

Reflections on the meaning of ‘resilience’ in the Palestinian context

Rita Giacaman*

Institute of Community and Public Health, Birzeit University, West Bank, Palestine

*Address correspondence to Rita Giacaman, E-mail: rita@birzeit.edu

ABSTRACT

This reflective piece offers an alternative perspective to understanding the components which support the Palestinian capacity to endure and resist 100 years of violation and injustice, in context. It traces the development of the author’s understanding over time as part of the Palestinian community living under Israeli military rule in chronic warlike conditions. It combines this lived experience with research results which raise question about what resilience means, the difficulties encountered in its measurement, and the utility of the concept in explaining the Palestinian reality. It emphasizes the need to include the contextual experiences of those who live in wars and conflicts in future research and for knowledge production. It ends by stressing that it is not sufficient to offer humanitarian aid to the victims of wars and conflicts without also advocating for justice not only for Palestinians but also in other contexts of injustice worldwide.

Keywords mental health, Palestinian, public health, war

At the Institute of Community and Public Health at Birzeit University where I am on the faculty, we had been grappling with the notion of what is called ‘resilience’ in the international literature, and its personal and collective characteristics and components, as manifested in the Palestinian context of chronic and protracted exposure to Israeli settler colonialism and violence. Yet, we have not been able to locate a word in Arabic to fully express the meaning of the English term. Some translate resilience to *Sumud* (steadfastness, meaning sticking to the land), others to *Jalad* (meaning ability to withstand), or *Muruneb* (flexibility) or *thabat* (pliability), and yet others call it *alqudra ala attabamul* (capacity to withstand).

In the mental health field, we usually face the problem of meaning versus semantics. We have over time collected an array of Palestinian colloquial Arabic words as opposed to classical Arabic (which can differ substantially depending on which Arab country we are referring to) expressing particular health states, at particular moments in time. For example: *hamm* (hamm is embodied and can be seen as someone who is carrying the weight of the world on her back) and *ghamm* (also embodied where someone’s bodily expression looks like someone is about to explode); or *sammēt badan* (poisoning of the body, also embodied) and *ghull* (could be rancor, could be hatred, could be burning thirst depending on how it is used). Sometimes it takes several words in English to explain the meaning of terms used in Arabic, and even when using several

words, meaning is not quite understood as it is understood in Palestinian Arabic.¹ More, how people express distress and ill-health/ill-being is usually related to a particular way of knowing,² of being and of doing,³ which are embedded in context and culture. This is about a different way of life.

Our attempt to understand and give meaning to the term ‘resilience’ began by the beginning of 2000 with the onset of the second Palestinian uprising (*Intifada*) onwards, where violence intensified and spared no one. Following Veena Das’ view, violence descended into the ordinary⁴ where people endured extensive exposure to personal and collective violation directly, indirectly or by witnessing violence against others.⁵ Our particular understanding of the concept of resilience is consequently derived from ‘the daily’, informed by our lived experience as Palestinian academics who are part of community, by conducting research among various Palestinian groups and by linking our work to theories largely generated in western countries. However, we soon realized that there was a tension between the theories and approaches generated through our own empirical research and the theories and approaches of the international literature.

All too often, Palestinian ‘resilience’ is over-rated and sometimes used as a means of avoiding acknowledging and addressing the issue of injustice to Palestinians with

Rita Giacaman, Professor

humanitarian and international support divorced from the calls for justice,⁶ as happens elsewhere. Nevertheless, at least, resilience implies ‘what is right’, instead of ‘what is wrong’, often identifying and describing Palestinians in dichotomies as either terrorists or victims (and we do not accept these labels) or by counting dead bodies, injuries and disabilities. From a public health perspective, it is the survivors of exposure to political violence who are our priority. And this includes not only the injured and disabled, but also all those with trauma’s invisible wounds. Such survivors oscillate on a continuum of ease–disease back and forth daily depending on the degree, severity and chronicity of violation⁷ and **capacity to endure and resist**. This is our definition of what resilience is about, not just bouncing back to where people were before violation, as the engineering term means.

We conceptualize resilience as a fluid concept which cannot mean the same thing to all people and in all contexts. Drawing on the work of Bourdieu,⁸ we relate the attributes and effects which resilience produces to the habitus ‘for which it is intended . . . and on which it operates’. This necessarily means that resilience and its manifestations are context-specific.

Based on this understanding and our research findings, we conceptualize resilience as a dynamic process which, in the Palestinian setting, is embedded in agency, every day practices and relatedness/connectedness to context.⁹ Perhaps contrary to what is believed, active nonviolent political participation of young Palestinians addresses the daily humiliation by the Israeli military occupation by restoring dignity through resistance and ‘agency’.

A study with young Palestinians revealed that political participation was seen as an important factor positively influencing youth well-being and ‘protects youth from physical, psychological and social ills’.¹⁰

In another study with 18–29-year-old participants from the West Bank and Gaza Strip,¹¹ young people revealed two main domains of inclusion/exclusion: Israeli military occupation and the internal Palestinian domain. They reported that they did not feel ‘excluded’ when it came to resisting Israeli colonization of Palestinian land as they have been mass mobilizing sporadically, but consistently, without any links to political parties. The restoration of their dignity entails working to end Israeli military occupation and Palestinian political factional divisions. Some revealed what many understand that agency and dignity are collective notions, not only pertaining to persons. Young people also reported being excluded internally with high levels of unemployment—58% of university graduates unemployed in 2019.¹² They reported that their confidence in Palestinian governmental institutions and political parties is very low and with little trust other than trust in family. Trust is an important component of

social capital which can contribute to ‘resilience’ and has been eroded.

In the Palestinian context, exposure to chronic violence is a shared experience. This shared experience and its processes including supporting each other gives ordinary people a sense of wellness. People are not isolated or atomized. Young and old alike are surrounded by networks of supportive relationships with families, neighbors and communities, which also assist in accessing a range of resources—that is, social capital,¹³ to help them endure and resist violation and in re-making daily life as normal as possible after violent attacks, in other words, normalizing the abnormal,⁹ another feature of the capacity to endure and resist.

We also know that ‘resilience’ can be episodic, depending on the context, even in the same country and culture. Another study of the wives and mothers of Palestinian political prisoners in Israeli jails¹⁴ demonstrates that when the national liberation project is the principal glue, which maintains the nation together (as in the first Palestinian Uprising of 1987–1993), personal and collective resilience and social support are high, and communities actively support prisoners and their families and strengthen their capacity to endure and resist. When the national project’s glue effect declines, as for example beginning in 2000 and the realization that the Palestinian Authority has become a means which Israel outsources to securitize Palestinians in order to assure Israeli security, not Palestinian security, or as happened due to the Fateh Hamas split, collective ‘resilience’ and communal support declines, and the ‘resilience’ of prisoners and families declines as well.

There is also the notion of symbolic capital,⁸ the collective knowledge and recognition that the moral imperative is that of Palestinians (we are the occupied and Israel is the military occupier, the aggressor and colonizer). This too helps in sustaining the capacity to endure and resist exposure to political violence. It also assists in sustaining well-being despite the harsh realities of life.

A peculiar brand of optimism despite hardship is also a facet of ‘resilience’ in our situation. Pessoptimism is in general our characteristic as a nation, written in novel form by the late Palestinian writer and novelist Emile Habiby.¹⁵ We are pessimistic and optimistic at the same time with inseparable feelings of hope and despair and representing ‘an enduring and defying Palestinian voice’.¹⁶ It is, as the Palestinian public intellectual Edward Said explained, a strength ‘. . . in the knowledge that they haven’t been able to get rid of us. It is a great feeling—call it positive or pessoptimistic—to wake up in the morning and say: “Well, they didn’t bump me off”’.¹⁷ It is about a mind-set, derived from habitus and the collective experiences which are imprinted on the national consciousness.

This mind-set has been shaped by what Palestinians and Arabs call the 1948 catastrophe (*Nakba*), described as the 'Ethnic Cleansing of Palestine' by the Israeli historian Ilan Pappé.¹⁸ As Das notes, the past informs the present.¹⁹ In the Palestinian case, the past—the *Nakba*—also informs the future. It is imprinted on our consciousness. We live with the threat and fear of eviction, expulsion, dispossession and dispersion, as has happened to the nation in 1948 and also during the 1967 Arab Israeli war. Some Palestinians had become refugees twice (in 1948, then 1967), and others, three times, notably, Palestinian refugees from Syria.

This experience and consciousness led us to think about developing measures to assess health and well-being, which are relevant to the Palestinian experience. We first developed a measure called 'fears and threats'²⁰ which we later called a human insecurity measure. This measure assisted in explaining the Palestinian predicament and the effects of war on the survivors. With the help of Jennifer Leaning et al.'s conceptualization of human security focusing on home, community and a sense of the future²¹ which happened to correspond to the items in the fears and threats scale we had developed based on initial field work, we adjusted this scale to create a human insecurity measure related to exposure to the violence of war and effects on health. We continued with humiliation and individual and collective exposure to violence where collective exposure, independently of individual exposure, was found to have negative health outcomes.²² We are currently developing other measures to assess the effects of war on health, before disease sets in, such as deprivation and uncertainty.

These observations raise some important questions. To begin with, recognizing that personal differences do exist, our experience indicates that context can play an important role in strengthening or weakening 'resilience', over the life course. It also indicates that the use of certain terms, as we sometimes find in the international literature, is problematic.

A study completed on a representative sample of adults from the Gaza Strip in 2015 following the 2014 Israeli onslaught²³ revealed that 56% of those surveyed reported that they suffered from deprivation. Of those, 53% reported feelings of deprivation due to Israeli occupation, 51% due to material deprivation, 48% due to the split between Fateh and Hamas, 39% due to Society's conservatism, 30% due to lack of work, 36% due to restrictions on movement to the West Bank, 35% restrictions on international travel, 27% due to lack of university education and 23% restrictions of movement in the Gaza Strip. Further analysis revealed that those who reported they were humanly insecure, deprived and generally suffering were 1.62, 1.73 and 1.64 times as likely to have been found with negative mental health, respectively.

Given that 'resilience' is understood as a defense mechanism, helping people to deal with adversity and imparts positive mental health effects,²⁴ it would seem reasonable to link the Gaza study's low mental health indicators with low resilience levels. Such results lead us to question the utility of concepts such as adaptation or coping which are attached to resilience building. To Palestinian survivors of war with no end in sight, adaptation is not a useful concept. Adaptation (in Arabic) means accepting and coping with the situation, without touching the root cause of problems. It is too accommodating, too passive and lacks a fundamental aspect of the Palestinian capacity to endure and resist 100 years of exposure to political violence.

Questions are also raised about the increasing importance of neuroscience research, reported as a major industry, with billions of dollars available for research,²⁵ to some extent separating itself from attention to politics, society and culture, and with biases and assumption in its approach. The question here is not about throwing the baby with the bath-water. It is about the limitations of this microscopic view of issues related to health and wellbeing which can end up blaming persons for the presence of socially and politically constructed health and other problems. This approach can also end up replacing justice—the root cause of many health problems especially in war- and conflict-affected zones—with medications and one to one therapies which are often not very useful, can waste needed resources, and are sometimes harmful.

Our experience also indicates that the use of some dichotomies, as we sometimes find in the international literature, or when employed by humanitarian aid, is problematic. Take for example the issue of risky versus adaptive behaviors.²⁶ Sometimes risky behaviors are about 'adaptation' to extreme and traumatic circumstances. In our context, young people reaching the Israeli army checkpoints to protest or even throw stones may well be seen as 'risky behavior' by some. Yet this behavior can offset their fury for having been politically (and these days, economically and socially) violated and humiliated, which, if not addressed through some sort of resistance and response, can lead to (and has done so) more 'risky behaviors'.

On the whole, we think that the notion of capacity to endure and resist is more applicable to or more explanatory than 'resilience' given our situation and our mindset. We think of it as a combination of agency, normalizing the abnormal, social support and social solidarity, the notion of *Sumud* (sticking to the land), the moral imperative being ours and the strength and power we draw from knowing that we are seeking justice for ourselves, our families and our nation. All are part of what constitutes 'resilience' in the Palestinian setting.

This capacity to endure and resist is not linear, with cause effect characteristics, and does not exclude feelings of distress, low life quality and feelings of humiliation.^{27,28} In other words, this capacity to endure and resist is both protective and frustrating at the same time.

In any event, the concept of ‘resilience’ as noted in the international literature is far from clear since there is no consensus on what is meant by ‘resilience’,^{29–31} nor how to measure it.²⁴ In addition, the various conceptualizations of resilience cannot be applied to all contexts. They ignore the key component of communal care and support, the collectivity of exposure to violation and also the collectivity of the healing process. This is why international and local organizations providing care with an over-emphasis on individualized interventions which overlook the presence and workings of collective ‘resilience’ simply fail. They fail to build on existing social capital and social solidarity within communities. They fail to build on already existing capacities among persons within groups. And sometimes, as we have witnessed, they also do harm.

Foucault has once noted that, to conduct a critique, there is a need to include in the critique what he called disqualified or subjugated knowledge.³² The knowledge that Palestinians (and surely other excluded groups) have accumulated over time combines life experiences and scientific research, reframes issues and redefines concepts in ways that are compatible with their realities. Such knowledge has for long been placed in the category of disqualified. Alternatively, Palestinian knowledge has also been subjugated to the production of knowledge in western countries.

This is why there is a need for a universal effort to try to understand what ‘resilience’ is about in context, given that understanding of this concept is still inadequate and the tools used to measure resilience varied²⁴ with limited ability to compare findings. Such understanding must include subjugated and or disqualified knowledge. As importantly, there is a need to raise the question of the usefulness of this concept for appreciating what happens to people in wars and conflict and how to assist them. From our perspective, it does not make sense to offer humanitarian aid, alleviate daily suffering and support Palestinian resilience so that they can cope, adapt and accept unacceptable conditions without also calling for justice to Palestinians. While justice may take long to be achieved, the least that is needed is combining support to Palestinians in their daily life plight, while advocating for justice, and assisting them in resisting injustice at the same time. This recognition of injustice and working towards its removal is a key component of ‘resilience’ building in the Palestinian and other contexts of injustice worldwide.

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