

EMERGENCY RESPONSE AND OPERATIONS

Effective Deployment of EMTs in Gaza for Rapid Trauma Treatment and Response

Melanie J Coyne MSc¹, Mohammed Aghaalkurdi MD²,
Sondos Alashgar², Laure E Bacchiocchi MA¹

1. Medical Aid for Palestinians (MAP), London, United Kingdom
2. Medical Aid for Palestinians (MAP), Gaza, occupied Palestinian territory, including east Jerusalem

Background/Introduction: The military offensive on Gaza since October 2023 caused mass displacement, killing over 39,480 Palestinians and injuring 91,128 (to 1 August 2024). Gaza's hospitals cannot cope with large numbers of trauma patients due to successive mass casualty incidents. Restricted humanitarian access into Gaza, ongoing attacks on hospitals and healthcare workers, and limited medical supplies hinder operations.

Objectives: MAP provided quality treatment of trauma cases in the south and middle areas of Gaza through the deployment of specialized care teams from December 2023 – August 2024.

Method/Description: MAP's specialist multidisciplinary EMTs initially deployed through Rafah and then through Jordan, operated and treated patients alongside the depleted local workforce. The careful selection of clinical skills in each EMT to best complement existing teams ensured maximum efficiency in trauma treatment.

Results/Outcomes: Despite the severe challenges, MAP's eight EMTs conducted 1,718 consultations and 551 surgeries, with 71% of surgeries being conflict-related and 21% were for children, over 97 days of treatment provision.

Conclusion: Factors contributing to effective deployment of EMTs and successful treatment of trauma and other cases included: 1. Availability of a local team able to support EMTs throughout their deployment inside Gaza; 2. Well-established relationships with the local hospitals prior to October 2023, allowing for effective liaison and adaptability to the rapidly changing and hostile environment; 3. Previous investment and expansion of our network of clinical specialist volunteers enabling rapid scale up of our EMT operations; and, 4. Flexibility of MAP volunteer specialists in undertaking new roles in the emergency room and operating theatres based on need.

Prehosp. Disaster Med. 2025;40(Suppl. S1):s26

doi:10.1017/S1049023X25000780

The Impact of Early Integration of Mental Health and Psychosocial Support (MHPSS) in the International Committee of the Red Cross (ICRC) Field Hospital in Gaza.

Bethan S McEvoy MSc Psychology^{1,2}, Zara E Sejberg MA,
International Education and Development Studies², Omar
S Rasheed PhD Psychology¹

1. International Committee of the Red Cross, Geneva, Switzerland
2. Danish Red Cross, Copenhagen, Denmark

Background/Introduction: In May 2024, ICRC and 12 Red Cross-National Societies combined efforts to open a field hospital in Rafah, Gaza, to help address the overwhelming health needs emanating from the ongoing armed conflict. The hospital complements and supports the essential work performed by the Palestine Red Crescent Society (PRCS) in providing urgent care.

Objectives: MHPSS is an essential part of emergency response, but it is still seen as an optional 'nice to have' intervention and therefore not always integrated within emergency health response in a timely manner. ICRC, in line with the International Red Cross and Red Crescent Movement MHPSS Policy and World Health Assembly MHPSS Resolution, decided early on to integrate MHPSS within the health services being provided by the field hospital.

Method/Description: Presentation and discussion on:

- How was MHPSS integrated within the hospital services, including mass casualty management and triage?
- What impact has early access to MHPSS had for patients and their families?
- What do EMTs need to know about MHPSS?
- What were the challenges and lessons learnt from this deployment?
- Sustainable approaches to ensuring MHPSS service provision within emergency health settings

Results/Outcomes: ICRC and Danish Red Cross (DRC) highlighted the importance of early integration of MHPSS into emergency health services and share best practice examples and case stories from the field hospital in Gaza.

Conclusion: Early and appropriate access to MHPSS saves lives.

Prehosp. Disaster Med. 2025;40(Suppl. S1):s26

doi:10.1017/S1049023X25000792

Transforming the Type 1 EMT Approach: How Rehabilitation Shaped UK-Med's Gaza Type 1 EMT

April Gamble^{1,2}, Harvey Surial¹, Dima Yasin¹

1. UK-Med, Manchester, United Kingdom
2. Wchan Organization for Victims of Human Rights Violations, Kurdistan, Iraq

Background/Introduction: The EMT Minimum Technical Standards and Recommendations for Rehabilitation advise that Type 1 EMTs have "capacity to provide at least basic outpatient rehabilitation." However, to our knowledge, Type 1 EMTs rarely include rehabilitation. UK-Med's requires rehabilitation in the Type 1 EMT, including within UK-Med's Type 1 EMT in Dier Al-Balah, Gaza (Type 1 Gaza EMT).

Objectives: Describe the rehabilitation needs, activities, and impact for people accessing the Type 1 Gaza EMT.

Describe the innovative rehabilitation service delivery model and associated lessons learned in the Type 1 Gaza EMT.

Method/Description: This research is informed by the following sources from May to October 2024 in the Type 1 Gaza EMT: 1. Statistical analyses of quantitative data from clinical