

## Fatina\*

Fatina was 11 when the bomb ripped through her shelter, a burnt-out UN school in Gaza. It contained thermobaric explosives designed to lengthen the blast in two waves. Her skin was burnt, and flying debris tore through her arms and back. Two weeks later she woke from a coma to learn her one-legged cousin, Asma, the only remaining relative from the first bombing, was dead. Fatina's sister, Samira, was lost in the south in one of four forced transfers. Her parents and brothers were gone.

Fatina was unable to speak for several weeks. By day she stumbled through the rubble, barking rabidly at anyone who came close. At night she woke several times screaming. Fatina lost everything: her family, home, her room with its stencilled wall flowers, the cat with its five scrawny kittens, her pink teddy with the word 'love' stitched across its chest. When the UNICEF aid worker asked what worried her, Fatina answered she was terrified her hair, burnt in the blast, would never grow back. One would assume Fatina urgently needed psychotherapy.

Palestinian trauma specialist Ashira Darwish knows all about such children. Herself detained by Israeli forces aged 16, she was brutalised in prison before an Israeli soldier lynched her, all but severing her spine. She lived, but it wasn't the torture or traumatic injury that broke her spirit. 'Detention removes attachment with your parents,' she explains in a YouTube interview with journalist-activist Miriam Francois. 'You spend the rest of your life trying to repair the attachment.' House arrest then intentionally poisons that bond, turning parents into their children's jailers.

Darwish had talk therapy. It took two years to recover - from the therapy. The first clinician gave her 'recipes' from which nothing could be made. The second was a 'horror show' - sitting in a room being questioned was 'terrifying'. Repeating the stories was retraumatising. Exploring how she got 'involved' left her with indelible shame and guilt. But the most abject failure of therapy was none of these mistakes.

In 2021 Euro-Med Human Rights Monitor reported 91% of children in Gaza suffering from PTSD resulting from Israel's operation "Guardian of the Walls." Two-hundred and forty-one children lost one or both parents and 5,400 lost their homes. But the report was wrong; not because the numbers were inaccurate or the children didn't suffer, but because there was no 'post' to the stress. For oppressed and subjugated peoples, trauma is stitched into the fabric of their daily lives. If you are subject to perpetual hostility, Ashira Darwish explains, the last thing you want to lose is the fight-flight reactions that every day save your life.

The trauma that Palestinians suffer, spans the generations, and pockmarks every physical and psychic surface of one's internal and external landscape. It's all-pervasiveness is what Palestinian Psychiatrist Dr Samah Jabr calls a 'traumatogenic atmosphere.' It is not just that Fatina suffered direct injury or loss. A child of occupation could suffer from their grandparents' banishment or their father's torture or their teacher's sudden disappearance or classmate's murder or the demolition of

their uncle's home or simply the grind of daily discrimination and dehumanisation. Traumatogenic atmospheres are not characterised by the severity or duration of traumatic insults. They are created by socio-economic and political systems of oppression able to countenance, tolerate, approve and perpetuate acts of systematic and collective dehumanisation and punishment. Children in such systems suffer, not just from the impact of abuse, abduction, torture, bombing or starvation, but from a profound betrayal of trust in the social fabric, in the community of human love and kindness. To add insult to injury, all too often their suffering is characterised as personal to their circumstances rather than as symptomatic of a profound structural malaise. And so, they are forced back on their own resources as Ashira Darwish found to her cost.

For this reason, Darwish, Jabr and many others now question the western conceptualisation of trauma and its treatment. The 'western modality of talk therapy does not work on occupied brown and black bodies,' Darwish explains. Not only because the catastrophe that gets etched into one's body is literally unspeakable, but because the growls, screams, jerks and dances, songs and stories the child finally finds to express their individual and collective pain, are met with incomprehension, discomfort, scepticism or silence. Such responses don't just negate the child's experience; they inadvertently affirm and vindicate the voice of the internalised oppressor: 'it's your fault, you are not worthy, your community is meaningless, your lives disposable.' This is why the most powerful thing anyone told Darwish when she finally recovered from therapy, came from her later friend and mentor, the Jewish physician and holocaust survivor Gabor Maté, when he told her 'It's not your fault.'

What Maté was offering was a form of what might be called *radical recognition*; acknowledgement that a person's distress may not be a symptom of a disturbed psyche, personal failing or attachment insecurity, themselves often symptoms of a profoundly sick society in a distorted world where 'fair is foul, and foul is fair.' In such a society it is apparently alright to watch the first ever live-streamed genocide, whilst the powerful people that represent us do nothing, and worse, aid and abet the suffering we consume as 'entertainment.'

In such a society is created an education system so profoundly mis-attuned to young people's developing minds and capabilities that it creates an epidemic of mental distress. Such a society decides that mental health support involves targeting a child with therapy, conveniently distracting attention from the formidable power structures, internal logic systems and oppressive social practices that cause so much child and family distress; systems and processes that impoverish, deprive, stigmatise, victimise, punish, marginalise and repudiate, sometimes with deliberate malintent.

Radical recognition involves decolonising psychotherapy of its white euro-centric assumptions and its faux neutrality. It involves recognition that helping heal troubled hearts may necessitate not only an active love and care, but also a form of solidarity,

collaborative action, community and re-education in the face of social injustice. It demands that those forces engaged in inadvertent or deliberate oppressive practices of the children and families we work with, are resisted and held to account. Examples abound, especially for care experienced children and young people, helpless wards of the state, exposed to broken and sometimes abusive care institutions chronically defunded and neglected by successive governments, who measure the value of care against the vested interest of a powerful few. Psychotherapy, it might be convincingly argued, may have to emerge from its ivory tower and into the street.

It is the street where Fatina finds herself crying with her mental health worker, picking over the rubble of what they believe was once her home, looking for the pink teddy or anything familiar, putting spring flowers on the broken concrete where her parents were lost and her childhood stolen. It is in the street that Fatina and Mariam find someone who's seen Samira in a tent community on the coast. It is in the street Mariam hustles for a phone and Fatina and Samira wail out their rage and despair together. It is in the street that Mariam helps Fatina make a TikTok walking through the daily hunt for food, pleading in broken English 'Please help us.'

*\* This is a fictional account the represents the lived experience of so many Gazan children*