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الملخص:

تتناول هذه الدراسة تأثيرات العدوان الإسرائيلي المستمر على الصحة النفسية والاجتماعية للطلبة الفلسطينيين، الذين يواجهون تحديات نفسية خطيرة مثل التوتر والقلق والاكتئاب واضطراب ما بعد الصدمة نتيجة للعيش في بيئة مليئة بالعنف والاضطرابات. كما تتطرق الدراسة إلى الآثار الاجتماعية التي تشمل التفكك الأسري والعزلة الاجتماعية وتراجع التحصيل الأكاديمي. تسلط الدراسة الضوء على الدور المحوري لوزارة التربية والتعليم الفلسطينية في مواجهة هذه التحديات، حيث تقوم بتقديم الدعم النفسي والاجتماعي للطلبة، وتطوير المناهج التعليمية، وتحسين البنية التحتية المدرسية. وتشمل المقترحات التي تقدمها الدراسة نموذجًا تجريبيًا يعتمد على تقييم شامل للاحتياجات النفسية والاجتماعية باستخدام أدوات تشخيصية معترف بها. يشمل النموذج تقديم الإسعافات النفسية الأولية، بناء شبكات دعم اجتماعي للأسر والطلاب، وتنفيذ برامج تربوية نفسية ودمج محتوى الصحة النفسية في المناهج الدراسية. كما يشمل توفير العلاج النفسي الفردي والجماعي للطلبة والمعلمين، وتدريب العاملين في مجالات التعليم والصحة النفسية. يهدف النموذج إلى تعزيز الصحة النفسية وبناء مرونة في المجتمعات الفلسطينية المتأثرة بالنزاع، مع التأكيد على أهمية البحث المستمر والتعاون الدولي لتأمين التمويل المستدام وتوسيع نطاق التدخلات.

**كلمات مفتاحية: (الصحة النفسية، التعليم، الدعم الاجتماعي، العدوان الإسرائيلي، الطلبة)**

#### Abstract:

This study addresses the effects of the ongoing Israeli aggression on the mental and social health of Palestinian students, who face severe psychological challenges such as stress, anxiety, depression, and post-traumatic stress disorder due to living in an environment filled with violence and instability. The study also discusses the social consequences, including family fragmentation, social isolation, and academic decline. It highlights the pivotal role of the Palestinian Ministry of Education in confronting these challenges by providing psychological and social support to students, developing educational curricula, and improving school infrastructure. The study proposes an experimental model based on a comprehensive assessment of psychological and social needs using recognized diagnostic tools. The model includes providing psychological first aid, building social support networks for families and students, and implementing psychological educational programs and integrating mental health content into curricula. It also involves offering individual and group psychotherapy for students and teachers, as well as training education and mental health professionals. The model aims to enhance mental health and build resilience in communities affected by conflict, emphasizing the importance of continuous research and international cooperation to secure sustainable funding and expand the scope of interventions.

**Keywords: (Mental health, education, social support, Israeli aggression, students)**

## Introduction:

Psychology is one of the vital sciences that contribute to understanding human behavior and interpreting mental processes that influence thinking, feelings, and behavior. Psychology helps in applying scientific theories and concepts to understand and interpret psychological and social phenomena, making it a valuable tool for scientific research, education, and the development of health and social policies. Additionally, psychology plays an important role in improving quality of life by providing effective strategies for dealing with stress and psychological disorders and enhancing overall mental health (Gross, 2020).

Psychology is considered one of the most influential sciences on our daily lives and society in general. It contributes to understanding human behavior and mental processes that affect how we think, feel, and act. The importance of psychology lies in shedding light on understanding human behavior at multiple levels, from daily interactions to complex issues such as mental illnesses. Psychology is used in wide-ranging fields like education, business, medicine, and sports psychology. For example, it improves work environments and increases productivity and is also used to enhance mental health. Psychology plays a crucial role in diagnosing and treating psychological disorders such as depression, anxiety, and post-traumatic stress disorder. Through various therapies like Cognitive Behavioral Therapy (CBT), individuals can improve their mental health and quality of life (Smith & Brown, 2023).

Psychology is considered one of the fundamental sciences that play a vital role in understanding and promoting mental health and personal well-being. This is achieved through understanding human behavior: psychology helps analyze and interpret individual behaviors and social interactions. Additionally, through therapeutic applications, psychology provides effective strategies and tools for dealing with psychological disorders such as depression, anxiety, and mood disorders. Therapies like Cognitive Behavioral Therapy (CBT) and psychodynamic therapy help individuals improve their mental state and enhance their overall health. Psychology also contributes to improving personal performance: by understanding psychology, individuals can enhance their personal and professional performance, acquire techniques like time management, develop social skills, and increase self-awareness, which in turn enhances efficiency and productivity in both work and personal life.

Psychology also contributes to developing effective training programs in various fields, such as education and vocational training, which are used to design educational and training strategies to improve skill acquisition and achieve goals (Smith & Johnson, 2023).

## Psychology and Educational Psychological Counseling:

Psychology and counseling are two interconnected fields concerned with understanding human behavior and providing support to individuals to help them achieve mental health and well-being.

(Atkinson et al., 2000) indicate in their book that psychology is the study of behavior and the mind, aiming to understand how individuals think, act, and interact. Psychology covers a wide range of fields such as cognitive psychology, social psychology, developmental psychology, and clinical psychology. On the other hand, counseling is the process of providing help and psychological support to individuals suffering from psychological, social, or emotional problems. Counseling

aims to empower individuals to better understand their problems, develop coping skills, and enhance their ability to make informed decisions to achieve a more balanced and happy life.

Counselors often address issues such as anxiety, depression, trauma, family difficulties, and other psychological problems through counseling sessions that rely on active listening, interaction, and providing appropriate advice based on scientifically tested psychological methods.

When discussing the relationship between psychology and counseling, Beck (2011) notes that in practice, psychological principles and theories are integrated into counseling processes. For example, Cognitive Behavioral Therapy (CBT), a direct application of cognitive theories, can be used in counseling sessions to help individuals change negative thought patterns that affect their behavior and mental state.

Both psychology and counseling play significant roles in society. They are not only individual tools for improving mental health but also societal tools that can lead to improved social relationships, reduced violence, and enhanced understanding between different cultures. Together, these fields contribute to building a society that is more self-aware and better equipped to deal with the psychological and social challenges faced by its members.

### **Psychological and Social Effects Resulting from Israeli Aggression:**

There are clear indicators that the repeated emergency events experienced by Palestinian society due to occupation in various areas of the West Bank create ongoing suffering for the population, undermining mental health levels and generating numerous psychological and social problems at the individual, family, and community levels. This also exacerbates the suffering of marginalized groups and deepens existing problems, necessitating action from all stakeholders, particularly institutions working in mental health and psychosocial support, to remove obstacles that hinder the development of effective responses to emergencies faced by Palestinian society.

The focus on the psychosocial mental health of Palestinians is a relatively recent phenomenon, dating back to the late 1980s and early 1990s. This period was characterized by growing global awareness of the potential negative impact of prolonged conflicts, wars, and occupations. The Israeli occupation and its repressive practices against the Palestinian people generated active initiatives in the early 1980s that provided psychosocial care to the wounded and disabled during the first Intifada, fostering a strong national movement for social work outside systems managed by Israeli occupation authorities. These initiatives and efforts aimed to meet people's basic needs as a matter of national survival (Jabarin, 2005).

The Oslo Accords of 1993 announced the beginning of a new phase with the establishment of Palestinian governmental frameworks. Initiatives were launched based on real needs, with the Ministry of Education adopting a school counseling program, encouraging other ministries like the Ministry of Health and the Ministry of Social Development to establish infrastructure for psychosocial support. It is worth mentioning that UNRWA adopted the teacher-counselor model to work in agency schools. Numerous local and non-governmental organizations emerged to provide psychosocial, social, and even legal services, offering consultations and reports related to child issues and violations by Israeli occupation authorities that Palestinian citizens face (Jabarin, 2005). A study conducted by Dr. Jabarin (2006) on the effects of Israeli aggression showed that the most common symptoms among school students included emotional problems (fear, anxiety, sadness,

loss, nightmares, anger), behavioral problems (conduct issues, hyperactivity, loss, jealousy, rebellion), physical problems (bedwetting), social problems (divorce, family breakdown, social disputes), psychological conditions (schizophrenia, nervous breakdown), and learning difficulties (distraction, forgetfulness, difficulty concentrating).

According to Western standards, the mental health of Palestinians is described as among the worst globally, with more than half of Palestinian adults reaching the threshold for depression diagnosis. A significant proportion of Palestinian children suffer from psychological distress, particularly in the West Bank and Gaza Strip. This high prevalence of mental disorders among the Palestinian population is attributed to the intersection of several factors, including exposure to conflict and war, poor living conditions, and movement restrictions due to the Israeli occupation (Nader, 2023). This study (survey) aimed to understand the intersection of various factors contributing to poor mental health among Palestinians. This survey was described as the first nationally representative survey on this topic. The study was conducted on a representative sample of 5,876 Palestinian adults from Gaza and the West Bank, who were assessed using various questionnaires. Survey results showed that 58% of participants reached the minimum threshold for depression diagnosis. Among participants from Gaza, approximately 71% could be diagnosed with depression, compared to 50% from the West Bank. Around 7% of survey participants met the criteria for post-traumatic stress disorder diagnosis, with minimal variation in prevalence rates between Gaza and the West Bank.

In another study conducted by Save the Children (2022), a report titled "Trapped" was issued, which included interviews with 488 children and 160 parents and caregivers, assessing the impact of the blockade on Gaza's children's mental health. The report showed that 80% of children reported experiencing emotional stress, 59% engaged in self-harm, and 55% thought about suicide. Weeks of continuous airstrikes and explosions severely damaged children's mental health in Gaza. After 16 days of bombardment, children exhibited severe trauma symptoms, including convulsions, aggression, bedwetting, and irritability. About 90% of children in pediatric hospitals showed signs of anxiety, with the majority displaying symptoms of post-traumatic stress disorder. On November 6, 2023, UNICEF spokesperson Toby Fricker warned of the psychological effects and "immense pressure" children in Gaza were facing. On November 17 of the same year, WHO Director-General Tedros Adhanom Ghebreyesus stated that 20,000 people needed specialized mental health services. Ahmad (2009) states that the destruction of education, learning, and teaching—considered pillars of Palestinian identity and existence—is part of the genocidal crime Israel commits against the Palestinian people. Education has never been immune to Israel's colonial-settlement strategies aimed at erasing Palestinians, their narrative, and history, subjugating those who remain, and turning them into subjects of the colonial state to facilitate its project of land control, de-colonization normalization.

Santos (2014) describes attempts to destroy the knowledge and culture of oppressed and colonized peoples as "epistemicide," a condition for "genocide" in major colonial projects. Therefore, across generations since the Nakba of 1948, Israel employed various methods of destruction, disruption, and fragmentation targeting the education sector in all its components.

These wars have had significant impacts on children's mental health. A report published by Save the Children in 2022 indicated that 80% of Gaza's children suffer from constant fear, anxiety, and sadness (Hagopian, 2023).

The education system also faced several challenges, notably overcrowded classrooms, many schools operating on a double-shift system, and the problem of weak infrastructure and lack of equipment became evident during the COVID-19 pandemic, preventing some students from engaging in remote learning (Hussein, 2024).

The war on Gaza coincided with the start of the 2023/2024 academic year, which was completely disrupted, and its fate remains uncertain. As a result, over 620,000 students lost access to education (Palestinian Ministry of Education, 2024). After more than four months of war, students missed the first semester, equivalent to half the academic year, and the war continues. In the West Bank and Jerusalem, following the Gaza war, at least 782,000 students were affected by movement restrictions, settler and Israeli forces' violence, with 46 students killed and 294 injured (Palestinian Ministry of Education, 2024). The year 2023 was the deadliest in the West Bank since 2005 (UNRWA, 2024).

Abdel Rahim Al-Sheikh (2023) described the extermination of children in Gaza: "Palestinian children write their names in hot ink on their limbs during genocidal wars so they can be easily identified after an explosion and their remains collected for burial." What is happening to children and students in Gaza starkly contradicts the foundations and programs established by global and international institutions (adopted and participated in by Palestine) under titles like "Safe Schools" (SSD), "Child-Friendly Schools" (CFS), "Education Cannot Wait" (ECW), "Education in Emergencies" (EIE), and "Education for All" (EFA).

In this context, Jason Lee, director of Save the Children, said: "A large part of the international community has failed the test of their commitment to protecting children so far, which is the hardest test of all. Will they respect international law and the right of children to life? Or will they stand idly by while more children's lives, bodies, and futures are destroyed?" (Save the Children, 2024).

### **Vision and Proposed Model:**

To achieve the vision, which is:

"Toward a student who enjoys mental health, capable of adapting and facing the exceptional challenges and conditions resulting from the Israeli occupation".

Today, we must think about the day after the war. Will it be the same as before? Certainly not; reality forces us to reconsider the psychological state of children who emerged from the war with severe psychological symptoms. Some lost their families or relatives, or perhaps most of their family members. So, what will the psychological reality of the child be after experiencing repeated traumas? Several steps can be taken to emerge from the dilemma of war and aggression to help children regain their psychological well-being.

This model primarily focuses on building and developing comprehensive and sustainable psychosocial interventions in conflict-affected environments. It includes initial assessment, psychological first aid, building support networks, providing psychological treatment, training workers, enhancing the role of the local community, using technology, and continuous research and



evaluation. These strategies aim to enhance the mental and social health of affected individuals and communities, providing comprehensive support that promotes recovery and resilience.

### **.1Assessment of Psychosocial Needs**

**Individual and Group Psychological Assessment:** Conduct a comprehensive assessment of the psychosocial needs of affected groups, including students, teachers, and community members. The assessment includes evaluating trauma, identifying the most vulnerable groups, and developing customized intervention plans.

**Use of Accredited Diagnostic Tools:** Adopt internationally recognized diagnostic tools to assess the impact of conflict on mental health and determine the level of support needed for each individual or group.

### **.2Preventive and Educational Interventions**

**Psychological-Educational Programs:** Develop and implement educational programs focusing on building psychological and social skills for students, such as stress management, expressing emotions, and conflict resolution.

**Enhancing Psychological Awareness in Curricula:** Integrate content related to mental health and trauma management into curricula to raise awareness among students and teachers about the importance of mental health.

### **.3Providing Psychological First Aid**

**Emergency Psychological Services:** Provide psychological first aid in affected areas immediately after traumatic events, focusing on children and adolescents most at risk.

**Rapid Response:** Form rapid response teams consisting of mental health and education specialists to work immediately in affected areas. These teams aim to provide initial psychological support, assess educational damage, and develop emergency plans for continuing education.

**Training Volunteers and Local Workers:** Train teams of local volunteers and field workers to provide psychological first aid to ensure a quick and comprehensive response.

### **.4Building Psychosocial Support Networks**

**Family and Community Support:** Create psychosocial support groups for affected families and communities to provide a supportive environment that helps individuals recover psychologically.

**Peer Programs Activation:** Launch peer support programs enabling students to provide psychological support to each other under specialist supervision.

### **.5Sustainable Psychological Interventions**

**Group Psychological Therapy:** Organize group therapy sessions for students, teachers, and community members to enhance collective recovery and build supportive social bonds.

**Individual Psychological Therapy:** Provide individual psychological therapy services for the most affected cases, focusing on trauma recovery strategies and building psychological resilience.

### **.6Training Education and Mental Health Workers**

**Professional Skill Development:** Organize advanced training courses for teachers and mental health workers to teach them how to deal with psychologically and socially affected students and provide appropriate support.

**Managing Complex Psychological Cases:** Provide specialized training for mental health workers on managing complex psychological cases and using advanced treatment methods.

### **.7Community Interventions and Local Partnerships**

Enhancing the Role of the Local Community: Involve local leaders and civil society organizations in designing and implementing psychosocial support programs to ensure responses align with local community needs.

Partnerships with NGOs: Enhance cooperation with NGOs specializing in mental health to expand the scope of interventions and increase their effectiveness.

### **.8Using Technology for Psychological Support**

Online Psychological Support Platforms: Develop digital platforms offering remote psychological and social support services, including online psychological consultations and interactive educational and psychological content.

Trauma Management Apps: Design mobile apps helping individuals manage psychological trauma, such as meditation techniques, deep breathing methods, and stress management.

### **.9Continuous Research and Evaluation**

Research on Interventions: Conduct research and studies on the effectiveness of psychosocial interventions in conflict-affected environments, using the results to improve future programs.

Continuous Monitoring and Evaluation Systems: Establish systems for continuously monitoring and evaluating psychosocial interventions to ensure objectives are met and improve community response to trauma.

### **.10International Cooperation and Funding**

Enhancing International Cooperation: Establish international partnerships with global organizations specializing in mental health to exchange expertise and secure necessary funding to expand interventions.

Sustainable Funding for Interventions: Work to secure long-term funding sources through collaboration with international and local donor agencies to ensure the continuity of psychosocial support programs.

We conclude from all this that the impact of war and Israeli aggression on Palestinian students over a year is comprehensive and deep, extending beyond psychological trauma and displacement to interrupted education and economic difficulties. The consequences of the conflict have affected students' entire lives, jeopardizing their current well-being and future opportunities. Addressing the educational gaps arising from such disruptions requires unified efforts to provide psychosocial support, ensure access to quality education, and promote community reconciliation initiatives. This can only be achieved through collective action and continuous investment to mitigate the negative effects of war on students and create a brighter, more inclusive future for all. The gap left by war and Israeli aggression in one year requires generations to heal.

While the tragedy of war and Israeli aggression shook the conscience of nations that raised their voices saying "Stop the war," countries that signed various international charters and agreements condemning the targeting of children and affirming the need to protect them and their right to education under all circumstances failed to fulfill their legal, ethical, and humanitarian responsibilities. The Israeli occupation continued to defy and violate these charters, persisting in its crimes against children and the rest of the Palestinian population.

For a safe return to education, it is essential for influential international parties to cooperate to achieve an immediate ceasefire as a prerequisite for resuming studies. Priority should also be given to urgent humanitarian relief efforts and the delivery of assistance to provide basic needs such as water, food, medicine, and shelter. Education is not a luxury but a fundamental right for all, yet it cannot be provided to a child without shelter, threatened with death, and suffering from hunger, thirst, and cold. The Palestinian Ministry of Education plays a pivotal role in addressing these challenges by providing psychosocial support, developing educational curricula, improving school infrastructure, and cooperating with international and local partners. Through these efforts and recommendations, Palestinian society can strengthen the resilience of its younger generations and ensure the continuation of education as a fundamental tool in resisting occupation and building a strong and cohesive society.

### **Recommendations and Visions:**

Regarding official and political interventions, and given the extensive damage to students, educational and administrative staff, and educational facilities, returning to education requires building and implementing urgent short-term mechanisms to achieve access to education and longer-term mechanisms to rebuild an effective education system. These recommendations and visions can be summarized as follows:

Strengthening a national protection system capable of implementing preventive protection measures at both official and unofficial levels, such as providing psychological first aid services in displacement and shelter locations.

Resilient and sustainable education system: It is necessary to develop a flexible education system capable of adapting to rapid changes and difficult conditions. This requires enhancing distance education, developing flexible curricula, and providing accessible digital educational resources anytime and anywhere.

Taking critical decisions and numerous attempts to modify proposed curricula slightly to suit the psychological reality experienced by students and all aspects of the educational process.

Focusing on the psychological reality and addressing internal crises significantly influences regaining missed educational concepts. Children require rehabilitation sessions to minimize psychological losses. This may pose an additional educational burden, especially since curricula did not consider this aspect, making it imperative to revise and modify curricula as mentioned earlier.

Implementing activities and programs for psychological and social support targeting students, teachers, and parents, in addition to supporting community initiatives to ensure broad coverage. It is important to involve students and give them active roles in these programs to encourage their engagement and enthusiasm for learning.

Empowering the workforce in mental health and social care through professional systems in case management and appropriate treatment methods for children.

Designing scientific programs targeting psychological flexibility for students and empowering them to deal with trauma.



Organizing training courses for teachers, educational counselors, and workers in psychological and social care to teach them how to handle children suffering from post-traumatic stress disorders.

Providing support for families through educational sessions for parents to help them understand their children's needs and challenges and how to support them.

Establishing primary psychological care centers near affected areas to provide necessary support for children and their families.

Enhancing community awareness by distributing materials on child mental health and how to effectively address it.

Creating partnerships with various formal and informal sectors to provide a comprehensive and coordinated response aimed at enhancing comprehensive mental health services.

Enhancing international cooperation: It is essential to strengthen partnerships with international organizations and supportive countries to ensure the provision of necessary resources for education in Palestine. These partnerships can contribute to improving education quality and providing psychosocial support for students.

The necessity of media targeting the issue of psychosocial support regarding awareness and presenting journalistic and investigative reports and other media tools.

Universities and various colleges should address the subject of community mental health through research and review, integrating mental health topics into university and school curricula.

Developing referral systems between levels of psychosocial intervention services, which requires coordination and cooperation within the framework of different service providers.

Conducting research and studies on the effectiveness of psychosocial interventions in Palestine and developing follow-up and evaluation programs whose results can guide policies and professional practices in the education system.

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