



## January 2016 Gaza Trip

By Janet Wright

In January, 2016, I traveled to Gaza with the Washington Physicians for Social Responsibility (WPSR), with support from Trauma Recovery, EMDR Humanitarian Assistance Programs, as part of a nine-day medical humanitarian trip. The Gaza Strip is one of the most densely populated areas in the world, with most of the population living in cities, towns and eight crowded refugee camps. My work in Gaza was a continuation of a long-term project with Trauma Recovery/HAP to provide EMDR therapy training to mental health clinicians in the West Bank and Gaza. Our West Bank EMDR training team, based at the East Jerusalem YMCA Rehabilitation Program (EJ YMCA RP), has tried unsuccessfully for years to obtain permission from Israel to enter Gaza to provide EMDR training to mental health clinicians there. When I was given the opportunity to go to Gaza with WPSR, the EJ YMCA RP asked me to provide an introductory protocol for treating children in groups.

Our delegation was hosted by the Gaza Community Mental Health Program (GCMHP). It included doctors and nurses in addition to professionals in the mental health field. These doctors were in high demand upon arrival. They performed critical surgeries and trainings and, with the WPSR, brought \$10,000 worth of medicine to the hospitals.

In Gaza, rather than posttraumatic stress disorder (PTSD), clinicians deal with ongoing continuous trauma that is experienced by nearly everyone living in Gaza. The director of the GCMHP lost 27 members of his family in the 2014 siege, an experience similar to many I trained.

John Soos, a clinical psychologist on our trip, described the situation we encountered: "Mental health professionals in Gaza are strained beyond capacity. Of the nearly two million residents of the Gaza Strip, there isn't a single person here who has not experienced multiple traumas. Continuous grief, nightmares, disabling anxiety and hopelessness color everyone's daily life. The therapists charged with healing these injuries are themselves victims of living in this traumatogenic environment. Their burden is thus two-fold: the trauma they share with their clients is compounded by repeat exposure to their clients' own clinical material.

The clinicians at my training talked about the depression and loss of hope by many in Gaza, including children. Those under the age of 15 comprise 50% of the population. An eight-year-old child in Gaza has experienced three wars, has no experience of daily electricity and is reluctant to make plans for the future, not knowing when the next bombing will occur. These psychological symptoms are in many ways a normal response to the abnormal situation of occupation and siege. I trained 18 mental health clinicians in the EMDR Integrated Group Treatment protocol to treat children individually or in groups to help them process their trauma and move forward with their lives. During five days of training, the first day was spent teaching the clinicians the techniques, followed by three days of practice with children who are current clients, followed by a final day in which the clinicians practiced the protocol with each other, working on their own trauma. Mona Zaghrout, senior EMDR trainer from the EJ YMCA RP, talked with the trainees by Skype on the first and last days to address her team's experience in using EMDR within the Palestinian culture while

experiencing ongoing traumatic stress. This was a great help as she spoke to them in Arabic. My training was conducted with a translator, which necessarily slowed and simplified the training. The therapists were eager to learn and desperate for additional therapies to help those they treat.

One 9-year-old boy who lost a leg in the 2014 bombing was brought for treatment by his psychiatrist, who was part of my training. The boy had been repeatedly unwilling to talk about what had happened to him. On the second day of our treatment, he talked for the first time about his experience. The psychiatrist is hopeful and grateful to have a therapy that will help his healing.



While there, I met a Gazan psychologist currently working for the UN, who begins work with the World Health Organization (WHO) in March. When I talked with her about my training, she indicated that the WHO has asked her to coordinate EMDR training in Gaza. The Palestinian clinicians in Gaza and the West Bank believe the WHO will be able to obtain permits for the West Bank training team to enter. I have connected her with Mona Zaghrout to pursue next steps. The Gazan psychologist anticipates that an EMDR training will be conducted in Gaza in 2016. This is the most hopeful development in the last ten years of efforts to bring EMDR training to Gaza clinicians. The WHO is already partnering with the Trauma Recovery/HAP to bring EMDR training to Nepal, a precedent that may help our partnering with WHO in Gaza.

On one of our last days in Gaza, we were given a tour of the Gaza Strip, particularly the northern area that was hardest hit during the 2014 siege, by a representative of the UN Office for the Coordination of Humanitarian Assistance. Beit Hanoun and the industrial area are still in ruin, though those from our group who had been there a year ago said they could see real progress in clearing rubble. We were told that of the 18,000 homes in Gaza completely destroyed in the siege only 5 have been completely rebuilt due to the blockade of construction materials.

Nearly all young adults in Gaza are unemployed, with no hope of finding work or leaving. It is nearly impossible to get a permit to leave if you are under 35 years old. Most have lived their whole lives in Gaza with no chance to leave.

Initially I was most impacted by the difficulty and suffering, but the longer I was in Gaza, the more I noticed the smiles, jokes and celebrations. I was invited to the women's party of the wedding of a family member of a clinician I trained. Gaza is a mixture of great difficulty and sadness and moments of joy. I don't think I could have been more thanked for coming or asked more to return. One of the doctors on our trip may have said it best when he described his work at the nearby hospital: "It's remarkable what they can accomplish with what they don't have."

I'm grateful to Carol Martin and the Trauma Recovery, EMDR Humanitarian Assistance Program for their support. As I left Gaza, I was aware of my privilege both to go to Gaza and to be able to leave, which so many there would like to do. I'm excited and hopeful for the next trainings we will do there.