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## **Women, Occupation, Collective Loss and Support: the Experience of “from a Bereaved Woman to Another”**

By Sohail Hassanein<sup>1</sup>

### **Abstract**

This study derives its force from experiences of Palestinian women, occupation and loss project that aims at describing and understanding the role of holistic intervention based on the mutual support approach “from a bereaved woman to another.” The qualitative method has been utilized, with a view to reaching an integrated description, analysis and explanation of the experience that has been documented in details, through using special documentation forms. The results reveal that changes have taken place to bereaved women and supportive bereaved ones, as a result of participation in support and through training meetings. The findings demonstrate that women have succeeded in expressing the memory and identity of loss and in being conscious of the Palestinian components. The experience of bereaved woman-to-bereaved woman, has proved effective and promising in the alleviation of the intensity of direct bereaved disorders. The study concludes that there is a dire need to develop this experience and provide it with societal and political legitimacy. It is expected that gender roles will be integrated and taken into account in describing, analyzing, explaining and evaluating issues of women and collective loss.

*Keywords:* Women, occupation, collective loss, social support

### **Introduction**

Going into the experience related to women, occupation, loss and support is a difficult task for professionals, but an experience undergone by bereaved women for the sake of bereaved women may be impossible. This impossible becomes realistic in the light of the project “Women, Occupation and Loss,” where the current study tries to focus on its experience. This project and the study were carried out by the Women’s Studies Center in Jerusalem and the Swedish association, Kvinna til Kvinna.

It is well known that the West Bank and Gaza Strip, since 1967, are under the Israeli occupation, and since the Oslo accords, the West Bank, in particular is under two authorities: the occupation authority and the Palestinian authority. During periods of significant resistance, such as the first Intifada that took place in the late 1987 and the second intifada, i.e. Al-Aqsa Intifada, that took place at the beginning of 2000, the Palestinian people faced and are facing the various arbitrary and several measures, such as fall of thousands of martyrs and wounded, arrests, torture, house demolitions and organized deportations. This is along with the establishment of a Palestinian authority (since 1996), which is trying to found structures of a state beside the presence of Israeli occupation.

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It is expected that the occupation will affect women significantly compared to other categories. They suffer with their families in cases of arrest, injury, death of family members, blockade or demolition of their houses. Women are also mothers, sisters and daughters of bereaved women and men, or male and female detainees. These conditions lead to continuous loss, and in many cases women develop symptoms and/or post-loss disorders. These symptoms may appear after months or even years from the occurrence of the trauma.

More than that, because of the absence of the husbands, women are forced to bear the burdens and responsibilities of the families, and because of the conservative society, they are not prepared for these new roles. They are living in a frustrating patriarchal society, which silences women and deny their basic rights. These social realities double their sufferings in addition to their suffering from the repressive and arbitrary measures of the occupation.

Thus, political and military contexts produce documented statistics, where the number of martyrs killed since the outbreak of the "Al-Aqsa Intifada" (in the period between September 29, 2000, and December 31, 2009) in the three areas of the study is as follows: in Bethlehem area - 140 martyrs, 15 of them are female martyrs. In Nablus area, the number of the martyrs is 568, including 31 female martyrs. The number of martyrs in Jenin is 414, of whom 24 are female martyrs. Of the total 2183 martyrs, there are 124 female martyrs (The Palestinian Central Bureau for Statistics, 2010).

As for the number of prisoners: their number before the Al-Aqsa Intifada was 794 prisoners in the various prisons of the occupation and then rose to 7,500 prisoners until October 2003. According to the statistics of the Ministry of Prisoners Affairs (The Ministry of Prisoners Affairs, 2010), the number of prisoners in Bethlehem area is 562, 1094 in Nablus and 877 in Jenin.

In general, data shows that about 7,500 prisoners had been arrested since the outbreak of the second intifada. The number of those who have experienced detention is estimated at 750 thousand Palestinians since the beginning of Israeli occupation of 1967, including more than 10 thousand Palestinian women, and more than 70 thousand detainees since the outbreak of Al Aqsa Intifada, including more than 900 women (Abul-Hassan, 2010).

### **The Project's Context**

The factors for proposing the project of working with the bereaved women were realistic and resulting from the occupation measures against the Palestinian people, where it is natural that women are among the most affected. The bereaved women are those who followed the issues of prisoners and wounded in their families and in the families of relatives and neighbors.

The project involved women who possess dual force: as mothers who insisted to continue in caring for the family despite the very difficult circumstances, and as women who are able to afford their status as victims of occupation, especially in the adoption of further new roles. The focus, in the first phase (2002-2004), was on the bereaved women in three areas, which are considered "hot spots" in terms of procedures of the military occupation, namely Nablus, Jenin and Bethlehem. The objective of this phase is to develop Palestinian strategies commensurate with the reality of the Palestinian bereaved

women and enable them to cohabitate with the loss as best as possible (Abu Baker, Kevorkian and Aweidah, 2004).

At the second phase (2004-2007), the intervention approach was developed in terms of adopting the bereaved survivors as supporters for newly bereaved women, in order to widen the circle of intervention in the regions. What also distinguishes this phase is the deeper understanding of the needs of the bereaved women, with the aid of the supportive bereaved women, and through taking into account a perspective characterized by cultural and gender sensitivity. It is considered an attempt to make the voice of the woman heard in a culture dominated by men (Españoli & Aweidah, 2007).

In the third phase (2008-2010), a decision had been reached on strengthening the application of the approach of "From a bereaved woman-to-bereaved woman," taking into account that the project has the most obvious structure and the trained manpower to work with the bereaved women. They are the supporters, coordinators, facilitators and trainees, where the trend is to document this approach in preparation for its circulation at the organizations working in the same field, as well as circulating the model at other areas in Palestine and the Arab region in light of the increasing numbers of women at risk of trauma and loss as a result of different political and military conflicts.

In each area, one coordinator works in collaboration with four new supportive bereaved women and four old supportive bereaved women, where they work as a team under the supervision of the central project coordinator and the project consultant. Work is done within four areas of support:

First levels: Individual support, which aims at intervening directly in the post-loss stage to help the bereaved woman in facing the trauma and returning back to normal life as soon as possible. This is done through two supportive women who will head to the bereaved woman to work with her directly and help her to discharge and exercise all the rituals that can assist her later.

Second level: Group support, through forming established support groups, where two supportive women work with them, the first is an old supportive bereaved woman and the second is a new supportive bereaved woman. The group support aims at providing psychological comfort through psycho-social support within the groups that share in the loss, where the bereaved women share their experiences.

Third level: Community support, through increasing community awareness of loss and the mechanisms to deal with it to ensure the availability of a community environment supportive to the bereaved women, where the supportive bereaved women hold seminars and lectures in coordination with the different social institutions, where they offer their experiences and explain the exercised community-based errors that increase the burden of loss on the bereaved women and contribute to increasing their suffering, as well as the alternatives to be developed in the community.

Fourth level: Training and guiding the supportive women, where the old and new ones are involved individually in a training program in line with their needs during implementation of the support meetings for the bereaved women.

In general, the measurement process focuses on the examination of changes in the new bereaved women and the supportive bereaved women on three levels: behaviors, emotions and thoughts. In particular, we measure the success of support practices through achievement of the following changes: commitment of the supportive bereaved women by continuing to work with bereaved women through the finalization of the project

implementation and beyond; the desire of the bereaved women to integrate and participate effectively in the support meetings; the bereaved women's perception of the significant changes in their communication, especially with spouses, children, relatives and neighbors and the supportive bereaved women's perception of concrete behavioral, intellectual and emotional changes in the context of everyday life and in the context of support processes for the newly bereaved.

### **Aims and Questions**

The main interest of the study is to develop a Palestinian holistic approach, which is more sensitive to the cultural, economic and political elements, and through which we can access the groups of bereaved women, who are victims of (arrest or injury, for example) or the loss of a spouse, family member, relative, home or any property as a result of practices of the occupation.

Therefore, the aim of study is to provide a set of conclusions and recommendations stemming from the examination of the effectiveness and efficiency of the support approach of "From a bereaved woman- to- bereaved woman."

This goal is based on a set of questions that the study attempts to answer. The most important questions are: what are the loss's symptoms of Palestinian women? How to deal with these symptoms at the individual, group, community meetings and through a training program? What are the basic outputs, effects and impact which represent the result of project's activities and inputs?

### **Population and Methodology**

The study uses the qualitative method that describes the most important practices of the intervention experience with supportive bereaved women.

The study population consists of an intended category comprising all women who took part in the third phase of the "Women, Occupation and Loss" Project. Ninety four supportive and bereaved women have been the subject of the current study, in addition to - 94 members of their families and people who voluntarily participated in the project from the 3 areas (Bethlehem, Nablus and Jenin), 70 of which have been newly bereaved.

It is obvious that most of the population of the bereaved women have suffered some sort of loss: imprisonment, a martyred husband or a martyred family member (approximately 77% of total), while 12% of bereaved women have suffered multiple losses. The data indicates that most bereaved women and supporters are married (71%) and widowed (21%), whereas the majority of widows are from both Nablus and Jenin. In the project, 50% of participants have less than 9 years of education. In addition, the data shows that 25% of them are aged 31-40 and 40% of them are aged 41-50 and 24% aged up to 50 years.

The study depends on multiple primary sources for data collection. Quality data depends on the methodology of documenting the experience, such as protocols of meetings of the executive team of the project, the project plan, summary reports for implementation of the project, reports of the field visits made by the project coordinator, and report of the external evaluation. The qualitative data is based on the method of content analysis according to specific addresses that reflect the components of the experience, such as the situation of the bereaved woman before loss, during loss, during support and after support, issues related to loss, relations of family with the bereaved

woman and supportive woman, support operations, and particularly focusing on the development of support relationship and support skills.

### **Theoretical Background**

In this theoretical framework, the study tries to develop an organized framework about loss and social support made in a context of struggle and conflict.

#### ***Collective Loss, Gender and Social Support***

Many field studies try to provide conclusions linking loss resulting from wars and situations of occupation, support and gender relations. Studies have shown that social support and gender are important elements to know the entity of the experiences of women in loss situations. For example, two years after the Bosnian war, it was shown that the groups mostly affected by the war were the women who were provided with low social support (Ahern, 2004). Similar studies, conducted in various areas that were prone to armed conflict and organized violence directed by “foreign” military forces, show the importance of social support in the face of the ‘post-loss disorders’ (Dybdahl, 2000; Stein, 2000).

One of the conclusions reached by different researchers is that the loss resulting from wars is related to gender, not from the perspective of women or men, but from the perspective that the women's trauma is made up in a way different from men. This difference is explained by addressing the components of the cultural identity of women and men in the society and not the physical component of both. For example, women in the time of war (as the case of Uganda) became responsible for the family, and many women have begun assuming new roles in addition to traditional responsibilities such as protection of children and provision of food for the family (Liebling et al., 2007; Liebling et al., 2008). Other studies tried to examine the impact of wars and armed conflicts on gender. In a study conducted in Bosnia and Herzegovina (Hasanovic et al., 2007) no statistically significant differences were available on the extent of the impact of war on gender, where the symptoms are similar for boys and girls.

However, the Arab literature focuses on two approaches which developed and examined the relationship between gender and loss. The first approach: according to the study of Kaddoumi and Al-Helw (2003), the disorders of pressures following the loss were generally higher among mothers than fathers. In concentration on the impact of the national loss on the family members, especially women and children findings of researches (Abu-Nada, 2003; Al-Khawaja (1996; Kevorkian, 2006; Punamaki, Qouta & Al-Sarraj 2007) reflect that groups of women are suffer from loss more than spouses or children. The second approach emphasizes that there is no different male or female reactions to the loss (Al-Majdalawi, 2004; Krenawi, et al., 2004; Shaath and Thabet, 2007). The basic conclusion is that the relationship is important and necessary among four concepts, namely the loss, conflict, gender and social support.

#### ***Collective Loss and Conflict's Context***

The interest in Arabic studies on the concepts of loss has increased which focus on the experiences of bereaved men and women (Jarallah, 2006; Nabulsi, 2006; Radwan, 2006; Saleh, 2006). The loss was a central subject of many studies (Abdul-Hadi, 2007; Abu-Dakha, 2009; Taamra and Hassanein, 2010), which concluded that wives of martyrs

suffer from losing the emotional security and stresses resulting from meeting the economic and psychological needs of the family, but her faith in God helps her to accept the loss. Other studies have been conducted in towns that have experienced wars and armed conflicts and they confirm that the loss causes the victim to feel angry and tend to violence automatically in case of danger as a way to protect oneself or to maintain one's entity in the new loss positions (Green, et al., 2000; Klaric, et al., 2007; Robertson & Duckett, 2007; Rushiti, 2005).

In this regard, it is necessary to address the important concept of "collective loss". In this context, there is a loss resulting from the conditions and situations of armed conflict and war. One of the studies that addresses the complications of the armed conflict's situations finds that a loss became a part of the thoughts and feelings of victims and pursue them for many years (Bajraktarevic-Hayward, 2008). In the Palestinian context, what distinguishes the loss is that it embodies a continuous traumatizing violence without any prior preparations. It is a shocking event, which forms a moral disaster which encourages individual self-sacrifice to preserve the collective dignity (the Arab Centre for Future Studies, 2002).

### ***Holistic Context of Social Support***

Feminist theories call for the "beneficiaries" to be active in the support process while maintaining the goal of empowerment. In addition, these theoretical trends focus on women's values such as powers, composition of social networks and understanding the situations from the viewpoint of the beneficiaries. Studies of Drumm, Perry & Pittman (2001), Liabre & Hadi (1997) emphasize that the loss environment plays an important role in the lives of the bereaved. So, the weak social support is a forecasting factor for post-loss disorders and stronger than the impact of the loss itself. In addition, the close family environment clearly influences the output of the bereaved woman's mental health.

Women are the most vulnerable to experiences of conflict, and thus the political and military conflict provide women with new responsibility to build families and communities during and after the collective loss. Thus, the necessity to determine the specific needs of women appears, as well as the necessity to provide opportunities through which women can actually express life experiences (Gardam & Charlesworth, 2000; Somasundaram, 2007). These experiences which stress the collective loss trend to use the holistic approach. This trend seems to be important in the oriental societies, which consider the individual who is affected by the prevailing cultures. The individual tends to be a part of the community, so disasters, wars and occupation have stronger complications and impacts in collective communities compared to individual communities (Green, Friedman & Jong, 2003; Litsegard, 2008). Somasundaram (2007) shows that the collective situations, which affect the conservative communities, have an impact on individuals. Therefore, it is necessary to intervene at the level of the family, the local communities and society in general, in order to restore the collective memory and strengthen it as part of the collective to the continuous practices of the occupation.

The "integrative approach" (Kostelny, 2006) suggests working with the bereaved women according to five levels: women as survivors or bereaved, family members (especially spouses and children), members of the community, social service providers and society in general. This holistic framework ensures working together with women in dealing with common experiences. A documentary study from Uganda, for example,

shows that the process of sharing others in pain helps to improve communication with self and with the environment, as well as through listening to the bereaved women and immediately after the loss (World Summit on the Information Society, 2005). The experience of victims of wars in Cambodia, as a second example shows that long-term intervention helps the bereaved women detect and explain ways to manage psychological difficulties (Hinton, Navarro, & Pointe, 2006). The Ethiopian experience is a third example, which deals with symbolic memories as communities undergo experiences during the armed conflict (Trapman, 1997).

The Palestinian experience deals with loss, in accordance with the approach of “From a bereaved woman- to- bereaved woman” (Españoli, & Aweidah, 2007). It means, working from inside the emotional and psychological structure of culture, in addition to removing the power and authority element from the treatment, which makes the psychological support honest, active and fast-acting (Abu-Baker, et al., 2004; Abu-Baker et al., 2006).

## **Results**

### **The Women Prior to Loss**

To delve into the issue of Palestinian women before loss is to delve into their status, socially, culturally, politically and economically, within an occupied society. The key role of women, as they believe, is to maintain their family. They feel home proud: “my home is my son. Economically speaking, “we have everything at home” The husband is the breadwinner. Sometimes, the mere presence of the husband with his wife and children, though jobless, would relieve his wife considerably, as regards cares and children’s responsibilities. Bereaved women assert that they are confident in their fortitude, which affords them endurance against the hardships of life; even though the dominant mentality is that they have no complaints. They think about the future of their family and children “we were so happy, me and the folk, that we got him married.”

Before loss, some women suffer from several social problems such as divorce and the other resultant problems: custody of children, being torn between father and mother, assuming responsibilities, parents’ rejection for staying with them or problems with her in-laws. In addition, there are some other harsh, day-to-day conditions such as death of the husband and assuming the responsibility of the children in his stead; at other times, she may have experienced previous loss or a family member in danger (pursued or wanted) “for a year and a half, I was tortured because, before my son was martyred, he was wanted. I couldn’t sleep at all.”

In this context, it is evident how tense the life of women is before loss. On one hand, they are expected to attend to the children and treat them with tenderness. On the other, they are expected to replace the father, or “the man.” Assuming these roles are not simple tasks to women. Nonetheless, the Palestinian woman suffers from tensions and worries, not only because of the social, economic and political conditions under which every Palestinian family lives, but also because of the fact that her husband or son is pursued, imprisoned, injured or martyred; or because her house is destroyed or she suffers from multiple losses. This period is considered the loss period and it is accompanied by traumas, in addition to psychological, social, and economic repercussions.

### **The Collective Loss**

Reactions to the incidents of loss vary among women. Some react by screaming, crying and slapping their faces; some by a momentary silence, followed by bursting into tears; some by longer silence until they accept the silence and do not realize the gravity of it, then the heart-wrenching and the suffering begins; while others react by thanking God that her son or husband was martyred; so, she prays a lot.

Often, the bereaved women feel huge responsibility towards their children, particularly, after the husband is lost; they bear the burdens of the house, loneliness, constant sorrow and chronic physical diseases: "it's always sorrowful; I developed high blood pressure"; another says, "I have developed a glandular disease, out of sorrow"; a third says, "my condition is really bad; I complain of everything and I go to doctor's quite a lot." There are some contradictions, which is normal in the case of loss. Some couldn't bear to stay at home; they felt it like a grave "the house is like a tomb; my son is in jail," while others locked themselves up at home "I no longer get out of the house; I don't go and visit any one." She has isolated herself and spent her time sleeping or staying alone "fed up, sleeping, I don't talk to anyone." In the event of losing her house because of demolition, she might be torn between neighbors' houses or those of her children.

Such loss substantively imprints on the bereaved; it debilitates her; she grows nervous; she does not do the house chores, like cooking "I stopped cooking the food my son likes." If she did cook, it would be unwillingly and reluctantly "anything I do, I do it half-heartedly." Some women have abstained for a while from cooking some of the food their sons like and refrained from being in the places they used to be.

What these women are experiencing is "an imbalance," "an upside-down" life, physically, psychologically, socially and economically. "My life has turned upside down," or "life itself just stopped; it's the end of the world. I am shattered. I don't sleep at night." They now view life from a different angle "it's a hopeless life; nothing is good" and "I feel older than I really am."

More roles have been added to the bereaved women as well as new tasks assigned, particularly at home and generally in life. She spends her time, in trying to visit an imprisoned family member and going to the concerned institutions. She suffers from the long time consumed in issuing permits and moving between prisons. In case he was injured, she would follow him to the hospital. Moreover, she is also stifled by domineering people around her, like her in-laws and her own parents. They put a lot of pressure on me "the reason I left him is because my brother-in-law hits me. That's what made me refuse to come back home."

The bereaved woman treats her husband in a nervous way if he is at home and for the most trivial of reasons "I grew very short-tempered and tense, I didn't do anything in the house. I keep saying I want to see my son." The relationship weakens, sometimes to the extent of severance "I stopped attending to his demands and wishes," "I don't treat him well and don't like to be close to him." On the other hand, some husbands blame their wives for the loss "he grew short-tempered because he thinks I am responsible and I am the reason the boy and the girl got detained."

The bereaved woman lives hard times and becomes tense in her relationship with children. This may be out of fear for them and it affects her relation with her children "I became very short-tempered with them: I beat them, reason or no reason." She cannot

bear any disturbance “when my children quarrel with each other, I leave the house. They get on my nerves. See, how my hand shakes.”

In addition, bereaved women express that the relationship with neighbors is “good and normal, even though they don’t visit as much as they used to, only in occasions, sickness or imprisonment.” As one of the bereaved women puts it, “my visits to them have decreased after my son’s incident ... just a few visits if I had to.” Some women assert a strong relationship, especially in the case of losing the house; the neighbors hosted them in their houses and shared with them everything. Thus, neighbors play a key role in helping the bereaved woman, relieving, standing by, supportive and feeling for her.

Reactions of Family and Neighbors towards Bereaved Women and the Loss: Sons, daughters, husband, mother-in-law and neighbors are much the same. All family members interviewed provide data on the difficulties lived by the bereaved woman. The dominant impression is that the bereaved woman is the one who suffers from the loss; and that it’s relevant to her only. Most reactions are sympathetic, sorrowful, wistful, and supportive.

Part of the surrounding persons focus on the nature of the changes that overcome the bereaved woman in terms of thoughts, feelings and behavior. A daughter of one bereaved woman says that her mother “is devastated, tense, torn, always confused, fearful, lacking self-control and surprised. She doesn’t talk to people.” It is felt that the bereaved woman demonstrates contradictions: sometimes, she acts in this way; other times, in that “sometimes, she acts calmly; others, nervously” or “she acts mysteriously and reservedly. She doesn’t open up.” The following sentence reflects indeed the situation of the typical bereaved woman as described by a son “my mother is always lost; she doesn’t know what to do. She’s always thinking of her jailed son.”

The bereaved woman’s sense of guilt dominates the thinking of the family members. In their opinion, the bereaved woman feels that she is to blame that her son or daughter got imprisoned “her morale is dashed because of the imprisonment; she feels remorseful and guilty”, or “she always thinks about the prisoner, wondering whether he’s eating or not... she feels that someone is missing.” There are different reactions to an injured son “she feels incomplete, especially after my brother got injured.” These examples reflect how the family of the bereaved woman is aware of her difficulties and needs.

### **Bereaved women’s needs during loss**

Bereaved women realize their need for psychological and moral support, their need for a feeling of psychological relief, calmness, serenity and uplifted morality; “I am trying to change myself and forget the hard days I have lived.” Another bereaved woman expresses the importance to vent her emotions and alleviate her pain: “I like talking about my problems and get everything out of me” or “I want someone to listen to me. I couldn’t find someone who would. I want someone to stand by me.”

The bereaved woman expects the support to provide her with hope in life and alleviate the loneliness or the frustration she feels; “it could make things easy for me and give me security. I now feel frustrated; and I need someone to support me and soothe me; I need to tell what’s inside me.” The bereaved woman feels weakened, thus, she expects the support process to help her to “become strong.” She also feels that, with the power of

knowledge, “she would learn new things and information.” She expects to be able to deal with her loss and boost her resilience in the event of receiving the news of a fresh loss. Sometimes, the bereaved woman feels strong; she wants to talk and speak up about her experiences; she wants to “talk about prison visits, how children miss their father, and their insistence on visiting the graves.” Another bereaved woman expresses that strongly, with a huge innate power: I like talking about martyrdom, children and injury. I myself got shot in the hand and my husband in his shoulder. It doesn't matter; I'd rather talk about my son to everyone.”

One bereaved supporter sums up her future role under the Palestinian conditions: “I am always ready to support others because this makes me feel special. This is an important role. In our besieged, occupied society, we are in desperate need for this type of support.”

### **The effect of the support experience**

A newly bereaved woman says “I felt a huge change in my life, though I am not nervous in running my family affairs and my daily life; my son's imprisonment has had negative impacts because he was away from me.” Another bereaved woman says, “I was bad; I couldn't see people or work, but when the supportive bereaved women came to me and asked me to join the group to console myself, I felt hesitant. When I went and tried it, I felt so happy and depressurized.”

Individual, group and community meetings have created common bonds and contributed to raising loss issues, without hesitation or worry, with full confidence, boldness, honesty, comfort and emotional and intellectual involvement. The bereaved women have tackled issues that reflect their needs. Thus, they have gained many experiences through careful listening during meetings, the accompanying respect of opinions, acceptance and confrontation, all affecting their daily practices.

Most bereaved women have expressed changes on the levels of themselves, family and society. Expressing difficult emotions is itself a change. Many times, bereaved women have expressed hard emotions; ones that we find it hard to listen to, or may not believe that such feelings existed. In the event of loss, one feels gloomy even depressed. The power of the bereaved woman here is like the rest of them: expressing strong emotions, while at the same time thinking about the change that has happened to her.

Bereaved women felt hopeful after the support. However, the conditions imposed by the Occupation are, many times, more powerful than support. A bereaved woman feels that hope exists after the support and that is what is comforting her; nonetheless, the conditions of her family are unbearable: her husband and sons are jobless; “we live in one room, six people. I learnt how to be patient from the support group; I learnt how to depend on myself. With all the crying and tears we have to move on. This bereaved woman has expressed her feelings in an unbelievable way: she could not cry or talk about her loss. At the start, she was shocked; she only listened to others. As time went on, she felt encouraged and was able to talk about all that is painful to her: about her martyred son, the imprisonment of her other son, her divorced daughter and her sick, jobless husband, in addition to the poverty she lives in. In the last meetings, she talked profusely about what is troubling her and requested help in finding solutions.

Another bereaved woman reflects the situation of the Palestinian society, living in the big prison because of the Separation Wall, the constant security measures and practices. She missed her husband, and her jealousy of her brother-in-laws and their wives. She talked about her farewell to her husband and about her relationship with her sons and daughters. She looked better than before with every meeting. Thanks to the atmosphere of confidentiality, embracing and love, she was able to surpass many of the loss symptoms.

Bereaved women realize the factors and the circumstances relevant to the loss; they stopped blaming their husbands. A bereaved woman convinces that her husband “is not to blame for my son’s loss. This is all destined. Thus, after support, she got closer to him and became aware that his presence relieved her and her family. She has been chosen to be a member in the loss group. She feels nervous and at the same time, she is the wife of an imprisoned husband. Her son was imprisoned, during the meetings. The supportive bereaved woman has given her ample time to talk about her son’s detention and the other bereaved women shared with her their own experiences. She believes that life moves on and that what happened to her had all been destined. She believes that she has no right to blame anyone.

Such changes, particularly in perception and realization of self and family also lead to a renewed consciousness, even a renewed energy, with respect to society.

In summary, the support experience has evidently contributed to making different changes to bereaved women: alleviating the intensity of the tensions that accompany and follow the loss, making intellectual and emotional changes for them, thus leading to behavioral ones evident in dealing with family members and the members of their milieus.

The question to be asked here: do husbands realize the changes that have taken place to the newly bereaved women? and how?

The majority of bereaved women’s husbands agree that the support experience has affected supportive women positively, as evident in the tangible changes in their performance at home and outside. Husbands realize how special the project is and how far-reaching in accomplishing the woman’s leading role. Husbands are aware of the substantive change that has taken place to their wives: she takes part again in farming. This is a significant point: an old memory is recalled to the pre-loss situation “at that time, he used to go with his wife to farm his land, the source of his living, today is not like before: she takes care of me. Every day, she goes to the land and we share together all the work of the land.

Husbands realize that bereaved women’s supporters are truly leaders. “She now likes to sit with people and guide others if she sees any incorrect behavior. She is now popular and everyone seeks her advice”; “she now visits people and support them in hard times, at the time of loss and at others. She likes assisting in all cases. She goes out; she sees the whole world beautiful and she is happy and comfortable” and “she has become strong, courageous and patient. She takes part in supporting women in all stages and types of loss.”

Both loss and support affect gender. As has been mentioned earlier, losing a relative or a dear one leaves enormous impacts on the person who suffers; that is the hard experience. The feeling of loss is rampant in the Palestinian society to a great extent, leading to a state of collective loss. The loss experience and the following support,

bereaved women's and her family's realization of the importance of the changes happening to them, thanks to support, lead to several changes, as regards gender relations: these reshape relations on the basis of the renewed roles of the bereaved woman within herself, her family and her society.

### **Discussion and recommendations**

This study deals with two significant concepts: collective loss resulting from occupation and holistic support, both of which are correlated. Apparently, support stemmed from the loss memory, or, a forgotten tragedy. However, the truth about loss is power itself and support comes from that power, which is developed by the bereaved woman, out of her loss.

In addition, the Palestinian women face the question of maintaining their status, under the cultural patriarchal system that oppresses for the mere reason of being women. This double captivity creates a strong being, ready to go through any new experience.

Within the experience of the project, the study attempted to describe and analyze the conditions of both bereaved and supportive women themselves in different stages: pre-loss, during-loss, during support and post-support as bereaved women and supportive ones see themselves and as seen by their family members. Nevertheless, the condition of women, as expressed by them, has changed with loss. Results of some studies have revealed that women suffer from psychological and physical disorders, worry, fear, and distrust in oneself and in others, in addition to depression and despair (Owaid and Fraige, 1996). On the other hand, results of other studies, conducted in countries that have gone through or are going through wars and occupation, have revealed that national loss leads the victim to feel automatically angry and violent when she senses danger, as a defense mechanism to protect herself or maintain her entity in the situation of loss. She suffers of symptoms for a period of up to 10 years after the war (Klaric, et al., 2007; Green, et al., 2000; Rushiti, 2005; Robertson and Duckett, 2007). However, these experiences are different from the experiences Palestinian women go through, given the fact that occupation persists and the threat is chronic and it is also different from the wars that may end.

The Palestinian experience is one of a kind, given that it is taking place in the context of Occupation that dominates over people and land. With the loss, the tensions intensify: the Palestinian women suffer from tensions and worries, not only because of social, economic and political conditions in which every Palestinian family lives, but also because of their pursued, detained, injured or martyred husbands or sons; or because their houses have been demolished or because of multiple losses (Al-Nablusi, 2006; Jarallah, 2006; Saleh, 2006; Redwan, 2006).

Experiences of numerous projects, conducted in military struggle reflect that the most affected groups or categories by such circumstances are women who do not have enough social support to deal with loss. Therefore, the support provided to women is considered significant and gender-related (Ahern, 2004; Kawachi and Berkman, 2001). Similar studies reveal the importance of social support in facing post-loss disorders and assert the significance of such support, particularly among women, as compared to men, because women are most susceptible to such disorders. This does not entail that men do not need support; they do, but perhaps differently (Dybdahl, 2000; Stein, 2000). In line with these experiences, work has been devoted to women, adopting support strategies

oriented towards transforming women from “silent victims” to effective participants in social support and decision- makers in practical phases (Liebling et al., 2007; Liebling et al., 2008).

Even though the current study tackles collective loss, and in order to make support programs effective, it is important to use the holistic approach. Such approach seems significant in conservative societies, which view the individual from a collective perspective (Green, Friedman and Jong, 2003; Gupta, 2009). It is important to note that the family and society are part of the self-identity of individuals, their awareness and memory. It is necessary to intervene on the levels of family, local groups and the society, with a view to restoring and strengthening collective memory.

Thus, this holistic approach of social intervention postulates that the social intervention, which leads to changes is an effort to rebuild the society (International Development Research Center, 2008; Litsegard, 2008). In the context of this approach, the results of the current study show that the majority of bereaved women believe that they need external assistance as a consequence to loss. This consequence requires the utilization of such approach, asserting that it’s necessarily to deal with loss through adopting an intervention that takes into account all parties: individuals, groups and institutions.

The holistic approach (Kostelny, 2006) postulates working with bereaved women in terms of five levels: women as survivors or bereaved woman, family members (particularly, husbands and children), members of the local community, social service providers and the society in general. This approach also deals with raising the awareness of different communal parties as regards psychological, historical, social and political contexts, which resulted in and produced such loss (Conner, 2005; Kostelny, 2006; Hinton, Navarro, and Pointe, 2006 ), and handling them as part of the support process.

The Palestinian experience concentrates on the bereaved-to-bereaved approach and through mutual support (Españoli and Aweidah, 2007). Therefore, women, in the field, have been viewed as an independent, real entity: they are the guides, the supportive women and the facilitators as regards ways of facing the reality of Occupation (Abu-Baker, et al., 2004).

It’s critical to view the training as imperative part of the holistic approach. It is expected that training programs would entail understanding the social, economic and political forces of loss (Barsalou, 2001) and understanding how to deal with traumas and loss, using the numerous support skills and methods. Intervention, during training days, is characterized by an identification of supportive women’s needs in every step of the project and dealing with these during the training. This part of interference have provided better knowledge and experience for supportive women, as regards support skills, intra communication and inter-communication skills.

The experience of loss and the consequent support and bereaved women’s realization as well as that of her family’s of the importance of the changes that have taken place, as a result of support, all result in numerous changes in gender relations, reshaping them, based on the renewed roles of the bereaved woman within self, family and society.

### **Loss, Gender and Reshaping**

The reality of women, under the triple-faceted occupation (the dominance of the Occupation, the patriarchal domination and the domination resulting from her loss), has a definite, even clear characteristic: it determines gender relations. The ordinary person thinks that gender relations are fixed or even static relations – an incomplete presupposition, even an irrelevant one to reality. The opposite is true: relations are absolutely dynamic; they are interactive, affected by all the personal, familial, social, cultural, economic and political factors; they are reformulated and re-determined in line with new circumstances or external events in a certain historical period.

Using gender-related roles as instrument in struggle is a very necessary trend: struggles lead to open opportunities and create new challenges to women. They contribute to change the familiar relations; thus, they contribute to their movement towards decision-making positions. It is not necessary to talk about making political decisions; it is enough, in light of the most complicated, Palestinian reality that decisions are on the level of relations between men and women, in family, in near milieus, and on the level of making changes in the familiar of customs and traditions, particularly that relevant to loss.

When talking about loss and gender, it becomes more complicated. There is a need to think, contemplate and understand the effect of struggle and loss on gender, particularly gender-related roles and women's roles in the process of decision-making within the family, in institutions, and on the level of political decisions, in particular. It is logical that women empowerment, in general, and that of bereaved women, in particular, has different dimensions, not necessarily positive or negative, but they affect the development of gender relations. Therefore, gender, loss and support are polemic concepts, with women, occupation and wars being what relate them together.

Awareness of culture and roles played by women in the Palestinian society are necessary when talking about gender-based intervention programs. These matters are important, particularly during and after struggle. The best practices and most effective intervention methods are the ones that determine the role of women and status, through empowering her, in terms of family, society, economy and politics. In the case of our Palestinian society, the religious, legal and ideological conditions are considered influential factors in implementing any intervention.

### **Serious Issues and Desired Opportunities**

There are essential recommendations relevant to women, loss and support:

(1) Given the issues, relevant to the status of women in the Palestinian society, women cannot empower themselves by themselves nor can they make changes. Thus, collective work alleviates that burden to an extent. Forming women's networks is an idea that exists in the Palestinian society; however, the target is to establish a women's support network in the field of loss. The network may start with a few, searching for solidarity; sometimes their only objective is to find better ways to adapt with collective post-loss disorders, resulting from the continued practices of the Occupation. Nonetheless, with time and with the expansion of such networks, women will have a real effect.

(2) Cultural understanding is necessary for the development of any intervention program for women and loss, resulting from the presence of occupation. In

other words, these programs have to take into account the cultural sensitivities. It is expected that both women and men will be integrated in the process of planning, implementing and evaluating these programs.

(3) Community-based participation is the key to any successful program. Such participation is concerned with a vital issue of cultural understanding, through the participation of men and women of the same community to highlight women's needs and abilities.

(4) The integration of women in the process of decision-making is a hard task, given the cultural, political and practical restrictions. Nevertheless, it has been proven that women affect the process of decision-making, as regards issues of loss in times of war or under continuous occupation. Women can raise the collective awareness of these issues and the resultant repercussions and negative outcomes on the level of family and society.

(5) When women become the main breadwinner in the family, they assume new social, economic and political roles. This shift in responsibilities may lead to increasing tension within the family and local communities. Attention should be dedicated to challenges that impede means of earning a living and that are faced by women during occupation. These new roles further develop new opportunities in the society.

(6) There still much to learn about the complicated issues relevant to the topic. The programs that are considered a reaction to such effect aim at improving the lives of affected women by adopting an integrated and interrelated approach. These programs are examples of popular, local initiatives: providing "crisis intervention teams", offering a group of services – medical, legal and counseling to bereaved women, increasing women's participation in decision-making roles, providing professional training to bereaved women, creating job opportunities in accordance with needs of bereaved women in a way that maintains their power.

## References

- Abdul-Hadi, F. (2007). *If I own the option*. Ramallah: the Center for legal and social counseling.
- Abu-Dakha, S. (2009). *Social psychological effects of war on women in Gaza Strip and a proposed plan to intervene*. Gaza: the Islamic University, Faculty of Education.
- Abul-Hassan, F. (2010). *A comprehensive and detailed report on prisoners in Israeli jails*. Ramallah: International solidarity Foundation. Palestine network for dialogue.
- Abu-Nada, I. (2003). *The impact of parenting support on Posttraumatic Stress Disorder among Palestinian children in Gaza Strip*, master thesis, School of Public Health, Gaza.
- Abu-Baker, Kh., Kevorkian, N., Aweidah, S. & Dait, E. (2004). *Women, armed conflict and loss: the mental health of Palestinian women in the occupied territories*. East Jerusalem: Women Studies Centre.
- Abu-Baker, Kh., Kevorkian, N., & dabit, G. (2006). *Women, armed conflict and loss*. *Arab Psychological Network Journal*, Issue 10: 179-182.
- Ahern, J. et al. (2004). *Gender, social support, and posttraumatic stress in postwar Kosovo*. *The Journal of Nervous and Mental Disease*. Vol. 192(11): 762-770.

- Al-Khawaja, J. (1996). Building scale disruption following pressures of shock in Kuwaiti society. *Psychological Studies*, 6: 313-330.
- Al-Majdalawi, A. (2004). Effect of Al-Aqsa Intifada psychic trauma of school performance among preparatory school children in Gaza Strip, master thesis, School of Public Health, Gaza.
- Al-Shemi, D. (2006). Psychological support to victims of wars and disasters. *Arab Psychological Network Journal*. Vol. 3, issue 12: 99-113.
- Bajraktarevic-Hayward, J. (2008). Community level interventions in working with torture and trauma survivors - nexus between theory and practice. Available at: <http://www.psychevisual.com/lecture.html?lecture=39>.
- Barsalou, (2001). Training to help traumatized populations. Special Report No. 79. Available at: <http://www.usip.org/files/resources/sr79.pdf>.
- Conner, M. (2005). Coping and surviving violent and traumatic events. Available at: <http://www.crisiscounseling.org/TraumaLoss/CopingWithTrauma.htm>.
- Drumm, R., Perry, S. & Pittman, S. (2001). Women of war: emotional needs of ethnic Albanian in refugee camps. *AFFILIA*. Vol. 16(4): 467-487.
- Dybdahl, R. (2000). Children and mothers in war: an outcome stress of a psychosocial intervention program. *Child Dev*. 72: 1214-1230.
- Espanioli, H, & Aweidah, S. (2007). Women, armed conflict and loss- the experience of bereaved women in mutual psychological support. Women Studies Centre. East Jerusalem: Al-Manar Modern Press.
- Green, B. et al. (2000). Outcomes of single versus multiple trauma exposure in a screening sample. *Journal of Trauma Stress*. 13(2): 271-286.
- Green, B., Friedman, M. & Jong M.(2003). Trauma interventions in war and peace: prevention, practice and policy. New York: Kluwer/Plenum Press.
- Gupta, R. (2009). The need for a holistic approach to social intervention. Available at: <http://t8web.lanl.gov/people/rajan/AIDS-india/MYWORK/designing.html>.
- Hasanovic, M. et al. (2007). Psychological disturbances of war traumatized children foster and family settings in Bosnia and Herzegovina. *Croat Med J.*, 48(2):145-162.
- Hinton, A., Navarro, N. & Pointe, T. (2006). Truth, trauma and the victims of torture project: helping the victims of the Khmer Rouge. Cambodia: Transcultural Psychological Organization.
- Jarallah, S. (2006). The psychological trauma of Al-Aqsa Intifada. *Arab Psychological Network Journal*. Vol. 3, issue 12: 238-241.
- Kaddoumi, A. and Al-Helw. G. (2003). Disturbance following pressure of shock and coexistence with the parents of the martyrs of the intifada in the governorates of Nablus, Tulkarem and Qalqilya. *Arab Gulf Journal*. No. 89: 68-96.
- Kawachi, I. and Berkman, L. (2001). Social ties and mental health. *Journal of Urban Health*. 78:458-467.
- Klaric, M., Klaric, B., Stevanovic, A., Grkovic, J. & Jonovska, S. (2007). Psychological consequences of war trauma and postwar social stressors in women in Bosnia and Herzegovina. *Croat Med J.*, 48(2): 167–176.
- Kostelny, K. (2006). A culture-based, integrative approach. In: Boothby N., Strang A. and Wessells, M. (eds.). A world turned upside down-social ecological approaches to children in war zones. CT, USA: Kumarian Press, pp. 19–37.

- Krenawi, A., Graham, J. & Sehwal, M. (2004). Mental health and violence: trauma in Palestine- implication for helping professional practice. *Journal of Comparative Family Studies*, 35, 185-220.
- Kevorkian, N. (2004). The hidden casualties of war: Palestinian women and the Second Intifada- indigenous peoples. *Journal of Law, Culture and Resistance*, 1(1): 67-82.
- Kevorkian, N (2005). Voice therapy for women aligned with political prisoners: a case study of trauma among Palestinian women in the second Intifada. *Social Service Review*. Vol. 79 (2): 322-342.
- Kevorkian, N. and Khsheiboun, S. (2006). Coping with trauma: Palestinian children voicing out their rights. Jerusalem: World Vision.
- Liabre, M. & Hadi, F. (1997). Social support and psychological distress in Kuwaiti boys and girls exposed to Gulf Crisis. *Journal of Clinical Child Psychology*, 26: 247-255.
- Liebling, H. et al. (2007). Experiences of women war torture survivors in Uganda: implications for health and human rights. *Journal of International Women's Studies*. Vol. 8 (4): 1-17.
- Liebling, H. et al. (2008). Violence against women in Northern Uganda: the neglected health consequences of war. *Journal of International Women's Studies*. Vol. 9 (3): 174-192.
- Litsegard, M. (2008). Alternative therapeutic interventions in trauma work In Cape Town. -An explorative study of holistic approaches in a field of social work practice. Available at: <http://www.essays.se/essay/55dca5e4fd/>.
- Nabulsi, M. (2006). Caring for victims of collective violence. *Arab Psychological Network Journal*. Vol. 3, issue 12: 132-125.
- Owaid, S. Fraige A. (1996). Psychological disorders among Kuwaiti families after Iraqi aggression. *Psychological Studies*. Vol. 6 (3): 133-153.
- Punamaki, L., Qouta S. & Al- Sarraj E. (2007). How family members express psychological distress and resources in war trauma? Gaza: Community Mental Health Program.
- Radwan, J. (2006). Psychological consequences of traumatic experiences. *Arab Psychological Network Journal*. Vol. 3, issue 12: 14-19.
- Robertson, C. & Duckett, L. (2007). Mothering during war and postwar in Bosnia. *Journal of Family Nursing*. Vol. 13(4): 461-478.
- Rushiti, F. (2005). A controlled study of the experiences of traumatized women in relation with their martial, parental and sexual life in Kosovo. Prishtina, Kosovo: The Kosovo Rehabilitation Centre for torture Victims.
- Saleh, H. (2006). Trouble after shock pressure. *Arab Psychological Network Journal*. Vol. 3, issue 12: 9-14.
- Shaath, N. and Thabet, A. (2007). Psychological Trauma of the occupation and its impact on the grief and distress. *Arab Psychological Network Journal*. Vol. 4, issue 13: 24-37.
- Somasundaram, D. (2007). Collective trauma in northern Sri Lanka: a qualitative psychosocial-ecological study. Department of Psychiatry, University of Adelaide, Australia & University of Jaffna, Sri Lanka. Available at: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2241836>.

- Stein, M. (2000). Gender differences in susceptibility to posttraumatic stress disorder. *Behav Res Ther.* 38: 619-628.
- Taamra, M. & Hassanein, S. (2010). Wives of martyrs of the intifada in the Bethlehem area. Jerusalem: social work program, graduate studies, University of Al-Quds (unpublished).
- The Arab Centre for Future Studies (2002). Features of Palestinian trauma through decades of aggression: the psychology of the intifada and the specificity of the pressures on them. Available at: <http://www.mostakbaliat.com/trauma.html>.
- The Ministry of Prisoners Affairs (2010). The number of prisoners before the Intifada until October 2003. Ramallah: the Palestinian National Authority.
- The Palestinian Central Bureau for Statistics (2010). The martyrs of the intifada. Ramallah: the Palestinian National Authority.
- Trapman, M. (1997). Collective trauma among displaced people and refugees in Ethiopia: steps towards intervention projects. Available at: <http://www.xs4all.nl/~mtrapman/Ethiopia/Pages/interv.htm>.
- World Summit on the Information Society (2005). Women's experiences in situations of armed conflict. Abstracted from "ICT for development success stories: youth, poverty, gender", a knowledge for development publication series of Global KnowledgePartnership (GKP).