance and sustainable funding, ensuring local ownership and continuity.

Community-Led Interventions in Action

Mental Health: The Palestine Trauma Centre operates a 24/7 hotline and mobile teams reaching displacement camps. UNICEF and local partners have created child-friendly spaces, while NGOs such as MSF and PCC provide mobile counseling and first-aid psychological support.

Nutrition: The Gaza Kitchen Collective delivers community-based meal programs using local ingredients, complemented by neighborhood gardening projects that promote food security.

Health Services: World Health Organization (WHO), Médecins Sans Frontières (MSF), and United Nations Population Fund (UNFPA) train local medics, surgeons, and midwives to sustain essential care under siege conditions. Palestine Red Crescent Society (PRCS) and American Near East Refugee Aid (ANERA) operate mobile clinics that serve displaced populations.

Water and Sanitation: Community-elected committees ensure fair access to water sources and organize cleanup campaigns to prevent disease.

Support for People with Disabilities: Mobile rehabilitation services, inclusive education, and vocational training help people with amputations and disabilities rebuild their lives and reintegrate into society.

Youth at the Frontline

Palestinian youth are redefining humanitarian response by delivering immediate relief while developing skills for the future. Their involvement transforms despair into purpose and creates a generation empowered to lead reconstruction and social change.

Key Lessons and Way Forward

Despite immense barriers, limited funding, damaged infrastructure, and fragmented coordination, community-based models have proven both effective and sustainable. Trust, local leadership, and cultural adaptation are essential. True resilience comes not from dependency but from empowering people to act collectively and rebuild with dignity.

A Call for Solidarity

The path toward recovery and peace requires sustained international solidarity, equitable aid delivery, and above all, respect for human rights and justice. Safe, community-led development, rooted in hope and humanity is the only path forward for a free, healthy, and dignified Palestine.

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Field Perspectives: Voices and Recommendations

This section amplifies voices from the field in Gaza, sharing firsthand experiences of health workers and community members navigating the ongoing crisis. It also outlines their key recommendations for improving health service delivery and community resilience amid the challenging conditions.

By Dr. Ayman Abourahma, Director of Preventive Medicine Department, Palestinian Ministry of Health

"As an organization dedicated to public health, our focus has been on the severe degradation of Gaza's health infrastructure and the immense challenges it presents for disease prevention and control. Our direct observations and the data from our surveillance activities paint a grim picture of a public health system in a state of collapse.

From our perspective, the key challenges have been:

- **Breakdown of Surveillance Systems:** The conflict has severely crippled the communicable disease surveillance systems that are essential for early warning and response. This has left the population incredibly vulnerable to outbreaks of infectious diseases such as polio, cholera, measles, and hepatitis A. Our teams on the ground are seeing a terrifying rise in infectious diseases, acute respiratory infections, diarrheal diseases, and skin infections like scabies, which are endemic. This is a direct result of the collapse of basic public health services.
- **Implementing Syndromic Surveillance:** Where traditional diagnostics are impossible, we have reverted to syndromic surveillance. Our field staff are trained to identify and report clusters of symptoms like fever with a rash or acute watery diarrhea, allowing us to detect potential outbreaks before they explode.
- **Overwhelmed Preventive Medicine Services:** Our preventive medicine departments have been stretched beyond their limits. The lack of access to clean water, sanitation, and basic hygiene supplies has created a perfect storm for the spread of communicable diseases. The vaccination programs, a cornerstone of preventive health, have been severely disrupted, leaving thousands of children unprotected.
- **Inadequate Outbreak Preparedness:** While we have always emphasized outbreak preparedness, the scale of this crisis has overwhelmed all existing contingency plans. The destruction of healthcare facilities, the scarcity of medical supplies, and the constant displacement of populations make it nearly impossible to mount an effective response to any outbreak.

In light of these challenges, we offer the following recommendations to strengthen the humanitarian response:

- **Restore and Enhance Disease Surveillance:** It is imperative to re-establish and strengthen field-level disease surveillance. This includes deploying mobile teams to monitor for outbreaks in shelters and communities, and ensuring that data can be rapidly collected, analyzed, and acted upon.
- **Prioritize Preventive Medicine:** International aid must prioritize the fundamentals of public health: clean water, sanitation, and hygiene (WASH) programs. We also call for the immediate resumption and scaling up of vaccination campaigns to prevent catastrophic outbreaks of vaccine-preventable diseases.
- **Immediate and Unrestricted Humanitarian Access:** We need safe, sustained access to deliver medical supplies, vaccines, and critical WASH equipment to all parts of Gaza.
- **Invest in Localized Outbreak Response:** The international community must empower local health partners to lead outbreak response efforts. This means providing them with the necessary resources, training, and supplies to rapidly contain any emerging health threats.

The resilience of the health workers and the people of Gaza is remarkable, but they cannot be expected to endure this crisis alone. A renewed and intensified focus on public health and preventive medicine is not just a recommendation; it is an absolute necessity to avert a deeper humanitarian catastrophe."

By Dr. Ghada Alnajar, United Palestinian Appeal (UPA) Programs Manager/ Head of Office, Gaza

"For two years, the war in Gaza has constituted an unprecedented assault on a health system and on human dignity itself. Our staff on the ground witness a reality where hospitals have been destroyed, healthcare workers killed, and the public health infrastructure necessary to prevent disease has been obliterated. We are now confronting a perfect storm of starvation, the spread of infectious diseases, and a massive mental health crisis, all while operating under continuous bombardment and with severely constrained access. The current humanitarian response, though heroic in its efforts, is a drop in the ocean of need, hampered by systemic barriers to access and aid delivery. To strengthen the response, we urgently recommend: First, a sustained ceasefire as the only way to enable meaningful humanitarian operations. Second, guaranteed safe and unfettered access for aid workers and supplies through all border crossings. And third, a massive coordinated surge in funding specifically for local NGOs, and health actors who are the backbone of the response. The world must not look away; the survival of Gaza's people depends on actionable solidarity today."

By Mr. Amjad Shawwa, Palestinian NGO Network (PNGO) Director

"For two years, Gaza has been enduring one of the most devastating humanitarian crises in modern history. The health sector has suffered a near-total collapse due to the systematic destruction of infrastructure, repeated targeting of health facilities and personnel, and the severe deterioration of essential services such as water, sanitation, and hygiene. The result is a public health catastrophe where preventable diseases and poor living conditions now threaten as many lives as the ongoing violence itself. As the Palestinian NGOs Network (PNGO), a network that serves as an umbrella for more than 150 Palestinian nongovernmental organizations — we express deep concern over the dire situation faced by our member organizations operating in the health sector. These organizations, once providing vital and routine medical and community services, have been forced to transform into frontline responders, working under extreme conditions, with scarce resources and no guarantees of safety. PNGO affirms that the situation in Gaza extends far beyond a humanitarian emergency; it is a direct outcome of the persistent disregard for international humanitarian law and the continued obstruction of aid and essential supplies. Despite the extraordinary commitment of humanitarian workers, the current response remains fragmented and constrained. No amount of emergency relief can substitute for the political will required to ensure safe, sustained, and unhindered humanitarian access. In light of this reality, and in line with our humanitarian and moral mandate, we call for the following urgent actions: Permanent Ceasefire, which is the essential precondition for any meaningful humanitarian or health recovery. Guarantee Safe and Unimpeded Humanitarian Access: All crossings into Gaza must be opened, and restrictive inspection procedures must be lifted to allow the predictable and large-scale entry of medical supplies, fuel, and critical spare parts needed to restore public health systems. Empower and Resource Local Actors: We urge genuine partnerships that strengthen the leadership of Palestinian civil society organizations and ensure direct, flexible funding to local actors who possess the trust, expertise, and community reach required for an effective and sustainable response. The Palestinian NGOs Network reiterates that saving lives in Gaza requires urgent political and humanitarian action; one that protects civilians, lifts the blockade, and supports Palestinian organizations and civil society, which remain the cornerstone of any meaningful recovery and a just future for Gaza."

By Mr. Anas Musallam, Food Security Gaza Coordinator, Food Security Sector (FSS)

"For two years, the war in Gaza has devastated every foundation of food security and human dignity. What we are witnessing is not only the collapse of the food system, but of people's ability to survive. Farmers are cut off from their lands, fishers from the sea, and families from safe and sufficient food. Agricultural infrastructure, bakeries, and storage facilities lie in ruins, while the border closures have made even basic food items and agricultural inputs nearly impossible to obtain. A man-made famine is unfolding. Entire communities are starving, and children are too weak to fight disease. Despite these impossible conditions, humanitarian and local organizations continue to stand with the people, working under bombardment and scarcity to sustain life through community kitchens, bread and hot-meal production, food distributions, fodder support, and small-scale farming recovery. To avert a total catastrophe, we urgently call for: a lasting ceasefire, unhindered access for food, fuel, and agricultural materials, and flexible, increased funding for local partners who remain the backbone of this response. Gaza's people are not statistics; they are families fighting for life and dignity. The world must not remain silent."

By Ms. Yousra Abu Sharekh, Gaza Program Coordinator, International Network for Aid, Relief & Assistance (INARA)

"Setting aside our own trauma to keep delivering aid to the most vulnerable people is always the most challenging part during our response. Working with children in MHPSS activities was not an easy part of our work, as they were experiencing fear and loss on a daily basis. Sometimes, during the sessions, a nearby airstrike hits, which makes it so challenging to achieve sustainable impact. After two years of horrific conditions, the pain is so deep, the trauma is very complex, and there is much to do in the future to have a generation that believes in humanity and to maintain their value."

By the Center for Mind-Body Medicine (CMBM) Team

"We at the Center for Mind-Body Medicine (CMBM) design and implement Mental Health and Psychosocial Support (MHPSS) programs, integrate MHPSS interventions across other sectors, and provide supportive supervision for MHPSS workers. Our efforts also include the Helping the Helpers initiative for frontline workers, as well as MHPSS capacity building and research activities. Through our work over the past two years, we have observed that frontline workers—particularly healthcare professionals—are experiencing significant trauma as a result of both direct exposure to war-related events and secondary trauma from working closely with affected community members. Therefore, we strongly recommend prioritizing MHPSS programming for chronically ill and cancer patients, wounded individuals, persons with disabilities, and healthcare workers. This focus is crucial during the upcoming post-war recovery phase and in the long term, as the mental health impact of the Gaza war is expected to persist for years to come."

By Dr. Mohammed Zaghbar, Dean of the Faculty of Medicine at Al-Azhar University in Gaza

(The following statement was taken from an interview with Dr. Mohammed Zaghbar)

"Since the war in Gaza, education has been severely affected, particularly in health-related fields such as medicine and health sciences. Some initial recovery steps took place between May and June 2025, with a number of students graduating and joining the workforce, while others were able to complete their current academic year. However, major challenges remain. Many medical facilities and laboratories were destroyed, limiting access to clinical training and practical experience. Hospitals suffered significant damage, and the displacement of doctors further disrupted education and mentorship.

By Dr. Ahmed Shatat, Director General of Planning, Palestinian Ministry of Health

(The following statement was taken from an interview with Dr. Ahmad Shatat)

"The health system in Gaza is under immense strain, and it is evident that it has been severely affected by attacks. Many hospitals and primary health care centers were either partially or fully targeted, with more than 70% of facilities fully damaged, significantly disrupting service delivery.

Although some partners and stakeholders provided support, it was not sufficient to meet the urgent needs. In collaboration with partners and organizations, the Ministry of Health had pre-existing plans for emergency response, which were regularly updated and implemented. Following the ceasefire, a three-month plan has been developed, focusing on providing life-saving services, expanding essential health services, supporting and strengthening the health workforce, and improving governance. A shared vision among all sectors, public, private, and international, is essential to ensure coordination and avoid duplication of efforts. A dedicated committee, including ministry officials and national experts, should supervise the response and recovery process. The plan must prioritize urgent and essential services, including mental health support, to help communities cope with the ongoing situation. Efforts should also focus on establishing or replacing primary health care centers, whether temporary field centers or permanent facilities, and on rebuilding damaged health services. Focusing on these priorities will gradually enhance the resilience of communities and strengthen the health system step by step.

By Dr. Eyad Krunz, Manager of Stars of Hope

(The following statement was taken from an interview with Dr. Eyad Krunz)

"Two years into the war on Gaza, the challenges faced by people with disabilities have significantly increased. Before the conflict, there were around 58,000 people with disabilities in Gaza. Today, this number has risen by an additional 43,000; an alarming 70% increase. Amid severe shortages of essential assistive and support supplies, many individuals with disabilities struggle to meet even their most basic needs, including access to food. Alarmingly, 83% of women with disabilities lack access to menstrual hygiene products, further deepening their hardship. In addition, around 15,000 children with disabilities face restrictions in traveling for medical treatment or rehabilitation. Following the ceasefire, it is crucial to ensure that people with disabilities in Gaza have access to the resources, support, and opportunities they need to live lives marked by dignity, inclusion, and empowerment.

Supporting Gaza's Health Sector: EMPHNET's Public Health Initiatives in Gaza

Through its Community Health Champion program (ChampNet), EMPHNET has built a network of trained community health workers across Gaza to deliver essential, community-based health services. The program aims to improve the health and well-being of communities by addressing pressing public health needs, with a particular focus on vulnerable populations. In collaboration with local and international partners, EMPHNET implements targeted health interventions addressing urgent needs on the ground, including the following:

Outreach, Promotional, and Service Delivery Activities

Since 2024, EMPHNET has been implementing extensive outreach activities across Gaza, delivering a wide range of community-based awareness sessions on critical health topics in all of Gaza's governorates. These sessions have addressed nutrition, communicable and non-communicable diseases, sexual and reproductive health, hygiene, mental health, and emergency preparedness, while also incorporating timely issues such as medication adherence and safe fasting practices for individuals with chronic conditions.

The outreach efforts include nutritional services such as mass health screenings, nutritional counseling, and the distribution of supplements to malnourished children, pregnant women, and breastfeeding mothers. In collaboration with international partners, EMPHNET has also distributed dignity and clean delivery kits, as well as organized dental check-ups to support community health needs further.

Post-Monitoring Polio Campaigns

In collaboration with WHO and the Ministry of Health, EMPHNET conducted independent monitoring (IM) to assess polio vaccination quality at various administrative levels, identify reasons for non-vaccination, verify vaccination coverage through fingermark confirmation, and evaluate community awareness and sources of information regarding the campaign.

Medical Points

In January 2025, EMPHNET established a medical point in central Gaza City within the Ministry of Labor, hosted by Juzoor for Health and Social Development. Operated by 10 to 15 trained health volunteers, it provides comprehensive care, including child and maternal health, management of non-communicable diseases, primary care services such as wound management, injections, and patient referrals, mental health support, rehabilitation for persons with disabilities, and reproductive health services covering prenatal, postnatal, and post-abortion care.

Capacity Building

Capacity-building activities are being continuously delivered to volunteers to strengthen their knowledge and enhance their field readiness. These ongoing training courses cover a wide range of essential topics, including Psychological First Aid (PFA), Protection from Sexual Exploitation and Abuse (PSEA), communication skills, gender-based violence (GBV), social mobilization, first aid and basic trauma management, adolescent health, women's health, nutrition management, health promotion, and risk communication, among others, based on emerging needs.

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Key Figures

400+
Community health workers were trained

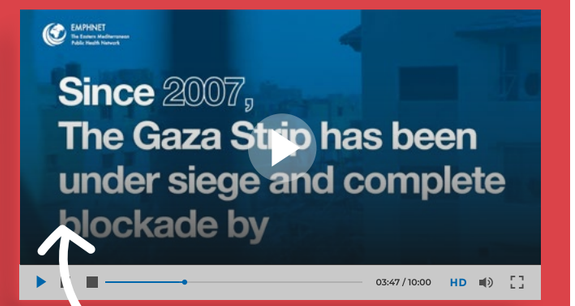
230,000+
women, children, and men were reached

1100+
outreach activities were conducted

10,175
cases were managed at EMPHNET's medical point

25,936
pregnant and breastfeeding women were screened for malnutrition

43,465
children Screened for malnutrition



Watch EMPHNET in Gaza

In Numbers

In Gaza, the ongoing crisis has created one of the most severe humanitarian and health emergencies in recent history. The war has devastated infrastructure, overwhelmed healthcare systems, and deeply affected the physical and mental well-being of the population. This section provides an overview of alarming statistics:

68,234
people have been killed, as of October 22, 2025

39%
(14 out of 36) of hospitals are functional, all partially, as of October 15, 2025

140
Civil Defense staff have been killed while on duty

170,373
people have been injured, as of October 22, 2025

35%
(64 out of 181) of primary health care centers are functional, all partially, as of October 15, 2025

252
journalists and media workers have been killed

2,615
fatalities and **19,182** injuries have occurred among people trying to access food supplies, as of October 10, 2025

32
Emergency Medical Teams (EMTs) were deployed by 20 international and two national organizations, as of October 5, 2025

25,000
infants are at risk of acute malnutrition and require urgent nutrition support between July 1, 2025, and June 30, 2026

463
malnutrition-related deaths were documented, as of October 11, 2025

+1 million
children are in need of mental health and psycho-social support, according to UNICEF

132,000
cases of children aged 6 to 59 months and 55,500 pregnant and breastfeeding women are projected to suffer from acute malnutrition through June 2026, including 41,000 severe cases of children

+575
aid workers have been killed since October 2023

+1,700
health workers have been killed, including 575+ counted under aid workers, as of October 7, 2025

89%
of the WASH sector assets have been either destroyed or damaged

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