Narratives from Jenin Refugee Camp: Children as extreme defence against the disintegration of family and community

Guido Veronese1
Mahmud Said2
Marco Castiglioni3

Abstract

This paper aims to explore practices that create serious risks to the physical and psychological health of Palestinian children. The typical stories of three children interviewed at Jenin refugee camp are subjected to content analysis. This analysis also extends to the micro and macro social developmental context of these children (which they share with the entire child population of the camp). Key themes emerging from the analysis include the need to “redeem” grandparents and parents (depressed, preoccupied, without hope), intolerance of imprisonment and being coerced into confined spaces (which are invaded on a daily basis), the need for space to play in, the acceleration, through violence, towards adulthood. The motivations leading to dangerous practices and risk and protective factors are discussed.

Keywords: Palestinian children- Refugee Camp – military violence- risk behaviours

1 Dpt. of Human Sciences, University of Milano-Bicocca. guido.veronese@unimib.it
2 Dpt. of Psychology, University of Milano-Bicocca. mahmudsobisaid@yahoo.it
3 Dpt. of Human Sciences, University of Milano-Bicocca. marco.castiglioni@unimib.it
Introduction

This article examines aspects of the developmental context of Palestinian children at the Jenin refugee camp in the West Bank, based on ethnographic and qualitative analysis of personal stories collected in the field (Barber, 2008a; Beck, 2005). We specifically focus on a high risk behaviour typical of these children: “playing” at chasing the Israeli armoured military vehicles present every day on the streets of the camp (Graham, 2003).

The debate between psychiatric and socio-ecological theoretical approaches provides a range of views on the psychological well-being of children growing up in contexts of war and political violence (Barber & Schluterman, 2008; Sagi-Schwartz, Seginer & Abdeen, 2008). The psychiatric literature emphasizes the pathological functioning of the child population in violent social contexts. Numerous studies describe children and adolescents growing up in such contexts as aggressive and impulsive (Barber & Schluterman, 2008; Sibai, Tohme, Beydoun, Kanaan & Sibai, 2008; Quota, Punamäki, Miller & El-Serraj, 2008; Tremblay, 2000; Fantuzzo, Boruch, Beriama & Atkins, 1997; Bandura, 1973) and find that high-risk and aggressive behaviours are correlated with physical and mental health risk (Baker, 2008; Hill, 2002; Garbarino & Kostelny, 1996; Millstein, Irwin & Adler, 1992). Other studies carried out in contexts of poverty and war, link trauma-related disorders with learning disabilities (McNamara, Vervaeke & Villoughby, 2008; Finzi-Dottan, Dekela, Lavic & Su'alid, 2006; Levendosky, Huth-Bocks, Semel & Shapiro, 2002; Armsworth & Holaday, 1993).

Similar findings have been reported for the Palestinian population, subjected to continuous military violence from 2000 (Al Aqsa Intifada) to date (Khamis, 2008; Quota, Punamäki & El-Sarraj, 2008; Thabet, Tawahina, El-Serraj, Vostanis, 2008; Lavi & Solomon, 2005). A study carried out in the West Bank showed that children are particularly prone to psychopathological disorders: in 2000, 42% of the child population had been diagnosed with psychological ailments (Zakrison, Shanen, Mortaja & Hamel, 2004). The most common psychiatric diagnoses include emotional-behavioural disorders, trauma-related disorders (such as moderate to severe post-traumatic stress syndrome) and learning disabilities (Arafat & Boothby, 2004; Miller, El-Masri, Allodi & Quota, 1999; Zakrison, Shanen, Mortaja & Hamel, 2004). These findings portray Palestinian children as severely affected by their life context, destined to react to violence with violence (Quota, Punamäki, Miller & El-Serraj,

2008; Punamäki, 2008; Thabet et al., 2008; Khamis, 2006a; Quota, Punamäki & El-Serraj, 1995).

Within this perspective, the family is viewed as a risk or protective factor in the development of psychopathology in children and youths (Quota, Punamäki & El-Sarraj, 2008; Aisenberg & Herrenkohl, 2008; Hasanović, Sinanović, Selimbašić, Pajević & Avdibegović, 2006; Barber, 1999). The family regulates high-risk and violent behaviours in children: the more the family is unable to respond to the uncertainties of the context (violence, poverty, lack of security etc.), the greater the physical and mental health risk for the children (Ramin, Wick, Halileh, Hassan-Bitar, Watt & Khawaja, 2009; Punamäki, 2008; Jablonska & Lindberg, 2007). The family promotes resilience in the child when it copes successfully with worries and objectively uncertain life conditions, and supports the child in dealing with trauma and deprivation (Ungar, 2008). Parental concern for children can have contrasting outcomes, depending on the type of support provided: parental use of force and punishment can lead to negative adjustment in children, whereas protective and loving parental care promotes positive adjustment and deployment of creative cognitive resources (Quota, Punamäki, Miller & El-Serraj, 2008; Punamäki, 2008).

Although it takes learning contexts into account, the literature on the role of the family in maintaining or resolving psychological distress focuses mainly on the malfunctioning of the child, postulating a strong correlation between conditions in the family and the development of psychopathology (Quota, Punamäki & El-Sarraj, 2008; Kiser & Black, 2005).

In contrast, the socio-ecological approach sees emotional, behavioural and psychological reactions to political violence as a complex phenomenon, in which dynamic political, cultural, social and economic forces play an increasingly important role (Barber, 2008b; Boothby, Strang & Wessels, 2006). The effects of trauma on the individual child are examined within the broader developmental context: behaviours that would be classified as maladaptive in other settings, may be adaptive in specific ways in a context of military violence. For example according to Belsky (2008), depressive reactions can be adaptive in a context where no safe escape routes are available, insofar as depression may desensitize the individual to enemy attack. Similarly, anxiety may stimulate the flight response in dangerous situations. Finally, aggressive behaviours may be functional strategies for self-defence or attack, especially where flight is not an option. However, the complex functioning of
children in war situations is not yet sufficiently well understood to allow definitive interpretations to be made in this sense.
Socio-ecological theorists also claim that the extent to which the social context makes sense of political violence (by explaining the facts, the causes and indeed the legitimacy of the conflict), is critical in determining how well children and youth adapt to it. Active participation in the struggle against an identified enemy provides youth with instruments for coping with trauma and favours positive social and psychological adjustment (Barber, 2008c; Punamäki, Quota & El-Serraj, 2001).

Our hypothesis is that within the socio-ecological perspective, the phenomenon of chasing armoured cars may be redefined within a broader meaning system so that it makes sense. Psychiatric science traditionally relegates this behaviour to the sphere of pathology and social maladjustment, consequently assigning the Jenin refugee camp children to the passive role of victims, with the label of chronic patients (Belsky, 2008).

Jenin refugee camp

The Jenin camp was originally built in 1953 on an area of 373 dunums (approximately one square kilometre). Jenin is about 20 kilometres from Nazareth: a first check-point must be passed through to enter the West Bank; a second check-point - Sabah el Kher, “good morning” in Arabic – gives access to the city of Jenin. A long avenue leads to the refugee camp. The camp has developed in a disorderly fashion, is densely populated and almost entirely lacking in services and facilities. According to UNRWA (United Nations Relief and Works Agency), the population of the refugee camp is around 16,000 (UNRWA, 2008), with 95% of the population having refugee status (Giacaman, Johnson, 2002). Most of these are families expelled from the Haifa region (currently located in Israel), when the state of Israel was founded in 1948 (Pappe, 2006). 47% of the population live below the poverty threshold. Only 25% of adults have employment. 42.3% of the population is under the age of 15. Literacy and school attendance rates are about 33% for women, and 21% for men, over the age of 12 (Giacaman, Johnson, 2002).

In April 2002 during the operation Defensive Shield conducted by the IDF (Israeli Defence Forces), 40,000 sq.m. of the camp were demolished. 52 people were killed in the operation, half of whom were civilians (Graham, 2003). Reconstruction of the camp has recently been
completed, but the closing off of the camp and military occupation have increased the level of fear and uncertainty. Every evening at 17.00, the army moves in from the first check point and occupies the camp, which remains under curfew until 6.00 a.m. Frequently the troops stay in the camp during the day, imposing impromptu day-time curfews. Anybody going to work outside of the camp needs to obtain a daily permit from the army.

The intervention

In this context, in the period 2000 to 2006, a team – made up of Palestinian psychologists and psychiatrists and European volunteers, in collaboration with the non-governmental organization Médicins du Monde – carried out an emergency programme at the Jenin refugee camp. The crisis intervention involved around 600 children and 70 families. The therapeutic protocol consisted of three steps:

I. *in vivo* exposure of the traumatized children at the scene of the disaster, with the participation of the family;

II. a home-based family intervention with the children present;

III. individual trauma therapy, offered to all family members (not necessarily only the child exposed to the traumatic event) displaying symptoms of extreme and cumulative trauma at the end of the live exposure phase.

Differently from a cognitive-behavioural approach to trauma, the *in vivo* exposure phase included elements from a narrative framework as well as techniques from systemic family therapy aimed at involving the families of the child victims (Veronese & Said, 2009). Research has shown that live exposure, which generally consists of reliving the traumatic experience moment by moment in the presence of a health care professional, has a cathartic effect on the victim (Foa & Cahil, 2002). In addition, numerous studies conducted within a narrative perspective, both in clinical and social psychology contexts, have reported that the reconstruction of meaning (making sense) through story-telling is effective in preventing and controlling post-traumatic and grief effects and contributes significantly to individual and collective well-being (Barber, 2008c; Neimeyer, 2006).

Within this project, in November 2006, an intervention was carried out with a class of children at the Y.M.C.A. (*Young Men’s Christian Association*) primary school, shortly after a 9 year old pupil had been killed in an offensive by the Israeli army. (In that year, during the war between Israel and the Lebanon, the Israeli Defence Forces had intensified attacks in the Occupied Territories (West Bank and Gaza), causing numerous casualties among the civilian
population and demolishing many homes.) The class was made up of 35 children between the ages of 6 and 12 (mean age 10.8 ; SD 2.4 ).

35 individual interviews were conducted with the classmates of the child who had been killed.

During these interviews the children were asked to recount the most recent traumatic event that they had witnessed or experienced directly. The interview opened with the following question: “Please, would you like to tell me about the last time you saw someone being treated violently, or were yourself violently treated, by the soldiers?” These preliminary interviews with the children were preparatory to the full-blown narrative exposure to the trauma (Veronese & Said, 2009).

The interviews lasted between 45 and 60 minutes, and were conducted in the local language by a bilingual researcher and therapist, a native Arabic speaker with an excellent command of English.

**Method**

The interviews were both clinical and research tools, and were co-authored by researcher and participants in the course of a dialogue about the traumatic experience (Braun & Clarke, 2006; Arvay, 2003).

3 of the 35 interviews were selected for in-depth analysis in this paper, and contain stories that are representative of experiences common to almost all the children in the class. The majority of the children in this class, as indeed the majority of children in the entire Jenin refugee camp, have witnessed episodes of military violence or undergone trauma.

The following criteria were used to select the 3 stories: a) the children interviewed had experienced severe trauma recently (between 3 and 6 months prior to the interview); b) the children had been directly involved in one or more episodes of military violence and had not only witnessed them; c) the children claimed to belong to groups that chase Israeli armoured cars; d) the children’s families and the children themselves provided informed consent.
**Procedure**

The narratives were subjected to thematic content analysis following Boyatzis (1998). In line with constructionist paradigms focusing on sociocultural contexts and on structural conditions, the interviews were analyzed using an inductive approach. “Inductive analysis is [...] a process of coding the data without trying to fit it into a pre-existing coding frame, or the researcher’s analytic preconceptions. In this sense this form of thematic analysis is data-driven” (Braun, Clarke, 2006: 83). The method involved the identification of core thematic nuclei within the narratives, and the classification of these themes into structured categories via an interjudge agreement process. The children’s narratives were audio taped, transcribed in Arabic, and translated into English by a bilingual researcher (who had been present from the outset of the research process) for subsequent analysis. The procedure broke down into the following steps: a) one researcher carried out an open coding analysis of the participants’ narratives to facilitate the emergence of critical themes; b) the themes were coded and organized into structured categories; c) the narratives and categories were discussed and agreed, by rater-judges (Boyatzis, 1998).

**Three stories**

Ziad is twelve and he presents severe learning disabilities: he is dyslexic and dysgraphic. His family is very poor. His father, a laborer, works some days a year thanks to an UNWRA support programme. Ziad is the oldest of four children. Ziad and his friend and classmate, Nasser (see below), have been through an extremely traumatic experience: they were both involved in the explosion of a mine on the land in front of Ziad’s house. Ziad and Nasser belong to the gangs of children who prefer to chase armoured cars instead of going to school. On the day of the tragedy, Ziad was out with Nasser and with his younger brother, Alif, without his parents’ permission.

Nasser, Ziad’s friend, is twelve. He is attending the final year of primary school but his academic performance is extremely poor. He has been diagnosed as suffering from a learning disability. Nasser and Ziad and their friends often played under an iron shelter on a piece of land near Ziad’s house. Nasser had moved away some metres to the right when suddenly he heard a terrible bang. All three children were thrown into the air, as Nasser said “towards the sky”.

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4 The method was adapted to meet the demands of the context which did not permit systematic data collection.
5 All the children’s names, works of parents and indications of the places are invented to preserve anonymity and safety of children.
Metqual is twelve and he is in the sixth class of primary school. He lives with his parents and five siblings. His father is a street vendor, selling kebabs outside the city hospital. Metqual has a very strong personality, he is a leader within his group although he is also recognised by his teachers as a good student, sociable and respectful of authority. His academic performance is excellent. While running after a jeep and jumping onto it, a bullet passed right through his thigh, tearing the muscle and leaving quite a sizeable hole.

**Narrative analysis**

Three categories emerge from the narratives: *individual, family* and *community*. These dimensions are closely interconnected.

Table 1 lists the key thematic nuclei grouped into macro-categories.

<table>
<thead>
<tr>
<th>Levels emerging from the narratives</th>
<th>Narrative Themes</th>
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<tbody>
<tr>
<td><strong>Individual</strong></td>
<td>Feeling of imprisonment and physical restriction</td>
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<td>Lack of positive stimuli</td>
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<td>Stigma of psychiatric diagnoses</td>
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<td>Feelings of fear, anger and impotence</td>
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<td>Need for approval of peer group</td>
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<td>Need for play in order to externalise trauma</td>
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<td><strong>Family</strong></td>
<td>Trigenerational inherited anger</td>
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<td></td>
<td>Depression and learned impotence</td>
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<td></td>
<td>Loss of hope for the future</td>
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Fear for safety of children

Feeling of humiliation and impotence

Deconstruction of male power

Emergent strength of female figures

Community

Exaltation of the combatant as an epic hero

Refugee camp as non-place unlawfully taken from the Palestinian people

Refugee camp as a violated motherhouse

Refugee camp as a symbol of tragedy (nabkāh)

Refugee camp as a symbol of the right of return (haqq al-ʿawda)

Deconstruction of social institutions

(e.g. schools)

Individual Level

The core themes emerging at the individual level of analysis may be summarized as follows: feelings of imprisonment and lack of space; reactions to negative stimuli such as exposure to military violence; reactions to psychiatric diagnoses; dominant reactive emotions (fear and impotence on the one hand, anger, arrogance and aggressiveness on the other); the attempt to emulate the combatant heroes; the importance of belonging to the peer group; reactions to trauma.

The children feel expropriated from the street, their main place for socializing together. Their narratives express feelings of claustrophobia.
The perceived lack of freedom is reinforced by the long nightly and daytime curfews enforced upon the population. The lack of positive stimuli and safe places to play in intensifies the perception of threat and danger (Punamäki, 2008); following the armoured cars allows the children to feel active and to experience positive emotions.

“\textit{When we can’t go out during the curfew, the time goes by very slowly, I spend hours in front of the TV and I know that out there the soldiers are occupying my streets and my friends’ houses. For months after being in hospital, I couldn’t walk, I had to stay at home. I felt like I was in prison, and to think that even when I do go out, I can’t feel free. [...] Running after the enemy is an indescribable feeling... I feel like a horse galloping, uncatchable.}” (Metqual).

“I don’t like being on the street, but where else can I go? To school? I don’t like it, especially since my brother died, it’s not safe. The street is my second home, although I don’t like being out on the street all day long. I like the market.” (Ziad).

The children engage in high-risk behaviours in order to experience feelings of self-efficacy, since they associate school with failure, labels and stigma. School does not provide them with the motivation to learn. Attending school in conditions of military occupation and violence increases their feeling of being under threat and they react with risk behaviors and aggressive conduct. The conditions of uncertainty, combined with poverty and social marginalization, lead in many cases to school drop-out.

“I’m not getting on well at school... I can’t read and I’m not able to write very well. The teachers and doctors told my father that I’m not learning... that I don’t want to study, the more time goes by, the less interest I have in learning...”; “...when you go out in the street, against the enemy, everybody respects you: it’s the respect that combatants deserve.” (Nasser).
“I often don’t go to school, and the way there is not very safe.. we meet the soldiers and they don’t let us go in, sometimes they fire at us.. my classmates are in danger too.. sometimes we can’t come out of school.. when they occupy the streets [during the day].” (Metqual).

The emotional tone of the narratives is strongly conditioned by the traumatic experiences the children have undergone and by their consequent desire for revenge. The constant threat to their lives leads to dominant negative emotions, which in turn determine the meaning that they attribute to their experiences (Cacioppo & Gardner, 1999).

“I saw his leg, and the shoe, the rest of the body further away covered in dust and blood...I wasn’t able to do anything, I couldn’t hear anything, only a loud buzzing..there was whistling in my ears and I couldn’t take my eyes off that leg...the swollen, deformed body..”. “They must be made to pay, they attack us on purpose... I can’t forget my brother’s broken body. All the boys must train, know how to use arms... to free our country” (Ziad).

Although the children’s lives are conditioned by fear and their perceptions, interpretations and memories shaped by it, they react to trauma with displays of aggressiveness and bravery. Their behaviour is vindictive, but also stems from the desire to emulate the combatants by seeking martyrdom. Imitating the combatant hero figure is an attempt to evade the role of victim, by activating positive behaviours and coping strategies such as acts of remarkable courage (Punamäki, 2000). “Courageous” behaviour also earns admittance to the peer group, whose approval and support is much sought by the children. The group facilitates the development of a set of social competencies, which provide protection from exposure to military violence. In contrast, exclusion from the peer group is an additional social stigma which can heighten the individual’s sense of vulnerability and isolation.

“...the combatants are our only protection and I want to be like them, a martyr..” (Metqual).

“Anyone who refuses to go out with the group, who escapes or hides in their house is not a man... to get away from my father’s control I prefer to meet the others straight after school. We agree on a meeting point ... one day we’re all going to be heroes “. (Nasser).
Family Level

A second level of key meanings concerns the family. The children perceive their parents to be almost incapable of protecting and consoling them. The main thematic nuclei are: transgenerational anger, depression, impotence, lack of future prospects, fears for offspring, feelings of humiliation, destruction of the male, positive role of females.

Diminished parental functioning makes children who are exposed to political violence more prone to responding with aggressiveness (Barber, 2001). The families are frequently unable to exert authority over their children or to protect them. In terms of meanings, the children compensate for the negative image of the family by engaging in risk behaviours such as the pursuit of armoured military vehicles. Brave conduct is a means of redeeming their parents who are afflicted by hopelessness and rage, as emerges from the following account.

“I see my mother worn down by pain more and more each day and my father break his back for a pittance that is barely enough to feed his children. I can’t stand by and do nothing about my parents’ suffering…I can’t stand still and watch my brothers fall one after the other.. the combatants are our only protection and I want to be like them, a martyr..” (Metqual).

Punitive and coercitive parenting styles increase the likelihood that children will engage in impulsive and risk behaviours (Quota, Punamäki & El-Serraj, 2008). The adults themselves are ambivalent in their attitude: on the one hand their desire to protect their children leads them to punish them and attempt to exercise tight control over them, on the other the prevailing propaganda encourages engagement in high-risk acts of resistance. The family’s intense anger towards the Israeli army leads the children to have a dehumanized image of the enemy, again encouraging them to engage in acts of aggression (Punamäki, 2008).

“..My grandfather often locks me into the house.., but he can’t hold me back. I know I make my mother suffer, but when the time comes I know how to get to the others.. my greatest desire is to avenge my brother and make my mother happy” (Ziad).

“..the soldiers have no mercy on anyone, they will shoot at anybody.. they deserve to be struck down and be punished for their inhumanity, they have not got the slightest bit of compassion… one day they’ll be put to flight …” (Nasser).
The adults’ anger and aggressiveness, inherited from the grandparents’ generation, that of the “Palestinian catastrophe” (Gluck, 2008), is in contrast with their feelings of impotence and fears concerning their children’s futures. The refugee camp parents have been forced into humiliating conditions of poverty and imprisonment and typically display anxiety and depression. The adult males are the most badly affected. The men are either unemployed or work only occasionally and they struggle to support their families. The impotence of the male family head is counterbalanced by a strong maternal presence. The women engage in a form of silent resistance and despite their evident anxiety and suffering, their children see them as more to be relied on (Veronese & Said, 2008).

“... For my mother, bringing me up is the most difficult thing of all. she’s doing it all by herself. my grandfather has lost everything, he’s old and dull with age. My father spends all his time in front of the TV smoking” (Ziad).

“... for five years my mother brought us up on her own, my father was in prison and we had no news of him. it was her, thank God, who fed us and acted as head of the family.” (Nasser).

The children witness the humiliation, the imprisonment and often even the killing of the adults in their world, especially the adult males. In Arab culture the male is particularly highly valued and held worthy of admiration and trust (Quota, Punamäki, Miller & El-Serraj, 2008); undermining the male figure implies striking the entire society at its very base. The children respond to this victimization by seeking secondary gain in terms of social recognition for heroic acts of resistance (Quota, Punamäki & El-Serraj, 2008).

Community Level

When the children’s narratives embody social and community dimensions, they become more complex: individual experience becomes separated from the traumatic event and incorporates community narratives which are a source of shared pride. “The Palestinian narratives were indeed intense, yet it was (not always, but overwhelmingly so) an intensity of passion, not despair; of commitment, not chaos; of pride not dismay; and of welfare, not wound” (Barber, 2008c: 287).

The main themes emerging from the interviews show that at a social level, great value is assigned to certain meanings which effectively encourage children to engage in active resistance (Barber, 2008c; Punamäki, 2008; Quota, Punamäki, Miller & El-Serraj, 2008). Specifically: glorification of the combatant hero figure, the illegitimate expropriation and violation of the refugee camp by the Israeli army, the refugee camp as a symbol of the tragedy (*nakbah*) and the right of return, and finally, the lack of social institutions to protect the population.

The community glorifies the hero figure. The combatant is an emblem of a society relying on a specific hegemonic model of masculinity as one of the last bulwarks of resistance. In fact, the narrative genre most popular and most present over recent decades, especially within the oral tradition, has been the epic saga (Peteet, 2000).

“When we chase the tanks and we hit them with stones, we’re like Nizar Tawalli and Zaccaria... When you manage to jump up on a tank and grab its machine gun then everyone recognises that you are a man...” (Nasser).

In the Jenin refugee camp, as throughout all of the Occupied Territories, the children are forced to live in very confined spaces, circumscribed by impassable borders that isolate them from the rest of the world, depriving them of their independence and accentuating their sense of humiliation due to being forced to live in a provisional place, without “space”. The home is deliberately turned into a battleground. Undermining and destroying homes becomes a strategic symbol with which to strike at the entire community.

To live on the street is to revindicate ownership of the prison into which they have been forced by the building of checkpoint and closed frontiers. The refugee camp is the property of the combatants, the “mother-home”; the refugee camp is “Palestine” (Botiveau, 2006).

“The refugee camp is our home, it’s our pride...” “The day that the soldiers are kicked out, we’ll all have to be in the camp and we’ll all have to contribute to the victory... the enemy’s days are numbered and I will do everything to be there when the Israeli army has to leave our land for ever...”

(Metqual).

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*Palestinian combatants*
Meanwhile the camp must continue to be the emblem *par excellence* of Zionist oppression and the displacement of the Palestinian people (*nakbah*, tragedy, or the more acceptable *hijra*, migration) to the eyes of the outside world, while internally it must remain a breeding ground for new generations of combatant-rebels. Terms like “refugee” and “camp” become metaphors of exile and resistance, serving to reinforce the narrative of the return to the Land of Palestine (*haqq al-‘awda*) (Farah, 1997; Chatty, 2002).

“My grandfather is a refugee, from Haifa, my father is a refugee and I am a child of the refugee camp. I’m a refugee...my mother is keeping the keys to my grandfather’s house, because one day we’re all going to go back.” (Ziad).

From the interviews it is clear that children become prematurely involved in activism and political life in an attempt to attribute positive meaning to their state of isolation and the military violence endured (Barber, 2008c). The children internalize social relations which lead them to make a very strong distinction between good and bad and to develop a hostile attitude towards the enemy. This attitude promotes a perception of individual well-being and helps to compensate for weak social institutions (such as schools), which are unable to protect the children. Clearly defining the enemy and taking concrete action to defeat him, enables both community and individuals to attribute meaning and value to the chronic condition of violence and uncertainty in which they are immersed.

**Conclusions**

The narratives of the Jenin refugee camp children can help qualify the hypothesis of a negative childhood condition due to exposure to armed conflict. If the analysis is only conducted at an individual level, the children come across as having both emotional and behavioural difficulties: the practice of chasing armoured cars would be classified as a conduct disorder, developed as a result of negative adjustment to the constant perception of threat (Punamäki, 2008; Srour & Srour, 2006). In addition to the risk behaviours, there are also the trauma-related disorders (such as PTSD, anxiety and depression), which worsen the overall mental health status of the refugee camp children (Zakrison, Shanen, Mortaja & Hamel, 2004). Finally, cognitive and learning disabilities complete a portrait of the refugee
camp child who has been stigmatized and pathologized by the all-pervasive process of victimization (Khamis, 2006a).

The family level analysis also appears to confirm a pathological response and negative adjustment on the part of the child (Khamis, 2006b; Barber, 1999; Garbarino & Kostelny, 1996). The family is unable to cater for the needs of the children because it is crippled by the occupation: demolished homes, parents who are humiliated, imprisoned and killed.

However, this is still only a partial vision. An individualistic perspective risks overemphasizing the pathological aspects of the situation, while overlooking evidence of resilience. This is particularly likely to occur within Western models, which in contexts of trauma and political violence tend to focus on problematic and negative psychological states (Gilligan, 2009; Barber, 2008b) and to underestimate the social and interpersonal nature of political conflict and personal and collective suffering (Honwana, 2006).

In the light of the political meaning attributed by the community to resisting the enemy, high-risk behaviours such as chasing tanks may be re-interpreted as an example of competent functioning, which allows the child to cope with trauma and to become an active social agent in conditions of uncertainty (Flanagan & Syversten, 2005). The children at the refugee camp become precociously involved as activists in the civic and political life of the community (Sherrod, Flanagan & Kassimir, 2005). Political involvement allows the children to restore to their individual narrative identities aspects of competence and positivity which direct or indirect exposure to military violence has fragmented.

High-risk and aggressive behaviours displayed by a child in a peaceful society can be interpreted as signs of an undermined moral system and a loss of meaning on the part of the child (Guerra & Bradshaw, 2008; Gilchrist, Howarth & Sullivan, 2007). However, in a context such as the Jenin refugee camp, the same behaviours acquire meaning and are incentivized by the community (Barber & Olsen, 2008). The social context encourages children to engage in active resistance to the enemy, seen as a means of redeeming individual, family and collective identities.

Our study analyzed a small number of stories, and therefore it is not possible to generalize from the results. In addition the narratives are not balanced in terms of gender: in a society which tends to respect orthodox religious conventions, it is difficult to obtain consent to interview female children, especially for male researchers.
Nonetheless the narratives offer a significant insight into the social and value systems of the Jenin refugee camp.

References


