

Conclusion

General Summary of the Project's Achievements

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Feminist Action Oriented Research, the Politicization of Loss, and Lessons Learnt from Um Ahmed and other Women Whom We're Helped

In spite of the team's prolonged intervention, and its familiarity with hundreds of stories of misery experienced by Palestinian women and their families due to war and its consequences, each and every story that was told by the women involved in the project created a firm emotional reaction amongst the members of the team. However, I often question the justification of this reaction from the professional point of view. Is it right to be so emotionally involved?

People who study the politics of loss and the loss caused by politics among Palestinian women will conclude that these women are obliged to adapt to political reactions, attitudes and behaviors that are imposed upon them, either for the sake of public opinion, the media or society. Palestinian women cannot take decisions with regard to general issues that concern the State or the profound loss experienced by them over the course of history. It is important to note that loss is not something new for Palestinians who have been suffering from different types of loss since the 1948 catastrophe, which has brought about Palestine's political, military and national distress. However, despite the fact that Palestinian women do not participate in forming national policies, they have been forced to abide by them and accept their consequences. Palestinian women, like women in other parts of the world who are suffering from wars and are losing their loved ones, their homes, their properties and the mental health of their families, are not living under acceptable and normal political circumstances. Hence, the only humane reaction that this experience would require from us is the rejection of loss and its glorification. In an attempt to prevent loss, it is our responsibility to call for a policy that shuns the voices that support destructive conventional warfare.

Throughout the project, we noticed that the women who experienced loss lived in a dual world: a world that requires them to accept the consequences of

living in a conflict zone, and another world in which they are incapable of coping with the misery of what had befallen their families. We, on our part, were able to encourage most of them to raise their authentic voices and give them the legitimacy they deserve. In the course of the project, the women experienced respect voicing their needs with regard to the various issues discussed throughout the project, as they were neither pre-judged, nor accused, nor humiliated in the process. This experience proved necessary in a patriarchal society that suppresses the voice of women, including their pains and sorrows.

The question that remains unanswered is: as a professional woman, I have the right to cry whenever I read the notes taken from discussions that took place during support group sessions?

As mentioned in the introduction of this study, we adopted the sensitive feminist approach to fulfill the objectives of this project. The research undertakes and relies upon several methodologies, including quantitative, qualitative, and action-oriented research. It was only right to use the different methodologies for the purposes of this research. One of the principles of the hybrid methodology we used is to look at women in the field as human beings with values of their own, and not just as figures in questionnaires. In fact, they were our teachers and instructors as they related to us the means by which they confronted the occupation. We, on the other hand, acted as researchers and professionals experienced in our field expertise. Every woman agreed to meet with us, and to fill out the questionnaire. The women willingly chose to participate in the focus group and support group discussions. The participating women had as much of an effect on us as we had on them. Whenever we asked them questions about their lives, they willingly responded to us as researchers, but mothers and women. They told us moving stories about which we cannot remain silent.

This brings us back to the different research methodologies that one can utilize in the field: qualitative, quantitative and action-oriented. While quantitative research is considered the last resort by which researchers do not sympathize with the subjects of the research, classical scientific research requires that the professional neither sympathizes nor is biased towards the subject of the research. We believe, however, that this approach is neither scientific nor practical in social research because it is impersonal. From the clinical point of view, empathy is an individual help that helps understand her, merge deeply into her feelings and thoughts and discover the ways in which she copes with her problems. We, as researchers, lent our ears to real human issues to the extent of identifying ourselves with women who had experienced loss, so as to find the best ways for this research to proceed. We were not at all ashamed as we sympathized with the women; we shared their tears. We believe in professionalism as well as skillfulness. A researcher utilizing the correct mechanisms for carrying out the field research focusing

women, the appropriate therapeutic and social intervention strategies were used. It is this combination that reflects the sensitivity by which our feminist work in the field was undertaken, which is what action-oriented research is all about.

The doctor that Sama met in the hospital described how his heart had almost stopped beating after witnessing so many deaths and injuries. As feminist researchers working in the field, our belief in change prompted us to control our emotions throughout the project so as not to get burnt out. We wanted to continue helping every woman who had experienced loss; our main aim was not to carry out research but to be useful to these women.

The facilitators sympathized with the women and understood their needs and confidentiality of the information they were willing to share with the facilitators. One of the most important issues was the confidentiality of the whereabouts of their husbands and sons, as they were being politically pursued. None of the facilitators used the real names of the women in professional discussions with the team of the project in order to ensure that there was no leakage of information about their daily lives. The facilitators were very careful throughout the stages of the research, as they were aware of the harm they could cause to the family that was hiding its pursued son if they did not respect the confidentiality of the information that was shared.

Another experience that made us examine in detail the reality on the ground and formulate mechanisms to empower women to implement change in their lives, was the participants' suffering from military closures, curfews and checkpoints. The soldiers were not an external topic to analyze, as their presence interfered in our daily plans. The checkpoints and the soldiers' behavior deterred the activities of our project and forced us to reschedule some of the planned rehabilitation workshops. Before starting the project, we emphasized the importance for the participating women to be punctual when attending all the support group meetings. The soldiers, however, prevented us from being punctual and imposed their agenda on us. During those circumstances, the question that guided our ability to learn about the daily routine of the women who had experienced loss was, "If this is the reality that prevents individuals to be the masters of themselves in the full sense of the term, what then is the best psychological and behavioral reaction they could adopt?" Keeping this context in mind taught us not to lose control, but to channel our anger positively in order to continue pursuing our path of change.

Despite the fact that we had prepared general guidelines for our work during the project, we did not assume to know what the women's needs were before meeting with them and studying their cases. So, it is during our work with the support groups that we formulated a plan for therapeutic intervention for

every participant after studying her case, including the structure of her fair her state of mind, and the support she received from her environment. All interventions were built upon, and in conformity with, Arab culture.

We were skilled both in utilizing the methodologies of research as working with the women who had experienced loss. We did not want to implement a previously formulated intervention. We preferred to develop interventions we were based on the needs that the women related to us on a weekly basis. The facilitators were wary of this kind of approach because they believed that if they did not have the 'Project Book' in their hands, they would not know how to work with the women. The saying "we will learn about the women's needs and we will guide them professionally to unveil them," had a dual effect on the facilitators. On the one hand they appreciated working in an environment of equality that void of the feeling of superiority; on the other hand they were nervous due to lack of experience of working in such an environment. Social and mental health workers are used to going to the field with an imposed agenda, a "Hard Cop" what they need to do, which is very rigid and inflexible. The alternative method we used in therapeutic intervention was the examination of the women's mental health, and the change she had undergone in different stages over the course of our meetings. In this way we could develop suitable therapeutic intervention strategies. A project of this sort would expect from its implementers to be able to discuss and to pay full attention to the participants' and the societies' needs. Although this method makes circumstances of intervention in the project difficult, all facilitators managed to succeed. We believe that it is the professionalism and skillfulness that accompanies feminist field research that helped the team of participating women's group to formulate a shared program. The researchers wanted to assist the women to utilize their individual and social skills in confronting crises situations. At every meeting, we asked the women to share with us personal sayings, Quranic verses, eulogies and other traditional customs to which they resorted whenever they wanted to pay their condolences to women who had experienced loss. Based upon our professional knowledge, we then formulated these customs as strategies of support for the women, in order to assist them in voicing their feelings and offer them with genuine and effective treatment.

As methods of Quantitative Research have dominated scientific thinking and as western terminology on mental health had dominated the understanding of professional expertise, at the beginning the facilitators had some doubts about the effectiveness of our work. So they thought that the contribution of the women in the field, particularly the peasants and the illiterate, was either primitive or inferior. Furthermore, they believed what the women who had experienced loss were exposed to was due to the lack of professionalism. We had to explain to the women every therapeutic intervention, its goals, and the long term vision of the research in order to erase the facilitators' doubts. So we immediately started

observing the changes that the women who had experienced loss had undergone, who in turn expressed their gratitude to the facilitators for the way in which they worked with the women. Taking the emotional and psychological aspect of cultures into consideration, as well as the absence of the factor of power during therapeutic sessions, is what caused the success of the honest psychological support that was provided to the women.

It was difficult for the team involved in the project to disregard the stories of the women who had experienced loss, as they affected the entity of each one of us. We are all Palestinians and we are all women who suffer in one way or another from Israel's policies. One of the most complex questions that we had to answer was whether our assistance was 'useful' to the families who had experienced loss. The difficulty of the question lies in the hardships the families had been facing. Some of them had lost their homes, their furniture and clothes. Others had lost members of their families. Others were suffering from physical deformities and psychological problems and yet others had lost their jobs, and their sources of income. One of the women in Jenin, for instance, told us that the Israeli soldiers had turned the Camp into a 'show' for people to watch. Neither did we want to deal with these hurting women as if they were a show, nor did we want to stand nailed to the debris of their world, as did the woman whom Sama met in the Jenin refugee camp. We wanted to help. We wanted to find out how we could be of help and where to start. The incentive that helped us transition from the stage of identifying with the women who had experienced loss, to the stage of guiding them professionally, was the question: "How can I be useful to these women now, today and tomorrow?" We wanted to take action. We wanted the women to go through a process of change in their lives that would gradually take them out of the circle of loss, depression and helplessness in which they were living.

Generally, Palestinians who are subjected to research expect researchers to help implement change in their lives rather than limit their role to conducting the research itself. The subjects of the research present their cases, and they want to know whether the researchers have contacts with any doctors, or a place where their son could be employed, or a clinic that would provide psychological therapy to their daughter. The limited capacity of the project's professional team members could neither contribute to the construction of a ruined home, nor to the removal of debris, nor to the securing of employment, nor to food provision. They could, however, provide the women with treatment of their physical and mental disturbances, even during the time that was designated for filling out questionnaires. During these instances, the facilitators would put the research and questionnaires aside in order to assist the women. It was the individual that was given the priority and not the research itself. The working team helped in mediating between institutions to solve the women's problems. They also mediated with other Arab countries for the medical treatment of the

wounded so as to relieve the tension of their mothers. Moreover, they sent in need of therapy to organizations that have expertise in counseling in order to relieve the consequences of the individual's illness on women and their families. In addition, the team encouraged the women participating in support groups to seek employment. They helped one of the disabled participants to register at the university. All these practical actions took place throughout the stages of research. When the study was complete, it was presented to different NGOs in the field, which adopted its recommendations that called for the continuation of the provision of assistance to other groups of women and their families who had experienced loss. The study is also going to be presented to the Palestinian Authority in order to formulate national strategies that would aim at providing proper treatment to individuals, their families and societies that have experienced loss caused by politics. All of this is expected to raise opportunities to implement the change envisioned by the project.

According to the facilitators and the academic advisor, Dr. KJ Abu-Baker, the weekly meetings of support groups were on the one hand with enthusiasm of the women for the chance to meet and discuss their agony and on the other hand they were filled with feelings of sorrow and tension. The details that the women were sharing with one another. Every conversation brought back memories of horrifying sights, odors of destruction, fires, corpses, loved ones, the dispersion of body parts of neighbors' children or schoolmates, in addition to Israeli soldiers' humiliation of the Palestinian individual, be it a boy, a husband, a youth or a respectable woman. The scenes were present in every session. Professionally, we controlled ourselves during the presence of women, but we cried loudly and lost control of our feelings at the end of every meeting. The close examination of every woman's experience of loss, as well as the intensity and the duration of her suffering made us lose much energy. The responsibility of supporting every woman who had experienced loss remained the only source of our energy, for the sake of which we searched for positive ways to start improving their conditions. Throughout the period of the project it was necessary to provide the facilitators with therapeutic sessions in order to relieve them from the pressure resulting from the accumulation of feeling of sympathy with the agonies of the women who had experienced loss. Instead of causing deterioration in the facilitators' professionalism, which was questioned in Quantitative Research, the sensitivity and professionalism of the facilitators increased, and their listening skills strengthened, thus decreasing the sorrows of the women and their families more than ever.

Um Ahmed said that after the inception of war, women bear responsibilities that men do not. Is Um Ahmed's theory correct within the Palestinian context? The theoretical presentation of researcher Dr. Shalhoub-Kevy confirms Um Ahmed's views in regard to women's role in wars, in different

of the world. This was also confirmed in other studies made in Palestine. Um Ahmed, as the example of a woman whose life, as well as that of her family's, was placed in a state of war, mustered all her strength to protect her family from the traces of oppression left by the Occupation. Ironically, the Israeli Army, which is composed of individuals who work for the army to gain their source of income, arrested Um Ahmed's husband and son, and deprived them of their source of income and their ability to look after their family. Not only did she have to tolerate the loss of her husband and son, but she was also obliged to adjust to the new conditions in her life as well as ensure the well being of her children. However, when the father and the eldest son were absent from the patriarchal society to which um Ahmed belonged, she felt paranoid of it, as well as of the patriarchal army, fearing for her daughters' safety and honor. She was therefore forced to gather all her psychological and social strength to protect her daughters from sexual or social abuse. There is no doubt that during their imprisonment, Abu Ahmed and his son suffered physically, psychologically, emotionally, and nationally, and they were humiliated in the worst possible way by the occupation. Um Ahmed, however, was responsible for pushing her 'normal, daily' life forward, attempting to prevent additional forms of loss.

When the historiography of national events are recorded in a patriarchal way, Abu Ahmed, his son and their likes in Palestinian society as well as elsewhere in the world, are mentioned as 'heroes who resisted'. Whereas Um Ahmed and her likes in the Palestinian society and others, are considered as the 'tolerant mothers'. Doesn't Um Ahmed resist? Doesn't she strive for change? Doesn't she push the wheel of daily life forward? How could Abu Ahmed and Ahmed have more to contribute than her when they are in jail? Um Ahmed came up with the idea of transforming her living room into a store for which a door was made that had access to a narrow passageway on the street. Another woman knew how to protect her children when she analyzed the military situation correctly. She forbade them from saving their injured father who was lying just outside the house during curfew, and later from wailing about his martyrdom, lest the soldiers should find out their hiding place. Then she worked to raise her children and grandchildren, and to lift up their spirits. She assured them of her strength and happiness, and that she would always protect them.

We concluded from this study that there is much silence concerning the issue of loss within the Palestinian family during armed conflict. The issue of silence is connected to the prevention of considering the role of women as a political role. At the same time, there is an adopted policy of limiting the role of women to the emotional realm, such as describing Um Ahmed as 'the tolerant', rather than 'Um Ahmed, the resistant'. Furthermore, there is a silencing of the natural and emotional voices of mothers, especially during experiences of loss.

When a woman's husband and sons get involved in war without consulting her, she has no choice but to be a widow or a mother bereaved of her child. And when this happens, the enforced political slogans are at the tip of her tongue. Whether she is a two-month bride or whether she has already lost 7 out of her 10 children (due to death or disability), she starts repeating the popular political sayings, and she prepares herself to bear more children who will be forced to go to the battlefield, and who will also be killed, with her consent. When the attention of the media subsides, the women are left alone in social silence and mental illness. During an interview with a woman who had lost 3 of her children, whose son had lost four 4 of his fingers, and whose daughter was injured in the stomach, the husband of the woman screamed that talking about the wounded was useless, and that she should remain silent.

Our Study, as well as other studies on mental health in different societies has led us to the conclusion that, talking about trauma or a person who is suffering from trauma, is one of the most important criteria to understand and treat its consequences in the most effective way. It is necessary to ensure that following an experience of loss, the Palestinian woman is granted with the right to make her authentic, rather than the society's, voice heard.

The second Intifada has brought about a state of anomaly, which is the absence of values, the absence of customs and traditions practiced during times of loss within Palestinian society. The reasons that have led to this state include:

1. The accumulation of loss after the first Intifada;
2. The numerous and various forms of loss experienced by one family or the other;
3. The contradiction between what is good for the nation and what is good for the family;
4. Heated arguments about what is religious and what is secular in recent days.

The husband of the woman who had experienced several forms of loss said that, on the first commemoration day of their martyred children, he only did they feel the absence of their children from home, but they also felt that their children were also forgotten by society. Sorrow was the family's only possession.

This study brings us to the conclusion that the family who has experienced loss has the right to come up with new customs and traditions to cope with its loss, and it must be supported both by the society and the organizations that exist in society. The customs exercised currently, including the kidnapping of corpses from hospitals or homes, and the rush involved with organizing a funeral in which local communities participate, strip the family from ownership of it

loved one; the corpse is transferred in such a traumatic way, that in no time, it becomes the possession of the community. In spite of the fact that there have been more than 4000 martyrs over the years of the Intifada, and tens of thousands wounded, Palestinians haven't developed the idea of formulating professional and specialized teams for transmitting news of the wounded to the families in concern. Instead, the martyrs' families hear about their loss either on television or from acquaintances. Later, the route to agony begins: they start rushing from one department in the hospital to another, until they end up in the morgues. Although this procedure prevents the family from experiencing the trauma of bad news in its full sense, it does not solve the problem. In fact, there are professional ways by which mental health specialists, doctors, and representatives from political and military organizations, can assist families that have experienced loss. We therefore recommend the establishment of such committees in every hospital to contribute to the treatment of the mental health of families that have experienced loss, from the very beginning.

The role of a family is to look after its children and to take care of them. Families look after their children from the day of their birth onwards. So, when parents lose their children, they feel guilty for their inability to protect their lives. Loss, as the word itself indicates, does not include any profit, so the normal human reaction would be to express sadness and feelings of distress. The pretence of joy upon the death of a family member as a martyr, places the family in a state of dissonance, because the behavior contradicts the natural reaction of any healthy family.

Taking advantage of the martyrs' families during times of grief and convincing them to give a political speech, has badly affected the families in all societies that have suffered from wars, including the Palestinian society. It is preferable that a family's catastrophe is not used for media purposes. It would be possible to talk to the family as one that has experienced loss, and to focus on its sufferings, instead of focusing on its illusory joy and the acceptance of its loss. Some families would rather not have the media interfere in their lives at times of tension and grief, and this request must be respected.

It is important for people who are close to the family that has experienced loss protect them. Moreover, the political and military factions to whom the martyr belongs, must leave the family alone for at least 3 hours, in order to give them the time they need to part from their loved one, in an intimate manner, without having these factions watch over them, or pressure them, or cause any incident. In this respect, we advise hospitals to set up a special room for the family, which should be warmly furnished and welcoming of the family. In such an atmosphere, they can bid their loved ones, whose corpses are not in a condition to be taken outside, farewell; cleansing rituals could be performed on loved ones; or trouble could be avoided during times of curfew. At the same time, it is necessary to keep

the family in isolation at home with the bereaved for consolation, and in order them to bid their loved ones farewell in a memorable atmosphere.

Another recommendation of this study is the empowerment of women who have experienced loss, and have received therapeutic support the necessary skills to assist other groups of women who have experienced These groups of women, therefore, would be qualified to reach out to families in distress, and to guide the women, their families and their community utilize the correct coping mechanisms in dealing with loss. We hope that development would become a custom rooted in Palestinian society.

In order to ensure the family's right to express its agony, rather than sustain its feelings of sorrow, the continuity of social customs like lamenting waiting for the dead as a mechanism for coping with loss must be encouraged. This kind of collective relief is helpful to the family that has experienced loss. In addition, it is helpful to the families of the bereaved and the widows to mitigate their agonies through sharing tears. Those who criticize such behavior the religious point of view contradict the Prophet's tradition or Hadith, supports a grieved person's right to cry and to visit graves.

Another point that should be taken into consideration is the fact that a person in mourning takes action, or "works," this provides the person with experienced loss with relief. For instance, within Palestinian society men at the funeral and its details, like the ritual of cleansing and the burial. This depicts the agony of the man who has experienced loss to a certain extent because he is doing something useful for his loved one. On the other hand, women are confined to their homes, forbidden to cry, and in most cases, they are allowed to bid their beloved ones farewell, or even to walk behind the funeral and in some extremely religious environments, they are forbidden from visiting graves. In these circumstances, the women who have experienced loss become numb or incapable of expressing their emotions towards such a disaster result of these prohibitions, our research revealed that several of these women were suffering from depression, and different kinds of breathing problems. I of the existence of such a social custom, which is harmful to mental health efficiency has to be reconsidered.

It is important for us to transcend other social customs that are harmful to families that have experienced loss, in order to assist them to return to the life they were leading prior to loss. For instance, the society, including neighboring relatives and acquaintances, criticizes the immediate return of the family customs prior to the experience of loss, disapproving of the women who wear black, or those who visit friends, or others who quickly indulge in social or participate in social activities and other people's happy occasions, or even

on feasts. Seemingly, the environment does not contribute to the relief of the family in distress. Instead, through criticism and gossip, the surrounding people force the family into seclusion, sorrow and depression. Despite restrictions placed on Palestinians, the neighbors can contribute to relieving the family's distress by taking the children to parks, which is costless, and by inviting the families to social activities, and by encouraging them to go out and gradually indulge in normal daily functions, and by supporting them to express their feelings about their happy moments, just as they supported them during times of sadness.

Furthermore, we suggest that organizations and political and military entities, contribute to the inclusion of families that have experienced loss in taking an active role in the preparation for activities that commemorate martyrs' day. In order for them to feel like they are 'doing' something constructive and positive for the memory of the martyrs, siblings and other family members could assist in preparing for days that commemorate their loved ones and other martyrs. These measures are relieving and constructive.

It is important that all social eulogies and political eulogies composed by the women, which truly and directly express the agonies they experience due to the politics of war, are documented and published in brochures, in order for them to be used in homes where condolences are paid. The ululation uttered by a mother who had lost several of her loved ones, is applicable to numerous Palestinian widows and women bereaved of their children:

*Sharon, how did you find your way to me?
You killed my youngest and eldest sons, both dear to me
They were young pigeons in my lap and now they have flown away
You shot them with a cursed bullet and I was left with nothing but grief*

This eulogy, spontaneously and with unique honesty, reflects the feminist belief that 'the personal is political,' just as it reflects the political image of loss. It also supersedes the euphuistic classical writings of men that are designated for literary and political podiums, writings that women neither read nor use at times of distress. Eulogies, on the other hand, are no doubt congruous with the experiences of women who have lost someone dear to them. The time has come to contribute to change in societal attitudes towards the importance of a woman's emotions, her behavior and contributions to society.

Appendix

Survey: Mental Health of Women Experiencing Loss During Times of Armed Conflict

Name of surveyed woman: _____

Beginning time: _____

End time: _____

Dear participant,

The Women's Studies Centre in Jerusalem, in cooperation with researchers and psychotherapists, Dr. Nadera Shalhoub-Kevorkian and Khawla Abu-Baker, are conducting this survey that aims at studying the experience of loss, resulting from the second Intifada, on the psychological health of women and their families. The aim is to provide the organizations that exist in addition to the women in distress, with the necessary psychological mechanisms that would be of use on the personal, familial and societal level.

Hence, we request your honest and truthful participation in answering the attached questions. We encourage you to contact the Women's Studies Centre in the case of feeling severe distress resulting from loss. To arrange a meeting with one of the counselors involved in the project, please talk to May Yasin, the Coordinator, at the following number: 02-234-8848.

We would like to reassure you that the answers you provide for the survey as well as any conversations you have with the counselors, will be confidential and the identity of the surveyed woman will not be revealed in any circumstances. We would like to confirm the confidentiality of each participant in the project.

In order for the interviews to take place smoothly, and with restrictions related to language or other issues, we decided to write the questionnaire in the colloquial Arabic language that is closest to the classical Arabic language. We will record your answers in the same manner.