Practicing social work in a "stateless state"; an exploration of the views, experiences and practice of Children and Family Social Workers in the West Bank and East Jerusalem.

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Introduction

This has been a difficult article to complete. Not only because the question of Palestine tends to be contentious and notably under-researched in social work literature, but also due to the timing of our research, the final part of which coincided with the 2014 war on Gaza. In over sixty-five years of conflict that followed the creation of Israel in 1948, and the subsequent occupation of Palestinian land, the official international and national organisations representing the social work profession have remained in a permanent state of avoidance. However, the ferocity and disproportionality of the war on Gaza in 2014 resulted in a major and unprecedented shift in the attitude of these organisations.

The first organization to react was the International Association of Schools of Social Work, which adopted an assertive and strongly worded statement condemning "Israel's significant attack on the Palestinians of the Gaza strip)".

 As a Congress of social workers we cannot stay silent. We demand an immediate cessation to the Israeli assault. We recognise that any solution to the crisis must include the right of Palestinian refugees to return home. (IASSW, 2014)

The assassination of Abu Maria Hashem, Palestinian social worker and board member in the Palestinian Union of Social Workers and Psychologists, was another key reason behind the mobilization of international organizations. IFSW swiftly circulated a statement condemning the assassination of a social worker by the Israeli Army and subsequently the organization took a clear stance on the Palestinian issue asking for self-determination of all people and specifically recognizing that liberation of the occupied Palestinian territories as a key precondition for achieving peace in the Middle East (Truell, 2014; IFSW, 2014). Within a week, regional and national associations from all parts of the world published their views on the issue producing an astonishing number of thirteen communiqués[1]. To put this into perspective one has to remember that within the 50 days, during the 2014 war on Gaza, the international social work community published more official statements than within 65 years of conflict which preceded the latest war.

A note on methodology

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[1] See a list of these communiqués in the IFSW blogsite, under the tag "self determination"
http://ifsw.org/tag/social-work-for-peace-and-self-determination

This article attempts to provide an initial exploration of the views, dilemmas and every day professional lives of children and family social workers in the West Bank and East Jerusalem. In doing so we developed a three-stage methodological approach: a) observation and workplace visits, b) interviews with key informants and c) in depth interviews with social workers.

Over the last six years, we visited the West Bank six times. Initially our research included field visits in social services in the cities of Ramallah, Tulkarem, Bethlehem, Hebron and East Jerusalem. During this stage we had the opportunity to visit social workers in their work places and discuss with them about the nature of their work while observing the working conditions, both in their workplaces and on the field. Each visit lasted approximately ten days. This *initial stage* helped us familiarize ourselves with the field and develop our initial views into more solid hypotheses, explored further in the subsequent two stages.

Once we were confident that we were able to appreciate the main characteristics of the complex and dynamic social work context in the West Bank, we moved onto the *second stage* of our research which focused on interviewing key informants, leaders of the social work profession and policy makers. The research purpose of this stage was to explore the 'official' social work narratives as presented by office holders. This included the president and branch members of PUSWP (Palestinian Union of Social Workers and Psychologists), the Mayor of Tulkarem, the Secretary of the Palestinian Federation of Trade Unions, the Minister of Social Justice, the Director of Defense of Children International and directors from UN supported schools. Key informants provided us with important information on the nature and challenges of 'policy making' in the West Bank and helped us navigate through the –rather fragmented- network of available social services in their constituency.

In the *third and final stage* of our data collection process we attempted to re-evaluate, clarify and enrich the narratives and hypotheses that had emerged earlier. This included interviews with twelve (one-to-one) children and family social workers, forming what we experienced as the most substantial and vivid stage of our research. We used convenience sampling techniques based on accessibility, utilizing networks we had developed in the previous two stages as a base-line and moving onto "snow-balling" in order to enhance recruitment. The demographic breakdown of our interviewees in the third and final stage of research included five men and seven women all of whom had graduated from social work programmes offered by Palestinian Universities.

We initiated these interviews with open questions *(what does a day at work involve for a Palestinian social worker? What have you done today? Can you tell us about a case that you are particularly concerned about?).* Through semi structured interviews we introduced the main themes that had

emerged as crucial in the previous two stages. Most interviews were conducted in Arabic, using skilled interpreters. Four participants preferred to communicate in English.

Adopting an interpretivist approach means that this research is not necessarily generalizable as it neither covers all different aspects of frontline experience in the Palestinian social services nor it identifies possible differences between the regions of West Bank and East Jerusalem (Shaw and Holland, 2014). However, the wealth of information generated through the interviews and the devel²opment of a three stage research approach which included field visits- limited observation, discussions with key informants and finally in-depth interviews with practitioners make us feel confident that the research findings offer a valuable, valid and reliable view of the unique and extraordinary nature of social work in Palestinian West Bank and Jerusalem.

The data collected, were analysed by the principal researchers and authors of this paper, using narrative analysis techniques which considered the interviewees' own "life experiences and interconnected work-life incidents/ episodes" (Bryman, 2012). While evaluating the data, two main narrative strands emerged; Firstly, the day-to-day practice based issues, which describe not only the hardships for social workers with relatively few resources, but also the advantages of being able to practice with more intimacy and immediacy than many European colleagues. Secondly, the significance of broader political and structural aspects of social work emerged as a central theme, which was highlighted by all interviewees. This resonates with epistemological debates about defining social work theory and practice (Ioakimidis, 2013). As it was not the intention of the authors to undertake a politically driven piece of research we tried to let the data set "speak for itself".

Professional social work in the context of a "stateless" state

There is a lengthy history of social work activity in Palestine although largely undocumented (Lyndsay et al, 2007). Despite such history, social work first emerged as a recognized profession in early seventies (*ibid*). Five Palestinian universities have been offering the BSW since then, and several social services providers (GOs & NGOs) were established providing services through social work graduates. (Abu-Ras, W NS Faraj, Z, 2013). The Palestinian Union of Social Workers and Psychologists (PUSWP) was established in 1997 and evolved as a representative body for all Palestinian social workers and psychologists through 13 branches in the West Bank and East Jerusalem, but not in Gaza Strip (PUSWP Strategic Plan, 2004-2009).

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² Unlike the West Bank, East Jerusalem has been formally annexed to Israel, and its residents have a different status and different opportunities than those in the West Bank.

Most of the social workers we interviewed (and this is a reflection of the wider demographics of the profession) were employed primarily by charity organisations. Others worked for UN funded projects while a large minority practiced social work without being 'formally employed'. Interestingly enough, the last category did not consider themselves as volunteers but insisted that what they practiced was professional social work, albeit in very irregular context. This irregularity in terms of working conditions, and the operation of social and other state services, forms a crucial aspect of social work in Palestine as it directly reflects the unique and hugely contradictory institution that is the Palestinian National Authority (PA).

The PA resembles an embryonic form of a state apparatus, which is so acutely confined by the realities of occupation that is condemned to a perpetual and often meaningless "Sisyphus like" commotion. The quasi-state market and economy that has emerged in the West Bank is absolutely reliant to the controls and policy changes of the Israeli State. The Palestinian National Authority was created as an interim self- governing body, linked to the provisions of the 1993 Oslo Accords. Turner, (2009) explains that the Oslo oversights combined with Israeli military operations and internal divisions among Palestinians has paved the way for the transformation of the PA from a quasi state to a failed state. In 2012 PA changed its official name to Palestinian State following a rather symbolic yet politically decisive UN decision to grant the Palestinians a non-member observer state status, thus formally recognizing Palestine as the world's only "stateless state".

Within this context, the Palestinian Authority has not been able to develop extensive and structured social services . As a result family and community solidarity continues to be the main source of social care in the region.

 S.A from Hebron mentioned that

"*The P.A. pays our wages (school counselor Hebron) but the Israeli's use collective punishment by stopping the revenues from our taxes mean that sometimes we don't get paid for many months. I'm lucky my brother has a farm outside Hebron and he helps me out. I don't have any children so I can get by. The P.A. can usually let us have about $100 a month in relief but my normal wage is about $400. I know people who have had to give up work because of this*".

He went into explain how the scarcity of jobs has allowed space for petit-corruption.

"* There is no chance of getting any paid work in Social work in Palestine unless you know a VIP (member of a political party) Can you help me to meet a VIP?*"

D referred to the same issue when she told us that

" We don't try and find any funding for the project any more, we just do what we can. We would like to build a guest room so that we can charge people for staying to make some money. I work as a security guard for the UN to feed my family"

From our interviews it became clear that the best working conditions are experienced by those employed by the United Nations or other major international NGO's. Such reliance on externally funded projects has caused a fragmentation in available social services and has deprived Palestine of a more unified, structured and coherent strategy in welfare provision. Inevitably, the lack of scope in the field of social services, affects the development, training and support of social work practitioners.
M from East Jerusalem told us that

"There are too many families and children for us to be able to work with. We have too little space. We mostly play in the covered school-yard because it is safe. We can't use it at night because the school van needs to be locked in, or the settlers will come and wreck it".

The complexity of practicing social work under extreme circumstances in Palestine does require an enormous amount of commitment, dedication and energy. Being part of the community they work with and facing very similar challenges and hardships as their service users means that for social workers in Palestine the emotional and psychological involvement in their work often comes with a heavy toll. Many of them talked to us about the emotional fatigue they have experienced while others focused on what they described as "secondary trauma", the process of re-experiencing in their work shocking conditions similar to incidents that had caused severe stress (traumatized) and affected them personally.

H from Hebron explained that

" I sometimes go to the Union office in Hebron to discuss a case if I feel really stuck. Otherwise, there's nobody else I can talk to"

While M from East Jerusalem suggested that

" There are no surprises for me . I grew up in this community. I have no formal support, but I have friends who I qualified with. We use Facebook to get advice from each other. If you have good friends in Social work in Jerusalem, then you can be a good social worker. If you don't then you can't be a good social worker"

Therefore, it should not come as a surprise that the question of supervision and peer support emerged as crucial in our discussions with professional social workers. More accurately, it was the lack of opportunities for supervision that most social workers would primarily highlight.

I., who lived and worked in the same city as the previous interviewee mentioned that

"We don't get any supervision The Union won't give us any supervision. Therefore we have to make use of other opportunities such as social media and peer support"

Although, the collectivist and community based character of social work in Palestine has enabled practitioners to re-discover the importance of collective peer-support, it seems that the barriers they face in terms of further professional development and formal opportunities for continuing education are much more difficult to overcome. Limitations in continuing professional development training opportunities have been also documented by Ramon et al (2006). Nevertheless, we are in no doubt that social workers in Palestine have been able to develop, by experience, an extensive and unique knowledge-base. It seemed to us that their expertise in working with communities affected by conflict, traumatized children and the question of re-integration of long term political prisoners, could match the knowledge generated by the best research centers globally. However, the practitioners we talked with strived for opportunities to reflect on their own practice, share their views/ experiences, expand their knowledge-base and ultimately feel valued as "reflective practitioners"

In line with this principle, all interviewees argued that in order to ensure that social work training remains relevant it is important that theory and practice is rooted in the history and extraordinary political context of Palestine. They believe that Palestinians' specific needs cannot be identified and properly understood without a historical appreciation. An example of rare synthesis between international support and appreciation of grassroots knowledge is the project initiated in 2012 and funded by the Norwegian Federation of Social Workers and Social Educators aiming recording aspects of the profession's history (cited in Abu-Ras and Faraz).

Practicing social work with children and families in Palestine

Children and young people have been systematically and disproportionately affected by the occupation. Jones and Lavalette (2011; 30) in their comprehensive research on the experiences of young people in the West Bank vividly explain how the Israeli Defence Forces (IDF) systematically and methodically target young people.

It was often more in anger than sadness that young people talked of how the occupation stole their childhood. They may have idealized what they were missing but they knew that many of their peers elsewhere had some fundamental freedoms, which were completely denied to them.

The interviews we had with Palestinian social work practitioners working with children and families were rich in content and exposed several inter-related themes. In our data analysis we identified four key themes that were raised in all discussions and were highlighted by the interviewees as the most crucial and defining aspects of their every-day practice: a) check point intimidation/ Incursions, b) dealing with the Separation Wall and c) trauma manifestations.

a) *Checkpoint intimidation and Incursions*

The "missing childhood" described in Jones and Lavalette's research has also been very well documented in other studies (Rabia et al, 2014). Most notably, the International NGO' Defence for Children-International (DCI) painstakingly monitored the extent and perpetuity of Palestinian children's rights violations. These include, *inter alia*, assassinations, torture, trials in military courts, military detention, solitary confinement, limited access to legal advisors and collective punishment (DCI, 2014).

D., one of the social workers we interviewed referred to the "missing childhood" concept explaining that many children tend to suppress behavioral characteristics attributed to children. She suggested that much of this behavior occurs in children who have directly experienced violence or witnessed the impacts of violence and intimidation in their families. She recalled the following story

" We have a big problem with boys wanting to play violent games with guns and to throw stones at each other. At Eid we try to get the children to play non-violent games, and we used balloons and prachute games. One boy refused to join in because he said he was too old for such games. I said... What do you mean... you're too old ... You're five!!"

In 2014, the average number of children held in Israeli military detention stood at 197 per month, while at least 11 Palestinian children in the West Bank, including East Jerusalem, lost their lives in the same year, after being shot with live ammunition by Israeli soldiers (*ibid*). It is important to mention that the majority of these detentions, routinely happen in a fashion designed to intimidate whole families and communities (night time incursions, house demolitions etc) (DCI, 2014).

All of the social workers we interviewed had experiences of being subjected to the intrusion of checkpoints, and night-time military operations. Many lived and worked in the refugee camps. It was clear that despite their often remarkable fortitude, these issues were stressful for them and their families as well. Many were tearful as they talked about their experiences, and nearly all of them talked about their sense of vulnerability and need for support. Several conceded to needing maintenance levels of medication to be able to cope. As well as each seeking to practice as a social worker to the best of their abilities, were also trying to make sense of their and their community's experience of occupation and oppression.

We didn't meet any overtly designated child protection or safeguarding teams, but much of what was encountered was family support work. However, there was a major safeguarding awareness, albeit no safeguarding systems to refer to. Whilst there were no such systems to address the issues of safeguarding *per-se,* we encountered a highly developed professional awareness of risks to children. Within families, risks were seen to stem from the manifestation of the poor mental or physical health of the parents, poverty, poor housing, and overcrowding. The prevailing safeguarding issue of course is related to checkpoint intimidation and routine harassment of children.

Everyone in Palestine is aware of the role of the Israeli Defence Force (IDF), and fear their presence and actions. We spoke to social workers in the Refugee camps who described the way in which soldiers would come into the camps and kick down doors and blow holes in walls to conduct night time searches under the name of security. Children are subjected to fear and trauma through this as they experience their families or communities being unable to protect them.

A.B a School Social Worker from Hebron described how the constant presence of IDF constantly affected the work of practitioners:

We take the children through the checkpoints, the soldiers laugh but we don't know why as they speak in Hebrew (...) Sometimes they tell us that they will close the checkpoints and its not even a Jewish holiday so we have to send the children home.

A.B's comment also illuminates the harsh reality of restricted movement and transportation in the West Bank. Although, it is often commonly thought that the West Bank, as an entire region, is under the control of the Palestinian Authority, who in the prospect of a solution will be able to establish a state on this territory, the reality is very different. The uninterrupted development of settlements across the West Bank means that Palestinian citizens have a limited access to urban and rural areas of the West Bank (UN OcCHA, 2012). The segregated road system which divides the road network in three different Zones regulating the access of Palestinians, is a representative example. These Zones are

controlled by fixed and mobile military checkpoints, which very often extend into Palestinian urban zones. The intimidation of soldiers and their frequently abusive and disruptive behavior towards Palestinian children was highlighted by all social workers we interviewed.

A.B while reflecting on her experience of crossing these checkpoints with children in her care, recalled several cases of humiliating and dehumanizing behavior:

Sometimes the soldiers drop their trousers to the ground when they see women coming to the checkpoint. They do not care if there are children around.

Also, in the same interview there was a clear reference to social workers' perceptions of risk and attempts to work closely with families in order to protect children while crossing the checkpoints:

We have to take the children through the checkpoint, the soldiers throw out their books and things from their bags. (…) The soldiers picked on one boy who was 6 years old and made him take his clothes off . We were concerned that he was being sexually abused by one of the soldiers . They took him off and gave him sweets and video games. We had to work with his family to ensure that he was escorted by adults through the checkpoint.

b) *Dealing with the Separation Wall.*

Similar stories were shared by social workers from other parts of the West Bank. Practitioners from Tulkarem placed particular emphasis on the grim impact of the separation wall has on the mental health of local children and their families. In the following quote, A. refers to family fragmentation, anger and frustration among young people which leads to risks and vulnerability.

 "I am worried about two brothers who come to our centre every day. They are about 14 and 15 years old. They live with their aunt and uncle and their cousins. Their mother has left the boys with her husband's sister. I don't know where their Dad is. No-one really cares about them. They are always fighting with the other children. I am frightened that they will get into trouble with the soldiers. Nobody will care about them. It is hard to get other people to see that they will come to harm. The Centre wants to ban them, but I am worried that if we throw them out they will get into serious trouble.

Tulkarem is a medium sized Palestinian city in the North East of West Bank, which was captured by the IDF in the 1967 war. Inside the city's urban zone lies a densely populated refugee camp, which was established by the United Nations in 1950. Nowadays a third generation of young refugees who and grow up in the camp face difficulties associated to the displacement, not dissimilar to those of their

parents and grandparents in the past decades. According to the UN these problems include suffocating living conditions, high unemployment, overcrowded schools and a constant threat of army incursions (UNHCR, http://www.unrwa.org/where-we-work/west-bank/camp-profiles?field=12).

However, the social workers we interviewed also highlighted another crucial aspect of every-day life in the city, which hinders the wellbeing of children and young people. In 2002 Israel commenced the process of building of a large separation wall, physically isolating Palestinian communities and enclaves. Approximately 85% of the 810km barrier has been primarily built on Palestinian land, claiming the farms and livelihood of thousands of Palestinians (B'Tselem. 2011).

Although, occupation authorities claim that since the creation of the separation wall, suicide attacks have been reduced noticeably, the United Nations has carefully documented the grim humanitarian consequences for Palestinian communities. In July 2014 the Secretary-General of the United Nations openly condemned the construction of the Separation Wall (OCHAOPT, 2014). His argumentation was underpinned by the then recent publication of a UN report presenting the impact of the wall on the lives of Palestinians. According to the report, the Wall affects the communities not only financially (through low productivity and loss of farmland) but also psychologically (isolation, sense of hopelessness, disrupted transportation (*ibid*).

The aforementioned report placed a particular emphasis on the impact of the wall on children's well being, explaining that for children and families who find themselves isolated by the barrier very small daily activities (such as inviting friends to a birthday party) require permission from the occupation forces.

Ziad, pupil from Nazlat Issa in Tulkarm, whose house lies between the Barrier and the Green Line explained that:

My main wish is to be like any other child in the world and that my friends can come freely to visit me at home (OCHAOPT, 2014).

Inevitably, for Palestinian social workers the separation wall stands in Tulkarem not only as a grim reminder of the conflict but also as yet another critical dimension of their daily struggle to 'safeguard' the physical and mental wellbeing of children.

c) *Trauma manifestations*

Inevitably, the curbing of fundamental liberties experienced by Palestinian children and families is only part of the story. Severe trauma and the impact of occupation on the mental wellbeing of children and young people is an important dimension that only recently has started attracting the attention of researchers (Thabet et al, 2008; Abdeen et al, 2008). In 2009, one of the first reports on "psychiatric disorders" among Palestinian children documented the extraordinarily damaging impact of the occupation on children's mental health (Espie et al, 2009) Depression, fear, anxiety, acute stress and symptoms that are often described as Post Traumatic Stress Disorder were rife among the population of young people investigated in this study (Rabia et al, 2014).

Social workers deal on a daily basis with children who have been affected by their experiences. We were advised of a range of traumatising issues stemming from the occupation. Seemingly these could be categorized as a) specific incidents which had frightened and abused the children and b) the wider non-specific milieu of occupation and fear.

Some of the stories describing trauma manifestations as described by social workers include the case of a boy in Aida camp, whose mother following the violent death of her daughter had developed significant mental health problems and started to dress her son as a girl, causing to display very disturbed behavior; he was spontaneously aggressive and had extreme attention difficulties. Also, social workers from the Holy Child Project in Bet Sahour, described a twelve-year-old girl who had been arrested and after she was released was subject to uncontrollable outbursts, and developed chronic epilepsy. Elsewhere in East Jerusalem we heard about children who had been playing outside and had rushed into the social workers' office to seek safety as they thought that the police had arrived. The social worker reported that the children were terrified and hid under the table. When the social worker checked, she found that it was a tourist in a group who had an olive coloured shirt on and a brown base ball cap. We also attended the Palestinian Arts Centre in Hebron, where much of the art work presented by the 60 children attending, includes representations of violence with images of soldiers tanks planes and guns with dead or bleeding people around.

Social Workers who worked with families in the West Bank suggested that trauma could also refer to physical injuries.

"We are working with one boy who was severely bitten on his head by the soldiers when they arrested him. When he came out of prison he had severe epilepsy. His family struggle to accept him now".

D. a social worker who works in a youth project in Jerusalem, identified another dimension of the catastrophic impact of occupation.

"Heroin is now a big problem for youth in East Jerusalem now. The Israelis are turning a blind eye to dealers. The Israelis say that you can have drugs, like water" Mithral East Jerusalem Youth project

The definition of trauma among Palestinian children requires some attention. In our interviews it became absolutely clear that excessive stress was the direct result of living a life under military occupation. The characteristics of trauma in this group as described by Palestinian social workers have been documented adequately by relevant clinical investigations (Rabia et al, 2014; Espie et al, 2009; Thabet et al, 2008; Abdeen et al, 2008). However, we would be very cautious with the use of clinical terminology in defining life under occupation, as the risk of pathologising and de-politicizing this experience is high. Although, dealing with the consequences of trauma and trying to relieve the most acute manifestations of it should be seen as imperative, it is our view that what Palestinian children need in the long term is not constant clinical treatment and medication but an end to the damaging consequences of the occupation.

This is exactly the point made by Rabaia et al (2014) after they examined much of the available literature focusing on trauma among Palestinian children.

Psychosocial project assessment frameworks are generally derived from biomedical and individualistic models utilizing 'objective' indicators of psychosocial health — often developed elsewhere — which may or may not be relevant and appropriate for culture and context. The assessment is based on the historical, sociopolitical and economic context are often neglected.

Grassroots social work; making sense of the politics and ethics of resistance

A direct impact of the occupation on social work as presented in previous sections is the importance of the shared experience by practitioners and 'service users' alike. This experience, contributing to the professional identity, cannot be seen independently of the harsh political realities experienced by Palestinian social workers and the people of the West Bank as a whole. Key in this analysis is the fact that social workers need to be seen as part of the historical and political processes of their occupied country and not in isolation. Therefore, it is important to avoid constructing vaguely defined and 'normalized' professional identities. Instead, it is important to appreciate that much of the experiences of social workers in Palestine are not fundamentally dissimilar to this of "service users" as it happens in Anglo-American social work where cultural, social and class boundaries perpetuate very different realities and routines between the two groups.

Social workers in Palestine do not consider themselves as heroes, freedom fighters or any kind of professional elite. In fact, often in our conversations we listened to them describing how they strived

for the creation of 'stable and ordinary' conditions in their work. It does not take long to realize that what they were describing was a struggle to create a much needed sense of security amid a very threatening and volatile environment. Therefore, it would be inaccurate and possibly unfair to attempt a romanticisation or idealization of Palestinian social work as an inherently progressive profession – away from its own contradictions.

Nevertheless, it has been very clear to us that the extraordinary political and social context, within which Palestinian social workers operate, has provided fertile soil for the development of an extremely rich and genuinely grassroots social work practice, even when it is not recognized as such. In fact, if we scratch the surface of a rather artificial and 'deficit oriented' social work normativity that informs much of the jargon that social workers use, one would witness enormously creative, politically committed and truly resourceful social work practice.

Lavalette & Ioakimidis (2011) have described aspects of this grassroots and holistic practice as popular social work and we believe that much of what we witnessed in Palestine resonates with this concept of social work. Jones and Lavalette (2013) defined some of the key characteristics of popular social work as follows:
a) It is not about policing the poor and troubled;
b) Its interventions are not based on a view of the client populations as being a priori pathological and inferior.
c) It does not crudely ignore the material context of poverty, which is at the root of so many problems.

Although their work on popular social work has focused on organic community projects relying on volunteers and practitioners who would not necessarily refer to themselves as social workers, we believe that the above key characteristics can easily be extended to the practice of qualified Palestinian practitioners. In our interviews we focused on practitioners who would recognize themselves as 'qualified social workers'. Yet there was plenty of evidence that even within this context the basic characteristics of popular social work held firm.

No group of Palestinians who live in the West Bank can escape from the consequences of the occupation no matter how 'privileged' they might be. It is true that severe poverty and crowded living conditions experienced in the refugee camps exacerbate the situation for those living in these areas. However, life under occupation means that the Palestinian people *in their totality* are exposed to sever restrictions in movement/transportation, violations of fundamental human rights, exposure to irregular IDF violence and a pervasive sense of insecurity. Such universality of the occupation experience means that Palestinian practitioners demonstrate a very strong sense of empathy and genuine solidarity towards the most vulnerable members of the community. We have never in our interviews and observations

witnessed a social worker who would adopt an approach that pathologizes or demonizes individuals for the trauma experiences. Always, trauma has been described, analyzed and addressed in the context of collective and historical suffering of the Palestinian people

M. from Bethlehem explained how and why she shares experiences very similar to those of the service users

"I have been in the Israeli prison for a year, when I was a teenager. My brother will be released next week after 14 years under the peace process"

Also, I. from East Jerusalem told us that

" When I was 14 years old the Israelis arrested me. They tied me up in a stress position and I was held like that for a week with no food or water, to see if I would crack. I was prepared for this in my own mind so they gave up. This happens to children all the time"

It is exactly this strong connection between social workers and their communities that has inspired many of them to 'unpack' resourcefulness and creativity in order to develop appropriate practice and in spite of the extraordinary shortages of funding, equipment and professional space. Interestingly enough there is a noticeable and stark contrast between the rigidity of social work theories and methods taught through the curricula we reviewed (most of the imported by the West) and the frontline practice we witnessed. What characterizes the practice and ideas of social workers we interviewed is a genuine commitment to non-stigmatizing and creative social work. The use of traditional dancing, community work, arts and sports in dealing with the impact of trauma is much more extensive than we have seen in many European countries.

Social Worker B, who works in a small Children's Center referred to the practitioners work in dealing with pervasive traumatic impact of the occupation:

We try and give them a good and safe experience. We hope to remove the trauma from their minds but we see it come out in their play and their writing and drawing.

We help the children and families to find a safe healthy place by giving them a good environment and helping them to use their imagination positively.   We ask people to imagine a little box in which they can put precious things thoughts feelings into where they will be safe in their minds

When we viewed the children's art work at PCAC there was much imagery of soldiers, helicopters, tanks and guns. They displayed high levels of violence in their play, often injuring each other and picking on perceived vulnerabilities of others. Social workers saw it as part of their role to address this trauma and through positive group activity, help the children to experience more positive ways of playing and being creative. We encountered social workers who variously and innovatively used writing, drama, art, puppetry, dance and music, to provide children with the opportunity to express themselves creatively and make sense of their emotions. The Al Doha Centre, in Deisha refugee camp, sought to use traditional dance and music particularly the dancing of the Dabka, as well as cooking and drama, to help to create a positive image of Palestinian identity. Social workers felt that it was important that children could be helped to create an identity, which was not defined by abuse and oppression, but on the contrary celebrate their traditions and collective experience as a source of pride and confidence.

A fundamental characteristic of social work practice in Palestine –as viewed and described by social work practitioners themselves- is this of active political engagement with the 'Palestinian cause'. As they explained to us the effects of the occupation permeate through every aspect of life in the West Bank. Therefore, they recognize that dealing with the impact of occupation on a micro and mezzo levels is of the utmost importance. Trauma needs to be treated, depression requires attention, poverty has to be addressed, children at risk have to be safeguarded and cared for. However, it is the overall political action and support of the collective struggle for self-determination that ultimately define the macro-level of social work practice in the West Bank.

M. from East Jerusalem gave us a very interesting example

"Sometimes the soldiers come in to school and tell me to close early and send the children home. There was a family who lived next to the school whose house was demolished earlier in the year and the children have to pass this every day. Sometimes the settlers break into the school in the night and slash the tyres for the van. I am working with a group of 14-17 year olds. We have some cameras and they are doing a project, recording what is happening to our community"

The appreciation of the political character of social work interventions in Palestine provides critical space for the creation of professional ethics very different to western deontological approaches based on Kantian categorical imperatives. Several times through our interviews we attempted to explore the question of 'violent resistant' as a potential ethical dilemma for social workers. Nevertheless, it became clear, even at the early stages of our research, that our questions bewildered our interviewees. Kantian and utilitarian moral codes seemed irrelevant to the Palestinian social work context. A strong sense of communitarian ethics meant that the universality of the occupation's experience could not be separated from the personal and professional experience. Social workers did not consider the question of variable

means of resistance (violent or 'passive') as an ethical or professional dilemma. They were of the view that the Palestinian people as a whole had both a duty and a right to resist and the selection means of resistance was not a matter exclusively related to individual choice but it was linked to the overall political circumstances and conjuncture. Nearly all practitioners and policy makers we interviewed had direct and personal experiences from detention, imprisonment and harassment by the IDF. The cruelty of the occupation and active resistance to it were seen as integral and indivisible parts of their professional and personal experience by Palestinian Social Workers. However, the complexity of ethical dilemmas present in a context where violence begets violence, raises the critical question "where is the limit of this violent resistance and what are the true implications of such practice?".

Some concluding remarks

In this article, we attempted an exploration of social work practice in Palestine as defined and experienced by Palestinian children and family practitioners. Our research approach included a series of visits and interviews with Palestinian social workers living and working in East Jerusalem and cities of the West Bank. In our discussion with them we recognized aspects of social work practice that bear similarities with our own social work practice in the UK; a hope for a strong professional voice, demands for better working conditions and expectations for meaningful supervision and professional development are only some of the aspects of social work we would feel familiar with.

However, the pervasive nature of occupation and its ever-present impact at all levels of life in Palestine, has created rather unique social work responses. In Palestine, all families are exposed to and experience fear, traumatic experiences, and discrimination through the incursion of military occupation in their daily lives. Such traumas overwhelmingly manifest themselves and are observable through the daily experience of social work practice. Arguably the prime function of social work 'to protect from harm and grow resilience in individuals, families and communities' is explicitly revealed through the observations of the daily activity of social workers, who practice in a society under extreme duress. Van der Kolk (2001) argues that the presence of support is intimately associated to the individual's ability to overcome the effects of trauma. The collective and creative nature of Palestinian social work practice, through seeking to provide effective support, is an effective means of sustaining resilience to ongoing abuse and trauma which the occupation creates.

In essence, Palestinian social work, despite its heavy reliance on international aid, is little known to practitioners and scholars outside the country. It is our conviction that a deeper and more methodic exploration of Palestinian social work would significantly enrich the profession's knowledge-base internationally. However, we believe that this transfer of knowledge should be mutual and therefore

international social work organisations should enhance and extend their support towards Palestinian practitioners on the basis of genuine internationalism. The Global Agenda for Social Work and Social Development (IFSW, ICSW and IASSW, 2012), provides us with a great opportunity for such exchange of knowledge and support.

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