



Global Scientific Attention to the Israel-Gaza Conflict: A Bibliometric and Thematic Analysis of Health and Humanitarian Research

İsrail-Gazze Çatışmasına Yönelik Küresel Bilimsel İlgil: Sağlık ve İnsani Yardım Araştırmalarına İlişkin Bibliyometrik ve Tematik Analiz

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ABSTRACT

Aim: Armed conflicts and humanitarian crises, particularly in the Middle East, have led to profound disruptions in civilian health and psychosocial well-being. In recent years, the Gaza region has become a focal point of such disruptions, prompting increasing academic attention. This study provides a comprehensive bibliometric analysis of the global scientific output related to war-affected civilian populations in the Middle East, with a special emphasis on Gaza and Palestine.

Material and Method: We conducted a bibliometric analysis of 488 peer-reviewed articles published between 1961 and 2025, retrieved from PubMed database. Quantitative metrics such as annual scientific production, author productivity (Lotka's Law), institutional contributions, international collaborations, keyword co-occurrence, and thematic evolution were assessed using Bibliometrix (R package). Visualization techniques included co-authorship networks, thematic maps, treemaps, and trend analysis.

Results: Scientific interest in war-related civilian health surged significantly after 2023, reflecting the global academic response to escalating humanitarian crises in Gaza. A small group of highly productive authors and institutions (primarily based in Gaza, Israel, and Western academic centers) contributed disproportionately to the literature. Core themes include psychosocial trauma, gender disparities, child vulnerability, warfare-related epidemiology, and health service disruption. Keywords such as "humans," "female," "warfare," "child," "Middle East," and "mental health" emerged as dominant focal points. International collaboration rates reached 20.9%, with a noticeable rise in publications from high-impact journals.

Conclusion: The intersection of warfare, civilian suffering, and public health has generated a distinct, rapidly expanding body of research. This bibliometric study maps the scientific terrain of conflict-related health literature. These bibliometric patterns are consistent with humanitarian data from the United Nations and UNICEF, which indicate that women and children constitute a significant portion of civilian casualties in Gaza. Future studies must prioritize inclusive research agendas that center the voices of affected populations and address structural inequities in global health scholarship.

Keywords: Gaza, Middle East, war, mental health, bibliometric analysis, public health, civilians, trauma, authorship, ethics

ÖZ

Amaç: Orta Doğu başta olmak üzere çatışmalar ve insani krizler, sivil sağlığı ve psikososyal refahta derin aksamalara yol açmıştır. Son yıllarda Gazze bölgesi bu tür aksamaların odak noktası haline gelmiş ve artan bir akademik ilginin odağı olmuştur. Bu çalışma, Orta Doğu'da savaştan etkilenen sivil popülasyonlara yönelik küresel bilimsel çıktının, Gazze ve Filistin'e özel bir vurgu yaparak kapsamlı bir bibliyometrik analizini sunmaktadır.

Gereç ve Yöntem: PubMed veri tabanından elde edilen, 1961 ile 2025 yılları arasında yayımlanmış 488 hakemli makalenin bibliyometrik analizi gerçekleştirilmiştir. Yıllık bilimsel üretim, yazar üretkenliği (Lotka Yasası), kurumsal katkılar, uluslararası iş birlikleri, anahtar kelime eş-dizilimi ve tematik evrim gibi nicel metrikler Bibliometrix (R paketi) kullanılarak değerlendirilmiştir. Görselleştirme teknikleri arasında ortak yazarlık ağları, tematik haritalar, ve eğilim analizi yer almıştır.

Bulgular: Savaşla ilişkili sivil sağlığına yönelik bilimsel ilgi, 2023'ten sonra önemli ölçüde artmış olup, bu durum Gazze'de tırmanan insani krizlere yönelik küresel akademik tepkiyi yansıtmaktadır. Başta Gazze, İsrail ve Batılı akademik merkezler olmak üzere, az sayıda yüksek düzeyde üretken yazar ve kurum literatüre orantısız bir katkı sağlamıştır. Temel temalar arasında psikososyal travma, toplumsal cinsiyet eşitsizlikleri, çocuk kırılabilirliği, savaşla ilişkili epidemiyoloji ve sağlık hizmetlerinin aksaması yer almaktadır. "İnsanlar", "kadın", "savaş", "çocuk", "Orta Doğu" ve "ruh sağlığı" gibi anahtar kelimeler baskın odak noktaları olarak ortaya çıkmıştır. Uluslararası iş birliği oranları %20,9'a ulaşmış olup, yüksek etki faktörlü dergilerdeki yayınlarda belirgin bir artış gözlenmiştir.

Sonuç: Savaş, sivil halkın çektiği acılar ve halk sağlığı konularının kesişim noktası, hızla genişleyen kendine özgü bir araştırma alanı oluşturmuştur. Bu bibliyometrik çalışma, çatışmayla ilişkili sağlık literatürünün bilimsel haritasını çıkarmaktadır. Bu bibliyometrik örüntüler, Birleşmiş Milletler ve UNICEF'ten gelen ve Gazze'deki sivil kayıpların önemli bir kısmını kadın ve çocukların oluşturduğunu belirten insani verilerle tutarlıdır. Gelecekteki çalışmalar, etkilenen popülasyonların seslerini merkeze alan ve küresel sağlık çalışmalarındaki yapısal eşitsizlikleri ele alan kapsayıcı araştırma gündemlerine öncelik vermelidir.

Anahtar Kelimeler: Gazze, Orta Doğu, savaş, ruh sağlığı, bibliyometrik analiz, halk sağlığı, siviller, travma, yazarlık, etik

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INTRODUCTION

In recent years, the intersection of armed conflict and public health has emerged as one of the most ethically charged and scientifically demanding domains in global research. Nowhere is this intersection more acutely visible than in the context of the Middle East (particularly Gaza) where prolonged geopolitical instability has transformed civilian life into a terrain of chronic suffering, psychological trauma, and systemic healthcare collapse (1).

Since 2008, the Gaza Strip has experienced multiple cycles of large-scale armed conflict, resulting in thousands of civilian deaths, mass displacement, and the systematic degradation of critical infrastructure, including the region's already fragile healthcare system (2). The cumulative impact of repeated bombardments, siege conditions, and resource deprivation has transformed Gaza into a prolonged public health emergency. These developments not only constitute a humanitarian catastrophe but also raise critical questions about how conflict-affected populations are represented in global scientific discourse (3).

While wars are traditionally analyzed through the lenses of strategy, diplomacy, and international law, a growing body of literature has begun to reframe conflict as a public health catastrophe (4). This paradigm shift demands not only humanitarian responses but also scientific accountability (5).

Bibliometric analysis in this context highlights how scientific attention aligns with humanitarian priorities (6).

This study presents a comprehensive bibliometric evaluation of publications focusing on war-affected civilian populations in the Middle East, with a particular emphasis on Gaza. By analyzing 488 peer-reviewed articles published between 1961 and 2025, we aim to map the intellectual architecture of this emerging field: Who are its leading voices? Which institutions lead the discourse? What are the evolving thematic currents? Most crucially, how has the academic world responded to one of the most prolonged humanitarian crises of our time?

By offering a multi-dimensional bibliometric analysis (spanning co-authorship patterns, institutional networks, journal sources, and thematic trajectories) this study does more than quantify academic output. This study aims to contribute to the growing academic focus on the human consequences of conflict, emphasizing the relevance of public health within war-related research.

MATERIAL AND METHOD

This bibliometric study was based exclusively on data retrieved from the PubMed database. The search yielded peer-reviewed articles published between 1961 and 2025, with 1961 was not a predefined cutoff, but rather the earliest year with a relevant publication identified by

the search algorithm. The aim was to identify and map the scientific literature focusing on the health-related consequences of armed conflict in the Gaza Strip. PubMed was deliberately selected as the primary database due to its curated biomedical focus and standardized MeSH indexing, allowing a precise mapping of clinically oriented health research related to conflict settings. The literature search was conducted in PubMed in June 2025 using a predefined Boolean strategy. The search combined geographical identifiers with health-related and humanitarian keywords as follows:

("Gaza"[Title/Abstract] OR "Gaza Strip"[Title/Abstract]) AND ("health system collapse" OR "public health" OR "trauma" OR "genocide" OR "siege" OR "war crimes").

The search was applied to the Title and Abstract fields to ensure thematic relevance. No restrictions on publication date were imposed. Language restrictions were not applied. The complete search strategy is provided in the Supplementary Materials in accordance with PRISMA-S recommendations. (7).

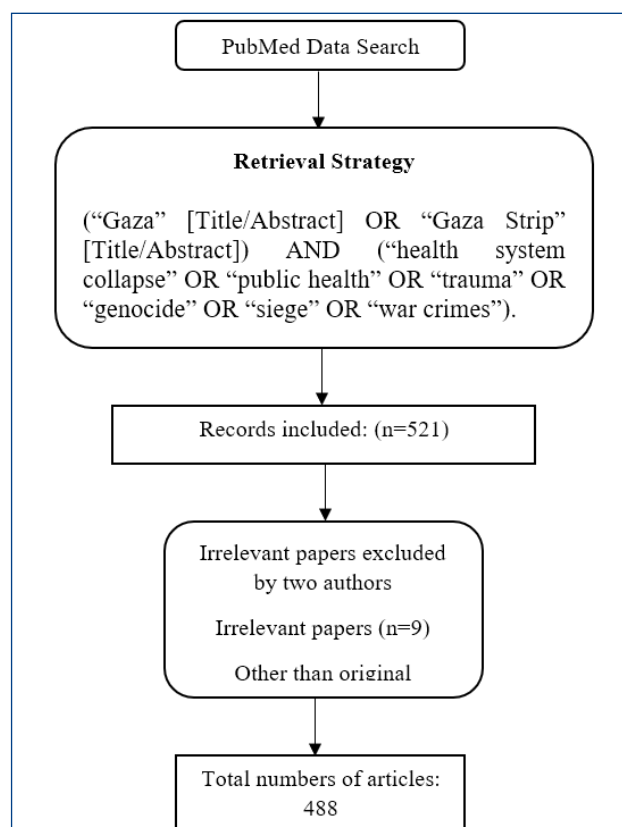


Table 1: Flowchart of the literature search for the bibliometric analysis.

Inclusion criteria were restricted to original research articles published in scholarly journals. Editorials, letters, commentaries, and conference abstracts were excluded (Table 1). A manual screening was performed to remove duplicates and non-relevant entries, resulting in a final dataset of 488 unique articles. Two independent reviewers screened the titles and abstracts to assess eligibility according to predefined inclusion and

exclusion criteria (8). Disagreements were resolved through discussion to ensure consistency and minimize selection bias. All bibliographic data were exported in BibTeX format for further analysis.

The data were analyzed using the Bibliometrix package in the R programming environment, accessed via the Biblioshiny web interface (9). This platform facilitated the computation of key bibliometric indicators, including annual publication trends, author productivity (Lotka's Law), institutional affiliations, country-level contributions, and international collaboration rates (10). Additionally, keyword co-occurrence networks, trend topic analysis, and thematic mapping were used to uncover the conceptual structure and evolution of the field.

Visualizations such as co-authorship networks, thematic maps, word clouds, treemaps, and international collaboration diagrams were generated and refined using integrated R visualization tools. This methodological framework enabled a multidimensional exploration of the scientific discourse surrounding Gaza and its civilian health implications under conditions of chronic armed conflict. The present study focused primarily on descriptive and thematic bibliometric indicators. Advanced citation network analyses (e.g. co-citation, bibliographic coupling) were beyond the predefined scope of this work.

RESULTS

The dataset comprises 488 PubMed-indexed publications related to the Israel–Gaza conflict, spanning a period of over six decades (1961–2025). These publications are distributed across 246 distinct journal titles, underscoring the inherently cross-disciplinary nature of the topic and indicating that scholarly attention is not confined to a singular specialty domain. The mean annual growth rate of 7.7% reflects a steady and sustained increase in publication volume. Rather than exhibiting sporadic surges, this trend suggests that each recurrence of hostilities or humanitarian crises tends to generate renewed academic output, contributing to a cumulative body of literature over time.

The average age of documents within the corpus is 6.3 years, suggesting that a substantial portion of research has emerged in the past two decades, aligning with intensifying scholarly engagement with the region's evolving sociopolitical and health dynamics.

Authorship trends further illustrate the collaborative nature of research in this domain. Among 1,736 individual contributors, only 63 publications are single-authored, with the modal article featuring an average of 4.8 co-authors. This aligns with norms in biomedical and public health research, where fieldwork and

interdisciplinary methodologies often necessitate team-based collaboration. However, the proportion of internationally co-authored papers remains relatively modest at 20.9%, notably lower than the rates commonly observed in global health literature (typically exceeding 30%). This may suggest continued regional concentration or geopolitical sensitivities influencing collaborative networks. Additionally, the 488 articles yielded 1,059 unique author-supplied keywords, averaging approximately 2.2 per article.

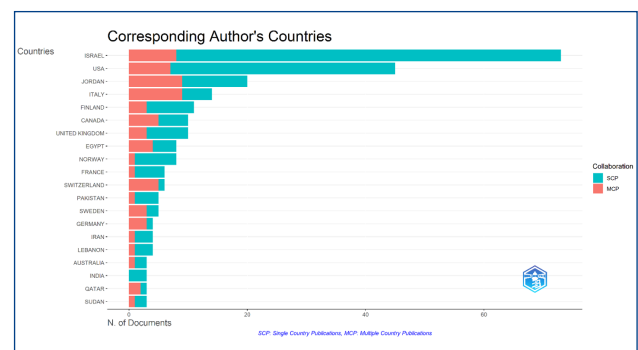


Figure 1. Geographic Leadership and Representational Asymmetries

The geographic distribution of corresponding authorship reveals notable imbalances (Figure 1). Israeli affiliations lead the corpus, with approximately 65 publications (13% of the total) listing a corresponding author based in Israel. The United States ranks second, contributing around 40 papers, while Jordan, together with Israel and the U.S, collectively account for roughly one-third of all publications. European representation is more dispersed, with countries such as Italy, Finland, the United Kingdom, Norway, France, and Switzerland each contributing between 8 and 15 papers. By contrast, authors from neighboring Arab states (including Egypt, Lebanon, Qatar, and Sudan) appear only sporadically, typically contributing fewer than 10 articles each.

Strikingly, no publications list a corresponding author based in the Palestinian territories (Gaza or the West Bank).

The collaboration pattern, illustrated through single-country publications (SCP) and multi-country publications (MCP), further emphasizes these asymmetries. Color-coded segmentation reveals a dominance of SCPs (shown in turquoise), particularly among Israeli-affiliated authors, who overwhelmingly publish within nationally confined teams. This trend is consistent with the use of locally controlled clinical data or the sensitivity of the subject matter. Conversely, countries with lower publication volume (such as Norway, Switzerland, and Pakistan) show a proportionally higher MCP share (in red), indicating greater reliance on international partnerships, often in the context of humanitarian missions or collaborative field research.

These patterns indicate that cross-border scientific collaboration remains relatively limited.

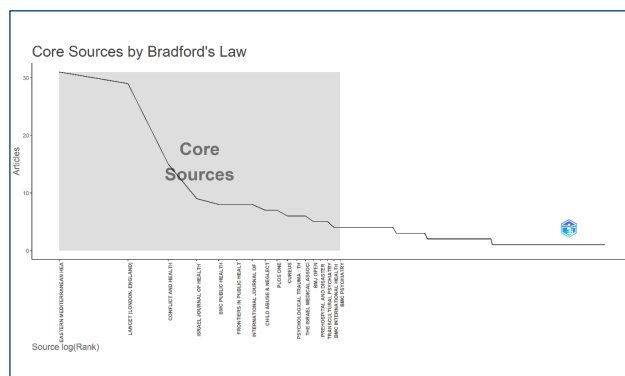


Figure 2. Bradford Core Zone – Where the Literature Clusters

Application of Bradford's Law to the dataset reveals a concentrated nucleus of approximately twelve journals that together account for one-third of all publications related to the Israel–Gaza conflict (Figure 2). Leading this core is the Eastern Mediterranean Health Journal, which contributes over 30 articles. The Lancet follows closely, owing to its long-standing engagement with Palestinian and Israeli health issues through its high-visibility Series, while Conflict and Health (an open-access journal specializing in war-related epidemiology) rounds out the top tier.

The remainder of the Bradford zone includes a blend of broad-spectrum public health journals (BMC Public Health, Frontiers in Public Health, International Journal of Public Health) and specialized titles addressing specific psychosocial or humanitarian dimensions of the conflict, such as Child Abuse & Neglect, Psychological Trauma, and Prehospital and Disaster Medicine. Notably, several large open-access platforms (including three BMC journals, PLOS ONE, and Cureus) feature prominently in the core.

The sharply declining curve beyond the core journals highlights a pronounced dispersion of the literature across a “long tail” of low-frequency publication venues.

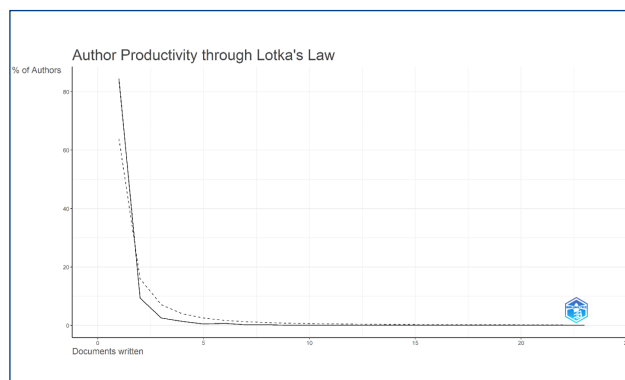


Figure 3. The ‘One-and-Done’ Effect in Lotka's Author Productivity Distribution

The authorship distribution in the Israel–Gaza conflict corpus exhibits a pronounced long-tail pattern, as visualized through a Lotka plot (Figure 3). Over 80% of contributors are represented by a single publication, with the curve declining sharply after the first appearance. Notably, the empirical slope (solid line) lies above the classical Lotka distribution (dashed line), indicating an even stronger dominance of one-time contributors than the inverse-square law would predict.

Beyond two or three publications, the curve approaches the x-axis, with fewer than 2% of authors contributing five or more papers. The most prolific contributor appears in approximately twenty articles.

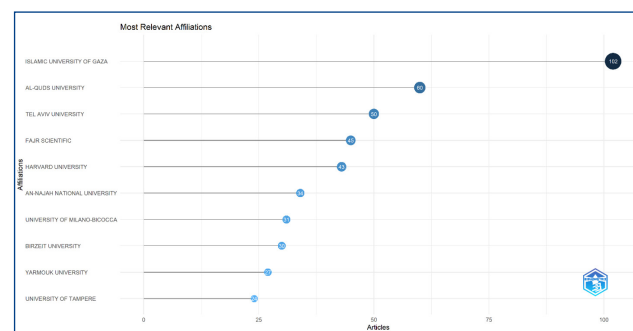


Figure 4. Institutional Footprint—Local Voices Hold the Numeric Lead

When institutional contribution is assessed by any author affiliation rather than corresponding authorship, the landscape changes significantly (Figure 4). Palestinian academic institutions emerge as central contributors: four universities from Gaza and the West Bank occupy half of the top ten most frequently appearing affiliations. The Islamic University of Gaza leads with 102 articles—more than double the output of the next most represented institution, Al-Quds University (60). Among Israeli institutions, Tel Aviv University is the most prolific, with 50 publications. Additional Palestinian institutions, including An-Najah National University (34) and Birzeit University (30), further underscore the extensive involvement of scholars from within the conflict zone.

Outside the immediate region, high-income institutions such as Harvard University (43) and the University of Milano-Bicocca (31) demonstrate consistent engagement, often in methodological or supervisory roles. Meanwhile, the University of Tampere (Finland, 24 publications) and Yarmouk University (Jordan, 27 publications) reflect smaller but persistent contributions from Nordic and neighboring Arab partners. This broader footprint suggests a heterogeneous global network, with varying levels of embeddedness and leadership.

When juxtaposed with the corresponding-author data presented earlier, a key asymmetry emerges: while Palestinian institutions contribute extensively as co-authoring sites, they are rarely listed in lead or senior author positions.

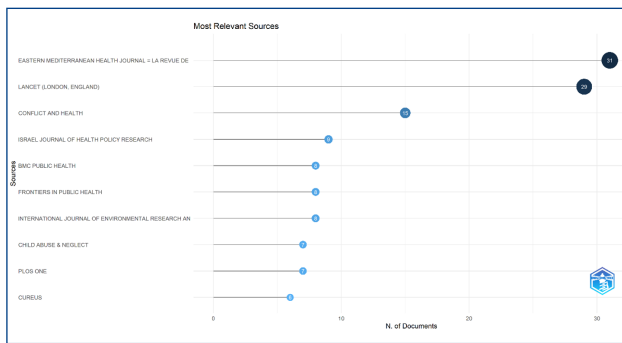


Figure 5. Scholarly Publishing Patterns on Gaza: Top Sources

A quick glance confirms the same nucleus identified by Bradford's analysis, but the bubble-plot adds nuance to relative weight (**Figure 5**). The Eastern Mediterranean Health Journal (EMHJ) tops output with 31 papers. Close behind, The Lancet contributes 29 articles. Next comes Conflict and Health (15 papers), the field's bespoke outlet for war-zone epidemiology.

Below the top three, the slope flattens quickly: Israel Journal of Health Policy Research (9) caters to domestic health-system studies; generalist public-health megajournals—BMC Public Health, Frontiers in Public Health, IJERPH—each host eight papers. Niche social-science venues such as Child Abuse & Neglect (7) illustrate the corpus's psychosocial strand, while platform journals like PLOS ONE (7) and Cureus (6) indicate that some teams value rapid dissemination and APC affordability over domain specificity.

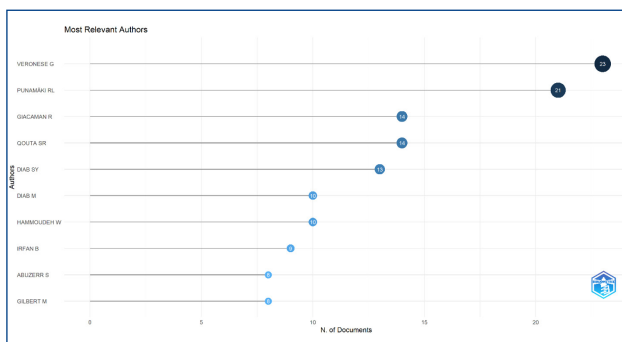


Figure 6. Who Holds the Pen? Most Active Scholars in Gaza Research

The bubble plot largely confirms the Bradford core previously identified, while adding granularity to journal-level preferences based on relative output (**Figure 6**). Leading the field is the Eastern Mediterranean Health Journal (EMHJ), with 31 articles. The Lancet follows closely with 29 papers. Conflict and Health ranks third, with 15 articles.

Beyond the top three, journal output levels decline rapidly, reflecting both thematic dispersion and practical considerations. The Israel Journal of Health Policy Research (9 articles) caters to locally focused health-system analysis, while public-health megajournals such as BMC Public Health, Frontiers in Public Health, and International Journal of Environmental Research and Public Health (IJERPH) each host eight articles.

Niche disciplinary outlets—such as Child Abuse & Neglect (7 articles)—highlight the literature's psychosocial dimension, while platform journals like PLOS ONE (7) and Cureus (6) exemplify pragmatic publication choices.

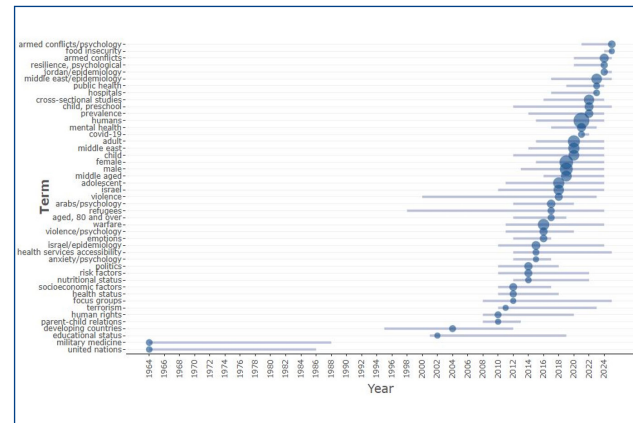


Figure 7. Evolving Thematic Landscape—From Macro-Politics to Lived Experience

The temporal evolution of author-supplied keywords reveals a marked shift in thematic focus over the past six decades (**Figure 7**). In the early period, the literature was sparse and predominantly policy-oriented. The first recurring term, “United Nations” (1964), reflects an initial emphasis on diplomatic and geopolitical discourse, rather than empirical research or public health inquiry. Following a prolonged lull, the thematic landscape began to diversify in the late 1990s and early 2000s—coinciding with the Oslo Accords and the Second Intifada. During this phase, emerging terms such as “developing countries,” “human rights,” and “terrorism” were observed.

The timeline curve steepens after 2008, reflecting a growing academic response to the intensifying humanitarian toll of recurrent violence, and accelerates again following the 2014 Gaza War. This period sees the lexical emergence of terms such as “public health,” “hospitals,” “prevalence,” and “cross-sectional studies.”

Keyword prominence in the 2020s—reflected in both bubble size and bar length—demonstrates a convergence around psychosocial and deprivation-related themes. Dominant descriptors include mental health-focused terms (“mental health,” “resilience, psychological,” “anxiety/psychology”), demographic indicators (“child,” “adolescent,” “female,” “aged 80 and over”), and structural vulnerability markers (“food insecurity,” “health services accessibility,” “socioeconomic factors”). The emergence of “COVID-19” in 2021 illustrates the compounding impact of the global pandemic on an already strained population, prompting urgent research into intersecting health and social risks.

these findings (22). To provide a broader context for these thematic trends, external humanitarian data are informative. For instance, UN OCHA and UNICEF reported unprecedented civilian casualties by 2024 and 2025, with a significant impact on women and children (23-24). The high frequency of keywords such as “child,” “female,” and “trauma” in our dataset aligns with this humanitarian context, though bibliometric data alone cannot establish a causal link between publication frequency and casualty rates.

The thematic evolution from acute emergency response toward long-term public health strategies suggests a recognition of the chronic nature of the crisis (25). Gaza represents a protracted public health emergency where repeated trauma and infrastructural erosion necessitate sustained, rather than episodic, scientific inquiry. However, the observed imbalance in authorship and regional representation raises persistent questions regarding the distribution of scientific agency in conflict research (26).

Furthermore, our analysis indicates that the field is still maturing. Despite the increasing volume of literature, the thematic network remains somewhat fragmented, with a lack of established methodological subdomains such as standardized trauma epidemiology (17). The relative absence of rights-based terminology in author keywords suggests that the literature remains largely descriptive rather than evaluative or systems-oriented (27). For a “precision” approach to conflict-related health research, it is essential to move toward standardized keyword tagging and cross-institutional initiatives that bridge the gap between fragmented documentation and policy-relevant scholarship (28).

Limitations

The exclusive use of PubMed inevitably underrepresents social science, legal, and political scholarship. Therefore, the findings should be interpreted as reflecting the biomedical and clinical research response rather than the entirety of global scholarly attention. The absence of citation network analyses limits the assessment of intellectual influence and knowledge diffusion.

CONCLUSION

This bibliometric study serves as a meta-analytical tool to reflect not only what is being studied, but how and by whom (29). The challenge for the academic community is to produce knowledge that is not only scientifically rigorous but also ethically inclusive, ensuring that the narratives of conflict are informed by those who experience them directly (30). Future research should prioritize equitable partnerships to ensure that global health scholarship reflects a more balanced and representative scientific dialogue.

ETHICAL DECLARATIONS

Ethics Committee Approval: This study is based on published literature and did not involve human participants, animals, or patient data; therefore, ethical approval was not required.

Informed Consent: Informed consent was not required.

Referee Evaluation Process: Externally peer-reviewed.

Conflict of Interest Statement: The authors have no conflicts of interest to declare.

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Author Contributions: All of the authors declare that they have all participated in the design, execution, and analysis of the paper, and that they have approved the final version.

REFERENCES

1. Slone M, Shoshani A. Efficacy of a school-based primary prevention program for coping with exposure to political violence. *Int J Behav Develop.* 2008;32(4):348-58.
2. United Nations Office for the Coordination of Humanitarian Affairs. Occupied Palestinian Territory: Humanitarian impact of recurrent hostilities. 2024. Available from: <https://www.ochaopt.org/>
3. Abimbola S. The foreign gaze: authorship in academic global health. *BMJ Glob Health.* 2019;4 (5):e002068.
4. Leaning J, Guha-Sapir D. Natural disasters, armed conflict, and public health. *N Engl J Med.* 2013;369 (19):1836-42.
5. Abimbola S, Pai M. Will global health survive its decolonisation? *Lancet.* 2020;396 (10263):1627-8.
6. Süer MS, Ergüder E, Demir S, Balas Ş. Scientific response to the 2023 Kahramanmaraş earthquake: A bibliometric study. 2023 Kahramanmaraş depremine bilimsel yanıt: Bir bibliyometrik çalışma. *Ulusal travma ve acil cerrahi dergisi = Turkish journal of trauma & emergency surgery. TJTES.* 2025;31(8):766-75.
7. Bramer WM, Rethlefsen ML, Kleijnen J, Franco OH. Optimal database combinations for literature searches in systematic reviews: a prospective exploratory study. *Syst Rev.* 2017;6 (1):245.
8. Moher D, Liberati A, Tetzlaff J, Altman DG, PRISMA Group. Preferred reporting items for systematic reviews and meta-analyses: the PRISMA statement. *PLoS Med.* 2009;6 (7):e1000097.
9. Lotka AJ. The frequency distribution of scientific productivity. *J Washington Acad Sci.* 1926;16(12):317-23.
10. Bradford SC. Sources of information on specific subjects. *Engineering: An Illustrated Weekly J.* 1934;137:85-6.
11. Carel H, Kidd IJ. Epistemic injustice in healthcare: a philosophical analysis. *Med Health Care Philos.* 2014;17(4):529-40.
12. Austin S. Decolonizing methodologies: research and indigenous people. *J Health Psychol.* 2001;6(3):358-9.
13. Sweileh WM, Zyoud SH, Sawalha AF, Abu-Taha A, Hussein A, Al-Jabi SW. Medical and biomedical research productivity from Palestine, 2002 - 2011. *BMC Res Notes.* 2013;6:41.
14. Levin G, Meyer R, Brezinov Y. Analysis of Scientific Publications on the Gaza-Israeli Conflict. *Isr Med Assoc J.* 2023;25(12):795-6.
15. Mansour R, Naal H, Kishawi T, Achi NE, Hneiny L, Saleh S. Health research capacity building of health workers in fragile and conflict-affected settings: a scoping review of challenges, strengths, and recommendations. *Health Res Policy Syst.* 2021;19(1):84.
16. Faure MC, Munung NS, Ntusi NAB, Pratt B, de Vries J. Mapping experiences and perspectives of equity in international health collaborations: a scoping review. *Int J Equity Health.* 2021;20(1):28.
17. Ennouri E, Boussarsar M, Ben Mahfoudh C, Elezzi K, Ben Saad H. Scholarly Publications and Opinions Through 366-Day War on Gaza (2023-2024): A Scoping Review and Bibliometric Analysis. *Int J Health Policy Manag.* 2025;14:8809.



18. Smith J, El-Solh S, Hanbali L, et al. Realising health justice in Palestine: beyond humanitarian voices. *Confl Health*. 2025;19(1):7.
19. Morton B, Vercueil A, Masekela R, et al. Consensus statement on measures to promote equitable authorship in the publication of research from international partnerships. *Anaesthesia*. 2022;77(3):264-76.
20. Abu-Elenin MM, Radwan MM, Rabie MM, et al. The repercussions of watching scenes of the escalating conflict in Gaza strip on the mental health of adolescents in a neighboring country. *BMC Public Health*. 2025;25(1):1590.
21. Vostanis P. Impact of trauma on Palestinian children's mental health: lessons from the Gaza studies. *Int Psychiatry*. 2003;1(2):5-6.
22. Hamamra B, Mahamid F, Bdier D. Surviving trauma: Gazan women's mental health during genocide. *Discov Public Health* 2025;22:229.
23. United Nations Office for the Coordination of Humanitarian Affairs. Reported impact snapshot: Gaza Strip – As of 31 May 2024. Available from: <https://www.ochaopt.org/content/reported-impact-snapshot-gaza-strip-31-may-2024> Date of access: 5/01/2026
24. UNICEF. Unimaginable horrors: More than 50,000 children reportedly killed or injured in Gaza Strip. 2025. Available from: <https://www.unicef.org/press-releases/unimaginable-horrors-more-50000-children-reportedly-killed-or-injured-gaza-strip> Date of access: 5/01/2026
25. Aqtam I. A narrative review of mental health and psychosocial impact of the war in Gaza. *East Mediterr Health J*. 2025;31(2):89-96.
26. Abimbola S, Pai M. Undoing supremacy in global health will require more than decolonisation - Authors' reply. *Lancet*. 2021;397(10279):1058-9.
27. Dewachi O, Skelton M, Nguyen VK, et al. Changing therapeutic geographies of the Iraqi and Syrian wars. *Lancet*. 2014;383(9915):449-57. Erratum in: *Lancet*. 2014;383(9915):412.
28. Adjovi ISM. A worldwide itinerary of research ethics in science for a better social responsibility and justice: a bibliometric analysis and review. *Front Res Metr Anal*. 2025;10:1504937.
29. Abimbola S. The uses of knowledge in global health. *BMJ Glob Health*. 2021;6(4):e005802.
30. Inter-Agency Standing Committee. (2007). IASC guidelines on mental health and psychosocial support in emergency settings. IASC. Available from: <https://interagencystandingcommittee.org/iasc-guidelines-mental-health-and-psychosocial-support-emergency-settings> Date of access: 5/01/2026
31. UNICEF. Children in Gaza. 2025. Available from: <https://www.unicef.org/press-releases/two-years-hellish-war-have-devastated-gazas-children> Date of access: 5/01/2026