

## Introduction

• Palestinian children and their parents live under occupation and mostly in a war zone. Therefore, the disastrous life of the Palestinians continues, e.g., the Gaza Strip has the highest population density in the world that equals 6,018 people for each one km<sup>2</sup> and most of them are refugees.

• The second Intifada (uprising) started against the occupation forces in Palestine in September, 2000. Children and families have been exposed to various traumatic events.

• Many studies on combat veterans and further traumatic experiences suggest that more time spent in potential danger can lead to higher levels of PTSD symptomatology in childhood and adulthood (e.g., Famularo *et al.*, 1996; Norris *et al.*, 2003; Kayser *et al.*, 2003; Eth, 2001). Subsequently, chronic traumatization may be damaging, not just because of the specific and repeated traumatic incident but because of the effects of living in a state of constant danger (Baum *et al.*, 1990; Herman, 1992b; Smith *et al.*, 1999).

• Most of the studies were conducted in Gaza Strip or West Bank found that Palestinian children living in war zones are at high risk of suffering from PTSD, psychosocial problems (e.g., Qouta & El-Sarraj, 2004; Thabet, Abed, & Vostanis, 2002; Baker, 1990; Punamaki, 1989).

• However, these studies have only focused on a small number of traumatic experiences. But the present study aimed to examine the traumatic experiences of children living in Gaza Strip using a large sample. Three new scales were developed and adapted for the Palestinian children and included a measure of exposure to a large number of possible traumatic events. Three specific questionnaires were addressed:

- 1- How many children have been exposed to traumatic events?
- 2- What type of traumatic events that children are exposed to?
- 3- How many children shown PTSD symptomology?

## Method

### Participants

The sample consisted of 1,137 children (498 male and 639 female) with a mean age of 14.36 years (SD=1.79, Range=10-18 years). 20% (N=226) of the children were at elementary schools, 48% (N=540) of them were at preparatory schools and 32.6% (N=370) were at secondary schools.

### Materials/Measures

Two new scales were developed:

**Checklist of traumatic experiences (CTE):** This scale was adapted from [Gaza Traumatic Event Checklist (Abu Hein *et al.*, 1993)] and [Trauma Questionnaire Scale (Qouta & El-Sarraj, 2004)], and includes 34 items covering the most traumatic events that a Palestinian child may have been directly exposed to during the war and the occupation period (e.g., tear gas, injured, beating, night raids...). The children are required to indicate whether or not they have been exposed to each event. If they have been exposed to an event then they should indicate how often.

**Symptoms of PTSD Scale (SPTS):** This scale was adapted from children post traumatic stress reaction index (CPTSD-RI) (Pynoos, Frederick, & Nader 1987), (World Health Organization ICD-10, 1992), (American Psychiatric Association DSM-IV, 1994), (El-Khosondar, 2004), (Hawajri, 2003). The scale consists of sixty items and based on the procedure of Pynoos *et al.* (1987) scoring norms were created. Items scores are as follows: always=4, often=3, sometimes=2, rarely=1, never=0. Scores have been classified as 'mild PTSD reaction' (total score of 1-60), 'moderate' (61-120), 'severe' (121-180), and 'very severe' (above 181).

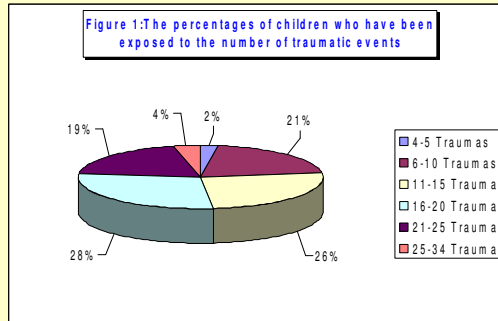
### Procedure

Participants completed the questionnaires in two sessions with a trained researcher and a school counsellor. Each session included 7 to 10 children and both sessions lasted approximately 1 hour (although primary school children were given extra time).

**Note:** All scales were tested prior to administration to ensure reliability and validity (including a pilot study). For more details of this procedure contact the first author. All scales are available in English and Arabic.

## Results I: Exposure to traumatic events

• All children had been exposed to at least three traumatic events (Chronic Trauma 2000-2005).



## Results II: Type of traumatic events

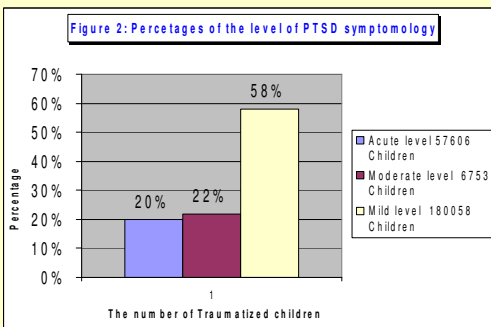
• Children had been frequently exposed to all 34 traumatic events (e.g., humiliation, injured, arresting, beating). The events with the highest exposure are shown below:

Table 1: The percentages of the highest exposure to traumatic events among children (N=1137)

The statements of traumatic events	Frequency	(%)
Have you been exposed to humiliation by occupying forces?	1134	99.74
Has anyone of your close family members been exposed to humiliation by occupying forces?	1126	99.03
Have you been exposed to the hearing of the explosion sounds or the sound bombs?	1099	96.66
Have you witnessed a martyr's funeral?	971	85.40
Have you witnessed shelling by tanks, artillery, or military planes?	964	83.91
Has any of your friends, neighbours, or relatives been killed by occupying forces?	900	79.16
Have the occupied forces used your house, block, camp, or zone as a cordon?	751	66.05
Have you witnessed people being shelled and bombed?	736	64.73
Has any of your friends, neighbours, or relatives been injured by the occupying forces?	733	64.47
Have the occupied forces destroyed a land or farm of yours or of a dear person by a bulldozer?	731	64.29

## Results III: PTSD symptoms

41% of the Palestinian children suffered from symptoms of post-traumatic stress and the breakdown of this group according to the level of symptoms is shown below:



## Discussion

• The chronic exposure to traumatic events in Gaza Strip indicates that childhood can be extremely serious and dangerous in Palestine.

• This type of exposure is particularly dangerous because of:

- 1- Time period (5 years).
- 2- The amount of traumas (> 3 traumas).
- 3- Type of traumas (severe).

• The population in Gaza strip is 1.4 million Palestinians and 53.3% (742200) are children (PCBS, 2006). This study showed that 41% (305195) of Palestinian children suffered from symptoms PTSD. Most children were not receiving any treatment for their symptoms.

• Therefore, clinical implications depends on the severity of PTSD, these children should be offered an intensive psychotherapy and rehabilitation program, or a psychological counselling and guidance program, or a basic preventive psychological counseling program.

• Children living in conditions of political violence and war have been described as "growing up too soon", "losing their childhood", and taking political responsibilities ample maturation (Boothby, Upton, & Sultan, 1992).



## Conclusion

• The war and the long term occupation resulted in Palestinian children being exposed to chronic traumatic events which violate every child's right, the right to live, to learn, to be healthy, to live with his/her family and community, to develop his/her personality, to be nurtured and protected, and the right of enjoying childhood.

• Having a normal childhood in Palestine is unlikely in the current circumstances and the future psychological well-being of Palestinian children is being compromised by on-going traumatic experiences.

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\* This study is one part of a big research about the chronic trauma in Palestine.

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