

A community in crisis

Abdel hamid afana outlines the experience of the Gaza Mental Health Program in Palestine

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Palestine has a desperate need for community mental health services. Not only is Palestine experiencing rapid social and economic change, but it has undergone long periods of military occupation by the Israelis, with a subsequent uprising (the Intifada) and, in turn further repression. All of these factors have affected the mental health of the Palestinian people.

Palestine is now gaining some political autonomy, with the new Palestinian authority taking responsibility for health and education. It is obvious that mental health care should not, and cannot, be provided by a few specialists or by large centralized institutions. The new authority now has the opportunity to consider adopting a new type of service based in the community.

The Gaza Community Mental Health Program was established in 1990 to respond to the overwhelming in Gaza. Around a million people live in this small area, mainly in refugee camps or makeshift shantytowns. The area is frequently sealed off from Israel and the rest of Palestine. The population, half of whom are under 15 years of age, has experienced curfews and night raids, seen houses being demolished, people being beaten, killed and imprisoned. In these circumstances, it is difficult to build relationships based on the trust, confidence and openness that facilitates good mental health.

Spreading skills

Our program attempts to overcome the lack of existing mental health care services through a community –based approach. Our three centers offer services ranging from clinical services, drug treatment and psychotherapy. Each center has a multi –disciplinary, nurses and a social worker, who also conduct home visits in addition to their work in the center.

We carry out training to spread mental health skills in the existing health sector by providing courses and workshops for workers in primary health care clinics. We also work directly in the community.

In Palestinian society, people with mental health problems face many prejudices. The traditional explanation is that an evil spirit, called a-fa-reet, and that only a traditional healer can extract the spirit from the body causes mental illness. People try to protect themselves against a-fa-reet, and that only a traditional healer can extract the spirit from the body. People try to protect themselves against a-fa-reet by wearing amulets containing verses from the Koran (the Muslim Holy book). Many Palestinians, including educated professionals, continue to hold these views, even though they may not express them openly.

Through community outreach aim to reduce prejudice and stigma and raise awareness of mental health. Traditional views and structures (such as male dominance and tribal authority) can present obstacles. Therefore, we have approached community leaders, such as traditional healers, religious and tribal leaders, in informal settings, listening to what they have to say and explaining what we are trying to achieve.

In one case, we approached the traditional leaders of a village in rural southern Gaza and discussed how to increase mental health awareness in their community.

They suggested it was better to start indirectly by talking about general health issues and arranged for me to talk to group of women on the subject of children's health.

At the women's request. I talked of the effects of intestinal worms and gastroenteritis. At our second session, I talked on dehydration and then introduced the topic of child behavioral problems. The women then asked for a discussion on bedwetting, aggressive behavior and disobedience among children. After five meetings, the women told me that they wanted to begin to discuss the problems they were experiencing as women.

The women talked of the Intifada, the curfews imposed by the Israeli army, imprisonments and beatings, and the psychological effects upon them –stress and trauma- related symptoms –physical and emotional abuse. To hear the women talk openly on these subjects was an exciting experience and it filled me with hope for the future.

In Gaza we have had to start from the beginning, by contacting and educating people about the concept of mental health. Services can only begin when people understand and accept what is being offered.