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"Traumatic Experiences of the Catastrophe –Nakba– after 72 Years as Perceived by the First Generation"

"Experiencias Traumáticas De La Catástrofe –Nakba– Después De 72 Años Percibidas Por La Primera Generación"

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Traumatic Experiences of the Catastrophe –Nakba– after 72 Years as Perceived by the First Generation

EXPERIENCIAS TRAUMÁTICAS DE LA CATÁSTROFE -NAKBA- DESPUÉS DE 72 AÑOS PERCIBIDAS POR LA PRIMERA GENERACIÓN

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Dedication

To the land where the tears of the mothers of the martyrs and the prisoners are poured

To the holy and blessed land... To the land of martyrs and prisoners... The land of olive, grapes, and fig trees... The land of sad orange trees...

Palestine...

To all the men and women who have re-written history with love and blood.

To every refugee who dreams of returning to his usurped homeland, and cannot forgot the right...

To my cherished father, mother, and brothers...

To my wife Amal, and son Adam

To them all and to you, I dedicate this dissertation.

Iyad Khamaysa

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For the memory of the Palestinian refugees who fought for their rights during the al-Nakba events......

Completing a doctoral dissertation is an impressive achievement in anyone's life. Through completing this international scientific study among the first generation of Palestinian refugees after 72 years, I am bringing to life the urgency of recognizing the oppressed voices of the Palestinian refugee community that can provoke and promote scholars to work towards social justice in Palestine.

I would like to extend my deepest thanks and appreciation to Professor Francisco Entrena Durán for his inspiration, encouragement, wisdom, and understanding in helping me get this thesis off the ground and completed. His high energy and motivating presence is a blessing for students, especially for those who are coming from vulnerable societies. The student would like to thank Dr. Francisco Javier Durán Ruiz and Dr. Bassam Banat for their helpful advice on various technical issues regarding my proposal and thesis.

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Abstract

The current dissertation aims to investigate the traumatic experiences of the Nakba as perceived by the first generation. The study approached literature as a multi-dimensional phenomenon, which tackled both theoretical and empirical research. The importance of the study is that it is the first topic, which proposes trauma among the first generation of Palestinian refugees and with large sample size, covering all refugee camps in the Palestinian territories following 72 years after the Nakba. The study will be a vital reference for psychologists and sociologists in general and those interested in refugee memory narratives and the impact of trauma on individuals (i.e., those interested in the Palestinian cause) in particular. To achieve this end, the study adopted the descriptive approach using the quantitative questionnaire design method, which is appropriate to the research and provides in-depth data in the narratives of those who experienced the traumatic events in the Palestinian context. The target population consisted of 12182, the first generation of Palestinian refugees residing in the West Bank and Gaza Strip refugee camps in 2020. The overall sample was constituted of 1365 the first generation of Palestinian refugees (539 males and 826 females) selected in a stratified method, according to gender, region, and camps.

Traumatic experiences of the Nakba were assessed using an index of a 46-item scale of Checklist of Traumatic Experiences (CTE), with international measurement standards; it was suitable as to psychometric properties, transcultural validity, and conciseness of previous use in refugee populations. The researcher approached participants in refugee camps in the West Bank and Gaza Strip and asked them to complete the questionnaire. However, interviews with older persons aged 75 and above were conducted in their homes inside the camps. Data were analyzed using the Statistical Package for Social Sciences (SPSS-20).

The findings reveal that the variables of gender, religion degree, social status, number of children, education level, and age are significant predictors of the traumatic experiences of the Nakba as perceived by the first generation. Moreover, the study reveals that there is a negative correlation between the number of children and traumatic experiences. Besides, there is a positive correlation between age and traumatic experiences. There are differences

in the traumatic experiences of the Nakba as perceived by the first generation according to gender and the region. Besides, there are differences in the traumatic experiences of the Nakba as perceived by the first generation according to the region and place of residence. Furthermore, there are statistically significant differences in the traumatic experiences of the Nakba as perceived by the first generation according to gender and religion degree. There are statistically significant differences in the degree of traumatic experiences of the Nakba as perceived by the first generation compared to the degree of traumatic experiences among Palestinian refugees. Furthermore, there are no significant differences in the traumatic experiences of the region. There are no statistically significant differences in the traumatic experiences of the Nakba perceived by the first generation according to gender and education level. Their narratives refer to many traumatic experiences, including arrest and humiliation, being stuck in camps and diaspora, helplessness, anxiety and fear, insecurity and uncertainty, death and mourning, loss of dignity and the right to return, and loss of everything (land, human, properties, dream of the return, identity, and dignity).

In light of the study results and the discussion, the study recommends demanding international organizations to pressure Israel to release information about Palestinians missing since and after the Nakba, both those who have been deported by Israel to other countries, and those who have been killed and buried in mass graves or cemeteries of numbers for its tragic effects on the life of their families in particular, and Palestinians in general. Further research is essential to expand the understanding of the collective memory of trauma of the Nakba among Palestinian refugees in general within different methodological contexts and within determinants in the Palestinian context. More research is needed on traumatic experiences among Palestinian generations and tracking of subsequent traumas. It is also recommended a comparative study of the traumatic experiences of the Nakba among first and second-generation forcibly displaced in the diaspora. As well, perceived effectiveness of coping strategies and manage stress, especially when faced with several tragic events.

Resumen

La presente disertación pretende investigar las experiencias traumáticas de la Nakba tal y como las percibe la primera generación. El estudio aborda la literatura como un fenómeno multidimensional, que aborda tanto la investigación teórica como la empírica. La importancia del estudio radica en que es el primer tema, que propone el trauma en los refugiados de mayor edad (primera generación) y con un gran tamaño de muestra, que abarca todos los campos de refugiados en los territorios palestinos después de 72 años de la Nakba. El estudio será una referencia importante para los psicólogos y sociólogos en general, así como para los interesados en las narrativas de la memoria de los refugiados y el impacto del trauma en los individuos (es decir, los interesados en la causa palestina) en particular. Para lograr este fin, el estudio adoptó el enfoque descriptivo utilizando el método de diseño de cuestionario cuantitativo, que es apropiado para la investigación y proporciona datos en profundidad en las narrativas de quienes experimentaron los eventos traumáticos en el contexto palestino. La población objetivo consistió en 12182 refugiados palestinos de edad avanzada que residían en los campos de refugiados de Cisjordania y la Franja de Gaza en 2020. La muestra total estaba constituida por 1365 mayores (539 hombres y 826 mujeres) seleccionados con un método estratificado, según el género, la región y los campamentos.

Las experiencias traumáticas de la Nakba se evaluaron utilizando un índice de una escala de 46 ítems de la Lista de Experiencias Traumáticas (CTE), con estándares de medición internacionales; era adecuada en cuanto a propiedades psicométricas, validez transcultural y concisión de uso previo en poblaciones de refugiados. El investigador se dirigió a los participantes en los campos de refugiados de Cisjordania y la Franja de Gaza y les pidió que completaran el cuestionario. Sin embargo, las entrevistas con las personas mayores de 75 años se realizaron en sus hogares dentro de los campamentos. Los datos recogidos fueron tratados con el SPSS-20 (Statistical Package for Social Sciences).

Los resultados revelan que las variables de género, grado de religión, estatus social, número de hijos, nivel educativo y edad son predictores significativos de las experiencias traumáticas de la Nakba percibidas por la primera generación. Además, el estudio revela que existe una correlación negativa entre el número de hijos y las experiencias traumáticas.

Además, existe una correlación positiva entre la edad y las experiencias traumáticas. Existen diferencias en las experiencias traumáticas de la Nakba percibidas por la primera generación según el género y la región. Además, hay diferencias en las experiencias traumáticas de la Nakba percibidas por la primera generación según la región y el lugar de residencia. Además, existen diferencias estadísticamente significativas en las experiencias traumáticas de la Nakba percibidas por la primera generación según el género y el grado de religión. Existen diferencias estadísticamente significativas en el grado de experiencias traumáticas de la Nakba percibidas por la primera generación en comparación con el grado de experiencias traumáticas entre los refugiados palestinos. Además, no hay diferencias significativas en las experiencias traumáticas de los años de la Nakba percibidas por la primera generación según la región. No hay diferencias estadísticamente significativas en las experiencias traumáticas de la Nakba percibidas por la primera generación según el género y el nivel educativo. Sus relatos hacen referencia a muchas experiencias traumáticas, como la detención y la humillación, el estar atrapados en campos y en la diáspora, la impotencia, la ansiedad y el miedo, la inseguridad y la incertidumbre, la muerte y el luto, la pérdida de la dignidad y del derecho al retorno, y la pérdida de todo (tierra, personas, propiedades, sueño del retorno, identidad y dignidad).

Basándose en los resultados del estudio y en el debate, el estudio recomienda exigir a las organizaciones internacionales que presionen a Israel para que haga pública la información sobre los palestinos desaparecidos desde y después de la Nakba, tanto los que han sido deportados por Israel a otros países, como los que han sido asesinados y enterrados en fosas comunes o cementerios de cifras por sus trágicos efectos en la vida de sus familias en particular, y de los palestinos en general. Es esencial seguir investigando para ampliar la comprensión de la memoria colectiva del trauma de la Nakba entre los refugiados palestinos en general dentro de diferentes contextos metodológicos y dentro de los determinantes en el contexto palestino. Se necesita más investigación sobre las experiencias traumáticas de la Nakba entre las generaciones palestinas y el seguimiento de los traumas posteriores. También se recomienda un estudio comparativo de las experiencias traumáticas de la Nakba entre la primera y la segunda generación de desplazados forzosos en la diáspora. Así como la eficacia percibida de las estrategias de afrontamiento y gestión del estrés, especialmente cuando se enfrentan a eventos trágicos

Chapter One

1 Introduction and rationale

1.1 In Search of the refugees' traumatic experience

Dupuy and Rustad (2018) have indicated that armed conflict increases worldwide, like in Palestine, Syria, Afghanistan, and Iraq. Palestinian people living in war zones are at a high risk of developing post-traumatic stress and other emotional disorders. However, little is known about the effects of traumatic events during war and occupation (Thabet et al., 2002). Recent events in the Sheikh Jarrah neighborhood of Jerusalem and the war in the Gaza Strip in May 2021 have created fear, anger, and frustration among people inside and outside the Palestinian territories. The recent wars' toll of at least 232 martyrs and 1900 injured in the Gaza Strip, 67 children were martyred warrants attention (Palestinian Ministry of Health, 2021; Tanous, 2021).

Since 1948, Palestinians have suffered from frequent episodes of war and conflict, which have occurred roughly every seven to ten years. Therefore, Palestinians live under severe conditions with the sense that every nine years, there is a war or an Intifada (Uprising), compounded with an ongoing sense of oppression caused by the occupation (UNRWA, 2007). Moreover, Palestinian refugees have increased from one million in 1950 to more than 13.7 million in 2020 (PCBS, 2020). Palestinian refugees in the Gaza Strip, who make up about two-thirds of the population, are in difficult economic and political conditions.

During the Nakba, Palestinian refugees experienced many stress factors, including extreme violence, massacres, and loss of relatives, sons, homes, and properties. They were uprooted from their villages and exposed to numerous traumatic loss experiences. They suffered significant losses in family members and personal resources, scattered in camps in Palestine and beyond, and separated from family and community relations. The economic, social, and existential dilemmas led to hopelessness, helplessness, and grief (Abu Hija, 2018).

Palestinian refugees experience various kinds of stress associated with the occupation. Punamäki (1986) showed that the prior experiences caused by Israeli forces lead to more stress than the daily life problems among the Palestinian population. 77% of the first generation of Palestinian refugees reported going through traumatic experiences (Dayyeh et al., 2018); these experience often leads to many mental health problems, including fear, anxiety, withdrawal, depression, guilt, despair, grief, PTSD, hopelessness, anger, psychiatric symptoms. Also, there are problems in the family, work, marital relationships, and adaptation. Life within refugee camps has its own set of issues, including a poor and crowded, lack of health and recreational resources, uncertainty, sense of loss, powerlessness, helplessness, distrust, over-dependency, social disintegration, crime, vulnerability, and violence (Marsella et al., 1994; Brewin et al., 2000; Banat, 2004; Khamaysa, 2012).

The experiences of refugees who have been exposed to traumatic events are often the first to be given attention when it comes to gaining information or data on the topic, especially if these are in line with dominant political violence, the culture that reflects right of return, and enhance the collective memory that related to the 1948 war. The culture plays a vital role in choosing the forms of transmission of memory through Palestinian generations, commemorating their displacement and strengthening this process. Older refugees may die, but sons and descents will never forget. Refugees living in diaspora camps were also denied the right to return to their lands from which they had been displaced in 1948, but if they tried, they would be killed or arrested and forcibly evicted. Palestinian culture has preserved collective memory made it more profound.

I wondered how refugees who have experienced traumatic events felt about evictions. Their experiences and stories were conspicuously absent from the dominant literature. Yet, I suspect they might shed considerable light on the ongoing hardship. Recently, evictions in Jerusalem in the neighborhood of Sheikh Jarrah led to military confrontation, resulting in a large number of martyrs and injuries, internal migration, and house demolitions in the West Bank and Gaza Strip.

The primary rationales for conducting this study: *Firstly*, many Palestinians go through chronic and frequented traumatic experiences due to the Israeli occupation, in a more straightforward way (incursions, martyrs, field executions, bombing by aircraft, using Palestinian cities and villages as training centers for the Israeli army, transforming homes into military sites (barracks), breaking furniture of homes, arrests, stealing Palestinian martyrs' organs, the use of prisoners and Palestinians to experiment with weapons and

drugs, the threat of rape, and give their homes to Jewish settlers, etc.). The Palestinians describe life as unbearable. *Secondly*, I visited the East Tennessee State University in the College of Nursing as a visiting researcher for six months to participate and acquire the best practices in Trauma-Informed Care (TIC). To understand and consider the pervasive nature of trauma and promote environments of healing and recovery rather than practices and services that may inadvertently re-traumatize. Also, I took part in a conference at East Tennessee State University in cooperation with Ballad Health Organization in Johnson City, TN, USA, under the title "Addressing Adverse Childhood Experiences Summit: A Call to Action." The conference referred to the nature of Palestinian trauma. It emphasized the importance of conducting studies on refugees in the Palestinian camps, specifically in Jordan, Syria, Lebanon, and Palestine, studying various aspects, including legal and political.

I do not mention the term "Palestine or Palestinians" in the study title, regardless of whether I mentioned it in the thesis content. According to an algorithm developed by American companies at an Israeli government demand, Google, YouTube, and Facebook banned Palestinian content, including the following words (Palestine, Palestinian refugees, resistance, martyr, displacement, etc.). These terms are prohibited from circulating within what Israel claims "anti-Semitism or anti-Israel."

Google Facebook and YouTube announced that the following situation that started in Sheikh Jarrah and led to the aerial bombardment in Gaza in 2021 had led it to develop an Israel crisis center to remove the Palestinian content (Alimardani and Elswah, 2021). In 2016, Israel decreed a strict new counter-terrorism law that broadened the definition of incitation to include any demonstration of "solidarity" with the Palestinian people. Because of the law's criminalized public praise, support, or even display of flags associated with Palestinian solidarity or independence movements. The law also authorized the Israeli military to arrest Palestinians for their online content—even in Areas A and B of the West Bank, under the control of the PA's, as part of the Oslo Accords peace agreement (Brooking and Campbell, 2021). The Israeli Cyber Unit has indicated in the past that 85% of their government requests to "remove content deemed harmful or dangerous" from platforms such as Facebook, Google, and Twitter are accepted (Alimardani and Elswah, 2021). It later became known as "digital apartheid."

This research project developed out of my ongoing interest in traumatic loss experiences among the families of Palestinian suicide martyrs, in particular, in the impact of loss experiences on the levels of psychosocial, personal, and financial adaptation. This interest developed because I became aware that the available literature on the traumatic experiences of the Nakba among the first generation of Palestinian refugees, together with formal and informal reports with refugees, were inadequate with the dominant global discourses on Immigration stress and exposure to traumatic life experiences. Thus, I determined that the focus of this research would be to investigate and analyze the traumatic experiences of the Nakba after 72 years, as perceived by the first generation, with a particular emphasis on the effects of painful stories during the Nakba still affects their memory.

In trying to understand the consequences of traumatic experiences (TE), scholars concerning PTSD consequences of organized political violence have lately focused mainly on refugees. Besides the very relevant studies on refugees, they have emphasized the importance of research on refugee victims of violence and still living in their countries of origin (Basoglu et al., 1994) as the only way to separate and examine the effects of organized violence between those living in their places of origin and those living in exile.

Recently, awareness of mental disorders has increased after four wars in the Gaza Strip, evictions, home demolitions, and political detention. Long-term consequences such as post-traumatic disorders, depression, anxiety, and dissociation have been found (Bichescu et al., 2005). Najib et al. (2015) noted that painful experiences were prevalent among the mothers of Palestinian prisoners; 72.3% reported trauma. They continue to endure most of the pain due to the absence of their detained sons.

In this case, therefore, I determined to interview the first generation of Palestinian refugees about their traumatic experiences, as elderly who have experienced awful events, to provide particular and differentiated insight into the painful experiences of such refugees as a group in camps. As a result, the specific aims of this study were firstly to elicit narratives of the traumatic experiences of the Nakba events. As mentioned earlier, there is a considerable body of literature on PTSD among emigrants but in exile. The current thesis supports the importance of research on victims of violence and their traumatic experiences who have continued to live in their countries of origin. The outcomes offer an understanding of specificity, which can help to change the current "status" regarding PTSD, lack of medical resources, traumatic narratives, and right of return.

The following research aims were developed as a tool to identify the traumatic experiences among the first generation of the Nakba, the major focus of this current research:

- 1. Identifying the total degree of traumatic experiences of the Nakba after 72 years as perceived by the first generation.
- 2. Identifying the impact of independent study variables with traumatic experiences of the Nakba after 72 years as perceived by the first generation. In addition, clarify the demographic differences in traumatic experiences of the Nakba after 72 years.
- 3. Exploring the traumatic experiences indicators among the first-generation.
- 4. Identifying the factors that affect their memories (The memory that never dies).

1.2 The Experiences of the first generation of Palestinian refugees who have experienced the Nakba events

It needs to be clarified that the focus of this research on the first generation of Palestinian refugees who suffered traumatic experiences from the Nakba events have become embedded in the memory of their painful stories and concerns about their refugee status. They also continue to live in non-viable Palestinian camps. At the same time, these experiences of refugees related to culture and organized political violence, evictions, and the right to return.

1.3 The Collective memory of trauma among Palestinian refugees

The collective memory of trauma promotes the preservation of group existence in a symbolic system, such as the right of return in symbolism (key of return) to enhance the collective self-transmitted across generations and diminishes existential threat. Moreover, a sense of historical collective self-increases group cohesion and group identification, creating existential meaning and reducing the threat. The deep sense of injustice caused by

collective trauma perpetuates the memory of the trauma (Nakba as 'traumatic' memories) and the reluctance to close the door to the past, making collective trauma the focus of group identity and the lens through which group members understand their social environment.

1.4 Research related to the topic of doctoral thesis

The researcher has carried out several studies related to the current research topic, which are as follows:

1.4.1 Articles Published:

1.4.1.1 Traumatic Loss Experiences and Social Adaptation among the Families of Palestinian Suicide Martyrs (Istishhadiyin). International Humanities Studies, 1(1), 1-3, 2013. (Arab American Encyclopedia - AAE – USA)

The current study aims at identifying the traumatic loss experiences and social adaptation among the families of Palestinian suicide martyrs (Istishhadiyin). The findings of the study have revealed statistically significant differences in the traumatic loss experience among the families of Palestinian suicide martyrs according to gender, locality, qualification, relationship to the martyr, refugee status, year of martyrdom, exposure of martyr to Israeli violence and reception of martyr body. The study reveals that there is a positive correlation between age and the traumatic loss experiences. Moreover, the study shows that there are statistical significance differences in the social adaptation among the families of Palestinian suicide martyrs attributable to the following variables: gender, locality, qualification, family relationship to the martyr, type of family, year of martyrdom, birth rank in the family, exposure of martyr to the Israeli violence and the reception of the martyr body. In addition, findings demonstrated that there is a positive correlation between age and the social adaptation. Moreover, results have shown that there are statistical significance differences in support among the families of Palestinian suicide martyrs according to: gender, place of residence, locality, relationship to the martyr, refugee status, type of family, year of martyrdom, birth rank in the family and reception of martyr body. Besides, the study shows that there is a negative correlation between the traumatic loss experiences among the families of Palestinian suicide martyrs and the level of social adaptation, as well as a negative correlation between the level of support with its different types and the experiences of traumatic loss among the families of Palestinian suicide martyrs. The study ends up with several recommendations, among which the most prominent is the necessity of planning programmed of psychological, social and economic support to activate their role in society in the various activities, and to demand international organizations and governments to intervene immediately to release the bodies of the martyrs detained in Israel for its traumatic effects on the life of their families in particular, and on the life of the Palestinians in general.

One motivation that led me to study the traumatic loss experiences and social adaptation among the families of Palestinian suicide martyrs (Istishhadiyin), when I read one of the doctoral research in the Department of Sociology at the University of Granada in 2010, under the supervision of Professor Margarita Latiesa Rodríguez. I took one recommendation of the doctoral thesis by studying the traumatic loss experiences and social adaptation among the families of Palestinian suicide martyrs (Istishhadiyin) because science is cumulative. I felt that the reality of those families was painful and still so, especially since I was familiar with the situation in Palestine, some of whom lived in camps without infrastructure, psychological, social, economic, medical, and recreational services. Each Palestinian family has been exposed to the case of arrest, injury, or even loss of one or more of its members, and the traumatic experiences of loss (martyrdom) have left their adverse effects on psychological, behavioral, and social aspects. The shock and impact of the notion of martyrdom on families go beyond the limits of the usual human experience. The tragic loss experiences of Palestinian families occur spontaneously and repeatedly through the event's revival and may extend over many years. As a result of the trauma suffered by Palestinian families, they deny the martyrdom of their children while keeping their images and constantly washing clothes, talking about the martyr, being moved to hear the news of the martyrdom of another person, and that frequent loss in the same family has more difficult effects. The preparedness to overcome the crisis is weak, as these people appear in a state of weak resistance, usually the mother and father, as they are among the most affected. It is concentrated in difficulty returning to a daily routine of life activities and entering a phase interaction of sadness, anxiety, and physical illness. In this context, the mother of a martyr says:

"When my son was martyred and my other sons were arrested, and since four years we live and die hundred times every day because of the Israeli forces who we are going and coming to us. Sometimes they come and sleep in our house waiting for my sons to come back home. Every time they destroy and break our house furniture. Our situation is very difficult, and today four of my sons are in the prison."

The Palestinian refugee suicide martyr (Istishhady) Ali Ja'ara became 24 years old, He was a son of one of the families whom the Jews expelled in 1948 from their village of Dir Iban Hebron district. His family is well known for its history of resistance and struggle in the ranks of Fateh Movement; all his uncles were put in Israeli prisons for long sentences; his aunt Sarah was imprisoned for ten years on charges of stabbing an Israeli soldier (Banat 2010; Khamaysa, 2012).

The study findings revealed the forms of Israeli violence against Palestinian suicide martyrs (Istishhadiyin), as follows: home raids, insults, swearing, detention, injury, martyrdom, house demolition, and deportation, etc. Moreover, it also indicated the majority (55.3%) of the Palestinian suicide martyrs (Istishhadiyin) were refugees while 44.7% were non-refugees (Khamaysa, 2012). Hence the idea of conducting studies on Palestinian refugees, specifically the first generation of Palestinian refugees, due to the researcher discovering that the majority of the families of the Palestinian suicide martyrs (Istishhadiyin) were refugees. When I met their parents, family members, and friends, I realized the difficulty of repeated loss from the Nakba until the martyrdom and arrest of their sons and the demolishing of homes, lands, and properties.

1.4.1.2 The Effect of Parental Deprivation at the Level of Self-Esteem, and Life Orientation among Palestinian Teenagers. Applied Research Journal, 1(3), 2015.

The current study aims at identifying the effect of parental deprivation on the level of selfesteem and life orientation among teenagers in Palestinian society. The study showed a reversal of the statistical significance between the level of deprivation in a teenager's (emotional deprivation, economic deprivation, psychological and social deprivation) of the father's absence, self-esteem, and life orientation. Every time they feel deprived of their father's absence, they have less self-esteem and life orientation. In addition, the study showed statistically significant differences in the level of sensory deprivation (emotional deprivation, economic deprivation, psychological and social deprivation) of teenagers deprived of the father's absence due to (Martyrdom, natural death, imprisonment, divorce, travel, divorce, and chronic illness); The study revealed there are statistically significant differences in the degree of sensory deprivation of parental absence of adolescents according to study variables (gender, age, birth rank in the family, place of present residence, place of birth, and reason of deprivation). The finding also showed there are statistically significant differences in the level of self-esteem and life orientation of teenagers deprived of the father's absence according to study variables (sex, place of birth, current residence, years of deprivation); whereas, there are no statistically significant differences in self-esteem and life orientation among teenagers who are deprived of a father's presence according to the study variable (age). The article ends up with several recommendations, among which the most prominent are: support and improve the living conditions of teenagers suffering from parental deprivation, provide their psychological, social, and economic needs to improve their living conditions, promote social adaptation, self-confidence, and life orientation, especially females, to increase their sense of safety and stability, which has a positive impact on self-esteem and life orientation.

The majority of participants in the study were teenagers who lost their families because of martyrdom. So I drew up a comparison according to the cause of parental deprivation. The most painful experience of teenagers has been the imprisonment or martyrdom of their parents and living in Palestinian camps. Outcomes gave me a strong indication for studies on refugees and their quality of life. It is also evidence of the traumatic loss experience, whether by martyrdom or arrest.

1.4.1.3 Tribal Intolerance and Revenge among Palestinian Universities' Students. International Humanities Studies, 5(3), 2018. (Arab American Encyclopedia - AAE – USA).

The present study examined the tribal intolerance and revenge among Palestinian universities' students. The data was statistically analyzed using Statistical Package for Social Sciences (SPSS). Palestinian students had a moderate level of tribal intolerance and

revenge. Of the students surveyed, 62.2% revealed tribal intolerance and revenge. The results demonstrated significant statistical differences in the tribal intolerance and revenge scores among the students according to their gender and place of residency. The grade point average (GPA) emerged as a significant predictor of the tribal intolerance and revenge. The implications of the findings for practice were also highlighted. Moreover, the study investigated demographic breakdown of tribal intolerance and revenge among Palestinian students with the aim of identifying differences. The findings revealed that age, university, and academic year do not signify any significant difference. However, it was found that gender and place of residency are significant variables. In relation to gender, the differences favored males (M 3.71 SD 0.58) compared to females (M 3.27 SD 0.43): T. test value was (4.5495 P=0.000). As for place of residency, the differences favored camp students (M 3.73 SD 0.37): F-value value was (9.682 P=0.000). Based on the findings of this study, the following recommendations were made: There is a need to address the Palestinian curriculum with tolerance concept as an important component of the society. Preparing programs to combat intolerant trends and make efforts in changing them or preventing them through various media. Creating workshops, conferences, and meetings to urge students to embrace the tolerance culture and democracy, and reject the culture of extremism and intolerance in all its forms and types. Further studies to establish a clearer understanding of tribal intolerance and revenge among Palestinian students using the qualitative research design should be conducted.

The study aimed to identify the phenomenon of tribal intolerance and revenge among Palestinian university students. The results indicated that the students who live in the Palestinian camps have intolerance to the tribe and family and a rush to take revenge for the family's sake. This leads to the fact that there must be a psychological, social, and economic understanding of the conditions of the people in the camps. The findings of the study revealed that our culture moves toward revenge instead of tolerating it. The Palestinian society has conservative customs and traditions, male patriarchal dominance, and social upbringing based on gender inequality. Patriarchal ideology is deeply rooted in Palestinian society, where the notions of father and brother are prevalent. Since this culture is commonplace in the Palestinian camps, there are cases of killing and wounding, and this is one of the traumatic experiences that are added to the rest of the painful experiences of the displaced Palestinian families.

1.4.1.4 Quality Of Life among Elderly Syrian Refugees in Jordan: Quantitative Study. Dirasat: Human and Social Sciences (Accepted for Publication 2022, forthcoming).

Quality of life (QOL) is an important measure in the life of older refugees, reflecting health and well-being. Maintaining an appropriate QOL score is important, especially with increased proportion of older adults in society. Since the beginning of the Syrian crisis, Syrians sought refuge to neighborhood countries, including Jordan, Turkey, and Lebanon. Many aspects of Syrian refugees' lives have been affected financially, socially, and physically; therefore affecting the overall quality of their lives. As a result, we focused our study on the evaluation of the QOL of Syrian refugees residing in Jordan, and tackled topic as a multi-dimensional phenomenon (Life overall, health, social relationships, independence, control over life, freedom, home and neighborhood, psychological and emotional, well-being, financial circumstances, and leisure and activities).

This study used quantitative methods and survey design with 150 elderly Syrian refugees (above 60 years old). The data was analyzed by using descriptive statistics, one-way analysis variance, factor analysis and chi square. The study revealed that there is statistical significant differences in QOL among elderly Syrian refuges according to the level of education in favor of those with higher level of education, the results also indicates that there is medium level of overall quality of life among males and females elderly, with higher level of QOL. In conclusion, this study provides insights about factors associated with good QOL among elderly Syrian refugees. Understanding QOL and its predictors is becoming crucial in order to deal with the problems of the aging generation of refugees from multiple stakeholders including service providers, caregivers, and policy makers. The familiarity with these determinants would contribute to initiate QOL improvement programs. Responding to the needs of elderly refugees and migrants, must be integrated into all dimensions of ageing policies and practices across the Middle East, specifically in Jordan which received the second largest number of refugees per capita after Lebanon. Relevant areas for policy-making include healthy ageing over the life-course, supportive

relationships and networks, people-centered health and long-term care services, and strengthening the evidence base and research. Generalized assumptions gleaned from studies of refugees from multiple countries and life stages may lead to incorrect assumptions about specific groups. A call has also been made for qualitative studies or mixed methods studies to provide more in-depth insight into the lived experiences, struggles and strengths of specific refugee groups.

Many Palestinian refugees have been displaced from camps in Syria to Jordan because of the war. It's also important to realize that many of these people have encountered a sudden change in their lives. The traumatic experiences and sudden shift in lifestyle came with financial, social, and physical burdens to many refugee families. The lives of the first generation of the Palestinian refugees in Palestinian camps and Syrian refugees before their escape and refuge to neighboring countries can be seen as below average and or just acceptable, and many of the first generation refugees relied on the social aspects of their lives with other individuals in their area to survive.

Palestinian and Syrian refugees have been subjected to the violence of armed movements that have stormed the camps and killed many people in Syria. The Syrian Government besieged the Palestinian camps and Syrian cities and bombed them with aircraft, leaving nearly a million people dead. For the Palestinians, and now they were displaced by the Syrian war. The trauma of the Palestinian refugees is ongoing, and its effects crush their psychological and social structure. Moreover, the general quality of life of Syrian and Palestinian refugees was not that acceptable. Thus this determines and gives an indicator to the quality of life experienced by the elderly as well. So when older people and their families escaped the war, and in some cases, the family separated to different regions, the elderly were ignored and were stripped of their social life.

This is consistent with the painful stories of Palestinian refugees presented in the current study. The term "Syrian refugees" was included in the study without mentioning the Palestinians because of the agreement among researchers that since the refugees only hold Syrian documents; we have to place them among the Syrian refugees. Unfortunately, the Palestinian refugees do not have any official Palestinian identity documentation but evidence of their stay in the camps for monitoring and prosecution by the Syrian

Government. Palestinian refugees scored lower in life orientation than other participants. 1948 is an important date that is unerasable from the collective memory of Palestinians; in the same year, a country and its people vanished from both maps and dictionaries (Sanbar, 2001; Banat, Entrena-Durán, and Dayyeh, 2018; Banat, 2019). Commonalities between my PhD thesis and this article are the quantitative approach, descriptive statistics, and the age of the participants. The research and the article are closely and directly related, as the displacement of Syrians and Palestinians living in refugee camps in Syria is very similar to the exodus of 1948. The Palestinian refugees they went through painful and repeated experiences.

1.4.2 Articles in Processing

1.4.2.1 Life Orientation and Mental Health among Palestinian Refugees Living in Camps in the Occupied Palestinian Territories (Opt), 2022, Forthcoming.

To determine the prevalence of mental health problems among Palestinian refugees living in camps in the occupied Palestinian territories and examine the relationship between lifeorientation factors that influence self-conceptions. The model of quality of life determinants in the Palestinian context was used to clarify the study, developed by Giacaman et al. (2007). The study adopted the descriptive method using a quantitative questionnaire design approach, involving interviews with 125 Palestinian refugees living in facilities operated by UNRWA, which was used to collect data. Data collection tools included socio-demographic variables, the General Health Questionnaire-28, and the Life Orientation Test-Revised. 58.9% of the participants reported that pessimistically oriented in their life. 54% of Palestinian refugees living in camps suffer from moderate to severe mental health problems. The results also showed a high level of social dysfunction, a mild level of severe depression, an intermediate level of somatic symptoms, and anxiety and insomnia. Respondents have scored of mental health problems because of the pessimism and need further investigation. The result may help to understand the challenges of quality of life among the Palestinian refugees. However, potential life orientation and mental health can affect the well-being of refugees.

This study examined life orientation and mental health among Palestinian refugee camps. Psychological distress in terms of significant levels of pessimistic life orientation accompanied by symptoms of social dysfunction, depression, anxiety, and risk of having traumatic experiences is highly prevalent among participants in Palestinian refugee camps. It is higher among those living in Palestinian refugee camps in Gaza Strip.

The findings of the study showed that participants have a more pessimistic life orientation. Besides, refugees consider the Nakba painful traumatic, which affected their past and present and future. Pessimistic orientations fueled by political violence could increase the psychological problems through always exposure. Therefore, mental health problems could increase among refugees because of a lack of medical resources and treatments. Participants showed they live in harsh socioeconomic conditions in the camps due to poor quality of life, high population density, and inadequate basic infrastructure. They do not have the basic needs to live generally as other peoples, which may increase their suffering, cause the continuity of mental health problems because of reproduction of collective memory of the Nakba, and reflect the negative feelings on the daily life activities. That is troublesome, especially since symptoms can continue for a long time. The participants described symptoms as distressing because they interfered with activities of daily living or provoked cognitive and emotional responses.

The indicators and outcomes of the study call for the urgency of societal and medical efforts to reduce mental health problems, improve housing facilities, and psychosocial interventions to help them in camps. Based on the findings from the current study, a recommendation for future studies on refugee mental health is to describe the legal status of the participants in camps because the camp houses are on rented land and operated by UNRWA, and hope to return to their lands. Besides the Palestinian context in which the study takes place. In the same context, UNRWA (2020) emphasizes that refugees do not "own" the land on which they build their shelters, but they have the right to "use" the land only for residence. These factors might penetrate both the quality of life of refugees and the mental health symptom levels. Palestinian refugees living in camps lack the infrastructure and basic needs. Their suffering does not end but continuously with the daily

violations committed by the Israeli army, such as arrest, demolition of homes, lack of permits for humanitarian, and humiliation at military checkpoints.

1.4.2.2 Symbols of Collective Memory among Palestinian Refugees: Land, Body, Dream and the Key of Return, 2022, Forthcoming.

This article deals with the collective memory of the 1948 departure (Nakba exodus) by exploring the articulation of symbolic representations of the Palestinian encounter with the Zionist project and deepening research in the role of culture in picking the forms of transmission of memory through Palestinian generations, commemorating their displacement and strengthening this process. Older refugees may die, but their descents will never forget. Refugees, on the run, are denied the right to return to their ancestral regions, but if they try, they will be forcibly evicted. It is clear from memory preservation practices that a special day called "Earth Day" has contributed to the production of collective memory and made it deeper.

The study of collective memory highlights the importance of physical structures, such as martyrs' graves, in the continuity and production of collective memory. The martyr embodies the ideals he sacrificed, and his body remains the embodiment of those ideals after his death. It also contributes to memory formation through a physical form of moral authority rooted in Palestinian society's values, norms, and shared destiny. Consequently, the Palestinian refugees have a strong collective memory of the Nakba more than others and continue to hope for their return to their homeland.

1.4.3 Chapters Published:

1.4.3.1 The culture of martyrdom and the acts of suicide martyrdom in the Palestinian refugee camps: A study in the sociology of the body and the social psychology of martyrdom. Essays on Migration and Global Pandemic, Challenges and Reflections, 2022. Editorial Comares, ISSN: 978-84-1369-232-6.

The chapter covers the martyrdom and suicidal terrorism in history and religion, in both its sociological and psychological versions, as it relates to contemporary Palestinian resistance culture. However, martyrdom has been a component of Islam. In Palestinian camps, it has never previously been a major one. The rise of martyrdom culture inside the

society played a crucial role in moving suicide martyrs through the sympathetic social fabric. There has been a revival of sacrifice style that emphasizes the defense of the (land and people), bringing out themes of bodily sanctity, visions and will of the martyr, memorialization processes, previous events, and hagiography associated with the movements. Taking part in festivals and giving the martyrs' names to the newborns encouraged the desire for the Palestinian people and refugees to rush to martyrdom from an ideological perspective. Without discussing the fact that linking Palestinian martyrs (Istishhadiyin) to psychological, economic, social, and other motives for martyrdom is unreliable because this will make it social suicide.

1.4.3.2 The glorification of martyrdom and the acts of suicide martyrdom in the Palestinian refugee camps: A study in the sociology of the body and the social psychology of martyrdom. Minors, Migrants in Times of Pandemic, 2022. ISSN: 978-84-1369-233-3

This chapter assesses the depth of Palestinian life that glorifies the processions of martyrs and the revival of sacrifice style that emphasizes the defense of the (land and people). Palestinian society appears to all respect and appreciation for the martyr and his family through many activities by drawing the images on the walls and streets of the camps, writing poetry, preparing and participating in festivals, and giving the martyrs' names to the newborns. Forms of glorification of the martyrs encouraged to generate a desire for the Palestinian people and refugees to rush to martyrdom as symbols of the struggle for freedom, the makers of life, and the future for later generations until attainment of liberation and independence. An understanding theme (martyrs as social archetypes) in theories in the sociology of the body and social psychology of martyrdom will be the focus of this chapter.

This chapter deals with the glorification of Palestinian suicide bombings. The cause of Palestinian suicide bombers during the Al-Aqsa Intifada supported the idea that linking self-sacrifice with heroic reputation and national liberation, at the level of spirituality, individuality, and nationalism, helps produce volunteers for martyrdom. The religious and national frameworks of Palestinian movements go beyond glorification and manipulation of individual minds. They combine religious texts and historical narratives with rituals and

ceremonies to promote the glorification that generates martyrdom. Individuals are not inspired to commit suicide bombings because it is the optimal strategy, given the limits of political status or estimates (cost-benefit); the redemptive nature of self-sacrifice inspires them. The systematic hierarchy of motivations caused by glorification will not help us much at this point. The will of the martyrs and those who know them well shows how often the motivations are rooted in religion, nationalism, and the desire for revenge. This case shows that glorifications based on religious motives cannot simply be attributed to religious groups or glorifications based on national motives to national movements. Nationalist and Islamist factions have promoted and benefited from glorifying the legend of the martyred hero doing his duty to God, nation, land, and people.

1.4.4 The commonalities of culture, glorification of martyrdom, suicide martyrdom, and the collective memory of trauma among Palestinian refugee camps

Israel forcibly uprooted and expelled three-quarters of the Palestinian population between 1947 and 1949; they had become refugees in the neighboring Arab States, a situation called "Nakba trauma" by the Palestinians, which was rooted in collective memory and in which generations of refugees, especially those living in refugee camps, remained. Since then, it has strengthened Palestinian identity through resistance and the removal of the idea of displacement (Giacaman et al., 2009).

The culture of martyrdom is a pressure factor for all Palestinian families. There are many families with a history of struggle. These families are always on the lookout for arrest, assassination, imprisonment, or deportation outside the country. The moment of hearing the news about the martyrdom of their sons is an incredible experience. In this context, (Altawil and Neil, 2008) indicated that hearing heartbreaking news leads to an imbalance of the individual and the occurrence of psychological and behavioral disorders and the occurrence of psychological shock. It is also a state of the psychological pressure of an external source that exceeds the human ability to bear and return to a state of permanent balance.

The martyrological phenomenon depends on the living situation, culture, and traumatic experience, such as martyrdom, displacement, detention, humiliation, disability,

demolition of houses, bulldozing of land, construction of settlements, etc. The Palestinian community treated the martyrs when they died and their parents as evidence of honesty, decency, and material support full of glorification for their extraordinary memory. Glorification has made the culture of martyrdom a great slogan for everyone who has lost their way and seeks a diverse culture of nobility, strength, loyalty, patience, compassion, and compassion until the liberation of Palestine and the fulfillment of Palestinian hopes.

The Palestinian cultural context of the "Islamic renaissance" and the context of the "violent nationalist conflict" allow these appeals to resonate with the general public and potential martyrs (bombers). Finally, Palestinian culture is based on the desire for revenge that arises when individuals realize that members of their society are being traumatized or humiliated.

1.4.4.1 Why do Palestinian refugees want to remember the Nakba?

The historical memory of the collective trauma, from the Nakba to the present, with Palestinian national movements commemorating the tragic events of Nakba, Palestinian people remember all the massacres, deportations, and martyrs in Nakba with their names, ages, and places of residence. These memories of victimization may convey a negative image of the group's powerlessness and weakness. It reflected this in the return marches, the revival of Earth Day, placing martyrs' symbols, and the key to return on the doors of Palestinian camps to recall the event of the Nakba- to create the meaning of for their issue and remember the dream of returning to their homes and land.

The traumatic memory of trauma adapts to individuals and groups. The painful memory of trauma encourages consciousness that may promote present group survival and restore a sense of effectiveness. However, the memory of trauma enhances and serves the needs of individuals and groups far beyond its contribution to survival; it also makes an inherent existential threat to stimulate a desire to create meaning around the experience of extreme adversity. During produced of meaning-makes, they transfer the transgenerational collective memory as the self-transcendent historical identity that provides a sense of the ongoing relationship between past, present, and future group members (Kahn et al., 2017).

The Nakba and its symbols promote the collective self of the Palestinians, work on the cohesion of the social fabric, feel the importance of shared destiny and give the culture of society a firm commitment to Palestinian identity. Traumatic experiences of the Nakba events restore the sense of control and promote collective value, which will create meaning for suffering as symbols respected by Palestinian society, such as the symbol of the key to return and the graves of martyrs. Ordeal symbols enhance individual value because abandoning the memory of the Nakba is a very costly and repugnant existential threat. It is also socially unacceptable at the individual or collective level because renouncing the right of return and commemorating the Nakba means waiving the collective meaning of the right to return to their homes and lands. Therefore, the collective sense of participation preserves the trauma of the Nakba as a lesson from the past to the future.

1.4.4.2 Trauma is of martyrdom, and martyrdom creates the meaning of Nakba in Palestinian culture

The psychological definition of trauma in terms of severe death anxiety or confrontation with death is essential in understanding this phenomenon. Therefore, we must understand the relationship and role of death in collective trauma and its relationship to construct meaning for the Palestinian right to return to their property. There are motives behind the determination to perpetuate the memory of collective trauma, despite the painful effects that this memory has caused.

Martyrdom cannot be directly apprehended by simple scientific means; culture provides the essential means to understand the final frontier between our existence as living beings and the eventual end of that existence. Death is an unpleasant fact, but the consciousness of mortality is a social reality, not a biological one. The knowledge of death, its meaning, and value are socially constructed (Barley, 1997).

Consequently, the status of 'martyr' can be considered a posthumous title as a reward for those deemed worthy of the concept of martyrdom by the living, regardless of the deceased's attempts to control how they will be remembered beforehand (Gölz, 2019a). Meanwhile, the martyr is a relational figure of a society's delimiting work produced by

collective memory (Gölz, 2019b). Originally applied only to those who suffered for their religious beliefs, the term has come to be used concerning people killed for a political cause.

Martyr narratives are characterized by personal action, cruelty to the body, institutional execution, and often last words or actions that articulate the martyrs' responsibility to firmly held beliefs and identification with their subject. Sacrifice is a compelling story in Palestinian culture because of the high value placed on individual life (Durkheim, 1951). The martyr anecdote is interesting because it focuses on the image of an ordinary person willing to accept death and extreme pain, giving his body and his life for the strength of belief. The pain and fate at the hands of institutional resistance make the violence associated with the martyr's death and subsequent reputation function as a tool of authenticity for reputation agents and the public. Hence, the sacrifice of life has a resonance that it would not otherwise have (Klapp, 1954; Scarry, 1985; Puppi, 1991; Kleinman et al., 1994; Gossman 1997; Smith, 1997; Boyarin, 1999; Mulvihill et al., 1999; Glucklich, 2001; DeSoucey et al., 2008). Therefore, martyrdom is not simply a temporary and consuming need or conduct but is also known as a system of behavior and a functional multilateral model of good merit, which may be the primary behavior in social subsystems such as family, educational, political, etc. The cultural practices of society shape the social structure; because society needs the general consciousness, it means that it needs common values that act as a connecting and unifying base of components and result in the social correlation. It relates traumatic experiences to one's identity and memory; so, it will attempt self-preservation to adapt to trauma, especially in a situation of ongoing trauma, to serve as a survival mechanism. However, individual memory, collective memory, and identity served as a psychological defense mechanism.

1.5 Underlying Theoretical Framework

During this research, I became painfully aware that by investigating the experiences of refugees who have experienced traumatic events. I remember questioning myself how can they cope with all this psychological pain, the frequent loss of family members, property, camp conditions, and disease, it was apparent in painful narratives. As researchers, this is

an opportunity to expand the study of their psychological, social, and economic conditions and the impact of COVID- 19 on their future health conditions.

In the scientific community, it is culturally and scientifically acceptable- to use collective memory to illustrate the psychological reactions to a traumatic event that affect an entire society; it does not merely reflect a historical fact, the recollection of a painful event that occurred to a group of people. Hirschberger (2018) pointed that it represented the tragedy in the collective memory of the group. Like all forms of memory, it comprises a reproduction of the events and a continuing reconstruction of the trauma to make sense of it.

Exposure to traumatic incidents refers to experiencing or witnessing very traumatic experiences, overwhelming sudden or unexpected, often seen as damaging and extreme and involves some psychological or physical harm, such as natural disasters, serious incidents, war, and sexual violence (Stamm et al., 1996; Altawil et al., 2008). The pain and killing witnessed by the first generation do not end there; in fact, displacement accompanied refugees from their homes and ended up in a different geographical region, but their memory could not absorb this. For examples of traumatic events beyond human resilience include killing men in groups and forcing them to dig trenches and bury them there, As in the massacre Bi'na, Majd el Kuroum, Eilaboun massacres, shooting at their feet and over their heads in Abu Shusha, Lydda massacres and robbing women of Jewelry during the march, and preventing the return of the expelled refugees, killing them, poisoning wells, looting then demolishing houses, burning crops (Abu Sitta et al., 2020).

The traumatic experience of Palestinians in general and refugees, in particular, is unique in pain and continuity. The factors that contribute to the increase in mental disorders are multiple and do not end with the end of the displacement event, as happens in other societies. Palestinian population suffers from the effects of the apartheid wall, land confiscation, house demolitions, arrest, exile, deportation, disability, testing of medicines and weapons on Palestinian prisoners and suffering from various types of cancers, stealing of skin and organs of martyrs. In the same context, Israeli Professor Nadera Shalhoub-Kevorkian revealed that the Israeli occupation authorities issued permits to large pharmaceutical firms to conduct tests on Palestinian and Arab prisoners. Moreover, the

Times of Israel also revealed that the Israeli military firms are testing weapons on Palestinian children and carrying out these tests in the Palestinian neighborhoods of occupied Jerusalem (Middle East Monitor, 2019). Therefore, as a researcher, I resorted to using psychological, biological, behavioral, and cognitive theories to explain how hormones affect actions and decisions and psychological and behavioral reactions to explain the behaviors of Palestinian refugees as psychological defense mechanisms to alleviate the painful experiences.

The most commonly used defense mechanisms among the Palestinian people are (suppression, justification, and denial). The psychological suffering of Palestinian families is varied, and different mechanisms are used to overcome the hard reality full of challenges associated with political violence and occupation. Denial is perhaps most commonly used when an individual has been traumatized. It is also the most extreme form of psychological defense against the threat posed by collective trauma to the moral image of Palestine refugees. It is a characteristic of Palestinian refugees. The majority withdrew socially due to the feeling of guilt and responsibility for leaving their area in 1948 and feelings of inferiority towards them that they did not defend their land. Therefore, the trauma of the Nakba negatively affected the beliefs of the Palestinian refugees, affecting their mental health and feelings of revenge, anger, and hatred against the State of Israel (Abu El Hija, 2018).

My epistemological and theoretical standpoint rests within psychosocial theories and theories of collective memory in the sociology of the body and social psychology of martyrdom; nothing in human norms and traditions is or must remain constant in principle. Ongoing trauma makes post-traumatic stress disorders challenging to heal because the re-traumatization makes have not stopped. Traumatic experiences in their stories reflect a perceived reality that has developed over time. It continues without interruption because of Israeli violence. In its historical context, the theory of susceptibility to colonization asserts that the network of social relations ensures the survival of the society, preserves its personality, and regulates the vital energy so that the society can lead the joint activity in history. Cultural, social, political, psychological, and economic factors have shaped the development of structures and deeply embedded moral attitudes in Palestinian society.

"Collective memory is used to refer to social existence based on common interests, goals, and history; but its focus is on nationalism and culture, a concept commonly seen in societies that have experienced or are experiencing conflict" (Banat, 2014b). Therefore, it is crucial to explore the historical origins of the Nakba issue with psychological and social explanations to provide a link with the present moment.

The prevailing experiences of the present it's related to previous events that represent social constructs. They are "true" in an absolute sense but merely an accumulation of constructs and associations; thus, they are not being erased. Here lies collective memory. The traumatic experiences of the Nakba have become firm in the collective memory of the Palestinian refugees (Dayyeh et al., 2018). Familiarity with the literature on psychological responses, adapt, resilience, and collective memory that shows biological, sociological, psychological, and cultural dimensions, and continues to exert an influence on interpreting traumatic experiences in Palestine refugee narratives, the assertion of the devastatingly adverse effects of traumatic experiences on mental health, and quality of life and public health among Palestinian refugees in camps and diaspora.

My theoretical approach to trauma and collective memory response emphasizes its multiform and dynamic nature. It's considered an integrated approach that points to the complexity that underlies the acute development of trauma. For this reason, an approach, which allows for the integration of these various theories, was reckoned most appropriate. Together, these qualitative and quantitative approaches thus oriented and informed the research design. Their influence was evident in how I focused respondents during the interviews and in the analysis of their narratives and psychological responses. The Various theories provided an adequate framework for testing the hypotheses. Although the content of the refugees' narratives could frame the initial form and structure of the analysis, I returned to the literature to deepen my understanding of the context of traumatic experiences to elaborate on the explanations given through the analysis and draw out their implications. The analysis of the narratives was very much shaped by the psychosocial perspective and in-depth insights derived from the vast multi-disciplinary literature on the subject area.

The chapters are linked to each other, as the first chapter gives an idea and rationale of the entire thesis contents as an introduction to understanding the research topic. The second chapter gives an idea of the traumas in Palestinian society, the traumatic experiences, and the massacres committed against the Palestinians. Also, how biological, psychological, social, and cognitive theories intervene in the interpretation of individual trauma within Palestinian society and the psychological defense mechanisms used by the first generation to alleviate psychological stress. On the other hand, clarifying how individual trauma became a collective trauma among Palestinian refugees by strengthening the collective memory of the trauma, such as martyrdom, became a cultural and social model that helped reinforce the collective culture of trauma. The researcher used several theories to explain the collective trauma, Durkheim's theory in explaining the collective consciousness, the theory of the embodied martyrdom reputation, and the theory of the susceptibility to colonization. Collective awareness consolidates yielded beliefs, ideas, and moral attitudes that function as a societal binding force. Collective memory is the identity of a social group created from tales and traditions performed to provide a people with a sense of community.

The third chapter, which combines previous Arab and foreign studies, gives more information about the results, the tools and research methods used, and the study's limits. The fourth chapter is based on presenting the research methodology, the study population, the sample, and the procedures for recruiting respondents for data collection, in addition to the statistical tests that were used according to the nature of the study variables, because other tests are not suitable for these variables.

The fifth chapter is based on presenting the study results according to each hypothesis. In the last chapter, the results of the current study were also discussed and linked to the previous theoretical framework and the results of the previous study mentioned in the third chapter. The sixth chapter is the most important and provides researchers and institutions with conclusions based on the study results to carry out various studies dealing with many aspects, including mental health; on the other hand, a need for institutions to provide psychological, health, and financial services to Palestinian refugees.

1.6 Structural Presentation of the Research Report

The doctoral thesis includes six main chapters, which are as follows:

Chapter 1 this part has outlined the rationale for the study. Also, include in search of the refugees' traumatic experience of the Nakba events through their narrative. The next step is to provide an insight into the theoretical constructs which inform the analysis of the collective memory of trauma among Palestinian refugees, and state the commonalities of culture, glorification of martyrdom, suicide martyrdom, and the collective memory of trauma among Palestinian refugees want to remember the Nakba? and trauma is of martyrdom, and martyrdom (death) creates meaning in Palestinian culture.

I mentioned previous research by the researcher that was relevant to the research topic; and underlying theoretical framework, methods and procedures, and structural presentation of the research report. This chapter is further purposed to reveal the beginnings of a specific theoretical model stemming from existing theories, which best explains the current research findings. Also, because the detail of the qualitative research with quantitative support often develops after the findings have been analyzed, these theoretical constructs have been chosen to enhance analysis and allow for discussion of findings for a better understanding of the research from the psychosocial aspect. It's not possible to discuss a psychological problem without the social and cultural aspects, and vice versa.

Chapter 2 provides an insight into the theoretical constructs which inform the research analysis. This chapter is further intended to reveal the beginnings of a specific theoretical model, stemming from existing theories: biological theory, attachment theory, analytical theory, behavioral theory, cognitive theory, and information processing theory; besides, three theories of collective memory in sociology of the body and social psychology of martyrdom: Durkheim theory-collective consciousness, the reputation theory of embodied martyrdom, and the theory of (Malek BENNABI), the Algerian thinker, on the susceptibility to colonization, which best explains the findings of the research. Also, because the detail of the qualitative and quantitative research often evolves after the

findings have been analyzed, these theoretical structures have been chosen to inform analysis and allow for a more comprehensive and in-depth discussion of findings. It also provides a general overview of political violence and cultural context, the manifestation of loss in Palestinian society, psychological trauma, the type of traumatic events, reactions, and defense mechanisms. As well as and presents the most traumatic experiences of the Palestinian people and how transmission of traumatic experiences across Palestinian generations from 1948 to the present through the painful narratives.

This chapter also briefly deals with the Nakba 1948; Sheikh Jarrah neighborhood evictions and the village of al-Araqeeb was demolished for the 190th time, to highlight some atrocities and massacres committed by Jewish terrorist gangs against the local Palestinian population. One hundred fifty-six massacres were recorded, leading to the evacuation of 220 towns and villages (Abu Sitta et al., 2020). In addition to geographical distribution and current estimates of refugees who have been expelled from their lands, explain pervading collective memory concerning the Nakba. Moreover, clarification of terms and assumptions for purposes of clarity, it is essential to specify some terms and assumptions made throughout the doctoral thesis: trauma, traumatic experience, PTSD, the Nakba (catastrophe), refugee, and Palestinian first generation. Besides, it includes study design with the limitations of the study are identified as well. An expanded theoretical framework is necessary because it reflects the different aspects of traumatic experiences resulting from the events of the Nakba. It also provides a comprehensive understanding of the range of traumatic events or types of trauma to which the Palestinian people in general and refugees, in particular, can be exposed and how culture promotes the collective memory of trauma through the creation of models in culture and society.

Chapter 3 is dedicated to providing a rich fundament for the research topic through previous studies, which preoccupied the minds of researchers who had explored Palestinian refugees for various purposes. Initially, the previous studies provide the interest and importance that studies provide to the world cultural heritage. They help the researcher formulate an apparent research problem and guide him to the aspects that other researchers neglected or called for studies. This is a great incentive to complete the current study. It provides an integrated picture of the research conducted regarding the subject and

its political, social, or psychological background and the study population and samples its characteristics, study tool, and suitability to the Palestinian cultural and social environment.

To give a clear picture, it has relied on Arab and foreign studies. Most of the studies dealt with the Nakba within the "Arab-Israeli conflict" and the obstruction of access to public opinion because they did not recognize the memory of the trauma as a direct reality of the Nakba. Here, we must reflect on the history of the Palestinians from the Nakba until today and what it means objectively and subjectively to think that this event was as terrible as other global disasters and that it has conditions like all catastrophes. I then explored sustaining factors or motives for the continuation of the effects to understand the social structures that have reflected prevailing collective memory.

Finally, the impact of both social structures and social attitudes on refugees who have experienced trauma is addressed.

Chapter 4 outlines the research design and adopted methodology. I clarified psychosocial aspects in terms of their methodological significance by the qualitative and quantitative methods are appropriate for the exploratory nature of the research. I described the demographic characteristics of the participants, with attention being given to aspects of psychometric properties, transcultural validity, and ethical considerations. This chapter ends with statistical tests and techniques used, such as T-test, One-way analysis of variance, Tukey test, Two-way analysis of variance, One sample T-Test, Chi-Square Test, Pearson correlation, Cronbach's Alpha, Split-Half Coefficient, and Factor Analysis.

Chapter 5 present the research findings, including extracts narratives from interviews, and tables are presented to clarify emergent contents that correspond to the particular research hypotheses and aims. The impact of study variables on traumatic experiences is explored in the findings by comparing current study data with results from previous studies and addressing the implications concerning the research aims; Concludes the thesis with a discussion of the implications, potential benefits of the research and recommendations for further research and understanding about traumatic experiences and collective trauma. Therefore, trauma's social construction and social representations must be given utmost

importance in the diaspora, such as Jordan, Syria, Lebanon, Europe, and the United States of America, existing in Chapter six.

Chapter 6 presents research conclusions by discussing the Nakba events and recommendations to investigate the psychosocial problems among Palestinian refugees; the last part is designed to reflect the potential benefits of the research. The outcomes of this research contain the possibility to assist in the following areas:

- 1. To assist the Palestinian refugees in gaining dignity and identity.
- 2. To improve the living conditions in Palestinian refugees' camps, particularly those who have experienced trauma, with pressure to provide services and supports.
- 3. To articulate the risks of forcing refugees to adopt Western views of resettlement in diaspora camps. The findings could also apply information arising from this thesis to a critique of the policy of global indifference and discrimination in human rights.
- 4. To assist Palestinian refugees in exploring and enhancing their psychological resilience strategies.
- 5. Advancing Knowledge on the trauma of the Nakba.
- 6. Further research into the understanding of the traumatic experiences of the Nakba is recommended using a greater sample size and in various camps and areas.
- 7. To contribute to public debates concerning Post-Traumatic Stress Disorders among Palestinian refugees, which are transmitted from generation to generation.

Finally, some recommendations are given in brief.

A reference and expert arbitrators' list, appendices, and figures are as follows. Included in the appendices are a sample size calculator screenshot of a copy of the facilitating mission letter for data collection that was made available to participants. Along with a copy of the questionnaire in both Arabic and English and a video recording of interviews with refugees, I used it as a source for analyzing the traumatic narratives of Palestinian refugees. **Chapter Two**

2 Background and Literature Review

2.1 Introduction

The tragedy of Palestinian refugees began following the end of the British Mandate for Palestine at midnight on 14 May 1948, and formally declaration of the creation of the State of Israel around 78% of the Palestinian territories on the morning of 15 May (Lesch and Frankel, 2004). The Zionist armed gangs uprooted the Palestinian peoples from 20 cities and 24 villages. Suddenly, about 957 thousand Palestinians, or 66% of their residents, were rendered homeless, and it subsequently displaced the citizens of Palestine to diaspora refugee camps, known as the Palestinian disaster (Nakba). In 1948, Nakba forced more than 900,000 Palestinians to migrate from their towns and villages immediately after Zionist movements destroyed 20 cities and over 520 Palestinian villages, especially those on the Palestinian coast from Naqoura to Gaza. They have converted these places into Jewish ruins or settlements (Abu Sitta, 1997; Banat, 2002; Salama, 2006; Dayyeh et al., 2018).

Palestinian refugees have experienced brutal conflict and still suffering from the Israeli occupation of their land and property. The Palestinian issue is unique in terms of the large size of the affected people and the duration of the problem (Lutz, 2018). Palestinian society was exposed to disasters and wars that caused many painful experiences for families, such as (martyrdom, destruction, detention, imprisonment, exile, forced deportation, etc.). We can say with no doubt that there is no single Palestinian living in or outside the Palestinian territories who have not gone through one of these events that have exceeded human resilience and affected all segments of Palestinian society (Khamaysa, 2012; Thabet et al., 2001).

Horrible experiences are essential in social and cultural contexts; to express the structure and vision of the individual's subconscious towards a subject similar to the emerging situation, which is formed through these experiences. It also controls their imaginations in a framework torn by emotions and feelings because they go through a period of severe change in their psychological development that makes them more vulnerable to the influences of the external environment when people are exposed to stress or trauma

(Khamaysa, 2012; Dayyeh et al., 2018). Therefore, children and adults can often develop or be affected by different levels and aspects during this process, with important consequences for their future (Wiese, 2010). In the event of war, as in the "Palestinian Nakba." It exposed them to the most unexpected forms of trauma that affect most aspects of their lives. Migration affects the family and significantly affects psychological growth and mental health, severe if associated with cumulative tension or painful situations among refugees (Najib et al., 2015; Wiese, 2010). War has many effects in the short and long term. However, the long-term impact of war is also catastrophic. War has a devastating effect on the health and well-being of nations. Many studies have shown that wars have caused more deaths and disabilities than any other severe disease. The gravity of the war is made possible by the fact that it initially destroys families and thus destroys society, thus disrupting the development of the State's social fabric. The long-term effects of war also have a physical and psychological impact on children and adults lead to a decrease in physical, human capital, and death. The war has other consequences, such as widespread poverty, malnutrition, various disabilities, psychosocial diseases, and countless problems and consequences (Murthy and Lakshminarayana, 2006).

Refugees may suffer from excessive fear, imprisonment, torture, loss of employment, and malnutrition, showing psychological and physical abuse. When refugees separate from their family members, it forces them to reveal the pain, property loss events, a witness of torture or murder, and the loss of family members or close friends. These events make refugees endure harsh environmental conditions. The existence of acts of hatred against others has become a significant factor in the life of refugees. It has important health indicators and their ability to develop based on social relations, which are necessary for migration and stability (Refugee Health Technical Assistance Center, 2011). Soto (2008) says that refugees have a painful, severe, and challenging experience and need the flexibility to overcome the difficulties of rebuilding their lives. McKell (2015) said that Palestinian refugees often suffer from trauma under difficult living conditions in refugee camps, such as violence and overcrowding. These conditions lead to a greater spread of mental illness than other populations.

The shock is an emotional response to a shocking event such as an accident, rape, or natural disaster involving unexpected emotions, memories of the past, tense relationships, and even physical symptoms such as headache or nausea. Some individuals may have difficulty moving forward in their lives (American Psychology Association, 2019). The American Psychiatric Association (2013) defined traumatic experiences as being subjected to actual or threatened death, violence/serious injury, disaster, or physical or threatened sexual violence through direct experience, viewing, or hearing about the event. Levetown (2008) showed that the shocking event might involve moving to a different place, anxiety, death of a friend, family member's anxiety, separation from parents, mass disasters, terrorism, war, etc.

Researchers used the word "trauma" in everyday language to indicate a very stressful event. However, the evidence of the traumatic events indicates the extreme stress that prevails over a person's ability to adapt. There are no clear categories of stress, trauma, and adaptation. Although I write about traumatic experiences among Palestinian refugees, it is also important to remember the reactions are psychological with a clear impact on social aspects. Investigators and therapists in this field define "trauma" in different ways. An Individual's experience determines whether or not an event is painful (Geller, 1999).

Literature can indirectly open a window into traumatic experiences. We are looking for painful experiences shared by Palestinian refugees seventy-three years after the Nakba in 1948 but to no avail. The Nakba has accumulated studies in Arabic, English, and French but limits them to a particular subject under the "Arab-Israeli conflict" and impedes the entry of public opinion. These studies do not recognize trauma memory as a plain fact. Here, we must think about the history of the Palestinians since the Nakba and what it means objectively and subjectively to believe that this event was as terrible as other global disasters and that it has its circumstances, like all disasters, in academic studies. The reasons and motives of those researchers and those who tried to explain the Nakba and the traumatic experiences among refugees by linking them to certain elements associated with such limited aspects as psychology, biological, environmental, religious, and political.

In responses and reactions to repeated traumatic experiences among refugees, memory activates, and the picture becomes clearer in a way that accepts different perceptions and

interpretations. This study aims to examine the traumatic experiences of Palestine refugees 73 years after the Nakba. The Palestine Nakba is closely linked to the political and military events in Palestine. It has scattered Palestinian refugees around the world. Internal migrations continue to occur because of the policy of house demolitions and evictions of the 48 areas of Jerusalem, the Negev, within the Green Line, and in the Gaza Strip due to repeated wars. The term "collective trauma" has been used to describe the exodus crisis's impact on millions of Palestinians. Palestinians may not recognize that they are experiencing the effects of collective trauma; it may leave many asking: What is collective trauma?

The term refers to the psychological reactions of a traumatic event affecting an entire society; and remembers a terrible incident that happened to a group of people. Therefore, collective memory prevails beyond the lives of direct survivors of events and is remembered by group members who may be far removed from traumatic events in time and space (Hirschberger, 2018). Such collective memory of the disaster experienced by the group's predecessors in the past may give rise to the selected dynamic of trauma that weaves the relationship between trauma, memory, and existential security (Volkan, 1997). Collective trauma is a catastrophic event that devastates the fundamental fabric of society. During the first half-century after 1948, the memory of the Nakba (or "catastrophe" in Arabic) when more than 700000 Palestinians were expelled during the establishment of the State of Israel. Those who have suffered trauma have not been unable to process it. This fact, combined with the deliberate efforts by Israel and the Arab States to remove/or erase the Palestinian identity, led to the repression of their collective memory for a long time (Milshtein, 2021). According to Sanbar (2001), the Palestinian people suffered a traumatic experience that cannot be erased from their collective memory.

2.2 Political Violence

The Palestinian people live under the continuing stress of the occupation actions that constitute a continuing threat to their life. These actions create an environment of fear, anxiety, psychological tension, frustration, confusion, inability to think logically, and a continuous expectation for traumas and crises, loss of control, and other painful feelings.

The Israeli occupation will affect older people significantly compared to other categories. They suffer from their families in case of arrest, injury, death of one of the family members, blockade, or demolition of the house. Political imprisonment is a painful experience, predominately accompanied by material denial, solitary confinement, overcrowding, torture, and the deprivation of fundamental rights and civil rights as well (El Sarraj et al., 1996; Mollica et al., 1998; Khamaysa, 2014; Quiroga and Jaranson, 2005). In the same vein, a political imprisonment is a traumatic event accompanied by torture and deprivation associated with Palestinian men's political, economic, community, psychological, and family functioning (McNeely et al., 2015). These conditions lead to continuous loss, and in many cases of older people develop symptoms of PTSD, and these symptoms may appear after months or even years from the occurrence of the trauma. Sometimes, older people are denied the right to visit their destroyed village, if they can, or visit their imprisoned sons and wait for days and nights, and sometimes months for permission in vain. More than that, Palestinian older persons, like most of the world's elderly, particularly in the Arab and third world, suffer loss and trauma. The traumatic experience of loss and circumstances of frustration are always available, increasing the suffering and escalating the severity of post-loss symptoms (Hasanain, 2010).

2.3 Psychological trauma

Trauma is not a new term in psychoanalysis and history. It received widespread attention from intellectuals and scientists in the social, psychological, and human sciences. In the early 1990s, the ranking of studies emerged as "trauma studies" published by *Felman* to help people learn about Holocaust events and memories and to deal with survivors of the Jewish Holocaust based on clinical and psychological interventions. *Caruth* combined literature with clinical studies mimicking historical trauma such as the Jewish Holocaust and the Hiroshima atomic bomb attack. Moreover, the spread of trauma in the American genocide, the atomic bomb on Hiroshima and Nagasaki, the fragmentation of India, and the civil war in Northern Ireland, South Africa, and Sri Lanka; even in the themes of sexual exploitation and homosexuality (Felman, 1992; Caruth, 1995, 1996).

Trauma in everyday language refers to all kinds of pressures experienced by individuals. But the clue to understanding traumatic events is that they indicate the extreme stress that overwhelms a person's ability to cope. There are no clear categories of stress, trauma, and adaptation. Although I am writing about incredible experiences among Palestinian refugees, it is also essential to remember reactions to tension are also clearly psychological. Moreover, different scientists and therapists in this field know trauma in different ways (Geller, 1999). I want to emphasize that the individual's own experience determines whether the event is traumatic.

The concept of "collective memory," which stems from Maurice Halbwachs' pioneering reflections on "Social Frameworks of Memory" (1925), having raised vital insanity in the mid-1970s, became widely questioned. It's a metaphor, a sociological imagination, or even a holistic ideology. However, in its social or collective dimension, the concept of memory has become familiar and thus transparent. The subject of many works in the social sciences is no longer called into question. It has mobilized the interest of social, political, collective, and ordinary actors in media if it is appropriate to designate all those who value their history or that of their family, who are interested in the past of their neighborhood, village, city, and region, and in the preservation and transmission of the latter (Lavabre, 2016). While the term "trauma" atypically refers to the effect of a traumatic incident on an individual or a few people, collective trauma refers to a traumatic experience that affects and involves entire groups of people, neighborhoods, or societies. Collective trauma is exceptional in which dangerous stimuli overwhelm the individual's capacity to regulate emotions, bringing distress and negative consequences to individuals and changing the fabric of the entire society (Erikson, 1976).

Sociologist Kai Erikson describes the relationships and differences between individual and collective trauma and its influence on the ego (self):

"by individual trauma, it means a shock to the self that happens through one's defenses so abruptly and with such harsh force that one cannot respond to it adequately... on the other hand, by collective trauma, it means a hit to the primary networks of social life that break the relations attaching people and reduces the general sense of common identity. The collective trauma goes its way deliberately

and with harmful effects (insidiously) into the consciousness of those who suffer from painful events. Therefore, it is a continuous recognition that the community no longer exists as an efficient source of support and that an essential part of the ego has vanished... 'We' no longer exist as a combined both or as cells in a larger collective body." (Erikson, 1976:153–154).

The disastrous picture of the long-term effects of the collective trauma depicted by Erikson is how traumatic historical events affect individuals and groups. Trauma is undoubtedly devastating. It often found unexpectedly meaning in disaster, facilitated by processes of meaning formation (Frankl, 1959/ 1976; Davis et al., 1998). Trauma may contribute to the existence and creation of the national narrative, and then the sense of identity (Alexander et al., 2004; Canetti et al., 2018, Khamaysa et al., 2021a, 2021b), and the models of cognitive work that ostensibly work to ensure the safety and wellbeing for all and provide the values and principles for the future (Bar-Tal et al., 1992; Hirschberger et al., 2017).

In its roles and centers, culture constitutes the cultural and social structures of the Palestinian people. Also, the content of socialization moves from parents to children and from generation to generation. On the other hand, values are standard rules on which society relies to evaluate and judge individual behavior in different situations and contexts of life. What is consistent with these values is accepted, and contrary to them is deviant, exceptional, or abnormal. Palestinian society has been exposed to disasters and wars that have caused many painful experiences for families, such as (martyrdom, destruction, detention, imprisonment, exile, forced deportation, etc.). Furthermore, these events affected all segments of Palestinian society. Palestinian culture is based on the desire for revenge that arises when individuals perceive that members of their community are traumatized or humiliated (Khamaysa et al., 2021a). e.g., the apparent interest of poets and artists in the subject of martyrdom, composing songs and poetry to embody their image of heroes in the collective memory and documenting their heroic stories through these literary works to serve as the (collective memory of Palestine) of stories, books, biographies, poems, and movies (Khamaysa et al., 2021b). Therefore, collective trauma may facilitate the construction of unique elements of meaning and social identity: aims,

values, effectiveness, and collective value (Vignoles et al., 2006; Olick et al., 2011). Actually, these trauma effects on the construction of collective meaning may increase over time from the traumatic event (Klar et al., 2013) because memory concentration shifts from the painful loss of lives to long-term lessons sets of trauma.

Trauma occurs when human beings experience sudden and unexpected adverse events, leading to an imbalance in the individual leading to some mental and behavioral disorders, including natural phenomena such as earthquakes or man-made phenomena, such as war, domestic violence, and forced migration (Altawil et al., 2008b; Altawil and Nel, 2008a). Here, three structural factors behind the trauma. First, the onset of trauma is associated with an external causative agent rather than the person who causes the traumatic experience to themselves. A traumatic event or experience is also associated with its sudden and unpredictable nature. Another factor associated with the formation of trauma is the experience of an unwanted violation of an individual's physical, emotional, or psychological privacy, either due to a person or other event. The third factor contributing to trauma is a sense of loss of control. So, the experience of loss of control exposes feelings of helplessness, insecurity, and vulnerability (Suri, 2012: 674).

In the event of war, as with the 1948 Palestinian exodus, it exposed people to the most terrible forms of trauma and tension that impacted most aspects of their lives. Migration affects the family and significantly interferes with psychological development and mental health, which can be severe if associated with cumulative tension or traumatic situations among refugees (Najib et al., 2015; Wiese, 2010). Wars and disasters have adverse effects on the physical, psychological and social aspects of their lives. Lack of essential trust in their surroundings can adversely affect their curious behavior and sovereignty, expressed in disorderly behavior (Khamaysa, 2012; Wiese, 2010; Najib et al., 2015). Refugees suffered from many very traumatic events because of resettlement, political oppression, war, and migration. It is even difficult to determine all the events they suffered, as the trauma of the refugees often predates the initial experience associated with the war that leads them to flee (Mollica et al., 1992).

The psychological hardship caused by the martyrdom of children or fathers, and loss, will get to a high degree leading it to the top of the list of themes to be studied for several

reasons; the most important of which is the prevalence of the situation where you can find a martyr in every family and street in camps and cities. A Palestinian family has lost more than one member, and this exacerbates grief and suffering. In addition, the loss of property is Israel's policy of collective punishment and displacement, such as the demolition of houses and the confiscation and bulldozing of land. Moreover, these effects are not transitory but may persist for relatively long periods, varying from person to person. It is, therefore, necessary to study this psychological suffering to reduce its negative impact on Palestinian society.

Everyone is under pressure in their lives, but when the event is stressful, it's called a "traumatic experience." They were directly affected, such as survivors, victims' relatives, ambulance and rescue workers, and friends. Also, who witnessed the tragedies and destruction, whether they saw the event themselves or were exposed to it on the ground or television and social media. Some events make the experience painful, such as serious injury, absolute powerlessness, a feeling of terror, the threat of physical injury, or death. Mujik-Biz (2020) indicated that the survivors affected by the trauma of 11 September 2001 would be disrupted for some time. It's hard for anyone to go back to their usual routine. In the Nakba issue, it refused witnesses to forget the events of the Nakba and confirmed revived the events of Nakba Day, recalling that exile and repression are unforgettable. Moreover, there is positive potential in the standoff between those who seek to reconcile with the tragedy of the past and embrace a future of coexistence and those who choose denial and conflict (Todorova, 2013). Traumatic experiences do not lead to long-term disability for most individuals. It is normal to experience such events throughout a lifetime; Often, individuals, families, and communities respond to their resilience (U.S. Department of Health and Human Services, 2014).

2.4 Manifestations of loss in Palestinian society

- 1. Loss of homeland.
- 2. Loss of physical and health supplies essential for life.
- 3. Loss of economic security.
- 4. Loss of security and safety.

- 5. The loss of the usual social role in the family.
- 6. Loss of self-worth sensitivity.
- 7. Loss of sense of innocence and purity.
- Loss of father's guidance in the process of social normalization (Abu Ayesh, 2006: 7).

2.5 Types of traumatic events

Post-traumatic stress disorder (PTSD) is a kind of mental health suffering that can develop in people exposed to traumatic events—caused by human beings, such as war and sexual exploitation. Additionally, natural life events such as death, intractable diseases, earthquakes, fires, etc. Some people are more vulnerable than others and suffer the most (Radwan, 2008). Classifying trauma as natural or human-induced can significantly impact how people interact with it and on the assistance mobilized in its aftermath. Natural shocks can directly affect a few people, such as a tree falling on a car during a rainstorm, or many people and communities, as with a hurricane. Natural events often referred to as "acts of God," are usually inevitable. A human failure such as technological disasters, accidents, hatred, and human innovation as war causes human trauma. Although multiple factors contribute to the severity of natural or human trauma, trauma perceived as intentionally harmful often makes the event more traumatic for people and communities. There are various categories and types of trauma according to the Treatment Improvement Protocol (TIP) (U.S. Department of Health And Human Services, 2014).

An incident that falls outside normal human experience and causes fear, helplessness, or deep terror to all people is shocking.

 War: such as World Wars I and II, Korean War, Vietnam War, Gulf War, War in Palestine, Lebanon, and Southeast Asia. In the same context, Rasras (2006) pointed out that wars or (organized violence) such as occupation or military intervention, such as closure, restriction of movement, prevention of roaming, breaking into homes and or being bombed, shot, beaten, or tear gas exposure. The term political conflict is to describe a range of incidents, including war, occupation, displacement, riots, and genocide (Neria et al., 2010). War is one of the tremendous hardships of life, where the aggressor can commit the most heinous acts and commit everything. The resulting destruction of the immediate environment, money loss, and loved ones hurt all aspects of life. It also causes anxiety and causes depression, fear, and conflict. In addition, it reduces the causes of safety and leads to deep and violent psychological stress. Stressors may increase the incidence of psychotic disorders in the community that has been exposed to such adversity. On the other hand, war can also result in the following traumatic disorder that results from aggression for several reasons: anxiety, death anxiety, fears, depression can be psychological outcomes of war, they can also be secondary symptoms of PTSD (Abu Hien, 2007).

- 2. Exposure to atomic bombing: The most serious was the atomic bombing of the cities of Hiroshima and Nagasaki in Japan.
- 3. Natural disaster: Such as tornado, lightning strike, wildfire, avalanche, physical ailment or, disease, fallen tree, earthquake, dust storm, volcanic eruption, blizzard, hurricane, cyclone, typhoon, meteorite, flood, tsunami, epidemic, famine, landslide or fallen boulder.
- 4. Technological Catastrophes: train derailment, roofing fall, structural collapse, mountaineering accident, aircraft crash, car accident because of, malfunction, mine collapse or fire, radiation leak, crane collapse, gas explosion, electrocution, machinery-related accident, oil spill, maritime accident, accidental gun shooting, sports-related death. Moreover, such as a nuclear reactor explosion in Chernobyl, Russia.
- 5. Transportation accidents result in serious physical injuries such as car accidents and planes crashes, train collisions, sea accidents.
- 6. Intentional acts or criminal incidents: such as arson, terrorism, sexual assault and abuse, homicides or suicides, mob violence or rioting, physical abuse and neglect, stabbing or shooting, warfare, domestic violence, poisoned water supply, human trafficking, school violence, torture, home invasion, bank robbery, genocide, medical or food tampering. It's common in the streets of cities in some countries of the first world, especially at night.

- 7. Family accidents: such as child abuse, child molestation, domestic violence, and wife-beating.
- 8. Incidents of a political or terrorist nature: such as concentration camps (such as Nazi camps), death camps, captivity, terrorism, kidnapping, and detention. In the same context, psychiatrist Khader Rasras (2006) noted individual and mass arrest and torture, barrier crossings, and degrading treatment. B'Tselem's documentation shows that security forces at the scene of settler violence rarely intervene to stop the violence. Sometimes they play an active role in the violence. From September 2000 to November 2011, B'Tselem sent 55 complaints to the Israeli government on issues that raised suspicions that security forces had not intervened to stop settler violence. In only five cases, Israeli forces opened the investigation. Two of the five cases were closed, with no measures being taken against the soldiers involved, and did not investigate the rest of the complaints (B'Tselem, 2012).
- 9. Severe physical injury: mutilation or amputation of the body part, such as torture.
- 10. Neurological events with a specific social context include the severe threat to a person's security and safety, such as witnessing a person mutilate a body, acting with a dead body, amputating a body part, and then killing him. Research has shown that victims of various traumas, such as natural disasters, rape, and war, have the same pattern of psychological disorder. The common disorders and diagnoses include general anxiety disorders, depression, misuse of resources with psychological effects (Al-Khatib, 2007).
- 11. Land confiscations, destruction of property, attacks on religious and personal freedoms, it considered traumatic experiences (Rasras, 2006). PTSD and the magnitude of exposure to the event, for example, the degree of psychological harm, the immediate risk to life, the severity of destruction of property, and the frequency of death, are significant indicators of post-traumatic stress disorder development (Neria et al., 2010).
- 12. The targeted announcement includes threats of potential danger or the broadcast of terrifying and depressing scenes, war of rumor, psychological warfare, or

negative mass polarization, such as terror that creates a state of mass hysteria and chaos (Rasras, 2006).

13. Watching the traumatic events with his own eyes or by media agencies' or transmits them individually, for example, when the victims tell of the cruelty of the experience they've had (Rasras, 2006).

2.6 Psychological responses to trauma

Most Palestinians hardship from symptoms of trauma have not received proper treatment. If it does not receive help or support soon, the Palestinian society will face a humanitarian disaster, which will make it difficult to heal and treat them later. In the same vein, Punamäki (1986) indicted the coping patterns of Palestinian women under occupation, general anxiety, and unpleasant feelings. Also, the most common reactions were stress, and the results showed a relatively high level of suffering of women under Israeli occupation in mental health, aggression, psychological symptoms, and public health. Al-Nabulsi (1991) explained the impact of trauma on Palestinian society, linked to the following elements: trauma prediction, duration of trauma, preparation for trauma, type of trauma, the fate of trauma, cumulative trauma. To study the behavioral and cognitive disorders of a group exposed to traumatic experiences, the level of exposure to such trauma and its relationship to behavioral and cognitive disorders must be investigated. The study of trauma is linked to the investigation of the apparent elements in the Palestinian case:

2.6.1 Trauma prediction

Israeli attacks on the Palestinian people are expected. In the same context, Al-Nabulsi (1991) states that the expected shocks have a more profound impact and damage than the unexpected. The late-night raids by Israeli forces on Palestinian homes have caused many psychological responses, mainly related to the unpredictability of Israeli soldiers' behavior and mistrust when they leave. Repeated raids on Palestinian homes make many women feel completely powerless and lose their capacity in the face of these atrocities (Abu Baker et al., 2004). Trauma occurs when human beings are exposed to sudden and unexpected events. The resulting trauma leads to various psychological, physical, emotional, and

social problems. Natural phenomena may cause trauma such as earthquakes, man-made phenomena such as war, internal violence, and forced migration (Altawil et al., 2008b). Artillery fire, fighting, displacement, extreme poverty, and witnessing violence are the most common war experiences. Residential areas are occasionally bombed, battles between rival militias erupt suddenly, time bombs and car bombs explode in the streets randomly. The consequences of the violent acts of burning buildings, killing and injuring civilians, and rushing terrified parents to seek family members. These scenes are so familiar to children that families are forced to flee to safe places that they don't care what can happen to their homes and properties, and that's what happened in all the wars in the Gaza Strip (Al-Hadad, 2007). Fedroff et al. (2001) assessed the various cognitive factors such as (anxiety sensitivity and trauma beliefs) in predicting and treating the severity of post-traumatic stress disorders symptoms. They pointed out that anxiety sensitivity and pain severity were essential predictors of Post-traumatic stress disorders symptoms. It showed that reductions in anxiety sensitivity and pain severity were essential predictors of reduced symptoms of PTSD. The results revealed that anxiety sensitivity is an essential cognitive risk factor for exacerbating and maintaining PTSD symptoms. It also showed that accident-related beliefs have not significantly predicted reducing symptoms by controlling anxiety sensitivity, pain severity, and medication condition.

2.6.2 Duration of trauma

Symptoms last for more than a month and are severe enough to interfere with relationships or work to be considered post-traumatic stress disorder. So, the course of the illness differs. Several people recover within six months, while others experience symptoms that last longer. Sometimes, the condition becomes chronic (The National Institute of Mental Health, 2019). Psychologically, chronic PTSD is over three months long, often much more prolonged (Shalev, 2009). In the Palestinian case, it is impossible to talk about the duration of exposure to the shock because of the chronic continuity of the trauma, the chapters of which have not yet ended. In this context, Al-Nabulsi (1991) shows that it is impossible to distinguish between the effects of the current trauma and the accumulation of old traumas in the Palestinian cause; we expect, even in this case on the possibility of cumulative trauma through loss and family trauma. Chronic trauma means that traumatic events such as (combat experience, physical injury, direct threats to their lives, and internal violence) occur several times over an extended period, and often multiple, severe, continuous trauma, specifically among veterans and other survivors of traumatic experiences. The study also shows that the most time spent at risk can lead to more severe symptoms than PTSD, both in childhood and adulthood (Altawil et al., 2008b).

2.6.3 **Preparation for trauma**

The Palestinian people are not prepared for the events that happen suddenly, like raids tonight and the use of tanks and warplanes. Israel trains the army to break into Palestinian homes without security reasons, but only for military training. The destruction of homes, furniture, infrastructure, physical injuries, and collection and processing of sampling stem cells from detained Palestinians. We were not ready for what had happened. We were watching every rocket fired from Gaza, every assassination and bombing, and wondering whether it would lead to a new war, a war more violent than that of 2014 and 2021. However, we did not imagine the number of people shot during the March of Return protests. These protests turned into bloodbaths that occur with relentless regularity, month after month until we became almost accustomed to them (Levine, 2018). Al-Aqsa Intifada, ongoing since September 2000, is a tragic event continuously with no prior preparations (Khamaysa, 2012). Trauma response is necessary to be a planned event. The management of traumatized people is complex, including the multidisciplinary team; if there is no proper preparation, there will be a failure. (Horne and Smith, 2015).

2.6.4 Type of trauma

The trauma of the Al-Aqsa Intifada occurred when Ariel Sharon visited the yards of the Al-Aqsa Mosque with the army and police provocatively to the feelings of Palestinians and Muslims. That incident represented a moral catastrophe for all (Palestinians and Muslims) and encouraged altruism (self-sacrifice) and death to preserve collective self-dignity. This moral character does not mean -in any way- the cancellation, or the disregard, of the elements of personal disasters. That had reached the limits of violating the most basic human rights and preventing the Palestinian people from exercising their

humanity and self-determination, as well as the constant threat to his security, life, and property (Abu Hein, 2001).

2.6.5 The fate of trauma

The current Palestinian trauma is not short, so it is difficult to talk about its fate without addressing past shocks. Most survivors of traumatic experiences develop mental illnesses between psychosis and suicide, as well as most of them, are traumatized (Khamaysa, 2012). The ultimate fate of trauma victims is not worse than death. Also, there is a significant negative impact on their functional abilities and quality of life (Livingston et al., 2009). The traumatized persons find themselves confused by witnessing the horrors of the period (Rechtman, 2005).

2.6.6 Cumulative trauma

This cumulative trauma in Palestinian society is very high and has affected a large segment of the population exposed to wars. However, if the cumulative exposure to traumatic events is high enough, this means that anyone will develop chronic Posttraumatic stress disorders. Moreover, there is no ultimate resilience to PTSD, and repeated traumatic experiences have a cumulative negative impact on the mental health of the victim (Neuner et al., 2004; Khamaysa, 2012). Finklestein and Solomon (2009) found a significant relationship between PTSD symptoms and cumulative trauma among Ethiopian refugees in Israel. The accumulated experience of political violence trauma is a risk factor for persistent symptoms of depression that need treatment and psychological support (Mormont and Sulayeh, 2008). The harrowing experience before their arrival is more important than the short-term interaction between Palestinian refugees, while aspects of life in exile are essential for early recovery from trauma. They are continuously harassed in refugee camps in Syria, as well as suffering from insecurity. As well, detention of political opponents without trial is also widespread. They've had many experiences of psychological violence and various problems with limited civil rights (Montgomery, 2011; Khamaysa, 2012).

2.7 Theoretical approaches to psychological trauma

Theories argue in how trauma-informed approach, and the most prominent of these theories: biological theory, attachment, analytical, behavioral, cognitive, and information processing theory.

2.7.1 The biological theory

Biological models explain trauma at different levels. Physiological effects have been studied where an individual is exposed to a traumatic event. It shows that trauma can lead to changes in neurotransmitter activities that lead to a range of consequences such as severe memory loss symptoms, emotional response to severity, emotional eruptions, anger, and violence. However, this is associated with increased adrenal secretion and trauma-related stimuli (Ghanem, 2006: 93). Concerning the brain's biochemistry, the low level of the central nervous system of adrenaline entails dysfunctions, including loss of interest or pleasure, numbness, and withdrawal from social activities. As well as the study, changes in the central nervous system or sudden, persistent, or severe exposure to traumatic events lead to many negative consequences and may cause destruction or change in the neural pathway. Several studies deal with the impact of trauma on the brain and the consequent changes in serotonin function that may be associated with loss of happiness or confusion in the traumatic experience and painful memories with which it has been associated and interacted (Ghanem, 2006: 94).

Similarly, repeated exposure to trauma leads to emotional numbing as a solution to trauma, and the brain secretes narcotic substances similar to the effect of opiate peptides (Jacob, 1999). They cannot deal psychologically with their problems until they feel safe in their bodies. When they lose control of their physical functions, they are not as competent as before (Kolb and Multipassi, 1982: 985).

Some researchers have tried to link PTSD to the functioning of the brain and its chemical, physiological and functional changes. Van Der Kolk et al. (1984) found that trauma disrupted brain function and body parts. This disorder shows high levels of catecholamine in blood and acetylcholine. There is also a decrease in norepinephrine, serotonin, and

dopamine in the brain. In the same context, Gandubert et al. (2016) pointed out that peritraumatic psychological and biological markers are independent indicators of the emergence of post-traumatic stress disorder (PTSD) under the stage of development. Psychological diathesis is a significant indicator of short-term dysfunction, while biological predisposition also predicts the development and maintenance of PTSD-psychologically to be independent risk factors for PTSD. Peritraumatic distress and dissociation predicted onset one-month, and mid-term PTSD four months, respectively. Also, it associated PTSD risk positively with systolic blood pressure and negatively with waist-to-hip ratio throughout the follow-up. A higher level of urine secretion for twelve hours throughout the night independently predicted PTSD four months.

The depletion of norepinephrine leads to the inability to eliminate trauma and the exhaustion of dopamine because the effective response and trauma support is impossible. Repeated exposure to trauma or remembrance leads to chronic fatigue and emotional numbness as an inevitable solution to trauma. Here, the brain produces narcotic substances similar to opioid peptides. The fate of PTSD then depends on the activity of the mentioned secretions (such as dopamine and norepinephrine) and the drugs released by the brain and perform this function when a person experiences trauma. After the end of the trauma, a withdrawal-like condition occurs, which we observe in the symptoms of sudden cessation of drug use, and withdrawal is known to be accompanied by severe traumatic physiological symptoms (Kolb and Multipassi, 1982; Van Der Kolk et al., 1984; Jacob, 1999; Ghanem, 2006; Gandubert et al., 2016).

2.7.2 Attachment theory

The theory of attachment emphasizes that individuals are prepared from an early age to explore the support of others in moments of demand and that it stimulates this reaction whenever individuals are at risk (Bowlby, 1969). How an individual realizes reactions as a general internal activity includes mental, emotional, defensive, and descriptive components (Main et al., 1985; Bretherton, 1985). Moreover, it works at the unconscious level and includes the individual's expectations of his value and that of the other in the relationship's context.

Individuals build intellectual models of self that reflect how they capture and value themselves in different fields. Levels at which an individual understands himself as a respected and valued figure by others and related personality, and this relationship continues to grow with experience and time (Rothbard & Shaver, 1994). Based on parental responses, an individual is aware of the structure of beliefs, ideas, expectations, emotions, and process of expectations from supporters.

The statement of controlled experimental studies showed that attachment relationships become disorganized during the first year of life due to violation and in response to interaction with a frightened and vulnerable person (Schore, 2009; Granqvist et al., 2017). Many refugee families experience stress before and during the exodus and resettlement. In addition, these adverse events and life trauma faced by refugee families lead to a harmful increase in the connection between children and parents. Moreover, refugees can experience many experiences that threaten their trust in others, although refugee mental health models have assumed that refugee experiences may compromise attachment control (Stauffer, 2008; Morina et al., 2016). The function of the refugee's family, as a fundamental emotional regulator in which different migration and trauma-specific relational processes may buffer or intensify the impact of mental state. Besides relational processes in refugees, families symbolize the role of the family unit as an essential collective context that designs the effect of successive traumas (De Haene et al., 2007; De Haene et al., 2010). Refugee families may follow different types of communication with trauma that further disrupt support and communication strategies and practice a pattern of denial, avoidance, or separate disclosure of painful memories that determine family communication. It also might work briefly as a flexible adapting strategy (Rousseau & Drapeau, 1998; Almqvist & Hwang, 1999). Moreover, there is a relationship between an individual's attachment pattern and the mother's behavior. Therefore, attachment patterns are classified into three types: secure attachment avoided attachment, and anxiety or resistance attachment (Ainsworth, 1985).

2.7.3 The Analytical theory

The analytical theory is based on Freud's views and followers in the same area that depend on an individual's previous experience and its impact on his current psychological state. This model assumes that danger has rekindled an unresolved old psychological conflict. Hence, renewed consent, for example, leads to regression and the use of defensive mechanisms such as repression, denial, or displacement, and the conflict reappears, such as a shocking situation occurring. Ego is trying to control the situation to ease anxiety. The analytical theory concerns the internal conflicts of the injured person. Freud attributed the cause of this disorder to the re-emergence of the problems experienced by a person with psychological trauma and their use of defensive enzymes to control anxiety, and that any external gains or stimuli from an individual's environment such as empathy and financial stimuli reinforce this disorder or become permanent (Abu Najila, 2001: 127). Here, Freud neglected the external environment and focused on the human personality before the trauma.

2.7.4 The Behavioral theory

There is a correlation between behavioral theory and learning theories that emphasize the importance of an individual's response gained because of a particular stimulus leading to a response created. So helps understand the traumatic experience through graphology theory. Trauma, events, wars, and acts of violence are unconditional alarms that give rise to fear and utter physiological reactions, and generalization occurs in response to a fear of attitude and stimuli that symbolize trauma or similarity with its tools and speaks of a gained alarm. It means that generalizing severe fear can be a gained reaction (Asaad, 1994: 96).

The researcher considers that behavioral methods are among the most appropriate for the Palestinian people and most receptive to individuals, most notably the gradual attraction of sensitivity, if they experience psychological trauma, for both adults and young people. Thus, determining disorder in behavioral problems, especially among children, most notably the enhancement methods in their forms, modeling, and response cost. In this context, Scott and Stadling (1992) showed that a stimulus, if very severe, can respond to other stimuli similar to its severity, intensity, and characteristics but differ from it in its source. For example, an individual may remember the sound of powerful gunshots or a grenade explosion that may have occurred before. When they hear a loud and loud noise from any new non-military civilian source, they distribute the previous stimulus to the

current stimulus and then generalize the previous response to a similar response. According to the researcher, behavioral theory explains trauma symptoms as being educated and gained in response to individuals. When exposed to a particular stimulus, it is a sign of the danger and damage that causes it to respond to emotional and behavioral responses as symptoms of suffering in this stimulator. Here, the individual generalizes the incentive to other similar stimuli, and then their response to the old stimuli can be generalized to the new stimulus.

2.7.5 The Cognitive theory

The cognitive model aims to make a person aware of what happens, how suffering arises, and the same depends on a person's view of themselves or the world. The personal views also identify the cognitive values, beliefs, and models that distinguish one person from another, and trauma undoubtedly destabilizes these unique structures. To see and adapt to reality to balance joy and pain, and to understand reality in a way that allows them to adapt to it acceptably, to maintain self-esteem, and to want to communicate and talk to others. Three beliefs explain a person's position on reality or beyond humanity, that this world is the source of good, that this world has manageable value and meaning, and that ego has particular value and importance. When a disaster occurs, beliefs and hopes are shattered, people feel resentment, despair, and lack faith in what happened, so positive beliefs become hostile, and the outside world becomes terrifying. Disaster destroys the ego and loses its meaning and value. Here, the importance of cognitive therapy, which deals accurately with negative thoughts and beliefs, is demonstrated so that a person with psychological trauma can rebuild his experience and change his "perception of oneself, reality and others" (Epstein, 1991; Jacob, 1999).

In this context (Hassanein, 2004) indicated that cognitive theory links the traumatic experiences or pressures of the individual himself to the surrounding environment. The cognitive theory considers the individual and environment intertwined, increasing the individual's adaptability and vice versa. There is a similarity between analytic and cognitive theory in understanding and interpreting an individual's relationship to the environment, and under shocking circumstances, both are considered a "reactive relationship." Similarly, an individual's relationship with the environment is disrupted

when external or internal demands increase, so the individual moves their resources to repair the relationship.

Cognitive processes are the basis for understanding traumatic experiences from the point of view of cognitive theory. An individual's awareness of events, attitudes, and people depends on the plans of knowledge that an individual makes, through which they understand things, attitudes, and people. If interest, love, and acceptance distinguish the relationship between people, the individual must judge himself, the family, and society positively and safely. He thus leaves himself, his family, and his community in love, respect, and appreciation, a painful experience or a stressful experience, which he may adapt to the above optimistic view of events and things, and with the help of family and supportive society. In addition, if "childish" experiences are neglected and rejected, the child will feel insecure and dissatisfied, making him feel negative and negatively judge the community (themselves, their family, social environment). Suppose self, family, and society do not give him security and security. In that case, he will be overly dangerous and evil, it will further complicate his life, and he may have psychological disorders resulting from traumatic experiences (Al-Otaibi, 2001: 122).

As a researcher, cognitive methods of exposure to traumatic events and symptoms of trauma avoidance are the most effective way to overcome stages of trauma to achieve psychosocial compatibility. A study by Khamaysa (2012) refers to a model that closely explains other factors associated with traumatic experiences, explaining the traumatic experience that occurs to an individual, as an interaction with internal sources that include both (thinking, emotions, and performance), with family as a relationship between a person and the environment in which violence occurs. Thus, mental health depends directly on their mental capacity and performance and on performing the family to interact with society.

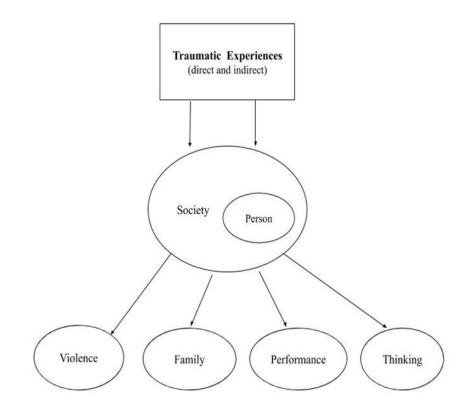


Figure (1). Mediating factors for traumatic experiences (Khamaysa, 2012: 40).

2.7.6 The Information Processing theory

Information processing (events) is one of the most influential theories to explain PTSD (Horowitz, 1986). The approach to information processing combines behavioral, educational, and cognitive theories of PTSD because emotional experiences continue to influence one's behaviors long after an emotional event has ended. Re-experimentation can generate a pattern of traumatic memory avoidance and maintenance of PTSD (Foa et al., 1989; Foa & Jaycox, 1999; González-prendes and Resko, 2012). In the same vein, González-Prendes et al. (2012) indicated that information structures in memory represent emotions. In addition, they found the memory associated with the information of the spooky stimulus, the public responses (physiological, verbal, and behavioral) to the stimulus, and the meaning that the individual attached to the stimulus.

The information invades the brain from every direction and is then absorbed and processed (coding, coding solution, behavior), some of which are not processed because the

information is incomplete. Besides the nervous system's capacity (recipient) in disasters and trauma, many painful stimuli are not proportional to a person's experiences and cognitive models because they go beyond the correct framework of human experience. These lead to distortion and disruption in information processing (Horowitz, 1986). Here, painful information (or stimuli) remains active and continues to painfully pressure the person trying in vain to keep him out of consciousness until he feels comfortable and safe. However, a person with psychological trauma usually resorts to negative defensive tactics such as denial, fatigue, and avoidance. These defensive mechanisms are the principle of compulsive repetition of disorder.

The memory of trauma (nightmares, thoughts, images, dreams) and painful stimuli pressure a person to be treated. Jacob (1999) and Horowitz (1986) believed that processing shocking information should go through multiple stages; rejection, resentment, crying, trauma, avoidance, denial, and trauma, as well as the oscillation between avoidance, denial and trauma, transition, and the overlapping of shocking information in a person's entity.

It is clear to the researcher that the theory of information analysis confirms that stimuli and experiences occur outside the information framework stored by the person with the trauma. Hence, distress occurs in the person where these new stimuli are stored outside the knowledge framework, leading to poor psychological and social adaptation. Alley Jamieson (2012) noted the approach to information processing:

- 1. Relevant negative assessments-influence thought processes during the trauma and past beliefs and experiences.
- 2. Future fears caused by past trauma.
- 3. Painful memory not embedded in autobiographical memory.
- 4. Data-driven versus conceptual processing.
- 5. Maladaptive behavioral strategies.
- 6. Maladaptive cognitive styles.

2.8 Common Reactions to Trauma

A traumatic experience is emotional trauma and can cause many painful problems as a common reaction in people after trauma. Thus, each individual responds differently to traumatic events so that they may have some of these reactions more than others, and some may not have them at all. Each of us will have a shocking event. It can be a car accident, an emergency medical condition, a natural disaster, or a fire - or another person's trauma has injured it, such as robbery, occupation-related fighting, or aggression. In addition, trauma can come from watching someone else get seriously hurt or killed or hearing something terrible happen to someone we love. Whatever the source, the trauma leaves its imprint on the brain. Therefore, empirical studies consistently show that PTSD is linked with higher brain activity dealing with fear and low activity in parts of the frontal lobe cortex (Rothbaum, Foa, and Hembree, 2007; Gillihan, 2016).

Most people who directly experience significant trauma have extreme reactions in the actual aftermath. However, many people suddenly feel much better within three months after the event, but others recover more slowly, and some do not recover enough without help. These changes after trauma are expected, as well coming more conscious of the changes they have experienced since your trauma is the first step toward psychological rehabilitation (Rothbaum et al., 2007).

Moreover, it is helpful to know the common reactions after the trauma as phrases expressed by the traumatized people —I'm scared, I can't sleep, I'm on edge, I'm angry, etc. In addition to recognizing that these problems connected to the trauma can make them feel more comfortable. Maybe what I am dealing with is one problem with many faces. It can also be helpful to realize that as the recovery process unfolds, these experiences are believable to improve, which can inspire trust (Gillihan, 2016). The most common problems (as reactions) after traumatic events, as follows:

2.8.1 Fear and anxiety

It's a natural reaction to a dangerous situation so that it may last for some people long after trauma, and that happens when one's attitudes or vision of oneself and the world change and become more negative, thus losing a sense of safety. You may be concerned when you remember the event, and it may sometimes come from out of the blue. Stimuli that cause concern may include places or times of day, smells, or noise that increases sensitivity to the trauma event (Rothbaum et al., 2007; Gillihan, 2016).

2.8.2 **Re-experiencing of trauma**

People who have experienced trauma often retake traumatic events, such as memory restarting, because individuals have unwanted thoughts of trauma and find themselves unable to get rid of them. A flashback occurs while the memory of trauma is observed (as a vivid image) and makes it feel like the trauma is happening again. It's common for actual nightmares to affect our dreams in the wake of trauma. The nervous system has suffered significant trauma, and even in the hours of sleep, the brain continues to process the event. The symptoms exist because the profound experience is so horrific and different from everyday experiences that you can't fit into what you know about the world. So, trying to understand what happened, your brain continues to restore memory. Most of the time, nightmares are not the experience of expected trauma but have shared concerns with it such as danger, panic, or stalking. These nightmares can contribute to the lack of common post-traumatic sleep (Rothbaum et al., 2007; Gillihan, 2016).

2.8.3 Increased arousal

It is a common reaction to trauma, includes anxiety, tension, and trembling. Being startled is quickly having trouble concentrating or sleeping. Constant arousal can lead to impatience and irritation, especially if you don't get enough sleep. Arousal reactions are because of the fight-or-flight response. Flight response is how to protect ourselves from danger. When we protect ourselves from danger by fighting or escaping, we need more energy than usual, so our bodies pump more adrenaline to help us get the extra energy we need to survive. The other reaction to the risk is freezing, and this reaction can occur during trauma (Rothbaum et al., 2007).

2.8.4 Avoidance

It is a typical way of dealing with trauma-related pain. Avoiding situations related to the event evokes painful memory, such as where it happened. Most people who have experienced traumatic experiences may avoid television shows reminding them of the event, often situations that are not directly related to trauma, going out in the evening if trauma occurs at night, or avoiding things because they feel dangerous. It is common to avoid being in crowds after trauma, even if the traumatic event is not directly caused by someone else, such as natural disasters. Another way to control pain is to get rid of the painful thoughts and feelings that can cause numbness.

Moreover, they find it hard to feel fun and scared or friendly. In general, painful thoughts or feelings may be so excessive that the mind completely prevents them and may not recognize some events that led to the trauma (Rothbaum et al., 2007; Gillihan, 2016). The brain may go through some ways that help avoid trauma, such as *"if I left work just a few minutes ago"; "I shouldn't have gone out at that hour"; "I should have seen it coming for me"; "Why wasn't I more careful?"* (Gillihan, 2016).

2.8.5 Guilt and shame

Trauma experiments often cause those feelings. Many individuals often blame themselves for things they did or did not do to survive, especially if the trauma is related to injuring or killing someone close to us. Therefore, we might blame ourselves and feel guilty that we didn't somehow stop it. As well as a sense of responsibility for being attacked or hurt, as if we had somehow caused it. Some survivors of the attack believe they should have confronted the attacker, blaming themselves for the attack, but others feel that they wouldn't have been hurt if they hadn't resisted. Besides, they are ashamed that they acted in ways that would otherwise not have been done (Rothbaum et al., 2007; Gillihan, 2016). In the same context, Rothbaum et al. (2007) indicate that guilt about trauma means that you take responsibility for what happened, which makes them feel somewhat more controlled and leads to depression and vulnerability.

2.8.6 Grief and depression

Reactions are common when trauma involves the loss of someone close to us, including frustration, grief, hopeless or despair. These feelings of grief naturally fade away. It can also lead to crying often. Individuals may lose interest in the people and activities they enjoy. I feel that your plans for the future are no longer critical or that life is not worth

living. Feelings lead to thinking about wishing you were dead, hurting yourself, or trying to kill yourself. Since trauma has changed your worldview and yourself, it makes sense to feel sad about what you lost to trauma (Rothbaum et al., 2007).

2.8.7 The self-image and views of the world

Appear more frequently negative after trauma. Some people say to themselves ("If I hadn't been so weak or stupid, this wouldn't have happened to me"), these responses are classified as being more negative after trauma ("I'm an obnoxious person, and I deserve this"). It is still ubiquitous to see others passively and feel that you cannot trust anyone and that the world is not safe. Besides, traumatic experiences suddenly make you think the world is too dangerous. Besides, these negative thoughts make people feel they've changed because of trauma; also, relations with others can become strained with low confidence in others (Rothbaum et al. \$2007).

2.8.8 Communication changes

Traumatic experiments cause those changes because of the painful situation. A person may also become very passive in contact or become angry, verbally aggressive, or demanding (Rothbaum et al., 2007).

2.9 Defense Mechanism

Sigmund Freud, father of psychoanalysis theory- defense mechanisms, is an approach developed by ego to protect against anxiety and threats to self-esteem and things they do not want to think or remember. Sometimes, defense mechanisms control inappropriate or unwanted ideas, memories, and motives from entering the conscious mind. An individual whose function is to distort the truth to eliminate the state of tension and anxiety caused by unresolved frustrations and conflicts that threaten their psychological security defines as subconscious means and methods of psychological defense mechanisms. Similarly, it aims to protect and defend oneself, maintain self-confidence, self-respect, and self-comfort (Zahran, 1978: 41; Vaillant, 1992; Corey, 2009; Anderson, 2012; Malle, 2014; Cramer, 2015; Waqas et al., 2015; MacDonald et al., 2016).

A human being uses psychological defense mechanisms to defend oneself through specific justification. One uses these methods as a weapon against internal conflicts to restore selfbalance and create psychological comfort. In addition, Cramer (2015) defines "defense mechanisms that he believes protect the mind from feelings and ideas that are difficult for the conscious mind to deal with." Sigmund Freud pointed out that ego is the aspect of the character that deals with reality through the character model. The ego still has to adapt to the conflicting demands of the id and the superego. It is part of a character that seeks to satisfy all desires, needs, and feelings. It is an essential part of our personality and works not to deal with events such as social benefit, morality, or even the reality of meeting our desires and needs.

Superego tries to make the ego behave positively and culturally. It implements this part of the personality of all the inner morals and values we gain from our parents, other family members, religious influences, and society. Freud documented a defense mechanism to protect the ego from conflicts developed by identity, higher ego, and reality (Waqas et al., 2015). The ego case cannot deal with the demand for desires, the limitations of reality, beliefs, and ethical standards. Freud knows that anxiety is an internal (unpleasant) state that people seek to avoid. Otherwise, it signals to the ego that things aren't going well. As a result, the ego then uses some defense mechanisms to help reduce these feelings of anxiety (Vaillant, 1992; Waqas et al., 2015).

2.10 Types of defense mechanisms

Anna Freud (1936) describes ten different defense mechanisms used by the ego:

2.10.1 Displacement

Displacement means sticking to our failures, feelings, and desires for the least threatened people or substances. It's a wide-ranging defense mechanism, for example, instead of expressing our anger in ways that can lead to adverse reactions as a (disagreement with the manager). Hence, expressing anger toward an individual or something that does not cause any danger, such as a partner, minor, or pet (Corey, 2009).

2.10.2 Denial

It is an absolute refusal to accept or admit that something has happened. Denial protects the ego from things an individual cannot adapt to changing environments are in danger. Victims of traumatic experiences may ignore what happened before. Drug addicts or alcoholics often deny a problem (Corey, 2009; MacDonald et al., 2016). Denial may protect us from anxiety or pain. It also uses other defenses to protect these undesirable feelings from conscious awareness. Most times, there might be overwhelming evidence that something is true, yet the person will continue to deny its existence or truth because it is too worried to face it. Maybe mean a straight-out rejection of the existence of a fact or truth. In other cases, it might involve recognizing that the object is actual but underestimating its relevance. Occasionally, individuals will recognize reality and the importance of the fact, but they will deny their responsibility and instead blame other people or other outside forces (Malle et al., 2014; MacDonald et al., 2016). Denial claims that there is no obstacle, conflict, or frustration not to threaten self-esteem and thus reduce its tension and anxiety and feel comfortable, coverage of reality, and self-deception. It is a common mechanism among people-especially children on the subconscious level. For example, the mother is very attached to her son. She denies any defect or deficiency in it, just as the individual himself denies the weaknesses and faults to avoid failure (Kafafi, 1990: 378).

2.10.3 Repression and Suppression

Repression acts to keep information out of conscious awareness. However, these memories do not just disappear; they continue to influence our behavior (Corey, 2009). For example, a person who has repressed memories of abuse suffered as a child may later have difficulty forming relationships. Sometimes we do this consciously by forcing the unwanted information out of our awareness, known as suppression. However, in most cases, removing disturbing memories from our consciousness is thought to occur unconsciously (Anderson & Huddleston, 2012). A mechanism protects the recognition of the motives that the individual prefers to deny because of fear of feeling pain, the suffering of conscience, and self-pain. Repression differs from suppression in that repression implies emotional restraint and restraint considering social norms for fear of shame

(Zahran, 1978: 46). It's the basis of unconscious information, through which experience is passed on unconsciously, where our unwanted and excessive ideas and needs for reality are contained in the unconscious. Thus, this mechanism helps the human being absorb the experiences of failure, frustration, defenses, and sexual tendencies and pushes them into the world of forgetfulness and unconsciousness. It begins with emotional repression and ends with the subconscious. A defensive process that an individual undertakes to drive away instinctive motives, the content of which is incompatible with his idea of himself or with the traditions of society. What distinguishes repression from other defense mechanisms is that it is more profound in its influence and more motivating towards extremism (Al-Khalidi and Al-Alami, 2009: 90). Suppression is a defensive mechanism of restraint in anger and tension, while suppression is closer to emotional mechanisms than unconscious ones (Radwan, 2002: 206). Al-Khalidi and Al-Alami (2009: 90) indicate that suppression is a defensive behavior particular in our social life and symbolizes willpower and personal strength. They also affirmed that it was a case of passion, including emotional and unconscious factors, not because of the fear of society, but to appreciate the place of others and talk about persons.

2.10.4 Sublimation

A defensive mechanism allows us to act with unacceptable motives by turning these behaviors into a more acceptable form. For example, extreme anger may take cake boxing to vent frustration (Cory, 2009). Here, Freud thought that sublimation was a sign of maturity that allows people to work typically socially acceptable ways (Freud, 1936). Al-Khalidi and Al-Alami (2009: 92) point out that it is the upholding of our impulses, desires, and behaviors socially and religiously and expressing them in more acceptable behaviors. It is also an unconscious process in which the individual converts a motive that society criticizes as desirable behavior and values. Sublimation is the rise of social motivation, its escalation to a higher level, and its expression by socially acceptable means (Zahran, 1978: 43). The transformation of the energy of aggressive motivation that threatens personality into creative and artistic energy that is accepted and appreciated by society and ascended according to the theory of psychoanalysis can be behind every creative and artistic process (Radwan, 2002: 206).

2.10.5 Projection

It is a defense mechanism that involves taking our unacceptable qualities or feelings to other people (Corey, 2009). For example, if you have an intense hatred for someone, you might think instead he doesn't like you. Moreover, projection works by allowing expression of desire or motivation, but in a way that ego cannot recognize, thereby reducing anxiety. It's a projection of the flaws that exist within us to feel comfortable and to reduce guilt. Someone who drops his hatred for others, like a paranoid state in which a patient drops his aggression against others and then imagines persecuting others toward him, is called a defensive projection (Zughair, 2010: 236). Alkhatatneh (2012: 228) indicates that it's a powerful and dangerous mechanism that works efficiently to reduce anxiety at the expense of distorting reality and repeatedly practicing the expression of the real motives of individuals. It's the basis for developing essential personality tests, known as projection tests, such as the Thematic Apperception Test and the Rorschach Test.

2.10.6 Intellectualization

This defense mechanism allows us to avoid thinking about the emotional, stressed aspect of the situation and instead focus solely on the intellectual element. Thought reduces anxiety by thinking about events in a simple, clinical way (Vaillant, 1992). A seriously ill person may focus on reading all information or achievements to cure the disease to avoid distress and stay out from the reality of the situation.

2.10.7 Rationalization

It is a defensive mechanism that involves explaining unacceptable behavior or feeling rationally or logically and avoiding the actual causes of behavior (Corey, 2009). So, this mechanism not only prevents anxiety but may also protect self-esteem and self-concept. For example, the student may blame the poor test result on the teacher rather than his unwillingness. Further, when faced with success or failure, people return achievement to their qualities and skills while blaming other people or external forces for failures. AL-Deeb (1988: 201) showed that rationalization is an unconscious tendency by an individual to fabricate illusory causes other than real ones, thus deceiving oneself. When faced with a

situation in which the individual cannot act normally, state the right reasons, and lose selfesteem and self-respect, he creates false reasons to avoid embarrassment.

2.10.8 Regression

When confronted with stressful events, people sometimes abandon coping strategies and return to the patterns of behavior previously (Corey, 2009; Deveaux (2014; Anshori, 2015). Anna Freud (1936) called this defense mechanism regression, describing that people act out behaviors from the stage of psychosexual development in which they are fixated. For example, an individual fixated at an earlier developmental stage might cry or sulk upon hearing unpleasant news. The behaviors associated with regression can vary widely depending on the stage at which the person is fixated. It is a return of the level of behavior to an early stage of an individual's development to relieve the pressure caused by an individual facing an obstacle or a problem and avoid a sense of failure without trying to solve the problem positively (Radwan, 2002: 206). Some scholars view regression as primitive behavior rather than reverting to earlier behavioral patterns. They show this by saying that a civilized human being may resort to fighting with a hand under repeated frustration even though he did not do so as a young child (Alkhatatneh, 2012: 221). Regression occurs most commonly for children but also adults. Sometimes, adults fall into a bad retreat after being badly shocked; they also act childish. Sometimes, they bend over their bodies like a fetus in a mother's womb (Anshori, 2015).

2.10.9 Reaction formation

Reduces anxiety by taking up the opposite feeling, impulse, or behavior (Corey, 2009). It is to show exaggerated feelings and reverse true feelings. Sometimes a person feels motivated and concealed by the contradictory reality. An example of reaction formation is treating someone you don't like so much in a friendly way to hide your actual feelings (Anshori, 2015). Why do people behave this way? According to Freud, they use reaction formation as a defense mechanism to conceal their true feelings by acting completely adversely. As well exaggeration of a person's emotions that exhibit socially acceptable feelings, desires, and motives to conceal socially unacceptable feelings and desires. A person frequently uses this mechanism to cover the feelings of malice, resentment, hatred, and jealousy toward

significant people from his life, or to cover up unreasonable fear or evil desire, threatening his self-esteem or provoking his social status (Mohammad and Morsi, 1986: 153). It expresses behaviorally reprehensible motives as a counter-reaction (Zahran, 1978 47). Problems will grow and appear when the unconscious stimulus remains incomplete—a sizeable negative power that can be inadvertently formed (Anshori, 2015).

2.10.10 Withdrawal

Avoidance is part of the defense mechanisms; it involves removing itself from events, stimuli, and communications under the threat of remembering painful thoughts and feelings (Schacter et al., 2011). The way people experience their past and plan for their future affects their behavior and choice of coping strategies (Boltova & Hachaturova, 2013; Iwanicka et al., 2017). Withdrawal may avoid experience and engage in stressful situations (Endler and Parker, 1994). Mainly when psychosis and psychological disorders arise, this reflects the persistence of behaviors from social withdrawal (Mercier, 1992). It means avoiding a stressed person by dealing with people, situations, or things that cause them anxiety. If it forces a nervous person to face these difficult situations, he isolates himself from society (Zughair, 2010: 236). As well, some individuals seem to withdraw behavior in the face of conflict and failure as if they were trying to move away from anxiety by avoiding direct contact with other people, a thing-oriented behavior with which fear and anxiety can grow. To avoid anxiety, individual isolates themselves, refrain from trying anything and discontinue their life changes in a way that reduces their daily activities (Alkhatatneh, 2012: 220).

There are many defense mechanisms, and scholars have other ways to reduce anxiety, some of which include: avoidance, dissociation, altruism, humor, compensation, undoing, acting out, fantasy, aim inhibition, and passive-aggression are used to reduce the conflict caused by these angry impulses. The internal representation of others as controllers continues until adulthood, where any threat can occur (Trijsburg et al., 2000; Steiner et al., 2001; Chávez et al., 2006: 18; Olson, 2008). Defense mechanisms are often seen as adverse reactions. We all need them to temporarily reduce tension and protect self-esteem during critical times, allowing us to focus on what is necessary at the moment. Some of these defenses can be

more useful than others. For example, using humor to overcome a stressful and worrying situation could be an adaptive defense mechanism (Corey, 2009).

The scholar asserted that the Palestinian people's most widely used defense mechanisms are (suppression, justification, and denial). Perhaps the most used in an individual being traumatized is denial. The second stage of trauma, if the person loses the home, land, village, and family member. Plus, when we talk about suppression, it's as if we're talking about unconsciousness and what an individual is trying to ignore to adapt to events in life. Similarly, the use of defense mechanisms is characteristic of Palestinian refugees. The majority withdraw socially because of guilt and lack of courage. It is responsible for leaving their region in 1948 and feelings of inferiority that they did not defend their land correctly. The psychological suffering of Palestinian families varies. They used various mechanisms to cope with the hard reality, which is full of challenges based on the Israeli occupation.

2.11 The transmission of traumatic experiences across Palestinian generations from 1948 to the present

The Palestinian people have suffered from various types of traumatic experiences that have had adverse effects on their psychological and physical development. The impact of these experiments depends on several factors, most notably the extent to which an individual understands the importance of these experiences and their effects on social relations, which may hurt one's relationship with one's family, peers, and political participation. A researcher shows that the most horrible experiences of the Palestinian people are:

2.11.1 The experience of migration

The Palestinian people experienced harrowing experiences when they left their land and property and migrated away for 73 years of displacement. Zionist forces forced them to flee by force of arms in 1948. The word "alienation" has been used to refer to displacement from the country or separation from others. It's a purely social meaning that's incontrovertible, but this separation cannot be done without psychological feelings. In

addition, immigration means leaving from country to country and landing in a new country, especially if the period of alienation is prolonged (Abdel-Hafiz, 1997: 47).

2.11.2 The experience of violence

Individuals living in areas exposed to different conflict events have a higher probability of suffering from physical weakness and chronic disease (Maio and Sciabolazza, 2021). Anyone who sees an act involving a manifestation of violence significantly affects his emotions, such as beatings, arrests, and loud noises, such as explosions. Most disturbing to Palestinians are from terrifying and painful scenes and resounding explosions. It is not surprising that Palestinians, especially children, confuse reality with imagination with their appreciation of the risks. Similarly, it is easier for these children to feel fear and anxiety, as it is difficult for them to understand the actual dimension or distract frightening thoughts from their minds (Moubayed, 2009: 128). The chronic phobias of events, people, or objects that accompanied the event, such as soldiers, sirens, loud noises, and aircraft, may come as a shock.

Sometimes, the child expresses emotions through various actions, such as crying, violence, anger, screaming, or fluid secretion in severe depression. Besides, there are symptoms such as headaches, cramps, difficulty breathing, and vomiting, involuntary urination, lack of appetite for food, sleep, nightmares, and fake pain if they see people in pain or tortured. Such as, if the child witnesses the horrific death of persons close to him or mutilated bodies, or a threat of sources of the child's safety (father and mother), the child will suffer from neurological trauma that may affect their mental health abilities (Jacob, 1999).

The United Nations has confirmed that a quarter of a million Palestinians are vulnerable to violence by Israeli settlers. More than 80 Palestinian housing blocks with 250,000 Palestinians are vulnerable to violence by Israeli settlers. Seventy-six thousand of whom are at high risk, noting that "The weekly rate of settler incidents resulting in Palestinian casualties or property damage increased by 40 percent in 2011 compared to 2010, and by more than 165 percent compared to 2009." According to the United Nations Office for the Coordination of Humanitarian Affairs, OCHA, Israeli settler violence undermines the physical security and living conditions of Palestinians who have been under Israeli

military occupation for a long time. Such violence includes, but is not limited to, physical abuse, inconvenience, seizure, and destruction of private household property, obstruction of access to grazing and farmland areas, and attacks on livestock and agricultural land (Al-Quds Newspaper, 2011). A study by Khamaysa (2012) revealed that there were numerous forms of Israeli violence against Palestinians, including house raids, insults, and arrests, followed by loss of employment (livelihood) within the Green Line 48, injury, lack of access permits to Palestinian territories 48 for humanitarian reasons. In addition to martyrdom, travel ban, deportation, wanted list, land confiscation, disability, demolition of houses, uprooting of trees, house arrest, etc.

A poll conducted by the development studies program revealed that 84.9% of the Palestinians felt that the Israeli violence had led to psychological disturbances among the children. It was ranging the psychological and behavioral disturbances that appeared on the children because of violence against them directly and indirectly, such as the dispersion and lack of focus, weakness of memory and forgetfulness, sadness and depression, excessive movement, violence towards others, bullying, and obedience, staying with adults to feel safe, involuntary urination, and insomnia. However, the Israeli violence affected the quality of games played by children (Palestinian Central Bureau of Statistics, 2001). In the same context, the results of the study of Abu Tawahina (1999) stated that at least 29% of those who were tortured suffered from mental illnesses resulting from torture, ranging from psychological tension, depression, and psychosis. A study, by Sylvie (1990) showed that (94.7%) of the children were exposed to violent scenes and procedures and that 40,000 children were injured, of whom 13,000 suffered partial or total disabilities.

2.11.3 The experience of loss

These persons' traumatic situation leads to psychological or physical distress resulting from harm, directly affecting the astonishment (primary or direct loss) and other persons who have suffered the loss (secondary loss). Here's the loss associated with the occupier. Relate this effect to factors such as person perception, prior experience, self-adapting capabilities, and level of external support available (Medline Plus, 2004). PTSD is the concept used to describe symptoms developed by a person who has experienced distress or trauma and is not one of the natural experiences they can deal with (Radwan, 2006). They considered these disorders to violate the relatively stable psychological situation in which human beings enjoy personal, family, and social harmony. There have been 140 martyrs in Bethlehem at the statistical level since the Al-Aqsa Intifada (29 September 2000-31 December 2009), 568 in Nablus, and 414 in Jenin. The total number of martyrs was 2183, including 140 women (Palestinian Central Bureau of Statistics, 2010). In the same context, Levine (2018) indicated that the Palestinians were stupefied to learn that it had injured more than 700 people and 20 martyred by Israeli soldiers stationed on the fence between Israel and Gaza on 30 March 2018.

The loss experience includes:

- Martyrs.
- Missing persons.
- Prisoners in occupation prisons.
- The bodies of martyrs in Israel in refrigerators or mass graves.

In this context, Hassanein (2010) defines loss as a feeling of grief and loss for those we love or of harming someone, especially if the loss is sudden, sometimes in stages, but every situation is complicated. There are many kinds of losses in Palestinian society, such as martyrdom, arrest, injury, demolition of a house, or removal of any rights and property, resulting from the psychological, military, political, and civil practices of the occupation (Khamaysa, 2012). Many people worldwide suffer from losses caused by imposing armed conflict (or continued occupation in Palestine) on the local population (Ocheing, 2008; Khamaysa, 2012).

2.11.4 The experience of home demolition

The occupation authorities continue the systematic demolition of Palestinian homes and the forced displacement. Not only this, but often, you intend to surprise the homeowners and force them to evacuate their homes, then demolish them with all the furniture and property, and then force the homeowner to pay for the demolition. These incidents, which accompany demolition from beatings, forced evictions, and arrests, are severe psychological experiences for homeowners. A Palestinian woman will be widowed if her husband dies after martyrdom. They will experience the support of some groups. Here, an internal conflict arises between the affected and the martyr's family over the usefulness of the testimony and whether his testimony is helpful to Palestine or the Palestinians (Abu Bakr, 2006).

The results of the Quota study (1997) showed that adults who experienced house demolitions showed higher symptoms of anxiety, depression, and panic than witness and control groups, and children in the loss group showed a higher level of psychological symptoms than children in control and control groups. The witness group differed from the control group in more depression among women and more psychological symptoms among children. Also, women suffered more than men from showing anxiety, depression, and panic in loss and witness groups other than the control group.

A study (Altawil & Nel, 2008a) showed types of chronic trauma in Palestine. For example, and not limited to demolishing the child's home itself by the Israeli forces or watching that event in the homes of its neighbors, relatives, friends. In addition to injuring the child, watching this for his friends, relatives, neighbors, or ordinary people, maybe a family member died before the child's eyes. In terms of the number of buildings that have been affected, 8060 buildings were demolished in Bethlehem, 9951 buildings in Nablus, and 9204 buildings in Jenin (The Palestinian Central Bureau of Statistics, 2010b).

2.11.5 The experience of detention

Palestinians have been exposed to multiple types of physical torture, psychological terrorism. Besides, repeated insults by soldiers during their detention from the moment they were arrested and transported from their homes for late hours to investigation centers, where humiliation, brutality, and violence occurred in various forms (Abu Daf, 2007). In this challenging context, children saw their parents helpless and being humiliated and beaten by soldiers. Besides, another issue affecting the Palestinian family is the torture and detention of thousands of Palestinians. Moreover, according to some estimates, one in three persons imprisoned in Israeli prisons, many of them parents or brothers, were exposed to various types of physical and psychological torture (Qouta, 2004; B'TSelem,

2000). In the study, Shehadeh et al. (2015) showed higher post-traumatic stress disorder (PTSD) levels and general mental health problems associated with the father's families. Also, the children witnessed the arrest of their parents; and they had more such disorders. Children living in villages reported higher levels of PTSD than children living in urban areas or refugee camps. It also found a few differences between the genders. Al-Sarraj (1990) referred to the physical torture used by Israel against Palestinian prisoners in prisons, such as beatings, severe cold, heat, hitting with cables, pressure on the neck, and gas spraying, inserting tools into the genitals, the anus, the pressure on the testicles and the use of the electric shock stick. The study showed that the occupying forces had ill-treated the families of the prisoners, and members of their families had been tortured. Finally, they referred to the psychological torture of Palestinian prisoners as follows:

- Verbal abuses.
- False allegations.
- Personal threat.
- Beat up prisoners for mocking them.
- Spitting in the face.
- The threat to relatives and the threat to rape a family member.
- Forcing the prisoner to watch the torture of others.
- Sleep deprivation.
- Exposure to high levels of noise.
- Water deprivation.

Data show that 850 prisoners have been detained since the outbreak of the second intifada. It is estimated that 750,000 Palestinians have been detained since the beginning of the Israeli occupation in 1967, including more than 10,000 Palestinian women and more than 70,000 detainees since the outbreak of the Al-Aqsa Intifada, including more than nine-hundred women (Abu Al-Hasan, 2010). Qouta et al. (2010) showed a direct link between physical and psychological torture and long-term effects. There is also a statistically significant direct relationship between torture, anxiety, and physical symptoms. In addition, detention has social implications within the family by not allowing more than 20% of Palestinian families to visit their sons. Israel has prevented all people in the Gaza

Strip from visiting their sons in prison for more than five years. Therefore, detention has psychological consequences for members of the Palestinian family because of the humiliation and insult suffered at military checkpoints during visits to their sons inside prisons. It also has more serious psychological consequences for children who have been denied access to their father for many years, suffering from mental disorders because of absence, such as anxiety, lack of sleep, and a sense of isolation. Many children are violent and not as happy as others (Ma'an News Agency, 2012).

2.11.6 The experience of raids (night and day)

Some scholars have revealed repeated practices during the first intifada, the day and night raids of homes by Israeli occupation soldiers, especially during children's sleep, if they have a relative wanted by the Israeli forces. Furthermore, children live in anxiety, anticipation, and an increased sense of any external sound, even if it's simple. The same context (Thabet, 1998: 28) pointed out the relationship between factors affecting traumatic experiences and psychological disorders resulting from traumatic situations. Findings revealed that 8.41% saw the Israeli army raided into houses at night, and 49% saw the army raided into the house during the day.

2.11.7 The experience of amputation

Amputation is a gained condition resulting from loss of one end of the body because of injury, disease, surgery, warfare, or absence of a single party for congenital reasons (Rains, 1995: 41). Amputation due to war, disease, or surgery is a disability because of the loss of a body member. In particular, disability and amputation are physical, social, and psychological problems that affect individuals and society (Tierney et al., 2005: 37).

Healthcare & research and quality in the United States of America have shown that there are 100 million amputees in the United States, among those living with limb loss; the major causes are trauma (45%), and amputations are treated for about 113000 per year (Ziegler-Graham et al., 2008). Palestinian society has a distinctive characteristic of the factors leading to amputation, owing to the conflict with Israeli forces. This conflict created this segment of Palestinian society because of the policy of assassinations, rocket

attacks, and house demolitions, and the media helped to highlight this group. Therefore, amputation has psychological effects, health problems, and social changes on individuals and society. So, intervention is needed to reduce these disturbances, mitigate the adverse effects of amputation, reduce the obstacles facing this group and help these individuals to create coping mechanisms for the new situation, which is an irreplaceable loss. The Palestinian Central Bureau of Statistics (2010) showed that Israeli occupation shot 32,213 citizens (male and female) during the intifada, including 3530 with permanent disabilities (between September 29, 2000, and February 29, 2008). In the same context, Ingres (2018) reported that the "Great March of Return" demonstrations held at the border almost every Friday since March 30, 2018, were met with gunfire from the Israeli army. By the end of 2018, 180 people had been shot dead and 6239 injured by live fire- the vast majority of the wounds in the legs with severe and complex injuries.

2.11.8 The experience of gas inhalation

Abualkibash (2020) found that every Palestinian in the study had experienced traumatic experiences. Moreover, the results revealed that more than 22% of participants experienced 11 to 15 traumatic experiences, such as watching the relatives, friends, or neighbors injured by the occupying forces, as well as inhaling tear gas. Al-Sarraj (2001) showed that (97%) of children were exposed to inhaling tear gas. 67% of children suffer from anxiety, stress, and fear because of the fearful practices of the Israeli occupation, whether from the use of night raids, loud sounds, or heavy, intense artillery shelling at night. Moreover, 87% of the children were exposed to gas inhalation (Abu Hein, 1990, 2004).

2.11.9 The experience of hearing gunfire

During the Great March of Return protests in Gaza in 2018 and 2019, thousands of people were shot-mainly in the legs-by the Israeli army, resulting in horrific and complex injuries. They need surgical and post-operative care, including rehabilitation and mental health support, to people injured during the protests (Médecins Sans Frontières, 2020). The most significant trauma among parents is watching the devastation caused by the artillery and air force attack, which reached 95% for both parents and children. While the

percentage of broke the sound barrier reached 94% among parents, and 90% among children, while the percentage of watching attacks on homes by an air force and artillery reached 93% among parents and 86% among children (Farina, 2000). Selvie (1990) revealed that injured forty thousand children and 13000 had partial or total disabilities. Allostatic load theory explains that prolonged cumulative exposure to violent or traumatic events (e.g., frequently hearing gunshots at night) may activate physiologic response pathways that lead to metabolic or autonomic dysfunction (McEwen, 1998).

2.11.10 The experience of frequented Israeli incursions

Israel has besieged the Gaza Strip for more than a decade, during which its people have witnessed three wars and repeated outbreaks of violence. The economy is in a state of free fall, and the humanitarian situation continues to deteriorate. Israel allows only a few people to leave, and since the border with Egypt is repeatedly closed, people-and in effect often are-trapped (Ingres, 2018). Palestinian people have been exposed to critical events, such as witnessing violence, raids on their homes, arrests, and deaths of family members. Consequently, they have developed anxiety, stress, and sleeping problems (Médecins Sans Frontières, 2020). The scale of the trauma suffered by Palestinian society is large, complex, and varied; the primary trauma to the individual and real danger and threat to his life. While, the secondary trauma by living with the actual reality is constantly threatened, arrested, and killed, as in the Gaza Strip and the West Bank in the occupied territories. Therefore, the consequences of the repeated Israeli incursions spread to all aspects of life in the West Bank and Gaza Strip. Its adverse effects were represented by destruction, vandalism, and displacement, and seeing people being beaten, tortured, and killed (Abu Hein, 2007: 151). In another study by (Assaf and Abu Al-Hasan, 2007), they found that the effects of trauma psychological stress resulting from the Israeli military incursions into the Jenin camp were moderate (56.3%).

2.12 Narratives of traumatic experiences and stress

2.12.1 Being detained, humiliated, and killed

Palestinian refugees interviewed reported that Israeli gangs had detained groups of women, children, and men and were unaware of their fate. So they're worried about these groups because they can't get news from these people or even their families and relatives.

Haj Samer said:

"I was providing treatment services to the wounded during the attack by Zionist forces, and then we had to move from Majdal village towards the Gaza Strip. It's been horrible days. The horror of the situation and the shooting shocked my mother. I always told her it was okay, but the truth is the opposite. I felt death near me every time I saw the bodies on the ground, and the hardest thing I've ever experienced, even at the moment I could never forget, was when I found out that one martyr was my brother. It was hard because I couldn't leave or carry all the bodies, which exhausted me and still made me feel guilty. I will not forget the fact that the Palestinian refugees were arrested and killed. The fact has made me shocked and humiliated by the silence of the entire world."

2.12.2 Being stuck in camps with lack of medical care, diaspora, and helplessness

Participants interviewed in Palestinian camps reported they could not return to their villages and homes because of fear of detention and murder. Israeli forces displaced them in 1948. However, remembering past adverse events is a factor that increases participants' fear.

Haj Mohamoud Hassania said:

"UNRWA is small. There are so-called refugees as long as UNRWA exists, there are refugees, and if UNRWA goes, there will be no refugees and no issue." He added: "As refugees, who can treat themselves?! If one of us gets sick, he should be treated at the hospital at his own expense."

Haj Khalid Ahmed Abu Tama'a said:

"UNRWA did not build me a home, did not educate anyone from my family, and did not provide any service to a member of my family."

He added: "Now I'm 80 years old, I stay home without UNRWA care. Every year they come once to visit me to see if I'm dead or alive. Therefore, no, the policy of ignoring and reducing the services adopted by the United Nations and the United States of America."

He continued: "When I feel sick, whatever it is, they only give me painkillers or aspirin. Who thinks painkillers will cure humans suffering from disease?"

Mohammed Mustafa Jawabreh said:

"As long as our problem exists... we are scattered. The international community has deputed the UNRWA with its responsibility to reduce our suffering. Still, unfortunately, it is now clear to the Palestinian people the UNRWA has destroyed the Palestinian issue and refugee's issue."

He added: "The UNRWA clinic doctor writes you the prescription when you are outside the door before he sees you or conducts the medical examination. The drug prescribed is the same for all kinds of health problems and is a painkiller that is not useful for treating those diseases."

Along the same lines, Al Hajjah Zeinab Mahmoud Salem said:

"Where do I go for treatment? I have nothing, no money, no son, no husband, and brother to take me to the hospital for treatment? UNRWA has a duty to do so."

Haj Majid Mustafa Albulasi said:

"I am a Palestinian refugee. My treatment costs about 6,500 shekels and is not available in UNRWA clinics or government health centers. As well, I appeal to UNRWA to establish a health committee for the residents of this camp. I confirm I do not have enough money to take care of myself and my family. Please tell me, where should I go?"

Haj Mohamoud Hassania said:

"It's called a refugee camp. What does that mean? I have nothing to own and only a house with poor living conditions.

He added: "There are houses that are hard to live in, so animals do not accept living in those houses if it's true to say they are houses."

Along the same lines, Haj Khalid Ahmed Abu Tama'a said:

"We're here in a refugee camp, like the dead. He confirmed we are dead, not alive."

He added: "They made this a refugee camp like detention camps."

Mohammed Mustafa Jawabreh said:

"We, you know what I mean my parents, lived in this house inside the camp, and they were just two people, and at least 28 members of the family live in the same house now; nothing has changed since."

Haj Mahmoud Ahmed Hassania said:

"Is there any country in this world where there are no Palestinian people? They exist all over the world, like (America, UK, Australia, Canada, and Europe). In the entire world, you find us scattered." He added: "Everyone has brothers and uncles and cousins and all of us in separate areas."

2.12.3 Anxiety and Fear

Participants interviewed reported that they had been exposed to a severe fear of being arrested and seeing corpses and demolished houses. They also confirmed that they could not access basic needs and suffered from hunger and thirst while living in caves and tents during the Nakba displacement.

Haj Ismail from the Gaza Strip said:

"When we immigrated and had nothing to protect us from the cold, we dug a big hole and slept in it like the dead inside their graves. My little sister's words emotionally touched me when she was four years old when she asked me if this was a big grave for us". ... "From that moment on, I could not confront the feelings of fear towards the idea of death or talk about those bitter feelings that accompanied these difficult memories, which were buried inside me for 73 years".

2.12.4 Insecurity and uncertain

Participants reported that, following the withdrawal of Arab forces from many areas where they protected Palestinians, Zionist forces had committed the most horrific massacres in Deir Yassin and Al-Dawayima. They stated that leaving the Palestinians in such an insecure situation had created a great sense of insecurity for all. Giacaman (2011) examined human security in Palestinian society and shows that high levels of human insecurity are linked with destruction, loss, and war-related factors. It also revealed that poverty, displacement, and forms of repressive regime lead to a high level of human insecurity.

Al Hajjah Wajih, she is one of the people who experienced the events of the Nakba and witnessed the loss of their loved ones, said:

"The Zionist gangs attacked us and killed my brother Sami, my mother and my father, and they took my little brother to an unknown destination, and Ali and Hussein traveled to Libya and the family was shattered. They left only women and children with pain and fear".

Haji Abdul-Khalek Shabib (Abu Khalil) said with tears in his eyes:

"The Zionist gangs deserted us from Ein Karem, southwest of Jerusalem, and we fled to Beit Jala, but the Zionist gangs started hitting us with mine launchers. Therefore, some people fled to Jordan."

Shabib also says, my mother told me: "Why we'll be staying here alone, you see everyone's gone from here. Especially after the Zionist gangs occupied Deir Yassin and killed women, children, and youth."

Abu Khalil says, "I had three little sisters. I was carrying my sisters on my back one by one to a distant place. We barely reached Beit Jala." He remembers the past days and says: "When almond trees were blooming; we used to move from tree to tree like birds, and we had all kinds of fruits (apricots, peaches, apples), every tree had a story, every street had a story, and every piece of land had a story."

2.12.5 Death and mourning

The refugees interviewed reported that Palestinian families lost many men, children, and women and could not reach the bodies or graves of their loved ones. They noted some families found some people alive in other countries such as Libya, Lebanon, Jordan, and others. They also found several bodies of people murdered in groups. However, they could not perform their religious traditions for the deceased or get a healthy grieving process.

Al Hajjah Zainab Salem from I'rak Al-Manshiyeh said:

"The dearest person passed away, Israel has dispersed us, what can we do about this suffering? We live in separate areas. The enjoyable days have gone away to be replaced by painful days." She added, "My family comprises my brother and I; our father passed away when I was one year old. I am here in the al-Arroub refugee camp and my brother in Amman, I can't see him, nor he does, I can't reach nor does he." She continued further, "There is no dignity for Palestinians, and they have nothing; there is no parallel for Palestinians in the humiliation and the insult they live in."

Along the same lines, Haj Mahmoud Kednawi from the village of Kudna said:

"Death but not humiliation, either a respectable life or death." He added, "Death is better than being humiliated. We were not created as Palestinian refugees for humiliation and insulation inside camps."

One 83-year-old Palestinian woman who survived the Deir Yassin massacre 73 years ago remembers that time with great grief and pain. The Zionist gangs killed more than 250 Palestinians on 9 April 1948, when they carried out a deadly attack on the western Jerusalem village of Deir Yassin. Al Hajjah Mariam Akil (Um Osama) lost her father, mother, and two brothers in the massacre when she was just ten years old. She lives in the Sheikh Jarrah neighborhood in occupied East Jerusalem and is one of the last witnesses to the massacre. Akil said:

"The Jews went down to the village towards dawn, surrounded the village, and did not want anyone to escape from the village. They had come to kill us all, and women and children began to flee when the attack broke out, but no one survived the Jewish bullets, and clashes continued throughout the day. Our entire house was under fire. Our mother didn't know where to hide us, she recalled. The Zionist gang took my 16-year-old brother out into the garden and bowed his head, and they shot five bullets in his head. They killed him in front of my sister's eyes," she said through tears."

2.12.6 Loss of dignity and right of return

The Palestinian refugees interviewed stated that they had lost life, hope, dream, and dignity, pending a just and lasting solution to their plight under applicable international

law and United Nations resolutions. They also believe that there is no dignity for refugees without excellent health services, peace, education, justice, and the restoration of usurped rights. Our right to return to our homeland and property is sacred, non-negotiable, and not time-barred.

Haj Mahmoud Ahmed Hassania said:

"Our dignity [Our dignity], Death but not humiliation, either an honorable life or quick death." He confirmed: "an honorable life or quick death."

Haj Khalid Ahmed Abu Tama'a said:

"Me our honor is our home, it is in gathering our families of our scattered Palestinian people. We have Palestinian people who gave up to our enemy and who live in the diaspora. The world is killing, compromising and slaughtering us as we don't have an issue".

Along the same lines, Al Hajjah Zeinab Mahmoud Salem said:

"There is no dignity for the Palestinian people and nothing they have... these people live in humiliation and insult; where is dignity when a man who has ten kids becomes a prisoner and leaves his family for begging and charity centers? Does he have dignity in such a case?!"

Haj Mahmoud Ahmed Hassania said:

"Everyone who has a right he will take it. Falsehood doesn't still forever. Right is stable, Sooner or later everyone will take his right". He added," I'm Palestinian, my father is a Palestinian, my grandfather is a Palestinian, and my son is a Palestinian. So, I will live and die a Palestinian. The word "Palestinian" doesn't end. It will never end."

He continued further, "I'm Palestinian, my father is a Palestinian, my grandfather is a Palestinian and my son is a Palestinian too. I will live and

die a Palestinian. The word "Palestinian" doesn't end, and it will never end."

Also, he added, "No rest for all the world that is made by God, as long as the Palestinians issue is not solved... no rest for the world, even if just four Palestinians have survived. There is no comfort will be achieved for all people in countries and all the presidents (countries, kings, presidents and even their people), it's the "enigma" so how it would be solved."

Haj Khalid Ahmed Abu Tama'a said:

"The ones who died as martyrs died not for food, but they died for their home and religion... they didn't die for food".

He added, "If you give me my right, I will not fight you, but if you don't give me my right, I will fight you, till becoming martyr. Who told you that the Palestinian issue has died? The Palestinian issue exists as long as there is a Palestinian who shouts in all over the world". ".

He continued further, "The Palestinian issue is alive, and there is no comfort mainly because of the refugees' issue, which is the main reason for the lack of rest in the entire world from West to East."

Mohammed Mustafa Jawabreh said:

"I have a right, and it's not far away, it's since yesterday,... turn me back, give me my right to live in peace you, me and whole world, but if my right is still stolen... I will never abdicate, and I'm ready to sacrifice and to do my best for this issue; for its right which I will not hand it over even if the price is prohibitive as my life or more expensive".

Along the same lines, Al Hajjah Zeinab Mohmoud Salem said:

"I swear they became martyrs for their home and for themselves to go back home." She continued further, "I will not accept any alternative instead of the home till the sea dries and becomes a soil, and till the sand is folded and trying to design a dress for it. I will not be satisfied with any alternative".

2.13 Al -Nakba 1948

The 1948 war is a decisive event in modern Palestinian history. The impact of the defeat of the 1948 war on the Palestinians was profound and shaped Palestinian history. We cannot understand the effects of 1948 without a severe physical analysis of the lives of the Palestinians today, as the Nakba disrupted the social and economic structures of Palestine. The economy in Palestine has been virtually destroyed, and hundreds of villages have lost their population when more than half of the Arab population has been forced to leave their homes (Sterzing, 2011).

Israel refused to allow the refugees to return. They were forced to build a new life in exile; this has led to the deterioration of Palestinian society and the emergence of a new phenomenon in Palestinian society - refugee camps. So far, 73 years later, over 7 million Palestinians continue to live in exile, mostly in neighboring countries, such as Jordan, Syria, Lebanon, and the rest of the world (Allan, 2005; Chatty & Hundt, 2005; Masalha, 2009; Sterzing, 2011; Banat, 2014).

Palestinian refugees in Syria, Jordan, Iraq, and Lebanon, in protracted refugee situations because of the political procedures of different government actors, are denied return to their homes where they usually live and the lack of meaningful legal protection in their host countries. Therefore, they consequently suspended Palestinian refugees between the political situation in a protracted conflict and the fragility of their humanitarian situation, unlike their refugee counterparts. Consequently, Palestinian refugees experience an unfair legal regime (Erakat, 2015). Of the more than 750,000 Palestinians displaced from Palestine during the Nakba events, 90,000 sought refuge in Syria in 1948 (As-Sahly, 1999). By the onset of the Syrian uprising in 2011, the Palestinian refugee population in the country increased to 500,000; they comprised nearly 3% of the population of Syria and 10.5% of the Palestinian refugees falling under the control of the UNRWA (Erakat, 2015). 40,000 Palestinian refugees have registered with UNRWA (The United Nations Relief and Works Agency for Palestine Refugees, 2014).

Most Palestinian refugees in Syria are marked by the memory of the September 1982 Sabra and Shatilla massacres, the eviction of stateless Palestinians from Kuwait during the first Gulf War in 1990, and the traumatic experience in Iraq after the U.S. invasion in 2003. However, the Syrian Army did not prevent invading the Palestinian refugee camp of al Ramel in Latakia in August 2011. This invasion forced the displacement of around 5,000 Palestinians. On 16 December 2012, a Syrian jet bombed Yarmouk Camp—the most prominent Palestinian refugee camp in Syria–in what the government claimed was an error, killing tens of civilians (White, 2013; Erakat, 2014). The mass displacement that followed reduced Yarmouk's original population of 160,000 to about 30,000 inhabitants; as well as, in April 2013, forcibly displaced in a single day around 6,000 residents from Ein el-Tal refugee camp, "following months of sporadic armed clashes" (White, 2013).

A recent study conducted by Nashwan, Sobh, Khamaysa, Harahsheh, and Salem (2021) about elderly Syrian refugees who fled from Syria to Jordan, and part of them are Palestinian refugees. They reported that trauma and departure had an effect that was highly associated with lack of self-care after taking depression into account with lack of physical energy and feeling of pain "as a psychosomatic illness." Palestinians, old and young, who live in refugee camps in Palestine/ or neighboring countries, such as Lebanon, Jordan, Syria, the West Bank, and the Gaza Strip, have grown up with trauma tales. They face daily violence, insecurity, and fighting and find refugees behind closed borders (Manna', 2013; Banat, Entrena-Durán, and Dayyeh, 2018). Until now, many families in refugee camps inside and outside Palestine have held on to the keys to their lost past of seventyone years of refuge experience and immigration, through the transmission of trauma between three generations later (Rabaia et al., 2014; Dayyeh, Banat, and Barmil, 2018). All the Palestinian camps suffer from overcrowding, unemployment, poor housing conditions, inadequate infrastructure, and a lack of access to justice (Erakat, 2015; UNWRA 2020a). Moreover, previous research revealed socioeconomic problems facing the Palestinian refugees in diaspora (Jacobson 2003; Peteet 2005; Petrigh 2006; Savigh 1995; Ugland 2003; Tiltnes, 2007). Generally, the refugee camps are deplorable and considered relatively dangerous places to live (Serhan et al., 2005). Hanafi et al. (2010) indicated that Palestinians have and will continue to suffer the consequences.

Life under constant stress and enduring social and economic deprivation (Tiltnes et al., 2013) has led to many problems with refugees suffering emotional, economic, and psychological deprivation in the absence of parents because of martyrdom, imprisonment, and deportation (Khamaysa, 2015); are also likely to create mental health problems for many Palestinians living in refugee camps (Alduraidi et al., 2018). As poverty, violence, and a lack of hope of returning to Palestine have led to widespread annoyance and exasperation within the refugee community; many Palestinian young expressed their desire to leave the camps and emigrate (Serhan et al., 2005), which made matters worse in the Palestinian camps in Syria and Lebanon. The Syrian Civil War has generated an influx of Syrian refugees into Lebanon and Palestinian camps, creating extra competition for scarce resources such as aid and work opportunities; this has exacerbated the Palestinian refugee problems (Nilsson and Badran 2019).

Meanwhile, Israel has wholly changed Palestine, destroyed Palestinian villages, and almost completely removed the Arab character of the country. Historical sources show the Nakba forced over 900,000 Palestinians to migrate from their towns and villages immediately after Jews and their secret militias destroyed 20 cities and over 520 Palestinian villages, especially those on Palestinian territory from the coast from Naqurah to Gaza. These places became ruins or Jewish settlements (Abu Sitteh, 2001).

Politically, the Palestinians have not only lost their state, as stipulated in resolution 181 of the United Nations General Assembly in November 1947 but have also led to a revolution within their political leadership, which continues to resonate in Palestinian politics today. In addition, cultural and intellectual life continues to be shaped by the repercussions of 1948, which significantly impact Palestinian politics and society (Sterzing, 2011).

Anyone who wants to pursue and understand Palestinian history must recognize the various fundamental effects of the Nakba, which are harmful to the physical, psychological, and social aspects of the displaced Palestinians (Najib et al., 2015; Khamaysa, 2012).

2.14 On the 73rd anniversary of the Nakba.

The story of residents facing eviction dates to a major disaster when Palestinians were expelled from their lands in 1948.

2.14.1 Sheikh Jarrah neighborhood evictions

The eviction of Palestinian families from the Sheikh Jarrah neighborhood in occupied East Jerusalem has caused a considerable outcry. As well as Jewish settlement, organizations seek a court ruling to evacuate homes from their Palestinian residents. The judicial battle has fueled tension, and the protests have turned into violent and bloody confrontations. The 1948 war, called the Nakba by the Palestinians, ended with the proclamation of the State of Israel. Many Palestinians currently threatened with removal have been displaced from the neighborhood of Sheikh Jarrah, on the eastern side of the old town, outside the wall. These 28 families and other villages around Jerusalem have been displaced and from West Jerusalem, completely taken over by Jews. The displaced families had taken refuge in East Jerusalem, established tents, and lived there. Some settled with relatives. Those families were identified as refugees and granted a refugee card or the so-called "ration card" issued by UNRWA. In 1956 the Ministry of Reconstruction and Development agreed with UNRWA that the Jordanian government would assist 28 families who had moved to Jerusalem to build tiny houses for them in Karam al-Ja'awni, part of the district of Sheikh Jarrah with a total area of 808 dunums. The current population of Sheikh Jarrah is estimated at 3,000, which has already happened. Prince Hussam Al-Din Ibn Sharaf Al-Din Issa Al-Jerrahi, the doctor of renowned military leader Salah Al-Din Al-Ayyubi, founder of the Ayyubid state, gave the name of Sheikh Jarrah. The neighborhood was established in 1865 and became the home of some notable families, such as Nashashibi, Jaralla, and Nasiba (Anadolu Agency, 2021; Monte Carlo Doualiya, 2021).

The Jordanian government developed a structural scheme and divided the land into 28 lots, each family having a space of land and a small house. UNRWA funded the project in exchange for family renunciation of refugee status and the return of the ration card, with a nominal fee to the Government of Jordan of 50 Jordanian fills per year, for three years. Then, the government would register the houses in their names; without going against the

right to return to their original villages later. Amman did not officially register houses with families' names for an unclear reason, although the West Bank and East Jerusalem were under Jordanian rule (1951-1967). The neighborhood boys grew up, got married, gave birth, and their number increased; over the years, they have had to add some rooms to their homes to number about 550 people today, living on 18 dunums (the dunum is a thousand meters) (Ukraine Gate, 2021).

In 1967, Israel occupied the eastern part of Jerusalem, and the West Bank. In 1970, Israel enacted new legislation on legal and administrative affairs. It stipulated that Jews who had lost their property in East Jerusalem in 1948 could recover it to their property. In contrast, Palestinians owned 30% of West Jerusalem real estate, but this legislation does not apply. Earlier, settlers had taken the neighborhood of Sheikh Jarrah through right-wing religious movements armed with the Jewish Property Restoration Act and claimed that the great clergyman named "Shimon Al-Siddiq" was buried in the neighborhood. He is a priest attributed to the founding era of the Second Temple. The Talmud claims to be the priest who met Alexander the Great upon his occupation of Jerusalem (Monte Carlo Doualiya, 202; Ukraine Gate, 2021; Anadolu Agency, 2021).

The Palestinian families appoint Israeli lawyer Isaac Cohen to defend their lands and homes, giving him documents dating back to the Ottoman period of 1876. However, Palestinian families were shocked that Israeli lawyers had leaked documents to the Jewish Colonization Association (ICA), including the Nahalat Shimon (בחלת שמעון), which consists of 40 Georgian immigrant families. As a result, Palestinian families feel oppressed and injustice by Israeli courts, robbed by Israeli lawyers, attacked by settlers, and theft of homes, land, and others; this led in 2021 to the conflict in the neighborhood of Sheikh Jarrah again. The purpose of the settler attacks on this particular area is that it constitutes an obstacle to geographical communication between western and eastern Jerusalem. The neighborhood is an Arab spot in a Jewish neighborhood. Thus, Palestinian families in the Karam al-Ja'awni area of Sheikh Jarrah live under the threat of deportation and struggle to stay in their land and homes, from which they were tricked by Jewish lawyer Isaac Cohen (Monte Carlo Doualiya, 2021).

2.14.2 Al-Araqeeb forced evictions

Al-Araqib is an "unrecognized" Bedouin village near Beer Sheva, in the Negev desert. Evacuated in 1951 by military order, the residents of Al-Araqib returned to its territory at the end of the 1990s. The village is illegal and has been regularly destroyed since 2010 and threatened by new legislation such as the Prawer Plan. The al-Araqib inhabitants struggle to survive in their village and their right to live on their land, particularly "resilience." To ensure a presence on the ground and continue despite the difficulties that have reduced the number of families, the various policies established by the Israeli State since established to control the Bedouin presence, particularly by entering the Bedouins in towns and declaring their land state property (Lecoquierre, 2015).

From 2000 to the present, the Israeli government has continued to demolish the village of al-Araqib to frustrate the village's inhabitants and displace them from their lands. However, residents insist on staying at home and rebuilding them. So, they also replaced their homes with tents to counter plans to get them out of their village. The Yoav unit of the Israeli police, the Negev Development Authority, has been breaking into the unrecognized village of al-Araqib, which is threatened with death and displacement. The Israeli occupying forces also destroyed the village over one hundred and ninety times in a row without stopping (Maan News Agency, 2021).

Many villagers reported that the Israeli authorities aimed to deepen their suffering. They repeatedly demolished their village and left them homeless in the open, without regard for extreme cold or hot weather. The authorities continue to restrict the people of the al-'Araqib population in several ways, including imprisonment, heavy fines, payment of money for the Israeli authorities for demolitions, and under the pretext of seizing the land of the State of Israel (Arab48, 2020). In the same vein, the Bedouin village of al-Araqib, despite being physically demolished, has minimal media impact and is now in the new media world on top of the Nakba mobile app (Schejter & Tirosh, 2016: 101).

2.15 Palestinian Generations

The Palestinian Nakba began in 1948 and represented the beginning of one last remaining settler-state colonial occupations and the longest and largest unresolved refugee crisis

since the Second World War (Pappé, 2006). Young Palestinians in Jerusalem and other parts of Palestine are constantly injured, killed, imprisoned, colonized by Israelis, and routinely resist. The Israelis must be deeply worried about three crucial things that strongly portends Israel and Zionism over the past five generations. Palestinians have become more efficient in the technical aspects of the struggle, sometimes including military dimensions. Every generation has absorbed and strengthened its national and personal Palestinian identity, naturally and organically, by osmosis from its parents. Just as Jews have done for thousands of years, people worldwide increasingly appreciate the justice of the Palestinian issue and criminal and cruel behavior (Khouri, 2015). In the context of the importance of the study, the scholar divided Palestinian generations into five categories according to wars and conflicts experienced by each generation, as follows:

2.15.1 The first generation (grandparents)

From the grandparents' era, the first Palestinian generation around 1900-1920 was the generation that saw the duplicitous British colonial powers make conflicting promises to Arabs and Zionists about the future status of the land after World War I (Khouri, 2015). The generation experienced the 1948 war, also known as the Nakba. Palestinians refer to the human tragedy when forcibly displaced from their homes and witnessed the removal of most political, economic, and cultural monuments. The Jewish State has also founded on the ruins of homes, lands, freedom, and Palestinian rights and self-determination.

The Nakba events include the occupation of most of Palestine by the Zionist movement. Some 750,000 Palestinians have been expelled and become refugees, as well as dozens of massacres, atrocities, and looting of Palestinians. During the Nakba, more than 500 villages and cities were demolished and then converted into Jewish cities. Most Bedouin tribes living in the Negev have been expelled and destroyed the Palestinian identity, erasing Arab geographical names and changing them to Hebrew names. Also, Israel destroyed the nature of the original Arab cities to attempt to create a European landscape ("Nakba Day," 2021).

2.15.2 The second-generation (parents)

Around 1920-1947, the second Palestinian generation resisted an existential threat created by large-scale Jewish immigration to Palestine to establish a Jewish "national home." The

parents' generation tried but failed to resist a colonial power and Zionist plans to build the Jewish State (Khouri, 2015).

The generation lived through the 1967 war, also known as the June "Setback" and the "Six-Day War." It was a short and bloody conflict between Israel, Egypt, Syria, and Jordan from 5 to 10 June 1967. Israel used misinformation, with its leading politicians declaring that their soldiers were on vacation at these times and that they were advocates of peace. The following day, Israeli aircraft destroyed the Egyptian Air Force, shocked Arab peoples who had awakened after the June defeat, which had led to the occupation of the West Bank, Sinai, and the Golan. However, Israel threatened to use excessive force (repression) against the occupied population in the West Bank if they allegedly committed acts of violence. They have brainwashed Arab and Palestinian prisoners through solitary confinement in prisons and small rooms and through the constant starvation of the prisoners and their families to get their confessions before investigators, who are implementing new ideas that Israel is an invincible state. It can also reach all fighters everywhere (Shukair, 2014).

2.15.3 The third generation (youth)

The third Palestinian generation who lived around 1948-1970 was stunned by the loss of Palestine lands, eviction, and the new state of Israel. They could only count on the support of the Arab States in the battle to restore their Palestinian land and rights, which was unsuccessful and reached a nadir in the losses of the June 1967 war (Khouri, 2015).

2.15.4 The fourth generation (children)

The generation that witnessed the Al-Aqsa uprising in 2000 is a massive, conscious, organized, inclusive, and mass stand against Sharon's entry into the Al-Aqsa Mosque. It is a confirmation of the Arab identity of Jerusalem, which is the heart of Palestine. The Al-Aqsa Intifada began in the wake of the provocative visit by (Ariel Sharon) to Al-Aqsa Mosque on Thursday 09/28/2000 and the heinous massacre committed by the Israeli occupation forces against the Palestinian Arab people in the squares of the Al-Aqsa Mosque during Friday prayers at 29/09/2000 (The Higher Movement Committee at Department of Media and Culture in Palestine, 2005: 123).

The intifada generation has witnessed a qualitative and dangerous escalation by the Israeli occupying forces in the occupied Palestinian territories, which continue to commit war crimes and crimes against humanity in a sped-up manner. The forms of this escalation are large-scale incursions into many areas of the Palestinian Authority, unprecedented aerial bombardment of strength and intensity, damage to private property, and increased targeting of civilians and their property, creating a chronic and compound trauma (Al-Mizan Center for Human Rights, 2001: 2).

Around 1968-2000, the Fourth Palestinian Generation got to mobilize through any means possible, fight with guerrilla warfare of small groups, and organize political action through the Palestine Liberation Organization. The 1987 and 2000 uprisings marked serious popular resistance against Israel and Zionism, using non-violent and violent means, and the 1993 Oslo Accords' unsuccessful attempt to get our national rights through diplomacy that would lead to statehood and an end to the Israeli occupation (Khouri, 2015).

2.15.5 The fifth generation (grandchildren)

Since 2000, the fifth Palestinian generation has taken to the streets of Palestine to fight and to do everything possible to end this conflict and get its national freedom. This generation, including grandchildren, was born or matured during the Oslo accords years, which established neither statehood nor an end to Zionist occupation and colonization (Khouri, 2015).

The generation that witnessed a war (2008) was called the "Al-Furqan War" by the Palestinian resistance, and Israel called it "Operation Cast Lead." This war lasted 22 days, from 27 December 2008 until 18 January 2009. The Israeli occupying forces violated the faltering temporary ceasefire between them and the Gaza Strip several times, using all instruments of criminality and aggression, and destroying everything in the Gaza Strip. The war left 1.440 martyrs and more than 5450 wounded and displaced 9,000 Palestinians from their homes (Palestinian Dialogue Network, 2012).

2.16 The atrocities and massacres committed by Jewish terrorist gangs against the local Palestinian population

In 1948, the evacuation of 560 Palestinian towns and villages by Zionist militias and the Israeli army could not have occurred without an organized campaign of massacres and atrocities, of which 156 were recorded. The campaign led to the evacuation of 220 towns and villages before the proclamation of the State of Israel and under the watchful British eye before any regular Arab force could intervene, showing that the massacres were a weapon of ethnic cleansing (Abu Sitta et al., 2020).

The most prominent popular features of these massacres:

- 1. Attacking Palestinian villages despite a peace agreement.
- 2. Attacking villages before a state was declared while Palestine was under the protection of the British Mandate, thus leading to the evacuation of 220 towns and villages, which represent half of all refugees today.
- 3. Attacking the villages in military formations and in far superior numbers to defenders, (a battalion of two to three hundred soldiers with superior arms against a dozen farmers with old rifles).
- 4. Attacking the villages from three directions to allow flee towards the fourth direction.
- 5. After the villages were taken, men, women, children were killed for no military reason. Random, brutal killing, and going from house to house killing people, as well as killing passers-by in the street or the road.
- 6. Deliberate terror. (E.g. grabbing a child and splitting his head with an axe), and telling his mother go and tell others. (Repeated: Abu Shusha, Dawayma massacres).
- Finding women huddled in a cave or a hiding place and terrorizing them. Besides, taking men away, killing them, and throwing bodies in a well (Dawayma, Safsaf massacres).
- Killing men in groups and forcing them to dig trenches and bury them there. (Bi'na, Majd el Kuroum, Eilaboun massacres).

9. The key action, eviction: forced march of the survivors towards another village, against two rows of Zionist soldiers, shooting at their feet and over their heads. (Abu Shusha, Lydda). Moreover, robbing women of Jewelry during the march. Thereafter, preventing the return of the expelled refugees, killing them, poisoning wells, looting then demolishing houses, burning crops (Abu Sitta et al., 2020).

In the same year of the Nakba, Zionist gangs carried out a series of terrorist and criminal acts, including massacres, mass killings, the planting of explosive devices in markets and population centers, the bombing of buildings and headquarters, and the encroachment of bodies and injuries, which led to the displacement of many Palestinians.

The forced displacement of the Palestinians was already planned, and its goal was to evict Palestinian people from their lands. The Zionists, having got the Balfour Declaration in 1917, sought to characterize Palestine as a "land without a people." To achieve this claim, they resorted to using violence, terrorism, massacres, and mutilations of the dead bodies, and military operations were accompanied by psychological warfare by leaking this news to the neighboring villages and towns. Hence, Zionists gangs sowed fear and anxiety in the hearts of the residents and used rumors that led to the evacuation of the villages to preserve their lives. After 1948, the year of the Nakba, the Palestinians entered a new era of land grabbing and displacement to neighboring areas. About 750,000 Palestinians became refugees, demolished about 500 Arab villages, converted them into Jewish cities, and attempted to destroy and erase the Palestinian identity.

The Zionist Jewish terrorism did not stop until the present time, as every day, it commits a massacre against the Palestinian people. This crime did not stop as long as the Zionist entity was on the land of Palestine. These are some massacres committed by the Zionists against the Palestinian people (Abu Sitta, 1997). In their efforts to strive toward getting control not only the Part of Palestine granted to the Jewish State under the UN Resolution (181), but also land designated to the Palestinian State; the Zionist forces and gangs committed the following massacres:

2.16.1 Deir Yassin massacre on April 9, 1948

The village of Deir Yassin is located 6 kilometers west of Jerusalem on the hill that connects it to Tel Aviv, near six settlements, especially the settlement of Givat Shaul. It subjected Jerusalem to successive blows, and the Arabs led by Abdul Qadir Al-Husseini were achieving great victories, so the Jews needed a victory, as they said, to break the spirits of the Arabs and raise the morale of the Jews. Deir Yassin was an easy opportunity for them. Zionist military organizations needed an airport to serve the inhabitants of Jerusalem. The killing and declaring the massacre was part of a general Zionist project to eliminate the indigenous people by killing them.

At the dawn of 19 April 1948, the Irgun Zionist gang, led by Menachem Begin and the Stern gang led by Yitzhak Shamir, attacked the village of Deir Yassin. They surprised the villagers with heavy artillery, machine guns, and land mines. It also demolished the houses on the heads of their residents while they were asleep. The Irgun forces entered from the east and south of the village, and the Stern forces north. They thus surrounded the village from all sides except the western side, which remained open. The Palestinian resistance initially faced a Zionist attack, resulting in the death of 4 soldiers and the injury of 40 attackers. The Palestinian women of the village did not abandon the resistance but helped to provide fighters and stand on the battlefield. They agreed to this attack in advance with the Haganah forces. The number of victims was about 260 martyrs from the defenseless residents of this village; this massacre and other massacres were terrorist acts, violations, and how armed Zionist organizations controlled Palestinian areas to prepare for the creation of the Israel State. It was common practice in the horrific massacre of Deir Yassin by Zionist gangs to surround a village, despite the surrender of its inhabitants. Men and boys were lined up and shot, and there was a brutal massacre (Pappe, 2006; Rashed et al., 2014; Al-Bayoumi, 2015). Pappé (2007) reveals that 500 women, children, and men were killed. To counter the steadfastness of the villagers, the Jewish attackers regained their support from a camp near Jerusalem, where they bombarded the village with mortars. In the same token, Abu Sitta et al. (2020) Zionist forces committed one of the most infamous massacres of the war in the village of Deir Yassin on the western outskirts of Jerusalem.

The village was free of any resistance by noon, and they used dynamite to blow up Palestinian homes. It was not until the Arab ammunition ended, and after the bombardment ended, they shot at all men, women, and children, stopped dozens of villagers on the wall, shot at them, and continued killing for two days. They practiced torture and indiscriminate abuse of men and women, amputation of the dead. They killed pregnant women, extracted fetuses, cut hands, legs, noses, removed eyes, smashed skulls, and cut off women's ears to extract gold earrings. Zionist gangs threw 53 children from residential neighborhoods outside the old village wall.

In addition, Zionist gangs placed some living men and women in buses to go back and forth in the streets of Jerusalem and then shot dead; the bodies were thrown into the well and tightly closed their door to hide the crime. Zionist military movements prevented the head of the International Committee of the Red Cross (Jacques de Reynier) from entering the village for more than a day. In contrast, the Haganah soldiers who occupied the village collected the bodies and then bombed them to mislead the Red Cross, suggesting that the victims had died during the armed clashes. In addition, Red Cross delegates found the bodies dumped in the well and found a six-year-old girl. At the time of the massacre, the reporter stated Zionist forces had raped a Palestinian girl in front of her family, after which they tortured her, cut off her breasts, and then threw her into the fire (Al-Bayoumi, 2015; Rashed et al., 2014).

A woman who survived the death says I saw a Jew shoot my brother's wife (Khaldiya), who was about to give birth and then cut her belly with a knife. When another woman tried to get the child out of the bowels of the deceased mother, Zionist gangs killed that woman; her name was Aisha Radwan. In this context, Menachem Begin stated in one of his writings that:

"The massacre at Deir Yassin contributed more than the other massacres committed by Zionist forces to evacuate the country." He also said that: "the Deir Yassin massacre had contributed to the establishment of the State of Israel, without which there would be no such thing as Israel." The main aim of these massacres was to spread terror and fear among Arabs, and they largely succeeded (Al-Bayoumi, 2015).

2.16.2 Naser al-Din Massacre 13-14 April 1948

The village of Naser al-Din is about 7 kilometers southwest of Tiberias, which was besieged by Zionist gangs from all sides. There are reports of Arab armies being supplied through nearby villages to help Tiberias. Zionist forces controlled all the main entrances to the village; they got that information regarding the access of those supplies to Tiberias through the village of Nasser al-Din. Stern and Irgun gangs sent their forces dressed in Arab clothes and were greeted by villagers thinking they were Arabs but were soon shot, and only 40 people who fled to the other villages survived. The number of victims of this massacre was 50 out of 90 and lasted from the night of 13/4 until 14/4/1948 (Al-Bayoumi, 2015).

2.16.3 Mazraat El-Khoury Massacre on 05/05/1948

Zionist gangs gathered around a building owned by the Khoury family in Nasser al-Din village in Tiberias, poured oil on the building, set it on fire, and killed those inside it. The gangs did this under the military forces' protection and released village elders to talk about what they saw and witnessed. They mocked the people, saying: "Ask the Arab countries to come to help you" (Al-Bayoumi, 2015). Farook (2017) reported that the Haganah forces committed a massacre in Mazraat al-Khoury. Many women, the elderly, and children were killed, and Haganah forces cut their limbs and heads. Besides, they tortured young men alive, brought them into the house, and burned them. They were mocking the Palestinian youth and saying: *Why don't the Arab countries come to save you*?

2.16.4 Abu Shusha massacre on 14/05/1948

The village of Abu Shusha was located five miles southeast of Ramla of Palestine until 1948. Abu Shusha had approximately 1,009 people; the entire population is Muslim. The village had 9,425 dunums, most allocated for cereals or irrigated orchards. In the early months of the war, Abu Shusha was first attacked in what the Haganah called "the model of a studied retaliatory operation." According to the story given by "The History of the Haganah," the hit-and-run attack was retaliation for the death of a guard from the nearby settlement of Gezer, killed while trespassing on fields owned by the Abu Shusha village. After midnight on April 1, 1948, two platoons of the Giv'ati Brigade's Second Battalion, accompanied by other forces, infiltrated into the village, and demolition experts blew up a

house and a well (Al-Bayoumi, 2015; Abu Sitta and Saah, 2020). In the second phase, Giv'ati Brigade's Second Battalion besieged the village from all sides at dawn, bombed it, entered and killed everything that moved in the village, and arrested many men. This massacre ended with all the inhabitants of the village being deported from their homes and demolished in stages. As for the women, they hid in caves for an entire week. It formed a committee to bury the dead and use caves and mountains as mass graves (Al-Bayoumi, 2015). Once the village was occupied, Zionist forces began the ethnic cleansing of the village from its Palestinian inhabitants. Villagers were killed on the street or in their homes. Some were axed to death, while others were shot. Jewish fighters found a group of men in one house and killed them with axes. In front of another house, some men lined up on the wall and were executed. This horrific scene was repeated throughout the village and continued a deadly silence until declared "victory." In Abu Shusha, the Giv'ati brigade killed 70 civilians. A report to the International Committee of the Red Cross said, "*The Jews have committee barbaric acts, including rape.*"

Three days after the village attack, the Haganah soldiers saw Fatima Nimr Al-Sawalha emerging from the caves to fetch water. Frightened women led the Zionist gangs to the caves, later ordered residents to leave. A few men hid in caves to escape detection, making their escape later, and the remaining villagers came out of hiding. A terrible scene greeted them, where women saw the bodies of their relatives, their husbands, sons, brothers, and uncles. They faced an uncertain future (Al-Bayoumi, 2015; Abu Sitta et al., 2020).

2.16.5 Al-Tantura Massacre on 25/5/1948

Zionist historian Teddy Katz at the University of Haifa in 1998 explained that the testimonies of survivors showed Zionist forces killed 230 Palestinian martyrs in the massacre. Katz's research also revealed the methods of the "Alexandroni" soldiers and said that what happened in al-Tantura was a mass massacre. It awarded scholar Katz a reward for his academic research, but because of racism and media rumors against the scholar, the university withdrew its recognition of his academic thesis about the al-Tantura Massacre (Al-Bayoumi, 2015; Pappé, 2001). The importance of the massacre is reflected in the number of victims who died, which came a week after the proclamation of the State of Israel and a month after the massacre at Deir Yassin. It aimed to achieve the Zionist goal of

ethnic cleansing displacement of the inhabitants. The United Nations archive file reveals one of the most heinous Zionist crimes on the 19th of Ramadan in the al-Tira neighborhood of Haifa; the Zionist forces took 80 people to prisons, then transported them to buses, poured gasoline on prisoners, and burned them (Pappé, 2001; Morris, 2001).

2.17 Collective Trauma

Collective trauma is a traumatic psychical effect shared by a group of people of any size, up to and including an entire society. Traumatic events witnessed by an entire society can provoke collective feelings, often in a transfer of the society's experience and culture and mass activities (Garrigues, 2013; Updegraff et al., 2008; Gelder, 2019). "Collective trauma" emerges between sizeable groups of individuals—such as mass murder, war, a terrorist attack, and disease. The effects are explicit below:

- The fear.
- Violence.
- Depression.
- Guilt.
- Physical responses.
- Sickness and a sense of disconnection or indifference.

Moreover, collective traumas can transmit across generations and societies (Garrigues, 2013). Collective traumas cannot be revoked or neglected. People band and support each other. Collective recognition and shared experience are its hallmarks. Else, campaigns were not merely about raising awareness—they brought victims together nationally and internationally by sharing personal experiences and describing previously concealed events (Gelder, 2019; Tosone, 2021).

It is necessary to address the critical concept of "collective trauma" or "collective loss" to distinguish between two types of collective trauma. Traumas result from the circumstances and situations of armed conflict and war. Military procedures in conflict zones aim to preserve "security of the population," as perspective and ideologies of the occupier, or the control of human beings and land from the victims' perspective. The other type is traumas

resulting from natural disasters, and of course, victims feel that these calamities were imposed on them. These traumas will produce profound changes in individuals, groups, frameworks, and communities. They will materially affect the political and social processes that in turn will affect not only those directly vulnerable, such as women who had a tired loss, but also other categories such as men, children, and elderly, as well as the next generations (Peace, Conflict and Development, 2008). The complication of the political situations and the traumas that occur in a political situation that traumas resulting from situations of armed conflict become a part of the thoughts and feelings of victims and pursue them for many years (Bajraktarevic-Hayward, 2008).

2.17.1 The collective memory of trauma among Palestinian refugees

The concept of collective trauma memory has been widely used in academic disciplines that teach societies and cultures. It is almost impossible to read a text in the social sciences of the twenty-first century that does not include the term "collective memory of trauma" in the world in general and in the Palestinian question in particular. Cultural issues and their relationship to politics through meaning and action have led to confusion and changes that have hit Palestinian society socially, culturally, and economically. Thus, the culture problem centers on a triangular equation (the body of the land, the collective body, the individual body) as the core of the conflict. It represents the sacred consciousness of the values and symbols of the liberal labor system by erasing the "right to land" of the Palestinians; the Zionist entity used all policies, crimes, and massacres to control the land. Control began to form before and after the 1948 disaster, and in 1967 when the Palestinian lost land (physically) and retained its moral or symbolic value in his imagination and collective memory. The Palestinian refugees used a substitute for the land he lost with (Key of return) as a reference to his liberal project and the (collective consciousness) as an intellectual and cultural incubator. The Palestinians fought the liberation battle to restore the land (land, people, dream), and their motto (man and land) was the theme of the beginning of the liberation struggle.

Meanwhile, the scholar considers the constituent elements of martyrdom where finds a human being who believes in a dogma that elevates the testimony and lives in a social environment that honors the martyrs and their relatives. Persuasion martyrdom for the sake of God for the liberation of the homeland and legitimacy of defense of the land and the sacred is firm the Palestinian people. The weapon of martyrdom is one of the most effective weapons of resistance for liberation and victory (Dajani, 1998).

Memory contributes to the formulation and shaping of both the present and the future and plays a vital role in protecting and preserving national identity. Therefore, the Palestinian narratives of those who tested the Nakba reflect the painful reality of loss (loss of son, family, relatives, land, home, identity, and dignity). Their narratives are critical in documenting and transmitting rights and suffering to other generations, accompanied by the names of Palestinian families, persons, villages, and cities, to protect the Nakba archives. Therefore, if a particular group of people loses their collective memory, they lose their identity and thus integrate with other cultures or societies forever. The nation is based on two things; firstly, it must have a sense of shared history, particularly the memory of joint suffering that seems more important than the conflicts and divisions that exist on that date. Secondly, people must have a desire to live together (Kamenka l 976: 12).

The collective memory of trauma refers to the psychological reactions to a traumatic event affecting an entire society. It reflects the recall of a horrific incident that occurred to a group of Palestinians, not just a historical fact. Like other forms of memory, the collective trauma of the Palestinian Nakba catastrophe includes the production of events and the ongoing reproduction and formulation of trauma to make remembering of it. The collective memory of trauma varies from individual memory because collective memory continues beyond the lives of direct survivors of events and is remembered by group members who may be far displaced from traumatic events in space and time. So, this is happening between different generations of Palestinians. These consequent generations of trauma survivors who have never witnessed actual events may remember events differently from immediate survivors, so the construction of these past events may take a distinct form from generation to generation. Such collective memory of the disaster experienced by the group's predecessors in the past may give rise to the selected shock dynamic that weaves the relationship between trauma, memory, and ontological security (Volkan, 1997).

Embodied in objects, images, and gestures, Palestine cannot shape the imagined synchronization of like-minded people who dream of returning to Palestine. Thus, rituals of

remembrance provide a touchstone, such as the memory of childhood, providing an absolute continuity of life almost determined by the practices and rituals of the surrounding communities in which Palestinians indulge (Bowman, 1993). Thus, the Palestinian "narrative" of nationalism was an account of popular groups concerning the land and a statement of the formation and reform of the Palestinian cultural imagination (AbuFarah, 2008).

Linking memory to self-identity or community identity as the extended Palestinian family sees it as a collective identity through respect for customs, traditions, and social norms. However, if individuals condemned this value, it would accuse them of neglect and lack of attention and weaken their social standing. Here, heroic action is linked to self-definition or identity in society. Individuals are children, adapted to their desires and will under the collective will of the family. They have always encouraged individuals to see themselves as others see them and measure their individual experiences according to the collective consent measure (Muhawi and Kana'na, 2001: 39). The enthusiastic words said by some of the martyrs' mothers and sons at the crowded funeral of the martyrs, carrying their bodies, were very expressive, thus confirming their determination and resilience in the face of the Israeli occupation.

A researcher talks about an Israeli occupation that exists everywhere and chronic trauma and loss (individually and collectively). This loss is distinguished because it embodies continuous traumatizing violence without prior preparations. It is an unexpected event, which forms a moral disaster for the Palestinians, that encourages individual self-sacrifice to preserve the collective dignity. The moral sense does not mean canceling or ignoring the elements of personal disasters that have reached the limits of infringement of fundamental human rights, preserving the Palestinian man from practicing his humanity. In addition to the continuing threats to his security, life, and property, any current loss is not the only loss. Therefore, it is difficult to determine its destiny away from the previous loss; this is the "accumulative trauma" made by the Israeli against the Palestinian people and contains wars, massacres, displacement, detention, and torture (Arab Center for Future Studies, 2002).

2.17.2 Palestinian land in collective memory

It's the images that come to mind when we think about Palestine, like the map, wall, key of return, and olive tree (Ballister, 2019). Despite over 73 years since the Nakba disaster, Palestinians are not tired of celebrating Earth Day. One of the most memorable days of their struggle, a historic turning point in their survival, affiliation, and identity since the 1948 Nakba, followed by the second turning point with the events of Jerusalem and Al-Aqsa in 2000. This anniversary is celebrated on 30 March each year to confirm their commitment to their homeland and land (Land Day has become a symbol of Palestinian resistance). Thus, the land and its era became a symbol of survival, entity, and identity (Awawda, 2010).

2.17.3 Dream of return

Today, Palestinian refugees keep the dream of returning to their land and their usurped homes. They keep the flame of return alive in the souls of their children, generation after generation (Mireles, 2020).

2.17.4 The key of return is a symbol that cannot be erased from the collective memory

It's the key that opened the door to the house where he was born. It also symbolizes the desire to return home preserved by every Palestinian refugee (Torres-Solanot, 2014). In the same context, Sorek (2015) stated that the key of return symbolizes the houses Palestinians left as part of the Nakba.

The keys to Palestinian homes remind them of the house they will get when they return. We have a house in this place, and we're going back to this house one day. It excites longing for something they like or hope to return. It symbolizes its inhabitants who abandoned these houses, which happened to most Arab villages in the occupied Palestinian territories after the Nakba in 1948. Keys without owners, that's an indescribable feeling. Until today, people keep their keys, but what's the point of having the key without the house? The key to the home left behind by the refugee refers to his right recognized by all. It's a symbol of constant suffering and unfulfilled hope, so the Palestinians hold the key as a symbol of the past and the future (Adwan et al., 2011: 30).

2.17.5 Camp

The camp is a population gathering built on a narrow area of land, which is given at the disposal of the UNRWA by the host government to accommodate Palestinian refugees and assist them in meeting their basic needs. The UNRWA provides complete control of the camp and only provides health services, education, relief, and social services for exceptional hardship cases. Areas are not designated and are not recognized as camps (UNRWA, 2019; Banat, 2002). The plots of land up are state land or, in most cases, land rented out by the host government from local landowners. It means that the refugees in camps do not 'own' the land they built their shelters but have the right to 'use' the land for a residence (UNRWA, 2019). A camp is a place where people who have escaped their own country can live, usually in poor conditions and only expecting to stay for a limited time ("Cambridge Online Dictionary," 2019).

2.17.6 The Palestinian refugee camps

Palestine refugees: Persons whose natural residence was Palestine from 1 June 1946 to 15 May 1948, and who lost their homes and livelihoods because of the occupation in 1948 (UNRWA, 2019).

The Nakba displaced 800,000 of the 1.4 million Palestinians living in historic Palestine in 1948 in 1,300 villages and towns. Thousands of Palestinians were expelled from their homes and lands and stayed in the area controlled by the Israeli occupation. The Israeli occupation controlled 774 towns and villages and destroyed 531 Palestinian towns and villages during the Nakba. Most of the displaced Palestinians ended up in neighboring Arab countries, the West Bank, the Gaza Strip, and other countries worldwide. Atrocities committed by Zionist forces also included over 70 massacres of over 15 thousand Palestinians (PCBS, 2020).

Palestinian camps were officially established between 1948 and 1950. One-third of Palestinian refugees live in Jordan, Lebanon, Syria, and the West Bank, 58 registered Palestinian refugee camps, and established ten camps after the Six-Day War. The remaining two-thirds live in the West Bank, the Gaza Strip, and the cities and towns of host countries (Al-Zaytouna Center for Studies and Consultations, 2020).

The total number of Palestinian refugees is about 5.6 million, of which 28.4% live in 58 camps (19 in the West Bank, 12 in Lebanon, 10 in Jordan, 9 in Syria, and 8 in the Gaza Strip). However, it is estimated that this is the minimum number of refugees, as many are not registered. This figure does not include Palestinians displaced between 1949 and the Six-Day War in June 1967. UNRWA's definition did not include Palestine refugees who had emigrated or been displaced after 1967 because of the war and had not been registered as refugees (UNRWA, 2019). The Palestinian refugees are living in the West Bank, Gaza Strip, and the Palestinian territories before 1948 account for 41% of the total number of refugees. Nevertheless, neighboring countries such as Jordan, Syria, Lebanon, Egypt, and Iraq host about 43% of Palestinian refugees. Moreover, roughly 16% of Palestinian refugees are dispersed in the rest of the world (Banat, 2014).

There are ten camps in Jordan, 9 in Syria, 27 in the Palestinian Territories, 19 in the West Bank, and 8 in the Gaza Strip (Sobani, 2007). Palestinian refugees account for 47.9% of the total population in the West Bank and Gaza Strip, representing 2,159,015 refugees (PCBS, 2018, 2019; PRC, 2020). According to UNRWA records on Palestinian refugee statistics, the number of registered Palestinian refugees is 5,571,893; In Palestine, the following: West Bank: 17%, with a total; of 895,703 refugees; and Gaza Strip: 24%, with a total of 1,263,312 refugees. While in Jordan 40%, with a total of 2,110,114 refugees; Syria: 10%, with a total of 528,711 refugees; and Lebanon: 9%, with 474,053 refugees (UNRWA, 2017).

In Jordan, the number was 3,240,473, and an annual growth rate of 2.47% during 2016, according to the Jordanian Department of Statistics (PCBS, 2019). More than 75% of Palestinians abroad live in Palestine's neighboring countries (Jordan, Syria, and Lebanon). Palestinians are still connected and close to their land and expect their return after 72 years of the Nakba.

The society includes many groups that interact with each other, maintain stable and social relationships and share common interests and goals set by values, customs, and traditions that regulate their behavior and relationships to ensure the survival and sustainability of society. Therefore, each group is concerned with certain behavioral norms based on its values to distinguish it from members of other groups in society. Moreover, each group

affects its members to adhere to these rules to preserve its existence, and these rules preserve its social structure (Othman, 1999; Khamaysa, 2012; Banat, 2014).

2.17.7 Theories of collective memory in the sociology of the body and social psychology of martyrdom

2.17.7.1 Durkheim Theory

According to Durkheim (1984), collective consciousness combines shared beliefs, ideas, and moral attitudes that function as a binding force in society. The concept of "collective memory" is the identity of a social group constructed from narratives and traditions created to provide a people with a sense of community. Since the experience of collective effervescence required the physical gathering of the community, it was important for groups to devise methods to prolong that unity when the group dissolved. He believed that totems, natural objects considered sacred, had immense power and suggested that they provided individuals with a device to remember the unity of the group effervescence experience individually. Although Durkheim claimed that collective effervescence provided the transmission of the past to the present, it based his emphasis on collective thinking on individual memory and the celebrations and totems that triggered those memories (Durkheim, 1995: 16).

E. Durkheim noted that societies require continuity and connection to the past to preserve unity and social cohesion. His study of traditional religious traditions suggested that rituals transmitted traditional beliefs, values, and norms. Shared rituals provided a sense of "collective effervescence," transcendence of the individual and the profane into a united religious (sacred) group. Durkheim asserted that collective thinking required individuals to come together physically to create a shared experience shared by the group (Durkheim, 1995: 16).

2.17.7.2 The reputation theory of embodied martyrdom

The concept of 'embodied memory' might help understand precisely how 'the body recalls early trauma' (Leuzinger-Bohleber, 2008). The reputation theory of embodied martyrdom shows that social institutions are based on the social recognition of bodies and the relationships between the body, identities, and culture (Turner, 1984). Scheper-Hughes and Wacquant (2003) point out that "increasingly, the body is an asset that does not belong to us," that is categorized, exchanged, and pushed into a commercial marketplace of ideas. Burial, for example, can become a controversial issue with political or religious consequences (Benziger, 2002). The reconstruction of the actual trauma is crucial in helping the survivor understand the body's language and connect it with conceptions, visions, and voices. The body's irreversible traumas and vulnerability as the 'symbols in traumatic history' must be recognized, emotionally accepted, and understood to live with them and not deny them. The critical aspect of psychoanalysis is trying to understand the meanings of things related to the trauma (Leuzinger-Bohleber, 2008). Therefore, integrating the trauma in personal history and identity is considered one of the main aims of psychoanalytic treatment with a harshly traumatized survivor. Palestinian martyrs, who ensure spiritual transcendence over death, embody the reasoning of giving their lives for Palestine and their religious and national community. Thus, martyrdom is a process of 'construction through destruction, where an individual's distress can become a blessing to a whole society (Aijmer, 2000; Khamaysa et al., 2021a, 2021b).

2.17.7.3 The theory of (Malek BENNABI), the Algerian thinker, on the susceptibility to colonization.

(Malek Bennabi) spoke of the "network of social relations and colonialism," he said that the network of social relations ensures the survival of the society, preserves its personality and regulates the vital energy so that the society can lead the joint activity in history. We know colonial activity when visible, like a child's game. Still, we do not realize its nature until it is clear as the devil's game. It may be enough a needle prick in a suitable place to resolve the paralysis of a network of social relations in the country (colonial occupier). It may also be enough to paralyze the nervous system in a living organism.

Unfortunately, we cannot, under the impact of our mental situation, understand the work of occupation colonialism except when it makes noise, like (the noise of a tank, a cannon or an airplane). When it comes to the measurements of an artist, or the work of a rodent, he loses consciousness, for one reason, is that it does make noise, you will notice that man is absolute (reality), not by what he sees, as you do, with his eyes. Therefore, but by what he thinks without reference to history or sociology, his mental upbringing prevents him from

seeing what is before his eyes, flesh, and bones. In truth, it is. We cannot say that colonialism causes all traditions hostile to society. Although most of these traditions are our own making, all traditions serve their destructive work. Every year they generate a substantial social deficit in our activity. So whatever the case of the means used, the objective is always the disruption of social relations until the end of its colonizing effort (Bennabi, 1989: 76-87).

2.17.8 The martyr as a cultural archetype of the collective memory

Martyrs are tangible cultural resources, used when "people may need a symbolic object to define, explain, or prompt a course of action" (Schudson, 1989), helping the audience to understand collective and social memories around cultural objects and practices. Their deaths and legacies call for social action, militarism, or nationalist identity. As the cases illustrate, the martyr's body is essential to capturing the essence of martyrdom and understanding its boundaries, opportunities, and limitations. Moreover, renowned entrepreneurs use the body to invoke martyrdom as a tool of collective memory. In death, the story of martyrdom emphasizes both the body's action and the pain it suffers. The remains of the body are used to cement martyr status. Finally, when later partisans invoke martyrs, they often appeal to bodily suffering to link the martyr to a particular cause. Each of these uses of the body highlights the various capacities of the body to perform cultural work (Scarry, 1985; Igarashi, 2000); making physical experiences a vital part of cultural discourse.

Ultimately, the role of the martyr is fundamentally social, as it depends on the recognition of bodily sacrifice in the form of particular scripts. Many have died for causes throughout history, but only a few have made a conscious decision, and even fewer have agents to bring the story to life (Smith, 1997). The effectiveness of these reputed entrepreneurs in distinguishing the martyr from other cultural archetypes and bringing their stories to the forefront of collective memory lanes depends on the selective emphasis of some details and the omission of others. Their bodies continue to resonate as symbols of social memory, in part because of the strategic work and pressures associated with the broader institutional and reputational patterns present in cultural systems. By making the martyr's body accessible to the public, entrepreneurs and institutions can use it to coordinate and strengthen social norms and collective values by presenting social frameworks to analyze historical and contemporary events (Klapp, 1954; Schwartz, 1996). Indeed, this theme has important contemporary implications. Through the vicarious experience of their agony and the visceral power of their body image, martyrs embody hopes, fears, and social life. Therefore, the present thesis concentrates on a current continuity of emphasis in the literature on social and collective memory, adding the role of embodied martyrdom to what Olick and Robbins (1998) essentially call "the connective structure of societies." The analysis describes the freedoms and limits of symbolic work around physical bodies, contributing to the sociology of culture (Jansen, 2007). The existence of embodied martyrdom suggests the value of further investigating cultural representations of historical objects and moments, recognizing the rhetorical power of the physical body in the formation of collective memory. The dual engagement with the past and contemporary relevance and identity allows embodied martyrdom to sustain shared social memory, developing unity around the materiality of faith and sacrifice (DeSoucey et al., 2008).

2.17.9 The martyr as a social archetype in collective memory

Martyrs are polysemic symbols accessible to renowned entrepreneurs in a variety of contexts, often controversial. They operate in spaces of social change and upheaval, usually located at historical points of action (Schudson, 1989). Martyrs' stories are marked by personal action, violence against the body, institutional execution, and often last words or actions that articulate the martyrs' commitment to firmly held beliefs and identification with a cause (Klapp, 1954; Boyarin, 1999; Mulvihill and Farmer, 1999). The martyr narrative is compelling because it focuses on the image of an ordinary person willing to accept extraordinary death and pain (Glucklich, 2001), giving his body and life for the strength of his belief (Gossman, 1997; Smith, 1997).

The pain and death at the hands of institutional opposition make the violence associated with the martyr's death and subsequent reputation function as a tool of authenticity for reputational agents and the public (Scarry, 1985; Puppi, 1991). Therefore, giving the sacrifice of life a resonance it would not otherwise have (Kleinman and Kleinman, 1994; Glucklich, 2001). To the extent that martyrdom involves actively opting for death rather than abandoning a belief, the martyr publicly embraces a political, ideological, or religious

position that puts them in opposition to powerful institutions (Mulvihill et al., 1999; Castelli, 2004). Martyrdom comprises renowned entrepreneurs with a history of embracing unpopular beliefs and accepting the ultimate sacrifice. It is the willingness to die rather than renounce these beliefs that generate the powerful images of physicality on which followers rely to proclaim and propagate the martyrs' beliefs and their own beliefs as well.

2.17.9.1 Collective memory and its representation of martyrdom embodied in the moment of death

The stylized, often dramatic, narratives of the martyr's execution usually include a description of the events leading up to the execution, including the ritualized speech or final words that often relate to the agency and relative personal importance of their body (Droge and Tobor, 1991). Such representations help establish the martyr's body as a resonant but contested cultural object. The focus on the corpse versus personal sacrifice elevates the martyr's body to the level of the sacred (Durkheim, 1995), thus transforming the martyr from an ordinary person into an extraordinary symbol of an institution or social cause. Kaufman (2000) affirmed the repulsion towards institutional torturers.

The ritual of martyrdom manifested itself in glorifying the martyrs and the pleasing expression of martyrdom attacks and the perpetrators of the attacks and the penetration of martyrdom in popular culture, including movies, comedies, and drama. Some researchers believe that the continuation of martyrdom operations depends entirely on the enthusiastic support of the local population (Moghadam, 2009). Palestinian society places martyrs in a prominent position and regards them with great respect, as their life and work are part of the history of Palestinian resistance. They hold up their photographs in squares and streets and tell stories of their heroism in mosques and schools. In the face of the occupiers, martyrdom has become the highest value of sacrifice and redemption. Palestinian society cares for the families of martyrs from the moment of their martyrdom, moral and physical support, full of honor and praise. It has made the culture of martyrdom a broad headline for all those who seek a diverse culture that focuses on heroism, power, greatness, honesty, patience (Khanfar 2002; Hussein, 2003).

2.17.9.2 The body in memory: the bodies of martyrs in history

Interested agents evoke the embodied reputations of martyrs at different times, places, and historical contexts as reverential and referential models of a communicable past. The communities can use them both for and against the very institutions against which the martyr fought. In the reputation framework, martyrdom is assigned to current needs and through the embodiment of changes between an abstract concept and a material object. Stories are told and retold, printed on the pages of history and legend, with details of choice deliberately included or excluded (Nora, 1996). Each of the martyrs' reputation stories highlights conflict and dissent, often due to the social location of supporters and opponents.

2.17.9.3 Collective memory and embodied martyrdom: linking reputation with bodies

Renowned entrepreneurs committed to a martyr's legacy have a rich symbol in the physical body at their disposal. The martyr's story is replete with words and actions that demonstrate courage, leadership, and vision, providing scope for turning words and actions into symbolic resources. The role of the mortal body as a reputational resource is less explored.

The body has increasingly become a fashionable topic of scholarly interest (Scott and Morgan, 1993; Shilling, 1993; Blaikie et al., 2004), accompanied by recognizing a mutually reinforcing relationship between the body and culture (Howson and Inglis, 2001). Thus, while Western thinkers have long attempted to separate mind from body and culture from nature (Blaikie et al., 2004), such analytical separation minimizes the importance of embodied experience, often described by feminist scholars (Conboy et al., 1997). The body is a "hub of sociological analysis" (Turner, 1984) and a site of nuanced understanding of diverse and fractured historical constructs (Scott and Morgan, 1993). It is a site where abstract concepts such as identity (Bernstein, 1997), citizenship (Valentine, 2005), and nation (Zerubavel, 1995) acquire physical form and cultural meaning.

Scott and Morgan (1993) condense the symbolic roles of the body into "4 Rs": Reproduction, Representation, Regulation, and Moderation. We add a fifth R, Reputation, to this list of symbolic roles for the mortal body and reinforce this addition by exploring the cultural power and representation of particular historical bodies in both life and death. By using depictions of the subsequent desecration of the body, reputable entrepreneurs paint the martyr's fate as much crueler. The body gives physical form to a cause, value, or belief system and serves as a concrete reputational symbol for the suffering faced by its supporters (Naveh, 1990; Igarashi, 2000).

The literature on collective memory has focused on the importance of physical memorial structures, such as monuments, in the construction and persistence of collective memory (Wagner-Pacific and Schwartz, 1991; Allen and Parsons, 2006). Such structures offer the cognitive sphere of reputation work a degree of heuristic value to focus emotion and feeling (Zerubavel, 1995), the embodiment of collective memory. We focus on three key areas where the symbolic power of the body, as a focal point, is deployed by credentialed entrepreneurs: the body and its treatment at the time of institutionalized death, the treatment of the body after death, and finally, the use of physical reminders to invoke memory and reputation long after death. Thus, the physical body assists those who seek to shape memory by providing a material form to anchor moral authority.

2.17.9.4 Linking reputation and collective memory in Palestinian refugee camps

The body has progressively become a popular topic of scholarly interest, accompanied by an understanding of a commonly reinforced relationship between the body, culture, and society (Howson et al., 2001; Blaikie et al., 2004). Here, Palestinians recognize Istishhady as a symbol of the struggle for freedom and heroic sacrifice for the good of all and the creation of life for the other generations until the end of the occupation (Banat and Ajarma, 2017).

Reputable individuals committed to the martyr's legacy have a rich symbol in the physical body at their disposal. As noted above, the martyr's story is replete with words and actions that show courage, leadership, and vision, providing a domain for turning words into actions. Israeli government warned that the bodies of the martyrs and the participation in their funeral, the words of the mothers, and organizations full of praise for the martyr, are essential factors for the continuation of martyrdom. Therefore, they decided to keep the bodies of Palestinians and Arabs in these secret cemeteries, mainly if they had carried out attacks against Israel; if this happens, they will be buried in one of Israel's "cemeteries of numbers." They will not be handed over to their families as a method of mass punishment

and deterring them from carrying out such martyrdom operations (*Fedayee*). In the same context, Khamaysa's study (2012: 194) showed that Israel refused to hand over the bodies of martyrs to their families by 68.2% and buried them in the "cemeteries of numbers."

Collective memory studies have focused on memorializing physical structures, such as gravestones (monuments), on the construction, continuity, and production of collective memories (Schwartz, 1996; Allen et al., 2006). The Palestinian refugee maintained a powerful collective memory of the Nakba. The painful experiences are not insurmountable, as older refugees may die, but the young will never forget, as they know their hometown, which their ancestors were forced to leave. This right of return is and remains imprescriptible and they will not hesitate to sacrifice their lives if it helps the Palestinian people to return to their homeland (Banat et al., 2018). Palestinians are understood to have suffered a violent uprooting from their land (Entrena-Durán, 2009, 2010). These structures provide the cognitive sphere of reputation work with a heuristic value to focus emotion and feeling (Zerubavel, 1995). It bases collective memory on shared values, norms, experiences, common fate, and a shared history of the individuals concerned (Dayyeh, 2019). Therefore, a martyr's (physical) body helps shape memory by producing a material form in which to root moral power (Desoucey et al., 2008).

2.17.10 How martyrs are used in Palestinian refugee camps, and their usefulness in collective memory

I used a reputational approach to clarifying a martyrdom theory synthesizing cultural symbols, collective memory and body politic. The making of a martyr, relies on the resources of the martyr's supporters and the cultural context into which the martyr's vision is introduced. Martyrs are used 'on the ground' and given cultural and material use. The reception of the martyr's mortal body, in particular, as a source of identity and meaning gives emotional weight to social ideas about sacrifice and death. Control over martyrs' bodies derives from reputational entrepreneurship's cultural and political complications, thus utilizing the body as a culture medium (DeSoucey et al., 2008). To explore this concept of embodied martyrdom, I will discuss the Palestinian cause.

In a society where the prolongation of life is one of the most central values, the willingness of martyrs to die for a cause makes them ripe for sociological investigation (Johnson and Sautter, 2004). The role of the martyr's body as a cultural object through which belief and sacrifice take material form and are open to change and challenge (Naveh, 1990; Turner, 2003). The analysis avoids a psychological reading of martyrs as principles of choice over self. Instead, it focuses on how respectable entrepreneurs' various body uses contribute to the production of reputation (Fine, 2001).

The employs the martyr's body by reputable entrepreneurs for political, religious, or cultural purposes; together with the concept of accepting death for one's beliefs (Cormack, 2002), these business rationales, enshrined in the body, distinguish the martyr from other archetypes, such as the victim, the hero, or the traitor. The embodied martyr is a resource for interest groups seeking to provide concrete proof of the righteousness of a cause (Klapp, 1954; Loades, 1970; Smith, 1997). To elicit desired behaviors, generate collective identities, and persuade a potentially indifferent audience, leveraging the martyr's story makes tangible the values and beliefs that reputational entrepreneurs seek to promote. Through memorialization and commemoration, these actors constantly realize and reproduce the cultural power of the body well beyond the moment of death, making martyrs physically present and cognitively memorable (Schudson, 1989).

In the same context, Fine (1996, 2001), reputations as the construction of socially recognized characters connected to shared images and markers of identification and embedded in social and historical relationships. Although martyrs are, by definition, posthumous charismatic personalities, they need not possess the values associated with Weber's conception of charismatic leadership while they live (Weber, 1978). The reputational entrepreneur, not the martyr, transforms the body image into powerful enough to break the established social order. The body itself is a tool that serves as a marker of nationalism, religiosity, and cultural traditions that reflect more profound claims about social worlds (Castelli, 2004). The analysis uses the role of martyrs' bodies to relate to and build on the growing and promising literature on social memory (Olick and Robbins, 1998; Saito, 2006), emphasizing the theoretically nuanced connections between bodily experiences (Kleinman et al., 1994), narratives (Igarashi, 2001), and reputational

entrepreneurs (Fine, 1996; Jansen, 2007) within the boundaries of symbolic and cultural work.

2.17.10.1 Ways of transmission of collective memory from generation to generation

The transmission of Palestinian collective memory from older to younger generations contributes to preserving Palestinian culture and heritage, and more effort is needed in this area. The Israeli occupation seeks to destroy the remaining Palestinian collective memory by removing Arab names from towns, villages, and streets, demolishing Palestinian buildings, and constructing modern buildings to conceal Palestinian Arab features. However, young Palestinians were attracted to the stories told by their parents and grandparents.

The Internet effectively informs younger generations of Palestinians about their traditions, culture, and heritage by creating websites dedicated to Palestinian collective memory and culture. These sites include "Palestine Remembered," "Palestine Facts," "Map of Palestine," "Nakba Archive," etc. Research centers have played an essential role in preserving Palestinian memory through interviews and research on the stories of the displaced during the Nakba, such as the Institute of Palestinian Studies in Beirut, the Palestine Return Centre in London, and the Center for Palestine Studies at Columbia University. Television is a very influential channel that can change perceptions and inculcate ideas in the minds of the public, especially young people, by producing television shows or series on topics related to Nakba, Palestinian Alienation" is the best example. Furthermore, movies about the Nakba, like "Man's Back,"; "A world, not ours," "3 logical exits", "I signed the petition," and "Xenos." Besides the protests in Gaza from 2018 to today, called "return marches," these are all means that contribute to the transmission and preservation of Palestinian collective memory.

Nakba day is the annual day of remembrance of the Catastrophic, also known as the Palestinian tragedy, which comprised the destruction of Palestinian society and homeland in 1948 and most Palestinian people's permanent displacement. It is commemorated on 15 May, the day after the British Mandate for Palestine and the establishment of the State of

Israel (Lesch and Frankel, 2004). As early as 1949, one year after the establishment of the State of Israel, 15 May was set in several West Bank cities (under Jordanian rule) by demonstrations, strikes, the raising of black flags, and visits to the graves of people killed during the 1948 war. Worker and student associations, cultural and sports clubs, scouts clubs, refugees' committees, and the Muslim Brotherhood organized these events. The speakers in these gatherings blamed the Arab governments and the Arab League for failing to "save Palestine" (Sorik, 2015). By the late 1950s, 15 May had become known in the Arab world as Palestine Day, which was cited by the media in the Arab and Muslim countries as a day of international solidarity (Masalha, 2005).

The cultural and literary contents reflect the experience of the Palestinian society in its continuous struggle to maintain its physical, social, and cultural existence in the face of the enormous challenges it has experienced. These challenges include uprooting, displacement, forced migration, and the transfer of its culture and homeland with the force of international repression to benefit a foreign settlement community from 1967 until now (Al-Quds Open University, 2000). Palestinian literary works focused on national consciousness and resistance to their beginning in 1948. Palestinians rejected Israeli laws and took pride in Palestinian Arab identity. In 1967, it reflected a new spirit of Palestinian literature and art through the establishment of the Palestine Liberation Organization. The spirit of anger and resistance culminated in the Palestinian and Arab literary press inside and outside Palestine. It preoccupied most of these Palestinian literary and artistic works with the themes of martyrdom, imprisonment, and sacrifice, in addition to calling for the preservation and revival of national culture, emphasizing the role of women, political affiliation, and national unity.

2.17.10.2 Intergenerational transmission of parental Nakba (Cross generations)

The traumatic events experienced during any displacement stage could have effects that last long after a family has settled into their current life and alternative home country. Meanwhile, the grandparents and parents are adapting to their psychological distress, their caregiving performance and efficiency may be crucially endangered, and their offspring may suffer because of the initial first-generation trauma (Ornelas et al., 2011). It absorbs the historical trauma into the cultural memory of the group and flows from generation to generation in the exact mechanisms by which culture is generally transmitted (Duran et al., 1995). The direct long-term impact of forced displacement on those who have experienced the exodus, scholars have demonstrated that associated symptoms reproduce into the next generation (Sack et al., 1995; Montgomery et al., 2001; Daoud et al., 2012). The traumatic experiences of the Nakba are prevalent among the first generation of Palestinian refugees. Also reported seventy-seven percent of the Palestinian refugees surveyed going through traumatic experiences. The study revealed that gender and household members were significant predictors of traumatic experiences among the first generation of the Nakba. These traumatic experiences of the Nakba have become firm in the collective memory of the Palestinian refugees (Dayyeh et al., 2018).

The scholars hypothesized that intergenerational transmission of trauma is a critical determinant of the mental health of refugees according to their studies which argued that mental health consequences of parental trauma affect offspring of Holocaust survivors and combat veterans (Carmil et al., 1986; Solomon et al., 1988; Solomon, 1998; Dekel et al., 2008; Felsen, 1998; Cohen et al., 2001; Kellerman, 2001; Özüorçun-Küçükertan, 2013; Fossion et al., 2013). Original communities throughout the world suffer from intergenerational or historical trauma resulting from forced assimilation and displacement. In line with the study conducted by Duran et al. (1995), this context suggested that historical trauma such as trans-generational trauma affects a subjective re-experiencing and remembrance of traumatic events by an individual or a community over multiple generations. Nina Fischer (2015) asserts that memory work is not a dispute with trauma among-first- or second-generations but an everyday human activity, which is in this case increased by the losses of the catastrophe and produced by the socio-historical specificities of being developed into the aftermath of genocide (Bladek, 2019). Traumatic experiences are not being erased, as older refugees may die, but the youth will never forget. As these refugees endure to be dispossessed of the right to return to the land where their forefathers had lived until they were violently displaced from the territory, the collective memory reproduction of the Nakba becomes deeper and stronger (Banat et al., 2018).

Nakba events can revive Post-traumatic stress disorders in each generation as members continue to witness the effects of the initial trauma experienced by previous generations,

even when the new generation is concealed from the specifics of the trauma narrative. Each successive generation might then exhibit its trauma symptomatology, which is often different from symptoms revealed by the prior generation (Milner et al., 2010). They possibly involve the transmission of trauma from one generation to the next, apparently in the offspring's proclivity for growth following subsequent trauma (Dekel et al., 2013). Some survivors from the catastrophe reported that they developed their intimate relationships proposing to establish a secure and supported space, to counterbalance the psychological uncertainty and lack of emotional security they felt linked with their parents' struggles in covering their experiences (Somer et al., 2014).

There are some studies on the intergenerational transmission of trauma in refugee families, focusing on war-related traumatization, as well as other studies conducted in conflict zones show that exposure to the traumatic events associated with torture causes the growth of PTSD in childhood and adulthood (Nader et al., 1993; Carlson et al., 1994; Montgomery, 1998; Rousseau et al., 1999; Thabet et al., 2000; Quota et al., 2003; Abu Hein, 2001; Montgomery et al., 2001; Daud et al., 2005; Attari et al., 2006; Vaage et al., 2011). Studies about refugee families have revealed the impact of the forced displacement of parental trauma history on their children. Family histories of violence (grandparent's violent death before the child's birth or parental exposure to torture) were the strongest predictors of prevalent sleep disorder by refugee children from the Middle East (Montgomery et al., 2001). Daoud et al. (2012) explored the effects of displacement on physical health among displaced Arabs in Israel and their offspring. They pointed out that displacement causes long-term and trans-generational adverse effects on physical health than the non-refugee Arab minority in Israel. There is an important relationship between the traumas of the parents and the injury of their children to PTSD (Sack et al., 1995). Research on trauma survivors reported that exposure to traumatic experiences to offspring is correlated with psychological adaptation in children of disturbed parents (Dalgaard et al., 2015).

Theoretical knowledge in sociology and psychology showed parental trauma experiences are determined to become family secrets, where behavioral patterns and suffering are transmitted between generations. However, displaced refugees share experiences with their descendants than the non-displaced ones because taking part in traumatic experiences may be contributing to the recalling of traumatic experiences. However, indirectly, their emotional responses to their offspring may serve as an indicator to appear of the transmission of trauma (Dalgaard et al., 2015). By discussing the phenomenon "conspiracy of silence" reported by who experienced events, which cause much suffering within the families of Holocaust survivors. This transmission of trauma may happen because of intra-family communication and how the survivors communicated about their children's traumatic experiences (Sorscher et al., 1997; Lichtman, 1984; Fromm, 2011; Braga et al., 2012; Giladi et al., 2013). Based on psychodynamic approaches, researchers assert that transmission of trauma is due to the lack of open communication about the past and the emotional withdrawal, which is assumed to represent the survivor parent. It looked at the transmission of trauma because of unconscious displaced emotions (Danieli, 1998; Kellermann, 2001; Katz, 2003; Shmotkin et al., 2011).

2.17.11 Exposure to Israeli Violence

Palestinian families in the camps constantly were exposed to different Israeli violence. Banat (2010) and Khamaysa (2012) indicated severe acts of violence among refugees, including land confiscation, uprooting trees, land bulldozing. Alongside not getting a work permit, wanted list, handicap, detention, home raids, injury, martyrdom, house demolition, job loss, a ban on travel, deportation, compulsory house arrest, etc.

Palestinian refugee camps are exposed to violence, and military aggressions, clashes between internal factions, and indiscriminate demolitions of houses; as well as, a severe lack of infrastructure makes daily life difficult and unstable (Veronese et al., 2011). These brutal conditions may negatively affect the hope for a promising future among Palestinian refugees. The feelings of anger, hatred, and desire for revenge among displaced and nondisplaced Palestinian people towards Jewish and the State of Israel are entirely natural. Therefore, displaced people see themselves as vulnerable victims and have feelings of hatred and desire for revenge because of feeling humiliated by the army and the settlers of Israel. So these experiences created these feelings (Abu El Hija, 2018). In the same context, the results of Cardozo et al. (2003) through a cross-sectional cluster sample survey in June 2000 in Kosovo to assess the prevalence of mental health problems associated with traumatic experiences, feelings of hatred and revenge, and the level of social functioning among Kosovar Albanians approximately one-year after the war. Findings suggested that victims have more feelings of revenge and hatred than the other group.

2.17.12 Methods of Displacement

The Zionist gangs used several methods and means to uproot the Palestinians from their homeland and dispossess them of their property. The most popular of these methods are:

- The Zionist gangs committed many acts of slaughter and massacres against Palestinian civilians, such as the massacres of Deir Yassin and Dawaima.
- 2. They forced Palestinian civilians to leave their homes and seek refuge elsewhere in neighboring countries such as Jordan, Lebanon, and Syria.
- 3. The Zionist gangs used many terrorist means, including the demolition of houses, bombing Arab civilians in public places, destroying entire villages, and robbing them of public and private property.

The Israeli occupation used distinct psychological warfare methods against Palestinian people, intending to force them to leave their cities and villages, such as spreading rumors and leaking news of massacres (Dayyeh, 2019).

2.17.13 Effects of Displacement on Palestinian Refugees

- The displacement and violations committed against defenseless civilian Palestinians since Israel occupied the Palestinian territory in 1948 have left long-term effects to this day:
- 2. The displacement of Palestinians has torn Palestinian communities apart, leading them to their dispersal in unrelated geographical areas.
- 3. It has led to a radical shift in the refugee lifestyle. It destabilized social relationships, with many psychological and social consequences. The refugee feels alienated, isolated, separated from the family, unable to integrate into the host community, not to mention the despair of ever being able to return home or even meet their families who have stayed at home.

- 4. Refugees lost their livelihood in their country (movable and immovable assets) due to the new political and economic conditions imposed on them and depending on the areas where they sought refuge. As for the host country, like Lebanon, the refugees are seen as a threat to their societies, and they are intrusive and suffer from problems of unemployment and assimilation. They may not work, own property, or even get the nationality of the host countries. Therefore, it is considered an intractable problem.
- 5. It has become a major concern for Palestinian refugees to provide daily necessities such as housing, food, and employment (Jarrar, 1995; Salama, 2006).

2.17.14 Naksa (Setback or defeat)

In Six-Days of the War or the 1967 War and called the "Naksa or Setback." Israel routed Egyptian, Syrian and Jordanian forces, escalated in the region as an unprecedented power, and ended with Israel establishing control over the entire State of Palestine, the Sinai Peninsula, and the Golan Heights. In 1967, Israel absorbed the whole of historical Palestine and additional territory from Egypt and Syria. At the end of the war, Israel uprooted 300,000 more Palestinians from their homes, including 130,000 expelled in 1948, and seized three and a half times more land. Moreover, the state of Israel came into being in a violent process that entailed the ethnic cleansing of Palestine, a tragedy that pointed up the requiring for a new strategy for repelling Israel aggression and liberating Palestine (Salama, 2006; Khalidi et al., 2011; Tahhan, 2018).

2.17.15 The right of return between rejection and resettlement

The "right of return" is one of the essential core issues of dispute in the Israeli-Palestinian conflict. The perspective of the right of return in legal theory, classical political and legal theory was more deeply concerned with the right of a person to leave his country freely and without hindrance. So it took the right of return as a natural result that would follow the securing of the freedom of travel. Therefore, the right of return is implicit in these words, particularly in the right's assertion of property retention. Francisco de Vitoria, the Dominican political theorist of the 16th century, considered exile a punishment of extreme

severity: *"Exile is included among the capital penalties."* The Swiss jurist de Vattel states in *"Le Droit des Gens"* that forced exile without cause entitles the exile to refuge elsewhere since he is denied his natural right to return home.

"An exile is a person driven from his place of abode, or forced to leave it, without the stain of infamy... exile does not take away from a man his human personality, nor consequently his right to live somewhere..." (UNPRC, 1978).

The Palestinian refugees who left their homes in 1948 and 1967 in numerous United Nations resolutions, most significantly Article 11 of Resolution 194 of 11 December 1948, which states that the General Assembly,

"Resolves that the refugees wishing to return to their homes and live at peace with their neighbors should be permitted to do so at the earliest practicable date, and the Israeli government should pay that compensation for the property of those choosing not to return and for loss of or damage to property which, under principles of international law or in equity, should be made good by the Governments or authorities responsible." (Hafnawi, 1990; Salam, 1994).

Over their decades, as a significant-group refugee population, the Palestinians have been extraordinarily coherent in mutually opposing resettlement as a permanent solution to their situation. Both the Palestinian society and later the Palestine Liberation Organization (PLO) have refused any suggestion of third-country resettlement because it would threaten the Palestinians' political and national rights. So, Palestinian refugees rejected the integration idea in the host countries (Irfan, 2017).

Palestinian refugee issue and right of return (Haq-Al-'Awda) are complex in the Arab-Israeli conflict. For over seventy years, the Palestinian question and rights have been central to the Palestinian national narrative of struggle against overwhelming odds, expulsion from the ancestral homeland, dispersion, and national reconstitution (Khalidi, 1992). In the same context, this right whereby one or several peoples and their descendants demand to return to the places where they used to live but were forced to leave; this is likewise the right to retake the property of which they were evicted or which they renounced (Babadji, 1996). Yet suggest the return of meaningful numbers of Palestinians to their villages and towns, or any part of Palestine, touches on deep-seated worries among Israelis regarding the legitimacy and perpetuation of the entire Zionist enterprise and the Arab-Jewish demographic balance within Palestine (Khalidi, 1992).

The Palestinians demand that (Five million) people— tens of thousands of original refugees who fled from their land and their millions of descendants — have a "right of return." But Israel rejects the demand, saying that it symbolizes a try by the Palestinians to destroy Israel by the weight of numbers. Israel's population is almost nine million, some three-quarters of whom are Jewish. An influx of millions of Palestinian people would mean Israel could no longer be a Jewish-majority state (Staff et al., 2008). The Trump Administration reported denying the long-standing Palestinian claim for a "right of return" for a million refugees and their descendants to occupied Palestinian territories. The US will reveal a policy that "from its point of view, cancels the 'right of return." The US government requires the Palestinian people to hand in their legitimate and permanent rights in return for economic obligations. The Palestinian people will not trade their national rights for the millions of dollars given.

2.17.16 Compensation versus losing a native land and properties

The Palestinians' attachment to their villages and land reflects the rejection of the idea of compensation due to the abolition of their right of return.

Palestinian refugees, therefore, consider compensatory payments by Israel as an attempt to buy them off, and the notion of compensation for years of suffering and displacement is an insult. For example, an older refugee says that Palestine and their village, in particular, are not for sale. Israel asserts that the compensation fund must only be for the resettlement of refugees in their places of residence in the camps, and it must be part of a general peace agreement (Samy, 2010a; Samy, 2010b). On the other hand, Palestinians continue to argue that Israel must take full responsibility for paying compensation, including the actual value of properties refugees left behind (Dumper, 2007: 148). The reality of collective memory

significantly impacts younger refugees, depending on the shocking stories of parents and grandparents who experienced the Nakba events. The new generation of Palestinians shows a stronger love and desire for Palestine than the older generations. Older refugees encouraged children and younger refugees to fight for the restoration of Palestinian identity, so they see little worth in compensation offers (Nabulsi, 2003: 492). In addition to restoring the dignity of Palestinians from developing a moral obligation to liberate Palestine, the Palestinian culture is based on a desire for revenge when members of society feel that society and their families are being humiliated and shocked (Khamaysa and Lahmar, 2021a). It also constitutes the cultural and social structures of the Palestinian people. The socialization content also goes from parents to children and generation to generation. On the other hand, values are general norms on which society relies to assess and judge individual behavior in different situations and contexts of life (Khamaysa and Lahmar, 2021b).

In the same context, Albadawi (2021) noted future negotiations must consider the generational stories and ensure that the right of return claim, compensation, and resettlement are not mutually exclusive in delivering a just solution to the displacement of Palestinian refugees. It is return something to its origin, to remove the drawback in the ethical and physical state of the individual and the community because of the difference between their living in their homeland and in a state of being uprooted and displaced. It includes everything related to personal material benefits, such as movable and immovable property and businesses, and public material benefits, such as organizations, services, public property, and sources of natural wealth. It also includes personal moral benefits, such as feeling safe, living in a family, feeling happy, and public moral benefits, like national identity, culture, history, and holy places (Abu Sitta, 2008). After the 1948 Arab-Israeli war, 750,000 Palestinians were forced to leave their homes for Jordan, Syria, and Lebanon, and many of them have been living in camps in neighboring countries since they left home. The Trump peace plan recently released in the Middle East rejects displaced Palestinians the right to return to communities from which they were driven out (Khairat, 2020).

The concept of "alternative homelands" is not new. They debated similar projects after the signing of the Oslo Accords in 1993. One of the most dangerous was the US plan to resettle five million Palestinians in the Middle East and worldwide to abolish the refugee issue from the "final status" negotiations. A report drawn up by Washington relied on a book by an American professor of international law at Syracuse University in New York, Donna Arzt, for its statistics and way to address this problematic issue. The report said that the USA would distribute 5,357,000 out of 6,275,800 Palestinian refugees among the Middle East countries and some Western capitals as a permanent solution to the Arab-Israeli conflict. Jordan, which hosts the most significant number of Palestinian refugees — 1,832,000 in the early 1990s — would, under that US plan, be required to host a new 168,000 taking the total to two million. Meanwhile, Syria would increase the number of refugees from 325,000 to 400,000. Lebanon would require it to keep about 75,000 refugees during the same period (Al-Sahli, 2018).

2.18 Study Design

2.18.1 Statement of the problem

As a basic unit in society, Palestinian families were exposed to a series of events and losses throughout the long years of occupation, such as increasing settlements, settler violence, demolishing homes, torture, detention, injury, or even loss of one or more family members and exodus. Therefore, traumatic experiences have adverse effects on individuals' behavioral, psychological, and social aspects. Palestinian refugees suffer from ongoing traumatic experiences that remind them of traumatic events for many years. Remembering past events impacts the willingness to reduce emotional stress and prevent severe consequences.

The camps are a symbol of suffering and a reminder of the events of the Nakba at all times. Refugees often suffer from weak psychological resistance that appears as an obstacle to returning to everyday life after feeling sad, depressed, and bouts of crying for no apparent reason. Palestinian families keep photographs and keys to their homes and photos of the loss of one or more family members during the Nakba. Israel officially admitted that it had sent 214 Palestinian children to be adopted in Europe without their parent's knowledge (Palestinian Return Center, 2019).

Traumatic experiences leave refugee families in constant shock and are affected by daily incidents perpetrated by Israeli forces where Palestinian worshippers are attacked in Al-Aqsa; including arresting and beating young men and others inside the camps; or killing Palestinians on the pretext of stabbing on the major roads. These events remind refugees of past events, distressed and constant trauma that move across generations—for instance, Israel's displacement of 38 Palestinian families living in Sheikh Jarrah and nearby neighborhoods. The Supreme Court of Israel ignored documents establishing ownership of land and houses and granted those land and houses to Jewish settlers who had no right. The decision led to military confrontations between Israelis and Palestinians, resulting in the martyrdom of 259 and the injury of 2211 Palestinians in Israeli airstrikes on the Gaza Strip from May 10-21, 2021 (Palestinian Ministry of Health, 2021: 3).

The exceptional circumstances in which families live, and the disruption of governmental or non-governmental support have led to problems that have left Palestinian families unable to cope with psychological, social, personal, and economic conditions in the camps—low reaction levels in dealing with complex events, including [displacement]. A suspension of UNRWA services would seriously aggravate the refugees and destabilize the fragile situation in the Palestinian camps in the West Bank and Gaza Strip. So, the United States funding cut prompted concerns that have stirred deep worry among refugees, stoking fears that the international community is abandoning them.

2.18.2 Questions of the Study

The current study aims to answer the following questions:

- 1. What is the degree of the traumatic experiences of the Nakba after 72 years as perceived by the first generation?
- 2. How have Palestinian refugees (first generation) aged 75 years and above perceived the traumatic experiences of the Nakba after 72 years?
- 3. How do Palestinian refugees (first generation) narrate the traumatic events during the Nakba?
- 4. What is the impact of independent study variables with traumatic experiences of the Nakba after 72 years as perceived by the first generation?

- 5. What are the indicators of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation?
- 6. What are the traumatic events affecting the lives of Palestinian refugees (the first generation), which activate the memory of collective trauma that does not die from the events of Nakba in 1948?
- 7. Are there any statistically significant differences in the traumatic experiences of the Nakba after 72 years as perceived by the first generation according to their age, gender, religion degree, social status, number of children, educational level, and region?

2.18.3 Hypotheses of the Study

- 1. There are no statistically significant differences at $\alpha \leq 0.05$ in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to age.
- 2. There are no statistically significant differences at $\alpha \leq 0.05$ in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to gender.
- 3. There are no statistically significant differences at $\alpha \leq 0.05$ in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to the degree of religion.
- There are no statistically significant differences at α≤0.05 in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to social status
- 5. There are no statistically significant differences at $\alpha \leq 0.05$ in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to number of children
- 6. There are no statistically significant differences at $\alpha \leq 0.05$ in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to educational level.
- 7. There are no statistically significant differences at $\alpha \leq 0.05$ in traumatic experiences of the Nakba after 72 years as perceived by the first generation according to region.

2.18.4 Study Significance

2.18.4.1 Theoretical Field

It addresses a central theme in the family's life and society as a whole, identifying the traumatic experiences of the Nakba after 72 years as perceived by the first generation with big data from all camps in OPTs. The study is the first of its kind within the researcher's knowledge, which investigates traumatic experiences; The Palestinian library also needs specific study for this purpose. Lay the scientific foundations for enhancing understanding of the trauma experience among refugees through painful narratives. Moreover, there is a scarcity of social and psychological studies on Palestinian refugees, especially those who lived during the Nakba and experienced traumatic events.

2.18.4.2 Applied Field

This study aims to illustrate the suffering of first-generation Palestinian refugees who have experienced the events of Nakba in 1948. They were exposed to the most heinous crimes and lost everything (land, safety, identity, individuals), living in Palestinian camps without infrastructure and basic needs. Their suffering ends with the events of the previous Nakba and daily violations committed by the Israeli army, such as arrests, house demolitions, lack of humanitarian permits, and humiliation at military checkpoints. All these daily events make them suffer from a new Nakba every day. The study will reveal the traumatic events experienced by Palestinian refugees in the camps. An attempt by a researcher to help social workers and psychologists understand what occurs to Palestinian families and build psychosocial programs to reduce symptoms that occur from the inability to deal with past events. We will see it as an essential source for those involved in trauma studies from a psychological perspective.

2.19 Study Terminologies

- **2.19.1 Trauma:** The exposure to sudden or unexpected overwhelming negative events (Altawil et al., 2008b). According to the American Psychological Association, trauma is an emotional response to a terrible event such as war, accident, rape, or natural disaster. Also, the most common psychological defense mechanism following the shock event is denial.
- **2.19.2 Traumatic Experience:** It is an event that causes physical, emotional, and psychological distress or harm. It is an event that is perceived and experienced as a threat to one's safety or the stability of one's world (Levetown, 2008).
- **2.19.3 Post-Traumatic Stress Disorder or PTSD:** it is a disorder that develops in some people who have experienced a traumatizing, terrifying, or serious event (The National Institute of Mental Health, 2019). Reichert & Bostwick (2010) indicated that traumatic events cause anxiety disorder.
- 2.19.4 The Nakba (Catastrophe): The Palestinian term for the events of 1948, when many Palestinians were displaced by the creation of the new state of Israel (Stevenson, 2010). It also refers to describe the "uprooting of the Palestinians and the dismemberment and de-Arabization of historic Palestine" (Masalha, 2012: 1). Moreover, this occurred when more than 900,000 Palestinian people—about half of prewar Palestine's Arab population—fled or were expelled from their homes during the 1948 Palestine war (Abu Sitteh, 1997; Banat, 2002; Masri, 2008).
- **2.19.5 Refugee:** They are the people who flee their homes because they have experienced or have a reasonable fear of experiencing persecution (U.S. Department of Health and Human Services, 2014). A refugee is any Palestinian who was expelled from their natural place of residence in Palestine in 1948 or after or had to leave for any reason. The occupying government disallowed them to return to their former homeland. The refugee continues to carry this label until they or their offspring return to their native country (UN, 1948; Banat, 2002; Masri, 2008); after 70 years of being exposed to all sorts of psychological, social, political, and economic suffering have elapsed.

2.19.6 Palestinian First-Generation: It is the generation that suffered from the 1948 war, also known as the Nakba, a term used by Palestinians to refer to the human tragedy of the displacement of many Palestinians from their homeland. Rampel (2006) refers to the term "Palestinian first-generation" as a comprehensive definition, referring to those who actually displaced in 1948 and 1967, and to the spouses and children of refugees and those who were deported from the Palestinian territories occupied by Israel; as the others in refugee-like conditions, such as persons who were abroad at the time of hostilities, and unable to return, as well as individuals whose residence rights had been revoked by Israel and those who had not been displaced but had lost their livelihoods.

2.20 Study Limitations

- **2.20.1 Human Limitations:** Palestinian refugees of the "first generation" who lived through the tragic events of the Nakba in 1948 and are still living in refugee camps.
- 2.20.2 Place Limitations: West Bank and Gaza Strip.
- **2.20.3 Time Limitations:** The Palestinian mass departure (displacement) of Arab-Israeli war in the period (1948-2021).

Chapter Three

3 Previous Studies

3.1 Introduction

As it is known traumatic experiences, research has burgeoned worldwide since 1990. The Palestinian Nakba had preoccupied the minds of researchers and thinkers who had explored Palestinian refugees for various purposes. Some of them had addressed the issue of refugees through demographic dimensions, which played only to deny social and psychological reality. However, some suggested the question service-minded, while others addressed the issue and its link to regional and national security aspects. A few studies have examined the depth of this issue through what happened in the past.

The literature helps us understand traumatic experiences, particularly in the stories told by survivors. As researchers, we look for commonalities between the traumatic experiences of displaced and the uniqueness of the traumatic experiences and their sustainability. Many studies do not treat the Nakba as a fact. We must view collective trauma as a real experience with real consequences for subsequent generations. In this context, (Noor et al., 2017) points out the reality of the consequences lies in how the literature deals with historical victimization, especially in relationships between groups, and the experience of collective victimhood, the material gains, and competition over these gains. Research is influenced by this literature's scientific goals and assumptions because intergroup relations research aims to understand the mechanism of conflict resolution, the right of return, and property restitution and compensations; to assess the long-term effects of collective trauma through these criteria, as well as the legal status of Palestinian refugees. Trauma memory enhances post-traumatic stress and stimulates growth through the meaning of the catastrophe that derives from the trauma itself. Memory confirms the steadfastness of the group and the ability to develop cultural formations in the path of the Nakba. The consequences in themselves are closely related to the issue of cultural formations and how generations of descendants of victims are trying to create a social meaning that interprets the past. It affirms the right as a mechanism to overcome difficulties, challenges and prepares the group for the future and the hope of returning to their lands and villages. Many researchers have focused on studying the traumatic experiences of Palestinian narratives among refugees, in which Nakba continues to play a crucial role. Several Arab and foreign studies and research have been produced on this subject from different dimensions. The researcher referred to several previous studies as follows:

3.2 Related Studies

In a recent study, Veronese et al. (2021) examined factors that shaped women's individual and collective perceptions of war and associated traumatic life events (TLEs) that happened during their lives. The sample of the study comprised 21 Palestinian women in the Gaza Strip. Researchers use responses by narrative timetables and a sociological, environmental, and culture-informed perspective as a tool for intervention and collection of data individually and collectively. Thematic content analysis was used to classify data. The findings revealed a correlation between events mentioned by Palestinian women individually or collectively and political events in Palestine. Through social and family support and life events, Palestinian women constantly try to balance and compensate painful events with the sources of well-being associated with support in its various forms.

Furthermore, narrative activities (both individual and collective) contributed to reformulating a significant in the emotional perceptions of the participants. The study explained how Palestinian women strive to build resilience through coping strategies and gaining survival skills and through daily practices and transgenerational resistance. The study recommended more information concerning Palestinian women's mental health and well-being living in conflict zones amid repression and war.

Khodary, Samara, and Askew (2020) examined the prevalence of traumatic war events, PTSD and how these shocking events predict post-traumatic stress disorder with Palestinian students' socioeconomic situation and demographics in the Gaza Strip. The sample comprised 1029 participants (533 females and 496 males). According to DSM-V, a research team used the PTSD symptom scale and the War and Trauma Events Checklist, using the diagnostic criteria of PTSD. Most participants experienced personal trauma (88.4%), observed destruction of property (i.e., houses) (88.3%), and experienced trauma to others (83.7%) during the war. Compared to females, males showed greater exposure to the three types of events than the traumatic ones. Findings also focused on

the prevalence of DSM-V Post-traumatic stress disorder diagnosis at 53.5%. A study showed that the children who had experienced trauma to other and personal trauma and the demolition of property were significantly more likely to be diagnosed with PTSD than those who had not, even when adjusting for demographic and socioeconomic factors. The strongest war trauma for PTSD is personal trauma, followed by witnessing trauma and then observing the demolition of properties. Moreover, it shows firm evidence that demographic, economic, and social factors mediate the relationship between PTSD and war trauma. Findings also showed that psychological interventions should remember the background of the participants, gender, marital status, age, income and size of the family, and the level of education to ease psychological symptoms and enhance their resilience on their lands.

Van Heemstra et al. (2020) examined the relationship between negative post-traumatic cognitions and PTSD among Palestinian refugees. The research team used two scales (PTC-Inventory and HTQ). The sample of the study consisted of 85 Palestinian refugees (51.8%) who were female. Palestinian refugees live under burdensome conditions and have negative prospects, so they expect negative awareness to prevail. There are two objectives of the study: investigate the degree to which endorsement of PTC in this sample differed from the endorsement observed in other samples and examine whether post-traumatic cognitions explain variance in PTSD symptoms and are predictive of PTSD diagnostic status. The findings showed negative post-traumatic cognitions (PTC) are a related factor in the growth, continuous, and treatment of PTSD. It is undetermined whether findings on the relationship between PTC and PTSD among non-refugees can be generalized within the context of Palestine refugees or not.

Moreover, total negative post-traumatic cognitions rates were higher in the Palestinian sample compared to reference samples. PTC revealed significant variance in the symptoms of post-traumatic stress disorder and possible diagnostic status. Moreover, according to the cognitive model, the findings confirm the links between the post-traumatic cognitions (PTC) and the diagnosis of PTSD in a Palestinian refugee sample. This relation is essential for researchers and psychologists dealing with refugees in conflict zones.

Rizkalla et al. (2019) investigated the traumatic experiences of Syrian refugees from war, the challenges of displacement while living in Jordan, and the consequences of their physical and mental health. Refugees fled to neighboring states because of the war, which led to the mass displacement of people. In Jordan, 1.4 million Syrians sought protection. Data collected between March and June 2014 included 24 in-depth interviews conducted in Arabic using audio-recorded and translated by researchers. The researchers invited the Syrian refugee women to share stories and frequently validated her understanding of their narration (21, 22). It used a group narrative method used to analyze the interviews. The nature of the process questions was as follows.

"Tell me, how was life in Syria for you before the war?", "How was your experience during the war? How did you escape?" Questions afterward included "How would you describe your life today in Jordan? What are the challenges and needs you have?" and "Do you suffer from any physical health issues or mental health issues?". Considering the sensitive nature of the interviews, it held them in comfortable areas; when not in an NGO building, it held them in the participant's homes or other public areas of their preference. The first author invited participants to share their stories and repeatedly acknowledged her understanding of their narratives. The findings showed that Syrian refugee women had been exposed to various acts of war violence (atrocities), including separation from family members, loss of property, bombing, and threats to their lives and loved ones. Participants stated on multiple displacement challenges, which are seen as an ongoing traumatic experience. In addition, narratives have shown many suffering, including mental health and physical problems due to stressors, the lack of mental health services, and the stigma on mental health that may be associated with the somatization of mental illnesses. The NGOs and host States are responsible for promoting access to comprehensive, trauma-focused physical and mental health services for refugees culturally and gender-sensitive.

Dalgaard et al. (2019) investigated the style of family communication in the transgenerational transmission of trauma. However, the study examined the depth of this issue through these aims: to study how parents' current war trauma is associated with trans-generational communication. To analyze the associations between trans-

generational communication and children's mental health, measured as post-traumatic stress disorder (PTSD), depression, and psychological distress, to identify the contents of family communication about the past national trauma.

The sample comprised one hundred seventy Palestinian families in the Gaza Strip, in which both fathers (170) and mothers (170) and one of their children (170) took part. The 170 children were 10–13 years old (M 11.2, SD 0.8), and 50.6% (86) were boys, and 49.4% (84) were girls. Parental age ranged between 25 and 56 years for mothers (M 37.4, SD 7.4) and between 28 and 65 years for fathers (M 42.1, SD 7.2). Fathers and mothers responded separately to three questions: what did their parents tell them about the War of 1948, Nakba? What did they tell their children about the Nakba?

Moreover, what did they tell their children about the the1967 Arab–Israeli War and military occupation? As reported separately by mothers, fathers, and their children, current war trauma refers to the Gaza War 2008/2009. Children reported their symptoms of PTSD, depression, and psychological distress. The results revealed seven communication content categories and one category showing maintaining silence about the traumas. Moreover, fathers' high exposure to current war trauma was associated with a higher level of communicating facts, reasons, and meanings—the associated high exposure to current war trauma with a lower level of maintaining silence. Family communication about facts, reasons and meanings was significantly associated with children not showing PTSD and marginally not showing psychological distress while maintaining silence was not associated with children's mental health.

Sousa et al. (2019) explored the place experiences of women in Palestine. This article aimed to clarify more extraordinary social work, attention to the centrality of place in human life, and the role of place in individual and collective identity and well-being. The Human Subjects Division approved all methods at The University of Washington. Research led five focus groups in 2008; Also, the sample comprised (32) adult Palestinian women. A collaborative research team did not collect the demographics of participants for more comfort and privacy. However, the research aims to identify ages ranging from youthful adult women to elderly. Likewise, they sought a holding focus group in five cities in the West Bank (Al Khalil, Jerusalem, Nablus, Tulkarm, and Qalqilya).

The results show that political violence has affected health and well-being. Their accounts centered on how their place experiences influenced individual and collective sovereignty and identity. Also, it revealed that individual-collective identity and sovereignty depended on three interdependent spatial factors: constraints on freedom of movement, possession, dispossession, and continuity of place. Their narratives highlighted the anger felt when their children could not access schools or critical examinations because of checkpoints, the wall, and Israeli settlers or military violence. Many participants cannot cross-checkpoints for medical care (hospital and clinic) with children for medication; the experience of waiting at a checkpoint, delays, and fingerprinting reflects on the largest workforce; the main objective of the soldiers is to control and delay people. They also did not want women to move forward in education, threats to place, and freedom access to space and threaten the livelihood of the individual and the family. Many participants noted that access to land was once essential for economic opportunities and stability. They announced how local communities had hampered their efforts to access training opportunities; however, they declared that education was vital to resistance and resilience. They interpreted these interruptions as attempts to impede individual and collective success and sovereignty.

Further research is necessary because the impact of Israel's policy of closure and confiscation of land, especially about social relations and emotional health, is the physical separation it imposes on extended families and nearby villages. Women have experiences with a range of negative feelings: A sense of control and decay; Jealousy, grief, and anger for others who enjoy the freedom of access while severely restricted and deeply oppressed by the betrayal of international conventions that should allow them free access. The consequences of these ongoing Israeli practices have produced deep personal feelings of humiliation, anxiety, frustration, and grief. They have repeatedly declared that the participants have repeatedly been collectively "asphyxiated." Therefore, with the continuity and cohesion of the Palestinian territory, women have moved almost smoothly from individual and practical experiences in place to collectivism.

Abu El-Hija (2018A) examined the possible intergenerational transmission of warrelated trauma experiences during the 1948 war (Nakba) on the second generation among the Palestinian population living in Israel and investigated how the psychological complaints were transmitted to second-generation immigrants. Despite an enormous amount of research on intergenerational transmission of war trauma, little has been investigated about the mechanism of transition.

The sample consisted of two hundred fifty-one Palestinians living in Israel. The intergenerational transmission of war-related trauma experiences of the Nakba was evaluated using self-reported questionnaires: The War-Related Parental Trauma Exposure Questionnaire (WPTEQ), the Second Generation Questionnaire (N-SGQ), and a questionnaire to evaluate feelings of anger, hatred, and desire for revenge (AHRQ). Besides the Brief Symptom Inventory (BSI) and World Assumptions Scale (WAS). The study showed that a significant positive correlation existed between the traumatic experience of parents and transmission of the Nakba trauma to the second generation. Findings also revealed that the Nakba trauma-affected negatively worldview beliefs by second-generation which then impacted mental health and the cultivated feelings of revenge, anger, and hatred against Israel and the Jewish people. It also showed that trauma has negative consequences, including depression, anxiety, PTSD, and other mental problems, along with negative world assumptions and self-beliefs. According to the world assumptions (WAS), the study found a mediating factor between parents' traumatic experiences and second generation's psychological troubles, the transmission of trauma to the second generation, and their reactions towards the state of Israel and the Jewish people. The greater the exposures to their parent's trauma, the world's assumptions of the second generation were more pessimistic.

Abu El-Hija (2018B) investigated the transmission of trauma to the second generation of Israeli Palestinians affected in the 1948 Palestinian exodus (Nakba). The negative impact of forced migration and displacement has been well documented. However, the effects on the offspring of the displaced people are less clear. The sample comprised one hundred thirty participants whose parents were displaced during the Nakba and compared the outcome with the one hundred twenty-one respondents whose families had

not been forced to migrate. The researcher assessed the transmission of trauma symptoms to the second generation: psychological distress, psychiatric disorders, world assumptions, feelings towards Israeli and Jewish communities, and sharing of traumatic experiences by survivors of Nakba with their offspring. The study showed that respondents whose parents had been displaced, compared to the controls, reported that their parents communicated less with them about the Nakba and would not share their experiences. This group presented with higher levels of psychological symptoms, more negative world assumptions, more hostility, anger, and desire for revenge towards Jews and the state of Israel. The findings indicated that forced displacement and trauma symptom transmission might proliferate into future generations and affect their mental well-being; significantly, political agendas of reconciliation may fail because of affected attitudes and feelings of revenge. Regarding mental health outcomes, the findings showed significant differences between displaced and non-displaced samples on almost all variables of the Brief symptom inventory- BSI: somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, anger/hostility, phobic anxiety, paranoid ideation, and psychoticism. The finding also showed that found no significant differences between paranoid ideation and psychoticism according to BSI. The study also shows significant differences between displaced and non-displaced samples in levels of world benevolence, self-control, luck, and the total WAS scores. There are no significant differences regarding the self-control, randomness, self-worth, justice, and benevolence of people subscales.

Abu El Hija (2018C) explored the transgenerational impact of traumatic stress during the 1948 Palestinian exodus (Nakba) on the second-generation Palestinian population living in Israel. The study aims to examine the effects of different degrees of parental disclosure of traumatic material relating to the Nakba on the transmission of trauma to the second generation. The sample consisted of 251 Palestinians living in Israel. All participants completed self-report questionnaires: The War-Related Parental Trauma Exposure Questionnaire (WPTEQ), the Second-Generation Questionnaire (Nakba Version; N-SGQ), Nakba Communication Questionnaire (NCQ), and a questionnaire to evaluate feelings of Anger, Hatred, and desire for Revenge (AHRQ). The Brief

Symptom Inventory (BSI) and World Assumptions Scale (WAS) were also administered.

The study results showed a significant negative correlation between disclosure communication and transmission of the Nakba trauma to the second generation. Moreover, participants reported loss by victims was that one of their parents lost their property. Of all participants, 62.5% reported property loss, so property loss was the most remarkable aspect of the victims' trauma. The majority of suffering and consequences faced were related to loss of residence and property. While 57% reported fleeing from their villages during the war, 51.8% reported that one of their parents was forcibly displaced and did not return home, and 49.5% of participants stated that their home was destroyed. Furthermore, loss of residence and property also showed other factors were as well. A study revealed that families were being split during the war stage, with forty percent of participants reporting this. Many people crossed the border to avoid the war, as 36.3% of people described this as traumatic experiences they suffered during the war. 29.1% of participants expressed even more tragic details as they said that for a whole year, their parents wandered from one place to another before settling in their current home. 21.9% of participants announced that they had to move over three stations before reaching the safe place they were living in Israel. 24.3% of participants commented they persecuted their family members and, in most cases, that family member was their father, as 27.5% reported their father experiencing oppression. The study indicated that another significant trauma of the time was families separating from one another, as 40.2% of participants expressed family separation. In 27.5% of cases, they described that one of their parents was separated from the other parent. 13.5% of participants reported that their grandfathers were in the Palestinian army and fought against Zionists, while the fathers of 10% of participants were Palestinian soldiers and fought against Zionists. Less than 10% of participants reported their family members, especially fathers, being sent to jail, while only 8% reported that one of their family members was executed during the traumatic Nakba period. The ratio of people hurt in the war (15.1%), tortured in the war (14.3%), and who died because of lack of medical treatment during the war (10%) was relatively low when compared to other traumatic experiences.

Dayyeh et al. (2018) examined the traumatic experiences of the Nakba for the first generation of Palestinian refugees. It used a purposive sampling design comprising 45 Palestinians from the first generation of people that experienced the Nakba in Palestine. They collected data using a 46-items questionnaire developed by the research team. The findings show that the traumatic experiences of the Nakba are prevalent among the first generation of Palestinian refugees. Of the Palestinian refugees surveyed, 77% reported going through traumatic experiences.

Furthermore, the interview contained questions about age, gender, region, marital status, educational level, and household members, and they completed 45 interviews. The respondents were between the ages of 80-98 (M 89.24). Males represented 51.1% of the participants, while the remaining 48.9% were female; they married the vast majority (75.6%) and were less educated (86.7% of the participants had primary education). Half of the participants (50.6%) lived in northern Palestine villages in 1948. 25.6% of the population live in the middle, and 23.8% live in the south.

The vast majority (82.2%) of their household had over nine members. The mean score of traumatic experiences of the Nakba among the first generation for the sample of 45 Palestinian refugees was high (Mean 3.85). The overall result has shown that there is a high proportion of traumatic experiences among Palestinians who have been repeatedly subjected to traumatic stress associated with the Nakba: They won't forget the Nakba incident, images of the Nakba have not disappeared from their memory; also, they think of the Nakba event with great pessimism year after year, taking into account the fact that refugees are denied their right to return to their villages and towns of origin. Participants emphasized that they remember the Nakba and are angry when they remember issues related to the Nakba. Many things remind them of the Nakba and feel that it will happen again under the ongoing Israeli occupation. Palestinian refugees have shown that they cannot express their feelings for the Nakba, claiming that they have difficulty sleeping because they cannot get rid of the images and ideas of the Nakba. They have disturbing dreams about the Nakba, difficulty breathing, increased heartbeat, dizziness, and loss of consciousness. Participants stressed that they had witnessed massacres of the unarmed Palestinian people and were at risk of death. They were exposed to extreme cold, hot weather; torture various forms, demolishing their homes, and destroying their villages and towns. The results also showed that sex and family members were significant predictors of traumatic experiences among the first generation of the Nakba. The study confirmed that the horrific experiences of the Nakba were rooted in the collective memory of Palestine refugees.

A study by Musa (2015) aimed to identify traumatizing experiences from 1984 to 2011 and their relationship to psychological compatibility by using a descriptive methodology and applying a set of scales on a sample of (41) families to achieve the study's objectives. The researcher chose families in a purposive way where four generations were available: Traumatizing experiences scale was applied to a sample of the first generation "Grandparents" aged 73-92 who lived during the war of 1984. The traumatic experiences scale was applied to a sample of second-generation "parents" aged 52-66 who lived during the 1967 war. Traumatic experiences scale was applied to a sample of the third generation "Sons" aged 20-48 who lived during the Al-Aqsa Intifada in 2000. Traumatic experiences scale was applied to a sample of the fourth generation "Grandsons" aged 9-18 who lived during the war of 2008. The post-traumatic stress disorder scale was applied on the first three generations, the effect of the traumatizing event on children's scale was applied on the fourth generations, psychological compatibility scale was applied in a sample of the first three generations, and psychological compatibility scale for children was applied in a sample of the fourth generations. The researcher validated the previous tools by presenting to a group of professors to measure internal consistency and Pearson correlation coefficients using the Statistical Package for the Social Sciences (SPSS).

The study revealed that the traumatic experiences of the first generation of "grandparents" were (58.5%) higher than the average. In comparison, the traumatic experiences of the second generation of "parents" (48.9%) reached an average percentage close to that of the third generation (49.2%) and the traumatic experiences of the fourth generation of "grandsons" (47.6%). The results also showed that the first generation "grandparents" suffer significantly from PTSD (80.5%), while the second generation "parents" have PTSD higher than average (58.5%). Third-generation

"children" with PTSD above average (56.1%) and fourth-generation "children" showed less than the average (26.8%). Furthermore, no statistically significant relationship between trauma experiences and PTSD in the first generation "grandparents" and the second generation "parents," while the results showed a statistically significant relationship between trauma experiences and PTSD in the other two generations. The study results showed a statistically significant positive relationship between PTSD and compatibility methods in the first three generations. At the same time, there is a statistically significant reverse relationship between PTSD and fourth-generation compatibility methods.

In another study by Abu Suhaiban et al. (2019), they reviewed several of the literature on demographics, predictors, mental outcomes of torture. The integrated care for the mental health needs of refugees. PubMed and PsycINFO databases search for original research articles on refugees and mental health published for ten years "between" (2010 2019). The study shows civilian war trauma, including the torture among most traumatic life experiences; exposure to such experiences is prevalent in societies experiencing the conflict. It has led further to refugees resettling worldwide with mental health needs that the psychologists and physicians may not be screening for prepared to address adequately.

Moreover, the study illustrates that 9% of seven hundred and twenty adults in conflict areas in Nepal, with a predominance of literate married males, met the threshold for PTSD, 27.5% for depression, and 22.9% for anxiety, while, PTSD rate has been documented as high as 88.3% percent among torture survivors including the Middle East. It reported depression as high as (94.7%) among one-hundred and thirty-one torture survivors and anxiety as high as 91% among 55 South African torture survivors. The severity of torture, post-migration pressures, and waiting time for clinical services was significantly associated with higher psychological symptoms. Mental health assessment is not a component of essential physical exams for refugees, even though these individuals have had high trauma exposure that should inform clinical care. Integrated care models are lacking but would benefit this community to prevent progression to the higher harshness of mental health symptoms.

A study by Zidan (2018) investigated the memories and fears of Nakba and displacement events as perceived by the first and second Palestinian generations of Deir Yassin village, Jerusalem Governorate, Palestine. The study approached the literature as a multidimensional phenomenon, which addressed both theoretical and applied research. The significance of this recent study is that it was the first to deal with this theme to the author's knowledge, given that seventy years have elapsed since the Nakba, and will be a vital reference for those concerned with the area of collective memory. The study adopted a qualitative research approach using the sample survey method. The interview questionnaire is appropriate for the exploratory nature of the research, comprising 20 items. The random purposive method comprised a sample size of (8) male and female Palestinian refugees of Deir Yassin village in Jerusalem Governorate of Palestine; participants were approached in the West Bank by the researcher and were formally asked to participate in the interview.

The researcher analyzed the collected data using a qualitative research approach. The study got several findings, the major ones being: the residents of Deir Yassin were exposed to the trauma of asylum, displacement, and loss of security and stability, leading to their sense of defeat, frustration, and denial, and entering a state of mental mourning. Findings show the participants preserve a powerful collective memory of the Nakba, and fear is the natural feeling of the inhabitants of Deir Yassin, considering the daily massacres and the ongoing Israeli occupation. The results revealed differences in expressing these fears among the refugees due to their place of residence. However, the inhabitants of Deir Yassin village nurse feelings of grief and pain. It also revealed nostalgia due to insecurity, and there was a consensus on mechanisms to express nostalgia among refugees. Also, it may contribute to realizing the extent to which the events of the Nakba have taken root among the refugees and the subsequent generations' knowledge regarding the Nakba events. In addition, the study may assist in revealing the fears of the first generation, which have been transmitted to the second generation and have become unerasable. Refugees may age and pass on, but the youth will never forget.

In a mixed-method study using quantitative and qualitative analyses, Kwan (2020) examined the time-image episode to detail how (post) memories of subsequent

generation genocide survivors are constructed. So, survivor generation silences proliferate, and transgenerational subjects are temporally and experientially directed from the violence experienced by their elders. However, it focuses on the qualitative data collected from a three-year ethnography at a Cambodian Language School in the California Bay Area along with 27 semi-structured, in-depth interviews with 20 to 35-year-old Cambodian American students and recent graduates and four semi-structured, in-depth interviews with first-generation Cambodian refugees from greater California. They conducted these interviews for over a year and a half. Yet, trauma and repressed memory have long served as critical departures in collective memory studies. Time-image episodes function as situated, imagined accounts of history and memory. They represent the circulation of narrative and non-narrative forms of communication, extending the present into other temporalities.

The complexity of the definition of transgenerational trauma encapsulates psychopathologies and alienation from a family and cultural history. It may help us better understand that the trauma experienced by descendants revolves around an absence of knowledge. Therefore, they provide empirical data on Cambodian Americans to analyze nonphysical forms of memory, conceptualize the multiple temporalities of trauma that shape collective memory formation, and redefine trauma not solely in pathological terms.

The study revealed that the participants have primarily come to terms with many of the struggles they had while growing up in poverty and with parents who had PTSD, communication challenges between them and parents. The sons had great trouble connecting with and talking to their parents. Eventually, some families cannot re-create the family because of losing so many children, but they cannot cope with mental health made for difficult home life. Losing their families at a young age and nearly escaping from death caused mental health challenges to linger among the older generation, perpetuating the silences across generations. The younger generation learned to interpret fragments, especially when they sense discordance and contradiction among their exchanges with parents. Thus, the descendant generation gathered as much information from families to piece together a past that has alienated them. Also, they actively want

information from their relatives; when they were younger, they knew that he did not have a much-extended family compared to friends and classmates because of the resettlement process, several family members in many countries, such as the USA and Canada.

White et al. (2020) explored the cultural context in trauma models to understand the responses to a profoundly traumatic event and examine why these discrepancies happen. The data reported drawn on data from semi-structured interviews with thirteen Holocaust survivors who aged 82 to 93 years (7 M, 6 F) in association with the 'Jewish Holocaust Centre,' and with twelve Sudanese refugees who aged 20 to 48 years (7 M, 5 F) in 'Stand-up,' the organization in Melbourne, Australia. The assessment established five essential aspects: impact on identity and the self; abandonment versus burden; persistence of memory; existential anxiety; and somatization and somatic metaphor. They examined the similarities and differences between the two groups using descriptive phenomenological analysis. The study found differences between the groups in the meaning of traumatic memory, the communication of somatoform symptoms in the Sudanese refugee group only, conceptions of self after the traumatic event, and the relationship change with the social world. Similarities included the persistence of traumatic memory, an impact on identity, a change in one's relationship with the social world, and the emergence of existential anxiety. The findings contribute to uncovering delineation points between cultural models for understanding trauma while simultaneously presenting a potential cross-cultural language useful for understanding trauma.

Participants in both groups described a persistent memory of traumatic events. Holocaust survivors described that persistent memories frequently occurred, for many every day, while the survivors showed that memories did not consider frequent remembering problematic. On the other hand, Sudanese refugees cautioned against active remembering. Although the memory of the traumatic events was indelible, its stressful impact was perceptively within their control. No Holocaust survivors, but many Sudanese, referred to the somatizing effects of the past or thinking about the past. Holocaust survivors felt that they had been damaged by or were different following a

traumatic event. Sudanese participants described this change to self by referring to a sense of powerlessness as an effect of traumatic events. They felt powerless to influence the ongoing conflict, help others, or better their circumstances. Here, the effect of 'traumatic things' was seen to undermine people's sense of agency and power over their circumstances and the environment. A salient difference in how Holocaust survivors and Sudanese refugees discussed the consequences of the past was how they related to the social world and the international community. For Holocaust survivors, the international community had a duty to help, and to the present, they had not fulfilled this. In contrast, Sudanese identified themselves as a burden to individuals and the international community because of traumatic events and their own experiences of psychological trauma. Both Holocaust survivors and Sudanese refugees expressed anxiety about the future and associated this with their experiences.

The most prominent compensation received by the Jews from Germany due to the Holocaust carried out by Hitler's Nazi regime against them.

German compensations: Since the end of World War II and after the establishment of the State of Israel, the latter has begun ongoing efforts to get compensation for the victims of the Holocaust during the Nazi era. As a result, in 1952, Israel and the Federal State of Germany signed the Luxembourg Agreement, in which Germany committed itself to pay reparations to the Jews who survived the Holocaust. The agreement also provided for the payment of reparations to the State of Israel as "the country that inherits the rights of Jewish victims" and takes care of Holocaust refugee survivors (Tovy, 2015).

In the period "between" 1953-1965 AD, Germany paid compensation in the amount of DM 12 billion, or approximately US \$845 million. The US \$100 million went to the victims claiming compensation, while the rest went to the State of Israel. The German government also committed itself to pay a monthly pension to every Jew under any pursuit by Nazi rule between 1933 and the end of World War II. The Israeli government by David Ben-Gurion justified the agreement in the face of those who opposed it and considered it a loss of memory of the victims. This agreement contributed to reducing the monetary inflation of the State of Israel from 66% to 4-5% (Sagi, 1986; El Sayed, 2014).

In 1988, Germany paid 120 million dollars in compensation that allowed the remaining Jewish Holocaust victims to receive an estimated \$290 per month per person for the rest of their lives. In 1999, the German government agreed to pay new compensation to Jewish and non-Jewish persons for slavery and forced labor in Nazi factories during the World War. The announcement came after the victims filed several lawsuits in American courts against the German government to end these lawsuits. Therefore, the German government has set up a foundation with up to \$5 billion in the capital so that victims of forced labor in German factories can apply for an estimated \$2500-7500. As of 2006, some 140,000 Jews from more than 25 countries had received such compensation. This step (reparations) was to protect their future industry from judicial problems; the case involved critical German companies such as Deutsche Bank, BMW, Volkswagen, and Opel (Tovy, 2020).

Details of German compensation:

(El Sayed, 2014; Tovy, 2020) indicated that the German government compensation list for Holocaust victims was as follows:

- 1. The family of the deceased receives a pension of \$755 per month. Four thousand one hundred ninety-nine families received the compensation.
- A person who has lost his health and physical strength receives a pension of \$480 per month. Eighty-six thousand one hundred thirty-eight persons received such compensation to cover the treatment expenses of those with a disability of 25% or more.
- 3. Compensation to those who have "lost their freedom" and who have been imprisoned, used for forced labor, or subjected to enforced disappearances. They get \$2.5 for every day they lost their liberty, which is only once and not a periodic pension.
- 4. Those who lost their property and homes are compensated by a one-time payment of not more than \$18750 at the currency rate at the time of the 1950s. Moreover, it compensated the number of 8382 persons who lost their jobs with a monthly pension of approximately \$483, or a one-time payment of up to \$6,500, depending on each case.

- 5. From 1957 to 1969, US \$250-1939 was paid to 22,000 Jews who were disabled due to Nazi persecution as a monthly pension.
- 6. "Between" 1957-1966, one-time payments of 50-100% of prior damages were made as a result of the loss of property, jewelry, etc.
- Since 1988, compensation has been paid in one-time payments of \$2500-300.00 to some 202,000 Jews who emigrated from Central and Eastern Europe to Israel.
- In 1993, compensation in a monthly pension of US \$250 was paid to some 49,000 Jewish Holocaust victims.
- 9. In 1999, Germany paid monthly pensions of US \$125 to 13,479 Jews residing in the Central and Eastern European regions due to the Holocaust.
- 10. There were many other compensations paid by Germany in 1990, 1991, and 1999, and other compensation from 1950 to the 1980s for forced labor in Nazi factories.

The Jewish Claim conference has estimated that around 400 000 Jewish victims are still alive. Most of the survivors live in the United States, Russia, and Israel. Forty percent of them live under the poverty line in their respective countries because they are mainly women and have smaller pensions, often due to working part-time, sometimes because of medical conditions. They also often face loneliness due to their whole families having been murdered and sometimes could not have children due to torture or medical experiments they underwent in Nazi camps (European Parliament, 2009). The organization "The Conference on Jewish Material Claims Against Germany," which aims to collect compensation for Holocaust victims Wednesday 06/10/2021, announced that it had received an additional \$767 million and estimated that the total compensation paid by the German government in 70 years exceeded \$90 billion (Monte Carlo Doualiya, 2021). During its 2009 EU Council Presidency, the Czech Republic organized the Prague Holocaust Era Assets Conference in Prague and Terezin. In the Terezin Declaration, 46 countries pledged to assist all victims of Nazi persecutions in their specific social and medical needs and to help them retrieve their lost property (European Parliament, 2009).

European Compensation

The German government has concluded bilateral agreements with several European countries to compensate the victims of the Nazi Holocaust (El Sayed, 2014).

- 1. Austria: Germany paid DM 101 million under the 1961 agreement.
- 2. Belgium: Germany paid DM 80 million under the 1960 agreement.
- 3. Denmark: Germany paid DM 16 million under the 1959 agreement.
- 4. France: Germany paid DM 400 million under the 1960 agreement.
- 5. Greece: Germany paid DM 115 million under the 1960 agreement.
- 6. Italy: Germany paid DM 40 million under the 1961 agreement.
- 7. Netherlands: Germany paid DM 125 million under the 1960 agreement.
- 8. Norway: Germany paid DM 60 million under the 1959 agreement.
- 9. United Kingdom: Germany paid DM 11 million under the 1964 agreement.
- 10. Luxembourg: Germany paid DM 18 million under the 1959 agreement.
- 11. Switzerland: Germany paid DM 10 million under the 1961 agreement.
- 12. Sweden: Germany paid DM 1 million under the 1964 agreement.

Öztürk, Günderci, and Tekin (2019) investigated the collective memory of Ezidi asylumseekers who migrated from Iraq to Turkey in 2014. The sample consisted of 20 participants (10 females and ten males) of Kurdish-speaking Ezidi, between the ages of (25–65) years, who arrived in Fidanlık Camp in Diyarbakır, Turkey, from the Iraqi Shingal region. Data was collected through semi-structured in-depth interviews, and qualitative content analysis was conducted on the collected data; and selected randomly. Each interview took place in varying time lengths from 90 to 120 min. The study designated that the word "edict," which refers to violent attacks, had significant importance in all participants' memories. The collective memory in Ezidi society leads to a collective fear. As well, homelessness and religious discrimination are other concerns observed in the population.

The researchers emphasized the significant spatial bond of the relationship with the past. The study showed that many interviewees mentioned that since their families had already migrated to Shingal from Diyarbakır, they did not want to stay in the camps in other regions and instead preferred staying in Diyarbakır. Additionally, there is a positive psychological effect on participants; living in Diyarbakır helped create positive feelings in participants with no difficulties in terms of adjustment. The results showed that traumatic events were forced upon Ezidis. It recognized much of the information stored in the collective memory to be related to an assumption of an edict. Furthermore, it was decided that threatened reactions developed in Ezidi society were directly or indirectly related to the reappearance of the last memory, and these memories lead to a collective fear.

Moreover, the results revealed that the traumatic effects of war and forced migration encouraged anxiety with difficulties in dealing with it. On the other hand, the study indicated that participants assume religion was the reason for many of the painful events they suffered in the past. As a result, they report feeling a need to hide religion and identity for self-protection. Remembering many negative experiences that occurred in this region is considered a factor that increases the participant's fear. Also disclosed that the Ezidi massacre and how it created severe feelings of insecurity for everyone. The Interviewees accounted that they had lost people from their families, but they could not reach their bodies and did not have a grave that belonged to them. Considering they could not perform their religious practices for their deceased, they could not have a normal mourning process. "Our tents are like a tent of condolence here, every da; every other day of mourning for us. We cannot accept what happened, and if we accept, we will forget these events".

Baranova and Dontsov (2019) analyzed the trauma culture through the memories of generations, characterized by signs of injury. The study involved identifying events that construct two generations of memories of a particular historical period and an analysis of how these events can be characterized as cultural trauma. Researchers used survey methods and in-depth interviews. The sample consisted of 83 participants. The study also revealed that the content of collective memories testifies to the marked signs of cultural trauma associated with a particular historical period: for the generation of 1961—1975. These are the events of the late 80s — early 90s, which determined start changes in the political and economic system (perestroika, the collapse of the Union of Soviet Socialist Republics). Also, it showed that cultural trauma is reflected in the

memories of generations of children of war. Through analysis of recorded post-memory processes, the younger generation's attitude to the traumatic events is beyond personal experience. The study determines a traumatic event as central to a generation. Historical significance is an essential but not sufficient factor; a necessary condition is its characterization in the collective consciousness. So, the place that this event occupies in the generation's continuum's life, and the degree to which it has a standard characteristic, is essential for comparison with other periods of life. Events vary in impact - some bear a strong emotional charge and have a strong emotional impact on people; others are epoch-making and lifestyle-changing. They remember events of both types, but only epoch-making events play a pivotal role in creating a group identity. The reference events were events lived through, representing historical significance and having the meanings of trauma in the collective consciousness; trauma is both a onetime event, "which changed life," and a process, "which continues to affect people's attitudes to their past and their perceptions of their present and future. In this approach, trauma becomes not so much a point, and not even so much a starting point, but as an ellipsis, a trajectory, a chain of events and experiences", an event "which unfolds in time."

Rajan (2019) investigated post-conflict settings showed that children's exposure to war and natural disasters is a significant predictor of experiencing violence within their families. However, it is unclear if this effect is driven by the characteristics of traumatized children or their parents. To disentangle these different factors, the researcher surveyed a children's home in Sri Lanka. One hundred forty-six institutionalized children aged (8-17) were interviewed using standardized questionnaires administered by local senior counselors to assess children's exposure to mass trauma, family violence, and violence in the institution and their mental health. They analyzed data via (JMP 13.0 and SPSS) to calculate frequencies, mean scores, and standard deviations to describe the traumatic events experienced by the children and their mental health.

Moreover, Spearman's rank correlations were used to assess the bivariate association between traumatic events and mental health. Also, multivariate linear regressions were employed to identify the predictors of violence in the children's homes. The indices for violence by guardians and peer violence outcome measures, whereas age, sex, exposure to a tsunami, war, and family violence were entered as potential predictors. Where linear regression analysis revealed that controlling for potential confounds, previous exposure to Civil war was a significant predictor of violence by guardians in the children's home. In addition, previous exposure to family violence was a significant predictor of violence by peers in the institutions. A mediation analysis showed that children's internalizing and externalizing behavior problems partly mediated the relationship between violence before the admission to the children's home and violence in the children's home. The results revealed the exposure to adverse and traumatic events due to the Civil war and Tsunami. More than half of the children (53.1%) reported the experience of at least one type of war-related event during their lifetime. On average, explaining the victimization of institutionalized children in the aftermath of mass trauma, 54 children experienced 1.68 (SD 2.18) different war events in their lives. The most common war-related events were seeing a dead or mutilated body (37.9%), being close to shelling or gunfire (29.0%), and being rounded up (20.7%). Ten children (6.9%) reported experiencing the 2004 Tsunami. Violence in the family of origin; A large number of the sample (80.0%) experienced at least one family violence-related event before entering the children's home. On average, the children experienced or witnessed 3.46 (SD 3.82) different event types in their families. The most frequent family-related violence event types reported by the children were being hit on the body, arm, or leg (44.1%), witnessing family members being pinched or hit (35.9%), and being told not to be a good child (31.0%). Four children (2.8%) had at least one injury because of the reported family-related violence and needed medical treatment. The study provides evidence for the assumption that the transmission of mass trauma into interpersonal violence can occur independently of parents through children's psychopathology.

In another study, Niazi (2019) assessed the experience of intergenerational trauma among 11-second generation adult Afghan American males, between the ages of 18 to 35, whose parents resettled in the U.S. after fleeing the 1979 Soviet Invasion of Afghanistan. The researcher tried to find the answer to this question "how war and migration trauma by Afghan Refugee's parents may have been transmitted intergenerationally to their offspring." "How second-generation Afghan men may have internalized their parents' experiences of trauma in ways that have affected their psychological well-being and identity formation." Although there is a growing body of research on Afghan refugees, there is little attention paid to their children and even less consideration given to the experiences of Afghan American men. The method included the invocation of mutuality and "resonance" interview, which should voice participants who might otherwise never share their stories and those of their families with a mental health professional; helping reduce the mental health care stigma—at the same time, enabling the researcher to explore critical questions extensively and comprehensively.

In undergoing a forced migration from their home countries, a migration journey filled with experiences of loss and violence, resettlement in a new socio-cultural context with a new language, and without the academic credentials and financial stability most refugees enjoyed in their countries of origin. Participants' parents probably experienced trauma that went unprocessed and recognition of this trauma among second-generation children-this study's participants-in ways that could lead to the intervention of rational trauma. Unprocessed intergenerational trauma, including post-traumatic stress, can affect socio-cultural outcomes for this population and could continue to be transmitted to future generations of Afghan Americans. To determine the extent to which secondgeneration Afghan American males experienced inter-generational trauma. This study concentrated on five research themes that emerged from participants' narratives: shared parental stories of migration/resettlement and Afghanistan history; values and traditions kept of Afghan culture; the impact of parents' refugee experience on overall life; and participants' experience vs. parent's experience; and the effects of intergenerational trauma. Participants' relationships with these themes reflected their familial trauma journey in ways that mirrored the researcher's experience.

A study by Bergquist et al. (2019) aimed to investigate layers of identity and identity gaps in refugee resettlement experiences in the Midwestern United States. To achieve this end, the study addressed the research questions via in-depth interviews. The target population comprised 350,000 living in the USA from six to fifteen months and resettled in a mid-sized midwestern city. They made up the overall sample of twenty-six refugees, 14 males, and 12 females ranging in age from 19 to 53 years. Also, some participants

were members of specific ethnocultural groups (Yazidi, Karen). The English language was a second, sometimes a third, for participants. All participants spoke fluent or proficient English, allowing them to inter for in-depth interviews. Those who came from 8 different countries are Syria, Lebanon, Iraq, Iran, Afghanistan, South Sudan, Colombia, and Burma. The state in which the participants live is ranked fifth in terms of refugees per capita and has received recognition for its inclusion and support of refugees and immigrants. The participants' who live in the same city have or another place, their experiences of resettlement were not limited to this region. They recruited participants through not-for-profit organizations that provided all the materials they would need. After contact with some participants, the scholars relied on snowball sampling given were working with a population who may be reluctant to start contact or interact with researchers. The results stated that a refugee lacks agency in starting refugee status, has limited freedom, and endures physical hardships such as starvation, exhaustion, disease, and death. Some refugees are a permanent feature of their lives, which will always be ingrained into their self-concept.

Moreover, the trauma and experiences that precipitate leaving a country of origin and the challenges of resettling weigh heavy on some individuals. In contrast, for other participants, these experiences were not as significant in their current self-perspective. However, some refugees embraced the label refuge, which is eventually transcended as part of the resettlement process. Some refugees are a permanent feature of their lives, which will always be ingrained into their self-concept. Participants who recognized relational identity emerging from family roles implied that this aspect of identity facilitated positive adjustment and coping during resettlements. Thus, the significance for participants in reflecting on their resettlement experience is that relational identity emerged as being defined by a family (i.e., a family relational identity) and served as an essential coping mechanism.

On the other hand, communal identity was characterized by providing support to other refugees because they identified with the challenges others experienced during resettlements. Also, the experiences of spoking to general identity layers did not reflect relational and social turbulence with resettlement. An enacted-relational gap resulted from different levels of linguistic assimilation or adherence to cultural norms. Enacted identity was synonymous with adhering to social norms about dating; however, this enactment was not consonant with identity ascribed to him by others in his family. Refugees' described a gap emerging between enacted and communal layers of identity. Primarily, this gap emerged with the enacted identity via language use or proficiency and participant's identification with a larger collective group.

Moreover, this tension reflected feelings of cultural homelessness or ambiguity as individuals often did not feel accepted by the larger community because they attempted to Identify. Further, complexity is heightened because families serve as a cultural home for participants during resettlement. Individual family members struggle to negotiate this tension while trying to adapt to new cultural norms. So, this is noteworthy considering the coping functions family relationships serve during resettlements.

Umer & Elliot (2019) investigate the refugees' distressed psychological well-being by exploring contributory factors to the refugee's effective resettlement during the postmigration phase. They selected participants according to the mixed-methods approach that contributed to determining refugees' post-traumatic growth and a qualitative investigation of their detailed writings on hope. Therefore, a psychic lens was adopted according to Charles Snyder's theoretical framework on hope and its assumptions, including goals, pathways, agency, barriers, thoughts, and feelings, using a unique context, the framework regarding the refugee's effective adaptation and integration into society.

The study reveals survival as the primary goal—a pattern that somewhat parallels write another low post-traumatic growth inventory scoring among Palestinian participants. Razaq-LM, who runs away from Lebanon, reported: "I had problems with the government, and they sent the army to torture me. I went to Turkey by plane. From there, I walked through Greece and France, and then after sitting for 14 hours in minus twelve temperatures, I came in a freezer troller to the UK. Here I am safe now". Moreover, Razaq-LM reported: I have panic attacks whenever I attend legal proceedings for his asylum claim. While, Kalam-HM writes: "I was born in Damascus, Syria. My area was affected because of bombs a lot, so all the people left the camp. This country can change your life with opportunities, and I have a lot of goals. I am studying programming. I want to continue to college and university and then work maybe after five years, but I will do it".

Dalgaarda et al. (2016) aim were to explore possible risk and protective factors by studying the association between intra-family communication style regarding the parents' previous traumatic experiences, children's psychosocial adaptation, and attachment; as well as identify the transmission of trauma in thirty refugee families in Denmark, where one or both parents treated post-traumatic stress disorder symptoms and had non-traumatized children aged 4-9 years. The study showed a negative impact of parental traumatic experiences on children might, as children's Total Difficulties Scores on the Strengths and difficulties questionnaire (SDQ) were more than the Danish norms. The study revealed a negative association between children's attachment security and externalizing symptoms. As Measured is significant, suggesting that they may associate trauma with disruptions in children's attachment representations, scholars found a significant association between parental trauma communication and children's attachment style. In contrast, it did not confirm an association between parental symptoms of post-traumatic stress disorders, depression, anxiety, adaptation, and attachment security among children, which maybe because of the high level of the parent's symptoms in the sample and reduced variance amongst them.

Peddle (2015) investigated the traumatic consequences of the Palestinian Nakba. He focused on examining the path through which trauma had crossed Palestinian lives from the beginning of the Nakba events and the consequent effect on their communications with the external world. The sample consisted of 6 Palestinian living inside Israel. The researcher used the psychoanalytic approach of transgenerational transmission of trauma to explain the effects of trauma on an individual witness and the percussive effects on their children and their children. Understanding the psychological concepts and a deep interest in the persistent crisis facing the Palestinian people motivated the phenomenon; through the different research questions, what impact has the trauma had on the lives of those who experienced the Nakba? Can psychoanalytic concepts enable a deeper understanding of their suffering? does such suffering still influence the lives of

Palestinians, and how and to what extent are these influences felt? The study showed that the stories focus on many of the transgenerational transmission of trauma model features that go with the Volkan theory.

The results show that the interviewees drew an accumulated traumatic self-representation and showed little sign of traumatic self-representation. It also showed a sign that seems to be painful, such as a parent's former village. Participants have experienced trauma during the Nakba of various complex emotions centered on loss, loss of parents, home, and the simplicity of childhood, and created feelings of helplessness and anxiety. In addition, the father's complex role, at once a source of pride and sadness and helplessness, sits a dominant position within trauma. The study pointed to the fact that they live fulfilled lives, and for the lack of personal loss, they cannot identify or comprehend the loss he feels. It may indicate the lack of loss in his children's lives and confers an exciting study pathway into whether loss or trauma within the individual is required to reactivate the trauma of previous generations. This disconnect is then conceivably evidence of a dormant traumatized self-representation. It is only reactivated when stimuli provoke the specific sensitivities that of the original trauma. The study recommended further and more detailed study to prove valuable in fully tracing the trauma legacies of the Palestinian Nakba.

Hussain and Bhushan (2013) investigated post-traumatic growth (PTG) experiences among twelve Tibetan refugees resident Dharmshala, Himachal Pradesh, India. The significance of this study is that it was explored (PTG) is the phenomenon of positive psychological changes experienced due to the struggle with highly challenging life circumstances. Significant themes depicting post-traumatic growth experiences included positive changes toward the world and people, the experience of more ultimate and meaningful relationships, and the realization of personal strengths. The study adopted a qualitative research approach using the interpretive phenomenological analysis for the narratives of case studies to explore various dimensions of PTG experienced by the participants due to facing various adversities in their lives. Data were analyzed using the guidelines provided by Smith, Jarman, and Osborn (2007). They found that the cultural worldviews provided necessary thrust and schemas for Post-traumatic growth with integrating some factors in health services may encourage positive growth outcomes among refugees. The study showed that all refugees reported specific changes in their outlook due to their traumatic experiences, as well refugees born and brought up in exile commented, "Traumatic experiences are part of life."

The comments of refugees, especially the older ones, reflected a relative lack of resentment for the adverse events of their lives. Buddhist cultural teaching seems to have desensitized their threshold of reacting to trauma, refugees who were orphaned in early childhood and escaped to exile during their early childhood. He stated, "In our culture, we learned that we are responsible for whatever happens in our life. Many times it seems obvious that others are causing us pain, but somehow we have invited them by our past actions". Plus, their cultural wisdom and personal struggle seem to have taught them humility and acceptance of suffering as a broader scheme of the existential plan. The evidence on suffering provided new insights into the nature of reality and made them spiritually mature. Some refugees felt that the practice of Buddhism became more critical in refugee life as it provides strength, hope, and wisdom to face hurdles of life. Others felt that the practice of religion was critical not only for their survival but also for the survival of their culture. Some participants felt more responsible for their lives than the negativity and sense of victimization that characterized their past. Thus, it can be considered a symptom of maturity that they previously lacked.

Some felt more sympathy for others after their sufferings. Personal suffering sensitized many to develop their consciousness, and as a result, they became more inclusive in their empathy and compassion. Participants felt that they are now more active in helping others as it gives them personal happiness and satisfaction because compassion is an essential aspect of Tibetans. Those who were involved with the lives of others and supported others in need experienced a more meaningful life. It was this sense of meaning in life that may be a source of compassion and altruism. Many participants reported that, despite their long life in exile, they are optimistic about their future. But some felt that they have survived for over two generations in exile, and they have every reason to be optimistic for the future. While discussing hope and optimism, it reflected a mixture of both positive and negative emotions on the participants' faces. One part of

their mind was full of hope that they had survived along with their cultural artifacts, and other parts of their mind always knew that they might not go back to a free Tibet. The traumatic experience started a deep sense of kinship and connection with fellow friends and community members who shared common values.

Individual trauma or collective trauma encourages them to connect and recollect with other survivors who are the source of giving meanings and support. It identified the Tibetan community worldwide that provides a sense of cohesion and meaningful existence by removing feelings of isolation and individual misfortune to many. The study indicated that some participants differed in narrative patterns, while a few participants had an identity crisis in their narratives as refugees. Participants could not locate themselves in any country and felt that they never had a home. However, others could find their existence in their community, and identity was not a problem. Still, contrasting images of Tibet were presented by the participants. On the one hand, they presented a highly negative image of Tibet under the control of China from suffering, persecutions, human rights violations are common phenomena. Also, they presented Tibet before the Chinese invasion as a peaceful land with religious devotion, love, and happiness.

3.3 Comments on Previous Studies

It is clear from the above-stated review of the previous literature that several studies have approached traumatic experiences and collective memory as a multidimensional phenomenon, an approach that includes both theoretical and empirical research. Previous studies have identified this phenomenon in terms of definition, historical framework, instruments, and effect for the displacement. The Palestinian Nakba maintains a dominant position in politics, anthropology, literature, and memory work but is almost entirely away from trauma study. Considering the Nakba's pivotal position in the mindsets of the Palestinians for a deeper and broader understanding of its position into a broader background is necessary. A few studies dealt with the topic from a field social and psychological perspective through the generations.

Furthermore, it showed that traumatic experiences lead to an increase in PTSD symptoms and the emergence of many psychological disorders such as depression,

pathological fear and stress, and their appearance at high levels in the emotional, physiological and cognitive aspects. The emergence of physical and psychological symptoms, and thus the inability to psychological and social adaptation because of collective memories and previous traumatic experiences that are the loss of the homeland and the land, losing homes and families, torture, injuries, and martyrdom of loved ones. Post-traumatic stress disorder is high among Palestinian refugees and is the most severe. It continues for a long time, with problems related to isolation and economic problems, increasing their suffering in the refugee camps everywhere.

However, these studies have benefited the present dissertation by shedding light on the phenomenon of traumatic experiences in their varied dimensions. They encourage the researcher to study this topic from the first generation point of view; the current study will continue within previous studies and carry out their recommendations.

Despite extensive studies on collective memory among second-generation in both Israeli holocaust and Palestinian refugees, empirical studies among Palestinian first generation are limited, especially, the transmission of trauma between generations. The Palestinian experience under occupation was and still is the most tragic one after seventy-one years of the Nakba, which is a landmark in the history of Palestinians; it carried with it all their traumatic experiences and their robbed homeland with a painful memory. The trauma is transmitted from one generation to another through the stories of the refugees who witnessed the painful events of killing, displacement, destroyed houses, arrest, sickness, cold or intense heat, and living in the mountains.

There is a tremendous amount of literature that confirms the transmission of traumatic effects across generations. Still, there are not enough studies that examine the psychological and social impact of the Nakba on the first generation of Palestinians living in camps in the West Bank and Gaza Strip and diaspora. The present study aims to find out the effects of traumatic experiences of the Nakba after 72 years as perceived by the first generation.

Chapter Four

4 Methodology and Design

An appropriate research approach to the subject matter is a descriptive approach based on a mixed-method approach of quantitative and qualitative designs. The questionnaire and interviews are suitable for the exploratory nature of the research and provide in-depth and transparent information on the traumatic experiences of the first generation of Palestinian refugees aged 75 and over living in Palestinian camps in the West Bank and Gaza Strip.

4.1 **Population and Sampling**

The target population consisted of Palestinian refugees aged 75 and above living in refugee camps on the West Bank and Gaza Strip in 2021. It included 12182 of the first generation who have experienced traumatic Nakba events. The population comprised 4817 males and 7365 females, distributing the samples according to the region (West Bank and Gaza Strip) and camps. The total number of samples constituted 1365 of the first generation (539 males and 826 females) selected in a stratified method, according to gender, region, and camps, as indicated in table 4.1 (PCBS, 2019).

Region	Male		Female	
	Population Needed Sample		Population	Needed Sample
West Bank	1752	200	2607	297
Gaza Strip	3065	339	4758	529
Total	4817	539	7365	826

Table (4.1). Distribution of the study population and sample by Gender and region

The overall sample was composed of 1,365 first generation (539 males and 826 females) between 75–100 years of age selected in a stratified manner by gender and region. The participants in West Bank were from Jenin, Tulkarem, Nur Shams, Far'a, Askar, Ein Beit al-Ma', Balata, Jalazone, Deir 'Ammar, Amari, Ein as-Sultan, Aqabat Jaber, Kalandia, Shuafat, 'Azza, Aida, Dheisheh, Al-Arroub, and Fawwar refugee camps. In addition, the participants in Gaza Strip were from Jabalia, Bureij, Maghazi, Khan Yunis, Al-Shati, Nuseirat, Deir al-Balah, and Rafah refugee camps.

The sample size was calculated using the sample size calculator available on the sampling website <u>http://www.surveysystem.com/sscalc.htm</u>, with a margin of error of 2.50%, as indicated in appendix A.

In all, 1365 of the first-generation participated in the study. The demographic distribution of participants was as follows: age, gender, religion degree, social status, number of children, educational level, region, and Place of residence. The mean age of respondents was 78.71 (SD 18.92) years and 60.5% were female, while the remaining 39.5 were males; The majority (47.2%) were of a moderate number of children "between" (7-10) per family; more than a third of the refugees (39.9%) were of north in Gaza Strip, and more than half (72.4%) were highly religious. In terms of the first generation education level, their academic achievement were less educated (elementary and below) (69.6%), and (17.1%) were secondary. Sample distribution by gender, (63.6%) of the refugees from Gaza Strip, and (36.4%) in West Bank. One-third of the refugee's camps in the north of the Gaza Strip, 31.2 % in the middle, and 28.9% in the south; the majority (70.2%) were married, also, (28.9%) were divorced or widowed compared to (0.9%) were single; as indicated (tables no. 4.2-4.8).

Age	N	Percent %
75-79	958	70.2
80-84	265	19.4
85-89	87	6.4
90-94	40	2.9
95-99	13	1.0
100+	2	0.1
Total	1365	100

Table (4.2). Sample distribution by age.

Table no (4.2) clarifies the distribution of the first generation of Palestinian refugees by age group: the majority (70.2%) were 75-79 years old, 19.4% in the age group 80-84, 6.4% were 85-89 years old, 2.9% were 90-94 years old, 1% were 95-99 years old, while 0.1% more than 100 years old. The average age of the first generation of Palestinian refugees was 78.71 years.

Table (4.3). Sample distribution by gender.

Gender	N	Percent %
Male	539	39.5
Female	826	60.5
Total	1365	100

Table no (4.3) shows the distribution of the first generation of Palestinian refugees by gender, as the majority (60.5%) females to 5% only males.

Table (4.4). Sample distribution by degree of religion.

Religion degree	Ν	Percent %
Practicing (High)	988	72.4
Practicing to certain extent (Middle)	301	22.1
Low	76	5.6
Total	1365	100

According to data reported in table no (4.4) the majority (72.4%) of the first generation of Palestinian refugees were deeply religious, 22.1% in the middle while only 5.6% were rarely religious.

4.5). Sample distribution by social status.

Social status	N	Percent %
Single	12	0.9
Married	958	70.2
Other (Divorced, widowed)	395	28.9
Total	1365	100

Table no (4.5) clarifies the distribution of the first generation of Palestinian refugees by social status: the majority (70.2%) are married, 28.9% other (Divorced or widowed) while 0.9% single.

Number of children	N	Percent %
Less than 2	85	6.2
3-6	492	36.0
7-10	644	47.2
11-14	134	9.8
15-17	8	0.6
More than 18	2	0.1
Total	1365	100

Table (4.6). Sample distribution by number of children.

Table no (4.6) clarifies the distribution the first generation of Palestinian refugees by number of children as follows: the majority (47.2%) have a number of children of between 7-10 members, 36% with 3-6 members, and 9.8% of the number of children between 11-14 members, and 6.2% less than two children, 0.6% of the number of children between 15-17, while 1% with fifteen children and above. The average numbers of children of the first generation of Palestinian refugees were 6.91 members.

4.7). Sample distribution by educational level.

Educational level	N	Percent %
Elementary and below	950	69.6
Secondary	233	17.1
Diploma	122	8.9
BA and above	60	4.4
Total	1365	100

Table no (4.7) shows the distribution of respondents according to educational level, as 69.6% of them are in the basic (elementary and below) level, 17.1% secondary, 8.9% have a diploma degree, while 4.4% bachelor degree and above.

4.8). Sample distribution by region and place of residence.

Region	Place of	N	Percent %	Total of Place of	N	Percent total %
	residence			residence		
	North	117	8.6	North	544	39.9
West Bank	Middle	166	12.2			
	South	214	15.7			
Total WB		497	36.4	Middle	426	31.2
	North	427	31.2			

Gaza Strip	Middle	260	19.0			
	South	181	13.3	South	395	28.9
Total GS		868	63.6			
				Total West Bank	1365	100
				and Gaza Strip		

Table no (4.8) shows that the majority (63.6%) of the first generation of Palestinian refugees were from the Gaza Strip, while 36.4% of them were from the West Bank. As the same table shows that the majority (39.9%) of the first generation of Palestinian refugees were from camps in the north, 31.2% from camps in the middle and 28.9% from camps in the south.

4.2 Instrumentation

According to international standards, traumatic experiences of the Nakba were assessed using an index of a 46-item scale, introduced by Khamaysa (2020) in West Bank and team on his behalf in the Gaza Strip using the *Checklist of Traumatic Experiences (CTE)*, and taking into consideration of the psychometric properties, transcultural validity, and conciseness of previous use in refugee populations with cultural appropriateness in the Palestinian society. Participants were interviewed in their shelters in camps to complete the questionnaire. The study instrument sought background information on participants' age, gender, degree of religion, social status, number of children, educational level, and region. A questionnaire that adopted a 5-point Likert scale (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree) was used to measure the responses, as indicated in appendixes B and C.

4.3 Instrument Validity

Validation of the instrument proceeded in two distinct phases. The initial phase involved a group of referees and expert arbitrators, who provided some comments on the tool, as indicated in appendix D. The second phase involved the implementation of a pilot study (N=45) to validate the survey using exploratory factor analysis. Factor loading for all items exceeded 0.60 (0.61 to 0.88), which meant that those items were suitable for measuring every item of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation, as indicated in table 4.9.

No.	Items	Extraction
1.	I was at risk of death	0.70
2.	I was physically injured	0.70
3.	I was hurt psychologically	0.70
4.	I saw a case of torture	0.69
5.	I saw a murder case	0.67
6.	I was tortured in different forms	0.80
7.	I was insulted	0.70
8.	I lost consciousness	0.62
9.	I was threatened	0.63
10.	I was arrested	0.60
11.	I was deprived of sleep	0.71
12.	I exposed to extreme hot	0.70
13.	I deprived of medical care	0.73
14.	I exposed to extreme cold	0.74
15.	I deprived of the food	0.86
16.	I deprived of the water	0.88
17.	I deprived of shower	0.80
18.	I deprived of performing prayer	0.63
19.	I deprived of my need	0.72
20.	I was shot	0.63
21.	I saw the devastation in my town	0.82
22.	I saw our house destroyed	0.78
23.	I used as human shields	0.60
24.	I saw the massacres committed against Palestinians	0.72
25.	I saw artillery shelling of destroyed Palestinian villages and cities	0.77
26.	I recall the Nakba event	0.74
27.	I have trouble sleeping related to images and thoughts of the Nakba	0.75
28.	There are things that remind me of the Nakba	0.65
29.	I get angry when I remember issues related to the Nakba	0.74
30.	I get upset when I think of the Nakba event or remember it	0.60
31.	I think of the Nakba event unintentionally	0.66

4.9). Factor analysis of traumatic experiences of the Nakba.

32.	I feel I'm living the moment of the Nakba	0.76
33.	I cannot express my feelings toward the Nakba	0.74
34.	I have the feeling that the Nakba will happen again	0.73
35.	The images of the Nakba do not disappear from my memory	0.66
36.	I feel sorry for what happened to the Palestinians in the Nakba of displacement and loss	0.65
37.	I feel that the Nakba event was not a natural issue	0.60
38.	I am surprised by images of the Nakba incident in my mind	0.79
39.	I feel very emotional when I remember the Nakba	0.67
40.	I try not thinking about the Nakba event	0.79
41.	Remembering the Nakba event causes physical reactions for me mostly difficulty breathing, increased heartbeat, and dizziness	0.65
42.	I have disturbing dreams related to the Nakba	0.72
43.	I avoid talking about the Nakba	0.71
44.	I avoid situations that remind me of the Nakba	0.73
45.	I will never forget the Nakba event	0.64
46.	I think of the Nakba event with every pessimism year after year	0.60

4.4 Instrument Reliability

The reliability was tested using Cronbach's Alpha and split-half coefficients to ascertain reliability and consistency of the survey. Cronbach's Alpha and split-half for the survey instrument were 0.94 and 0.87, respectively, indicating excellent reliability and consistency, as indicated in table 4.10.

4.10). Reliability of traumatic experiences of the Nakba scale.

Model	No. of items	Alpha
Cronbach's Alpha	46	0.94
Guttman Split-Half	46	0.87

4.5 Statistical Analysis

Following data collection, and prepared for processing into the computer, and allocate certain numbers to transform verbal answers into numbers (strongly agree, agree, neither agree nor disagree, disagree and strongly disagree), with the highest score indicating a moderate level of traumatic experiences. Descriptive statistics measure traumatic experience scores among the sampled population. The following statistical techniques were employed: T-test, One-way analysis of variance, Tukey test, Two-way analysis of variance, One sample T-Test, Chi-Square Test, Pearson correlation, Cronbach's Alpha, Split-Half Coefficient, and Factor Analysis; and to understand the results of the study, the mean score key in table no. 4.11 shown below will be useful.

Table (4.11). Mean	score key for the	e results of the study.
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No.	Mean score	Key of traumatic experiences degree	Standard
1.	1 - 2.33	Low	One Standard Deviation
			below
2.	2.34 - 3.67	Moderate	Mean
3.	3.68 - 5	High	One Standard Deviation
			above

Chapter Five

5 Findings of the study and discussion

The study aimed at identifying the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation. This chapter details the results, as follows:

5.1 Degree of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

What is the degree of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation?

Numbers, mean score, standard deviation, and percentage were used to answer the above question. Table (5.1) presents the results.

Table (5.1). Number, mean score, standard deviation, and percentage of the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

Variable	Ν	Mean*	Std. Deviation	Relative index
				(Percent %)
Traumatic experiences total score	1365	3.44	0.81	68.8

*Mean out of 5 points.

The mean score of the traumatic experiences scale as experienced by the sample of 1365 the first generation of Palestinian refugees participants of the study was moderate (M 3.44 SD 0.81), as indicated in table 5.1. The total score showed that (68.8%) of the first generation of Palestinian refugees experienced above-average traumatic experiences during Nakba events.

5.2 Indicators of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

What are the indicators of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation?

Numbers, mean score, standard deviation, and percentage were used to answer the above question. Table (5.2) presents the results:

Table (5.2). Mean scores, standard deviation, and percentage for the indicators of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation ranked in a descending order.

Indicators of traumatic experiences	Mean*	Std. Deviation	Relative index (Percent %)
I feel sorry for what happened to the Palestinians in the	4.67	1.31	0.90
Nakba of displacement and loss.			
I feel that the Nakba event was not a natural issue.	4.52	1.36	0.90
I will never forget the Nakba event	4.44	1.39	0.88
I get angry when I remember issues related to the Nakba.	4.30	1.66	0.86
I think of the Nakba event with every pessimism year after	4.24	1.36	0.84
year.			
I saw the massacres committed against Palestinians.	4.20	1.46	0.84
There are things that remind me of the Nakba.	4.12	1.30	0.82
I was insulted.	4.06	1.46	0.81
The images of the Nakba do not disappear from my memory.	4.01	1.41	0.80
I was at risk of death.	4.00	1.27	0.80
I think of the Nakba event unintentionally.	3.87	1.44	0.77
I recall the Nakba event.	3.84	1.27	0.76
I was hurt psychologically.	3.81	1.33	0.76
I saw a case of torture.	3.79	1.52	0.75
I get upset when I think of the Nakba event or remember it.	3.77	1.24	0.75
I exposed to extreme cold.	3.74	1.27	0.74
I feel I am living the moment of the Nakba.	3.67	1.28	0.73
I was threatened.	3.63	1.46	0.72
I was tortured in different forms.	3.53	1.36	0.70
I was deprived of sleep.	3.50	1.45	0.70
I saw artillery shelling of destroyed Palestinian villages and	3.49	1.40	0.69
cities.			
I have the feeling that the Nakba will happen again.	3.45	1.45	0.69
I am surprised by images of the Nakba incident in my mind.	3.43	1.65	0.68
I saw the devastation in my town.	3.39	1.41	0.67

I deprived of performing prayer.	3.36	1.54	0.67
I feel very emotional when I remember the Nakba.	3.30	1.37	0.66
I saw a murder case.	3.29	1.45	0.65
I deprived of my need.	3.27	1.40	0.65
I was physically injured.	3.23		0.64
I deprived of medical care.	3.22	1.31	0.64
I exposed to extreme hot.	3.19	1.36	0.63
I saw our house destroyed.	3.18	1.39	0.63
I deprived of shower.	3.14	1.66	0.62
I deprived of the water.	3.06	1.36	0.61
I deprived of the food.	3.06	1.46	0.61
I was shot.	3.02	1.30	0.60
Remembering the Nakba event causes physical reactions for	2.96	1.46	0.59
me mostly difficulty breathing, increased heartbeat, and			
dizziness.			
I used as human shields.	2.94	1.41	0.58
I was arrested.	2.88	1.27	0.57
I have trouble sleeping related to images and thoughts of the	2.88	1.44	0.57
Nakba.			
I cannot express my feelings toward the Nakba.	2.73	1.27	0.54
I have disturbing dreams related to the Nakba.	2.64	1.33	0.52
I try not thinking about the Nakba event.	2.61	1.52	0.52
I lost consciousness.	2.50	1.24	0.50
I avoid situations that remind me of the Nakba.	2.43	1.27	0.48
I avoid talking about the Nakba.	2.27	1.28	0.45

*Mean out of 5 points.

Results showed that the indicators of the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation were ranked in descending order as follows: I feel sorry for what happened to the Palestinians in the Nakba of displacement and loss (M 4.67 SD 1.31). The first generation of Palestinian refugees emphasize that they still feel that the Nakba event was not a natural issue (4.52 SD 1.36); they will never forget the Nakba event (M 4.44 SD 1.39); also they angry when they remember issues related to the Nakba (M 4.30 SD 1.66). Moreover, the refugees indicated that they were thought of the Nakba event with every pessimism year after year (M 4.24 SD 1.36); and they saw the massacres committed against Palestinians (M 4.20 SD 1.46).

Furthermore, the first generation of Palestinian refugees indicated that there were things reminding them of the Nakba (M 4.12 SD 1.30); they indicated their exposure to insults during the events of the Nakba. (M 4.06 SD 1.46). Further, they pointed that images of the Nakba do not disappear from my memory (M 4.01 SD 1.41); also, they indicated that they were at risk of death (M 4.00 SD 1.27). In addition, they were thought of the Nakba event unintentionally (M 3.87 SD 1.44); and they still recall the events of the Nakba (M 3.84 SD 1.27), as indicated in table no. 5.2.

- 5.3 Relationship between age variable and traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.
- 5.3.1 There are no statistically significant relationship at $\alpha \le 0.05$ between age variable and traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

Pearson correlation was used to validate the above hypothesis. Table (5.3) presents the results.

Table (5.3). Pearson correlation for the relationship between age variable and traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

Variables	N	Value (R)	Sig.
Age* Traumatic experiences total score	1365	0.292**	0.000

Data in table (5.3) show that there is a direct relationship of statistical significance at $\alpha \leq 0.05$ between the variable of age and the traumatic experience total degree, so that the greater the age, the greater the degree of traumatic experiences, and vice versa. The null hypothesis is therefore rejected.

5.3.2 There are no statistically significant differences at $\alpha \leq 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender.

T-test was used to validate the above hypothesis. Table (5.4) presents the results.

Table (5.4). T-test for the differences in the traumatic experiences of the catastrophe – Nakba– after 72 years as perceived by the first generation according to gender.

Gender	Ν	Mean*	Std. Deviation	Df	t-value	Sig.
Male	539	3.50	0.85			
Female	826	3.41	0.79	1363	1.911	0.021
Total	1365	3.45	0.82			

*Mean out of 5 points.

In relation to gender, the differences in the traumatic experiences of the Nakba among the first generation of Palestinian refugees favored the males (M 3.50 SD 0.85) compared to (M3.41 SD 0.79) for females, T-test value was (1.911 P=0.021) as indicated in table (5.4). The hypothesis is therefore rejected.

5.3.3 There are no statistically significant differences at $\alpha \leq 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to religion degree.

One-way analysis of variance was used to clarify the above hypothesis.

Tables (5.5–5.7) present the results.

Table (5.5). One-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to religion degree.

Source	Df	Sum of squares	Mean square	F-value	Sig.
Between groups	2	11.339	5.669		
Within groups	1362	903.948	0.664	8.542	0.000
Total	1364	915.286			

With regard to religion degree, the results showed that there are significant differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the

first generation. The differences in the traumatic experiences of the Nakba among older Palestinian refugees favor older people who always practice religion (M 3.48 SD 0.72) compared to (M 3.08 SD 1.34) for the older refugees who do not practice religion, F-value was (8.542 P=0.000), as indicated in table (5.5-5.7). The hypothesis is therefore rejected.

Table (5.6). Tukey test for the source of differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to religion degree.

Religion degree	Practicing	Practicing to certain	Non practicing
	(High)	extent (Middle)	(Low)
Practicing (High)		0.04037	0.40026*
Practicing to certain extent (Middle)			0.35989*
Non practicing (Low)			

Table (5.7). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to religion degree.

Religion degree	Ν	Mean*	Std. Deviation
Practicing (High)	988	3.48	0.72
Practicing to certain extent (Middle)	301	3.44	0.90
Non practicing (Low)	76	3.08	1.34
Total	1365	3.44	0.81

*Mean out of 5 points.

5.3.4 There are no statistically significant differences at $\alpha \leq 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to social status.

One-way analysis of variance was used to clarify the above hypothesis.

Tables (5.8–5.9) *present the results.*

Table (5.8). One-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to social status.

Source	Df	Sum of squares	Mean square	F-value	Sig.
Between groups	2	9.636	4.818		
Within groups	1362	905.650	0.665	7.246	0.001
Total	1364	915.286			

As for social status, the results showed that there are significant differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to social status. The null hypothesis is accordingly rejected. In terms of social status, the differences in the traumatic experiences of the Nakba were in favor of the first generation of single (M 3.75 SD 0.51) compared to (M 3.39 SD 0.68) for married refugees; F-value was (7.246 P=0.001) as indicated in tables (5.8-5.10).

Table (5.9). Tukey test for the source of differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to social status.

Social status	Single	Married	Other (Divorced, widowed)
Single		0.35631	-0.17461*
Married		0.18170	
Other (Divorced, widowed)			

Table (5.10). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to social status.

Social status	N	Mean*	Std. Deviation
Single	12	3.75	0.51
Married	958	3.39	0.86
Other (Divorced, widowed)	395	3.57	0.68
Total	1365	3.44	0.81

*Mean out of 5 points.

5.3.5 There are no statistically significant relationships at α≤0.05 between number of children variable and traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

Pearson correlation was used to validate the above hypothesis. Table (5.11) presents the results.

Table (5.11). Pearson correlation for the relationship between number of children variable and traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

Variables	N	Value (R)	Sig.
Number of children * Traumatic	1365	-0.054*	0.046
experiences total score			

Data in table (5.11) shows that there is a reverse relationship of statistical significance at $\alpha \leq 0.05$ between the variable of number of children and the traumatic experience total degree, the higher the number of children within the Palestinian refugee family, the lower the degree of traumatic experience of those families, and vice versa. The null hypothesis is therefore rejected.

5.3.6 There are no statistically significant differences at $\alpha \leq 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to education level.

One-way analysis of variance was used to clarify the above hypothesis.

Tables (5.12–5.14) present the results.

Table(5.12). One-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to education level.

Source	Df	Sum of squares	Mean square	F-value	Sig.
Between groups	3	56.984	18.995		
Within groups	1361	858.303	0.631	30.119	0.000
Total	1364	915.286			

In terms of education level, the differences in the traumatic experiences of the Nakba were found in refugees' education level in favor of less-educated refugees (M 3.57 SD 0.69)

compared to (M 2.89 SD 1..19) for the refugees with well-educated F-value was (30.119 P=0.000); as indicated in tables (5.12-5.14). The null hypothesis is accordingly rejected.

Table (5.13). Tukey test for the source of differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to education level.

Education level	Elementary and below	Secondary	Diploma	BA and above
Elementary and below		0.32482*	0.46615*	0.68243*
Secondary			0.14132	0.35761*
Diploma				0.21628
BA and above				

Table (5.14). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to education level.

Education level	Ν	Mean*	Std. Deviation
Elementary and below	950	3.57	0.69
Secondary	233	3.25	0.92
Diploma	122	3.11	0.99
BA and above	60	2.89	1.19
Total	1365	3.44	0.81

*Mean out of 5 points.

5.3.7 There are no statistically significant differences at $\alpha \le 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the region.

One-way analysis of variance was used to clarify the above hypothesis.

Tables (5.15–5.17) present the results.

Table (5.15). One-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the region.

Source	Df	Sum of squares	Mean square	F-value	Sig.
Between groups	2	0.117	0.059	0.087	0.916
Within groups	1362	915.169	0.672		
Total	1364	915.286			

As for the region, results showed that there are no significant differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation, F-value was (0.087 P=0.916), as indicated in table (5.15). Similarity has been found in the first generation of Palestinian refugees' traumatic experiences mean scores of the Nakba despite their region, as indicated in table (5.16). The null hypothesis therefore is accepted.

Table (5.16). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the region.

Region	Ν	Mean*	Std. Deviation
North	544	3.43	0.82
Middle	426	3.45	0.86
South	395	3.45	0.75
Total	1365	3.44	0.81

*Mean out of 5 points.

5.3.8 There are no statistically significant differences at $\alpha \leq 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and the region.

Two-way analysis of variance was used to clarify the above hypothesis. Tables (5.16–5.17) present the results.

Table (5.17). Two-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and the region.

Source	Df	Sum of Mean		F-value	Sig.
		squares	square		
Gender	1	4.733	4.733	7.839	0.005
Region	1	90.908	90.908	150.543	0.000
Gender * Region	1	4.111	4.111	6.808	0.009
Error	1361	821.859	0.604		
Total	1365	17154.325			
Corrected Total	1364	915.286			

In regard to gender and the region, the differences in the traumatic experiences of the Nakba among the first-generation refugees favored the males and females who are living in West Bank. They have had traumatic degrees of experience due to the events of the Nakba is the highest (M 3.92 SD 0.67) and (M 3.68 SD 0.80) respectively; F value was (6.808 P=0.009), as indicated in table (5.18). The null hypothesis, therefore, is rejected.

Table (5.18). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and the region.

Gender	Region	N	Mean*	Std. Deviation
Male	West Bank	193	3.92	0.67
	Gaza Strip	346	3.26	0.84
Female	West Bank	304	3.68	0.80
	Gaza Strip	522	3.25	0.74
Total		1365	3.44	0.81

*Mean out of 5 points.

5.3.9 There are no statistically significant differences at $\alpha \le 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the region and place of residence.

Two-way analysis of variance was used to clarify the above hypothesis. Tables (5.17–5.18) present the results.

Table (5.19). Two-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the region and place of residence.

Source	Df	Sum of	Mean square	F-value	Sig.
		squares			
Region	1	94.089	94.089	157.275	0.000
Place of residence	2	10.858	5.429	9.075	0.000
Region * place of residence	2	10.061	5.030	8.409	0.000
Error	1359	813.014	0.598		
Total	1365	17154.325			
Corrected Total	1364	915.286			

In terms of region and place of residence, the differences in the traumatic experiences of the Nakba among the first-generation refugees favored those living in the west bank in the camps located in the north (M 4.8 SD 0.54). While, in Gaza Strip in the camps located in

the middle (M 3.26 SD 0.85); F-value was (8.409 P=0.000), as indicated in table (5.18). The null hypothesis is thus rejected.

Table (5.18). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the region and place of residence.

Region	place of residence	Ν	Mean*	Std.
				Deviation
	North	117	4.08	0.54
West Bank	Middle	166	3.75	0.78
	South	214	3.63	0.80
	North	427	3.25	0.80
Gaza Strip	Middle	260	3.26	0.85
	South	181	3.24	0.63
Total		1365		

*Mean out of 5 points.

5.3.10 There are no statistically significant differences at $\alpha \leq 0.05$ in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and religion degree.

Two-way analysis of variance was used to clarify the above hypothesis. Tables (5.20–5.21)

present the results.

Table (5.20). Two-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and religion degree.

Source	Df	Sum of	Mean square	F-value	Sig.
		squares			
Gender	1	0.600	0.600	0.910	0.040
Religion degree	2	13.999	7.000	10.612	0.000
Gender * Religion degree	2	5.180	2.590	3.927	0.020
Error	1359	896.414	0.660		
Total	1365	17154.325			
Corrected Total	1364	915.286			

As for gender and religion degree, the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation favored the males in high religion degree (M 3.57 SD 0.74). F-value was (3.927 P=0.020), as indicated in table (5.21). The hypothesis therefore is rejected.

Table (5.21). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the gender and region.

Gender	Region	N	Mean*	Std. Deviation
Molo	Practicing (High)	396	3.57	0.74
Male	Practicing to certain extent (Middle)	115	3.41	0.95
	Non practicing (Low)	28	2.87	1.41
E	Practicing (High)	592	3.41	0.70
Female	Practicing to certain extent (Middle)	186	3.45	0.88
	Non practicing (Low)	48	3.19	1.30
Total		1365		

*Mean out of 5 points.

5.3.11 There are no statistically significant differences at α≤0.05 in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and education level.

Two-way analysis of variance was used to clarify the above hypothesis. Tables (5.22–5.23) present the results.

Table (5.22). Two-way analysis of variance for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender and educational level.

Source	Df	Sum of	Mean square	F-value	Sig.
		squares			
Gender	1	0.986	0.986	1.573	0.210
Education level	3	57.823	19.274	30.753	0.000
Gender * Educational level	3	2.251	0.750	1.197	0.310
Error	1357	850.485	0.627		
Total	1365	17154.325			
Corrected Total	1364	915.286			

With regard to gender and education level, the results showed that there are no significant differences in the traumatic experiences of the Nakba among first-generation according to gender and education level; F-value was (1.197 P=0.310), as indicated in table (5.22). Similarity has been found in the traumatic experiences of the Nakba among first-generation mean scores of the Nakba despite their gender and education level, as indicated in table (5.23). Thus the null hypothesis is accepted.

Table (5.23). Mean scores and standard deviation for the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation according to the gender and educational level.

Gender	Educational level	Ν	Mean*	Std.
				Deviation
Male	Elementary and below	352	3.66	0.70
Male	Secondary	89	3.30	0.93
	Diploma	63	3.25	0.95
	BA and above	35	2.82	1.18
Female	Elementary and below	598	3.52	0.67
remaie	Secondary	144	3.21	0.92
	Diploma	59	2.95	1.02
	BA and above	25	2.99	1.22
Total		1365		

5.3.12 There are no statistically significant differences at $\alpha \le 0.05$ in the degree of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation compared to the degree of traumatic experiences of the first generation of Palestinians.

One-Sample T-Test was used to clarify the above hypothesis. Tables (5.24) present the results.

Table (5.24). One-Sample T-Test for the differences in the degree of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation compared to the degree of traumatic experiences of the first generation of Palestinians.

Variable	N	Mean	Std. Deviation	Df	Mean Difference	T-value	Sig.
Traumatic experiences total score	1365	3.44	0.81	1364	-0.40	-18.078	0.000

As for the degree of traumatic experiences among the study sample and Palestinian refugees in general, the differences in the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation favored the Palestinian refugees in general whose traumatic experience was higher than the study sample as indicated in table (5.24). Thus the null hypothesis is rejected.

5.3.13 There are no statistically significant differences at α≤0.05 in the degree of exposure to bodily injury of the catastrophe –Nakba– after 72 years as perceived by the first generation according to gender.

Chi-Square was used to clarify the above hypothesis. Tables (5.25) present the results.

Table (5.25). Chi-Square for the differences in the degree of exposure to	bodily injury
according to the gender.	

Gender/ Degree of	Strongly	Agree	Neither	Disagree	Strongly	Total
exposure to bodily	agree		agree nor disagree		disagree	
injury						
Male	55	137	37	123	187	539
	10.2%	25.4%	6.9%	22.8%	34.7%	39.5%
Female	87	332	41	157	209	826
	10.5%	40.2%	5.0%	19.0%	25.3%	60.5%
Total	142	469	78	280	396	1365
	10.4%	34.4%	5.7%	20.5%	29.0%	100.0%
Chi-Square = 35.050 ^a			$\mathbf{Df} = 4$		Sig. = 0	.000

In relation to gender, the differences in the degree of exposure to bodily injury of the Nakba among Palestinian first-generation favored the females (40.2%) compared to (25.4%) for males, Chi-Square value was (35.050^a P=0.000), as indicated in table (5.25). The null hypothesis is therefore rejected.

5.4 Discussion of the findings

The current study aimed at identifying the traumatic experiences of the catastrophe–Nakba– after 72 Years as perceived by the first generation; I will present the results regarding the topic of the study.

Findings showed that the first generation of Palestinian refugees experienced a moderate level of traumatic experiences of the Nakba. In fact, this generation of the Nakba experienced interpersonal trauma frequencies compared to other generations in the Palestinian family. The prevalence of exposure to categories of traumatic events during the mass exodus of 1948, such as (witnessing trauma to others, experiencing personal trauma, seeing massacres, mass murder, demolition of property, exposure to extreme heat and cold, etc.). In this context, El-Khodary et al. (2020) point out that the harshest war trauma for Post-traumatic stress disorders (PTSD) is personal trauma followed by witnessing traumatic events to others and then seeing the demolition of properties.

The Palestinian experience was and still is the most tragic one in terms of the victims and violence it has left behind, because of acts of killing, injury, disability, physical and psychological torture which is exercised as house demolition, confiscation of lands and water, arrests, raids, and other forms of violence. In fact, the pivotal date of 1948 itself engendered a traumatic experience that cannot be erased from the collective memory of trauma of Palestinians. This result is consistent with the results of the study Khamaysa (2012) revealed that the families of Palestinian suicide martyrs (ISTISHHADIYIN) experienced a moderate level of traumatic loss experiences. In this context, Dayyeh et al. (2018) indicated that the first-generation of Nakba had experienced high levels of trauma compared to other generations. A study by Musa (2015) revealed that the traumatic experiences of the first generation were 58.5% higher than the average, also showed that they suffer significantly from Post-Traumatic stress disorders 80.5%. Khodary et al. (2020) reveal that the Palestinian children who had experienced trauma to other and personal trauma and the demolition of property were significantly more likely to be diagnosed with PTSD, even when adapting to demographic and socioeconomic factors. Moreover, exposure to war violence, including separation from family members, loss of property, bombing, and threats to their lives and loved ones, multiple displacement challenges; it's ongoing traumatic experience (Rizkalla et al., 2019). According to Morina et al. (2010), civilian war survivors seeking treatment reported multiple war-related traumatic events and high levels of psychiatric morbidity.

Moreover, individuals assessed during follow-ups reported no change in post-traumatic stress symptoms or psychological well-being. Political violence has affected health and well-being, and their narratives focused on how their place experiences affected individual and collective sovereignty and identity, which depended on three interrelated spatial factors are constraints on freedom of movement, continuity of the place, and possession and dispossession (Sousa et al., 2019). In contrast, Rajan (2019) indicated that exposure to war is potential predictor of traumatic experiences. In another study, Niazi (2019) showed that parental narratives, previous experiences, resettlement, values, and traditions preserved in culture, the impact of parents' experience with refugees, and the effects of intergenerational trauma reflected their own journey of family trauma.

The first generation of the Palestinian catastrophe, geography persisted in their memory in all its details. Many still keep their ownership papers for their occupied lands, and others keep old keys to their homes from which they were abandoned and destroyed by Zionist gangs. It is the generation who rejected the dictations of history. So the authenticity of the place is steadfast in their memory and narration. The refugees prepare the ground for reproducing collective memory of the Nakba youth in 1948 through accounts of the massacres committed by the Israelis and the places from which they were displaced and uprooted. They informed their narratives of homes left behind or missing land when the Zionist movement announced the formation of the State of Israel, which annexed 78% of Palestinian land (Banat, Entrena-Durán, and Dayyeh, 2018). In the same context, Borer (2010) indicated how place matters for individuals' social life experience more than simply providing the background or setting for actions and interactions. It also shows how places can structure interactions between people and act as identity markers for the people who inhabit them, transitioning from collective memory to collective imagination.

This memory exceeded the parameters of geography and passed on to generations who were impregnable barriers against those new settlers. The geographical place has a standard characteristic, which is essential for comparison with other periods of life. Events vary in impact - some carry a strong emotional charge, others have a strong emotional impact on people, others make an era, change a lifestyle (Baranova et al., 2019). In this context, Haj Abdel Majeed Abu Srour from the destroyed village of Beit Natif in 1948 said that he could not forget the scene of the bodies of martyrs who tried to infiltrate back to their homes following displacement were killed by the Zionist militias.

Abu Srour, who now lives in the Aida Refugee Camp, said:

"I saw at least six bodies thrown on the ground. I used to smell the strange odor. They destroyed the entire village, including the main mosque, shrines, and homes".

As for Haj Mahmoud Abu Hashhash from the village of I'rak Al Manshiyeh, which was under a six-month siege, narrated the story of when the wife of Abdel Rahman Al-Tit was martyred. She was carrying food to her husband when the Jews shot her on the right side of her head, and the bullet came out from the other side. Additionally, Haj Abdallah Najjar from the village of Faloja said:

"Jews in principle... they are the ones who brought about hatred and detestation to the Palestinian lands; they are the ones who are committing massacres one after the other since the Nakba and before".

Moreover, Hajjeh Amena Ajarma from Ajjur narrates the great trauma she underwent after witnessing the horrific and catastrophic scenes. She said:

"Most Palestinian families escaped while they were still in their pajamas; mothers forgot their children at home and left the place. Others mistakenly took bed pillows instead of their babies; they woke up to more horrible catastrophes larger than what they could absorb, aside from other tragedies which I myself am incapable of describing [happened] at my young age, when I was 10 years old". Differences according to gender were also found, commonly with the traditional gender role expectations in Palestinian society. Males of the first generation of refugees have higher traumatic experiences than females. Palestinian society has conservative patriarchal ideology dominance and social upbringing based on gender inequalities of power and discrimination. It is deeply rooted, where the notions of father and brother are prevalent. Palestinian culture seeks to direct males towards asserting masculine qualities like stamina, bravery, gallantry, and daring. Besides, it emphasizes steering females through feminism, love of children, housekeeping, and stability. The traumatic experience of males is even more difficult, owing to the anticipation of the behavior and reaction of Zionist forces because of resistance operations and the consequent intrusion into the town and houses. The distrust of when they will leave, the accompanying arrest, restriction, screaming, cursing, shooting, and forcing stripping in front of children and family. These days the same behavior is being done by the Israeli army.

All shocking events and experiences weaken the father's personality in front of the children and make him feel unable to protect them and lose the capacity to confront these atrocities. The soldiers' actions aim to damage the father's prestige and scare the families as a policy of collective punishment. These practices generate psychological disorders in children. Therefore, it was easy to increase the traumatic experiences of the Nakba among males. He is the father, leader, captive, activist, and martyr. It also bears witness to the suffering and tragedy of the Palestinian people. Men would likely experience a higher level of traumatic experiences of the Nakba. Therefore, fathers' high exposure to war trauma is associated with a higher level of communicating facts, reasons, and meanings regarding their painful experiences (Dalgaard et al., 2019). In the same token, Kwan (2020) indicated that losing their families at a young age and nearly escaping from death caused mental health challenges to linger among the older generation, which perpetuated the silences across generations. While Rajan (2019) pointed out that sex is a potential predictor of traumatic experiences.

The current study revealed that women were exposed to Nakba physical injuries among the first generation Palestinians compared to men. The consequences of these continuing Israeli practices have resulted in a deep personal sense of humiliation, anxiety, frustration, and

grief. They have repeatedly declared that they have been collectively "asphyxiated." Along with the continuity and cohesion of the Palestinian land, women have moved almost smoothly from individual and practical experiences to collective experiences (Sousa et al. 4 2019). Meanwhile, Palestinian girls and women also suffer from Israeli practices such as house demolitions, home raids, and movement restrictions, resulting in extreme psychological suffering, violations of women's human rights, and exposure to direct physical violence. Events led to the disintegration of the social-economic structure and the uprooting of thousands of Palestinians from their homes (OHCHR, 2021). In the same context, Dayyeh et al. (2018) show women from the first generation of the Nakba reported a higher level of Nakba traumatic experiences than men. The findings revealed a correlation between traumatic events mentioned by Palestinian women individually or collectively and political events in Palestine (Veronese et al., 2021). In the same context, Rizkalla et al. (2019) stated that women were exposed to various acts of atrocities, such as loss of close family members, loss of property, bombing.

The narrative of Thouria Hamouri, a Palestinian woman arrested during the second Intifada, reflects the reality of the ongoing Palestinian trauma:

"Unfortunately, I did not succeed in committing the attack... I wanted to be a martyr 'Shahida'. I wanted to sacrifice myself for Palestine and our land and to kill many Jews. You use Apache helicopters, F-15s, tanks against us, and you have all the weapons. For us, the only weapon available is people like me, who take explosives and commit suicide. Since I was a child, all I have seen is war, death, hatred, and blood. Since the beginning of the Intifada, I have followed what is happening and I have seen only the blood and killing and Palestinian children who are being killed. I told myself that just as you pay taxes for your country, my tax will be my body. I will give my body for the Palestinian issue" (Kimhi and Even, 2004: 828; Khamaysa, 2012: 305).

The various and frequent traumas among Palestine refugees, all camps suffer from poor quality of life, overcrowded, and lack of infrastructure and open space for recreational purposes and various activities. Housing in the camps is narrow in size at 30 square meters, with two rooms for one family, so Palestinian camp conditions are among the worst in the world (Budairi et al., 1990; Ugland, 2003; Fincham, 2010; Mahamid, 2020).

In addition, statistics from the Palestinian Central Bureau of Statistics (2017) show the highest proportion of poverty and difficult socio-economic conditions in refugee camps, where 47.5% of refugee families are at risk of poverty because of high fertility rate; high unemployment; large family size; and a high dependency rate. In the same context, an older refugee said:

"We live in the bitterness of life and unbearable suffering. We have been spending our days with anxiety that we have not seen since we were displaced from our lands and villages. Today we're looking for a loaf of bread in front of humanitarian associations and institutions to feed our children, a pill to treat our patients, poverty, unemployment, and an unknown future. We don't know where we're going? He added: Are not we human?! Who's responsible for us, defends us, and protects us from this injustice we're being exposed to"

Moreover, the findings reveal that age among first generation refugees positively correlated with traumatic experiences (TE) of the Nakba. If the age increases, the degree of TE will increase. In the same context, Rajan (2019) indicated that age is a potential predictor of traumatic experiences. The findings reveal that number of children negatively correlated with traumatic experiences of the Nakba. If the number of children increases, the degree of TE will decrease. The greater the exposure to their parent's trauma, the more negatives the world's assumptions among second-generation (Abu El-Hija, 2018a).

The study findings also reveal that degree of religion has a significant difference in traumatic experiences among the first-generation refugees. The differences were in favor of the first-generation Palestinian refugees, who were the most religious and had the highest traumatic experiences compared to the non-religious. This indicates that religion is an important factor in engaging in resistance and defending land and individual. In addition, a religious person is at any time willing to dead, martyrdom or losing a close friend or family

member may be one of the hardest challenges. Religious values give Palestinians in general and refugees, in particular, a sense of responsibility for the liberation of Palestine and the repatriation of refugees. Let us not forget the role of religious values in the upbringing and preservation of children and the reflection on their needs in the difficult conditions of the Palestinian camps, perhaps a sign of psychological stress.

On the other hand, they are most adapted to traumatic experiences. Ideological sense, political education, national and religious distribution, a culture of defiance, and resilience against occupation have had a significant impact on people in protecting them from the development of their symptoms of trauma (Altawil and Nel, 2008a). The weakness of the religious beliefs is an obstacle to social adaptation (Al-Assadi, 2004). In the same context, Ghnadra (2013), in a study on the effects of the 1948 war and displacement on the mental health of Palestinians living in the occupied territories, found that the use of religion and faith for relief was the main adapting strategies used by victims to deal with trauma consequences of war and forced displacement. Moreover, there is a significant difference in traumatic experiences among the first generation of Palestinian refugees according to the social status; the differences in favor of unmarried refugees who had traumatic experiences were highest. As a family member, the environmental conditions surrounding the family affected an individual. Variants of this environment include the location of the dwelling and the type of neighborhood in which the family lives. There is a correlation between the socio-economic status of the family. An important manifestation of the family's economic situation is the income level reflected in the family's standard of living, social status, and relations between the family and other families. In addition, the cultural, social, and economic level of a family has had a profound impact on individuals' behavior and social adaptation (Al-Saleh, 1996).

Palestinian refugees in the camps lack housing, basic needs, health services, and humanitarian work permits, and some do not have papers and personal identity. The violence resulting from the Israeli occupation has created many problems for Palestinian families as a policy of collective punishment. If there is a martyrdom operation, Israel will punish the family as a whole for carrying out the operation by demolishing houses, confiscating land, arresting, and denying work permits. Therefore, because of the difficult

living situation of Palestinians in general and refugees in particular, this explains the shocking experience of single people who cannot marry, build a family or even care for themselves and their parents. They are therefore living in great psychological pressure, accumulated by Israeli repression, denial of employment or movement between Palestinian cities, as well as threats of arrest or death.

The findings of the study also revealed that region did not entail any significant difference to the traumatic experiences of the Nakba among the first generation of Palestinian refugees. This indicates that Palestinian refugees in all camps, whether in the West Bank or the Gaza Strip, suffer from traumatic experiences. The cause of this is the previous events of Nakba in 1948 and the subsequent Israeli practices of confiscation of land, arrest, martyrdom of family members, and other traumatic experiences. The daily suffering of occupation makes the memory of those painful events active. In this regard, the study of Dayyeh et al. (2018) there are no significant differences in traumatic experiences among the first-generation refugees according to the region. Also, indicated variable did not quite influence the traumatic experiences of the Nakba and is more likely to be affected by other factors. Also, findings revealed that region and place of residence have a significant difference to the traumatic experiences of the Nakba among Palestinian refugees for those living in the West Bank camps in the north and the Gaza Strip camps in the middle. Regarding gender and the region, the findings reveal that the differences in the traumatic experiences of the Nakba among refugees were in favor of the males and females who are living in West Bank, with the highest of the traumatic experience of the events of the Nakba.

Moreover, the finding reveals that there is a reverse relationship of statistical significance between the number of children and the total degree of traumatic experience. The traumatic experiences of the Nakba are less prevalent among extended refugee families than nuclear families. I associated the history of any trauma in Palestinian society with the highest degree of social support, taking into account their most tragic experiences under the Israeli occupation, more than 70 years after the Nakba. In the same context, the study of Altawil et al. (2008b) showed that the support of community, family, relatives, teachers and spiritual leaders can be very useful. They often considered family solidarity a key feature of the Palestinian family where the child arises over family solidarity at different levels, including responsibility for the care and guidance of children (Banat, 2010). The father, mother, brothers, sisters, some aunts, uncles, and cousins take part in this, which decreases the level of traumatic experiences among the Palestinian refugees.

The social environment consists of informal sources that an individual can turn to for help, such as the family, parents, colleagues, relatives, neighbors, and other members of society who are particularly important in an individual's life. Social support includes help, financial, emotional, moral, information and community support through social relations with sources available in the social environment. The initial interest in social support dates back to a long history when *Emile Durkheim* (1951) observed suicides cases spread in social environments with weak and disjointed social ties that are related to causing some disorders (Momani and Al-zaghoul, 2009). It based Palestinian society on paternal kinship in the extended family, and they care for each other in times of need. The Palestinian family continues to play a distinctive role in preserving the social, cultural, political, and economic identity of Palestinian society, especially in the difficult conditions and events that Palestinian society has experienced in the 73 years since the Nakba and even before, and the continuing suffering caused by the occupation and its violent practices.

Education is a critical predictor of traumatic experiences among refugees. The results show that the level of education of refugees is in favor of less-educated refugees compared to well-educated refugees. This means that it is the less educated refugees who have the highest symptoms of trauma. The more educated Palestine refugees are best able to adapt from aspects of personal, psychological, and social, through their psychological flexibility and prior experience; and thus helps them to solve all problems by resorting to social support networks by the family and social institutions. In contrast, uneducated refugees cannot deal with their daily and personal problems because they do not turn to others to help them in their plight, avoid people, and lack psychological resilience. As well as in the psychological dimension, refugees see them as losing everything. Also, they don't know what's going to happen in the future and want to return to their homes and dream about it every day, which is the main reason they don't adapt. More educated Palestinians had greater more difficulty passing over gaps and contradictions in their identity, resulting in feelings of anger, hostility, and vengeance towards Jews (Ghnadra, 2013). The combination of prolonged social and economic deprivation, neglect, and military and political repression does not encourage advancement in schooling and academic achievements. Compulsory education in Palestine was essentially a privilege for limited strata, mostly urban and male, new levels of education (basic, secondary and higher education) soon became a feature of many refugee communities (Rosenfeld, 2002).

Finally, the study indicates that all Palestinian refugees and their families have been subjected to ongoing Israeli violence. The indicators of the traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation. They saw massacres perpetrated against Palestinians. Many things remind them of the Nakba. They also reported that they had been humiliated, and that the images of the Nakba did not disappear from their memory. They also indicated that they were always at risk of death. In addition, they still remember and thinking of the Nakba event unintentionally.

Moreover, the findings show that Palestinian refugees have suffered from physical injuries because of Israeli violence during the Nakba events of 1948, especially females more than males. Moreover, they feel that the Nakba will happen again under the ongoing Israeli occupation. The findings also show a significant difference in the traumatic experiences of Palestine refugees in general, who have the highest experience of trauma compared to the sample study.

The Israeli occupation understands only the language of force and violence. Deir Yassin, Nasr al-Din, Mazraat El-Khoury, Abu Shusha, Al-Tantura, Haifa Oil Refinery, Kafr Qasem, Rafah, Khan Yunis, Sabra and Shatila, and the Ibrahimi Mosque massacres are just some examples. It has subjected four million Palestinians to collective punishment on a daily basis for more than 70 years. What Israel has done on the ground is a disaster for the Palestinians, so we find many researchers shocked about the massacres and their description by listening to the oral narrative of the massacres and the number of deaths and missing persons. Palestinians are now the largest group of refugees, who are being abandoned since the Second World War and so far by countries and international institutions together. The situation remains fragile and clear in refugee camps in the West Bank, Gaza Strip, Jordan, Lebanon, Syria, and the diaspora, where things are getting worse because of the increase in the population and the lack of basic needs.

In fact, the expulsion of Palestinian refugees has turned into a factor of strength for the Palestinian people in the struggle against occupation. Palestinian refugees are more determined to resist until they return to their original villages, towns, and cities. In the same context, Khamaysa (2012) indicated that the majority of those who carried out martyrdom operations were Palestinian refugees, at 55.3%, compared to 44.7% of non-refugees. The female suicide martyr (Istishhadiya), Fatima Najjar, is a woman who experienced the Nakba of Palestine. She saw the exodus of the Palestinians from their lands in 1948. Her days were blended with grief and sorrow. That woman, whose face would illustrate the pitfalls of the bitter time, had no hesitation, not for a moment, in carrying out a martyrdom operation amid a large group of Israeli soldiers at Gaza Strip on the 23rd of November 2006, confirming that the Nakba generation—the generation of the 1948 Palestinian exodus—marks the beginning of the martyrdom and repatriation generation (Banat, 2010). In the same vein, Punamäki (1986) concluded that the previous experiences caused by occupation create more tension and stress than the problems of everyday life.

Psychologists and sociologists are active in the study of the Palestinian diaspora, because of its importance in the Palestinian context, the formation of public opinion on the most prominent problems facing Palestinian refugees in diaspora camps, and because refuge is the common denominator of the greater part of the Palestinian people and forms part of the collective unconscious. In addition, it plays a crucial role in shaping awareness and determining relationships. The Palestine refugees have a fear of the future with all difficulties. They stick to return, which contributes to creating a society on the brink of anxiety. The experience of the diaspora has an unforgettable impact on the psychological and social structure of Palestinian refugees, who are displaced, arrested, humiliated, lost land and livelihood, scarce food, seeking relatives, missing, and martyrs. Most of the refugees in the diaspora are in the open, and charity from others and their pitying gaze. Losing land as a space for the roots of the social life, collective memory, and identity of the Palestinian people has contributed to deepening the psychological crisis. All these current and accompanying events have led to painful and cumulative experiences that cannot be

erased from the collective memory of trauma; it will go from generation to generation to return through the oral narrative of those painful stories with the names of the people who have been displaced, the massacres, who died in the Nakba events, and the villages or homes.

Chapter Six

6 Conclusions

There is no brutal crime in human history, as the Zionist gangsters forced the Palestinians out of their lands in 1948; this was later called the Palestinian Nakba (catastrophe). The traumatic events of the Nakba have become embedded in the collective consciousness of different Palestinian generations. Therefore, the collective memory of trauma plays a pivotal role in the survival of the Palestinian issue vivid among refugees.

Palestinian refugees have preserved a strong collective consciousness. It also reinforced the social group's identity with tradition, heritage, and oral narrative to give its members a sense of community. The content of collective memories testifies to the apparent signs of cultural trauma associated with a particular historical period. According to the analysis of recorded post-memory processes, cultural trauma is reflected in the memories of generations who have experienced war-related trauma. In addition, the attitude of the younger generation towards traumatic events is beyond personal experience. Therefore, the characterization of historical significance is an essential condition in the collective consciousness (Baranova et al., 2019). In this context, Durkheim (1893) described it as a collective consciousness based on shared beliefs, ideas, and moral attitudes that serve as a unifying force within society. Families were fragmented, communities, cities, and neighborhoods were destroyed, and it changed the names of Arab regions to Hebrew to obscure Palestinian Arab identity. In this sense, the "Nakba" includes the loss of property as well. "The suffering and plight of the Palestinians" encompass all kinds of social, political and historical, cultural deprivation, which has dramatically affected the Palestinian society, aspirations, and identity (Adwan, 2011). It suddenly expelled Palestinians who once lived in a boom in their homes and on their land, uprooted, and forced to become refugees. They lost everything, houses, land, material property, and other (clothing, photographs, furniture, rare books, magazines, etc.). In her novel "Al-Tantoureyya" (2010), author Radwa Ashour created a collective memory-based identity that revolves around experiences of trauma and suffering by introducing different narratives and versions of painful memory. Ashour seeks to add space constantly while recognizing the specificity of each experience. The Nakba in the collective memory is part of the cultural identity. The identity in this depiction of the Nakba as constant is painful, profound (displacement), other traumatic tragedies and their representation as variables, and peculiarities, such as repeated deportation, scattered family members, subsequent wars, discrimination, and deaths (AbuKhoti, 2018).

In the same context, Mahmoud Al-Namurah said:

"I lost my library, known as the Treasure of Knowledge, which included more than 5.000 rare scientific and literary books, along with newspapers from Egyptian and Turkish archives."

Trauma and psychological pain have severely affected the first generation of Palestinian refugees. However, these feelings have transcended generations and are still present, intensely felt, and embodied in participation in Earth Day, return marches, and so on. The second, third, and fourth generations of refugees today still carry with them a great sense of injustice, loss, guilt, and pain, and living as strangers and forgotten people. Trauma has negative consequences, including depression, anxiety, Post-traumatic stress disorder, and other mental problems, along with negative assumptions of the world and self-beliefs. Besides the evident psychological impact, there is also a social impact of displacement. Issues such as lack of national identity, racism, or discrimination will undoubtedly affect these vulnerable groups. Perceived social support, government support, employment opportunities, and community resiliency can help displaced people successfully adapt to or recover from stress (Punamäki, 1986; Khamaysa, 2012; Siriwardhana & Stewart, 2013; Sheikh et al., 2014). The persecution of individuals and the violation of their rights in the Palestinian context is part of the collective trauma. This shock requires a coordinated response. It means forming a union between therapists, victims of trauma, and family members. Avoiding such a situation would impede a sense of historical continuity and could separate and dismantle the social fabric. Moreover, it aimed collective engagement at psychological compatibility (Saul, 2006, 2007).

Palestinian refugees continue living with narratives and memories of grandparents. They dream of one day returning to their homes and lands and regaining what is right of them. The most painful aspect of this situation is that there is no certainty when or if this will happen. It has not given the issue the proper importance; the Oslo Accords neglected the plight of Palestinian refugees; and they are still steadfast, even 73 years after the Nakba.

Stories continue to narrate between generations about the plight of the Palestinians, which adults, young, and children will never forget. Everything will remain engraved and rooted in Palestinian collective memory, and those shocking experiences associated with the names of people, homes, and land will be transmitted among generations. Therefore, it is impossible to erase or forget that the traumatic experience from the memory. The process of remembering and forgetting is closely linked to Israeli practices and ongoing violence of killings, house demolitions, land confiscation, settlements, apartheid wall, military checkpoints, night incursions and other repressive practices against Palestinians.

6.1 Potential Benefits of the Research

The chapter concerned the research conclusions, including a public discussion of the Nakba events and recommendations to examine the psychological problems concerning the impact of trauma on Palestinian refugees. The last part is s designed to conclude the doctoral thesis with a summary of the potential benefits of the research. It is not the intention to reiterate the detail of the findings but rather to refer to the outcomes and indicate their possible use. In essence, the findings of this research contain the potential to assist in the following areas:

6.1.1 To assist the Palestinian refugees in their try to gain dignity and identity

This research summarizes the factors contributing to traumatic disorders among the first generation of Palestinian refugees in camps. Furthermore, the study has highlighted the long effects that the Nakba and occupation have had on the psychological well-being of the Palestinian community in the West Bank and Gaza Strip. The refugees have suffered due to the Nakba events, followed by culture (Self-sacrifice and martyrdom) as a traumatic experience. The specific knowledge gained from this research has the potential to be used in the development of community groups or organizations for changes to policy concerning health, economic, psychological, and social support. Besides, activate their role in society in the various activities and provide housing, food, water, and medicine to the refugees in the camps by UNRWA and the organizations concerned with displaced persons. As a social group, Palestinian refugees need to share memories, information, and knowledge that are significantly associated with the group's identity. In particular, special counseling training to work with refugees who have experienced traumatic experiences could benefit

from information arising from this research, which has revealed the extent and depth of the effects of the ongoing Nakba events on their psychological well-being.

6.1.2 To improve the living conditions in Palestinian refugees' camps, particularly those who have experienced trauma, with pressure to provide services and supports

Most participants stated that they had reflected on their refugee status until, as they said, they "were hounded by the Israeli occupation forces and their sons detained in prison." Living in camps is also experienced as an ordeal. So, they refused to resettle in the diaspora camps. We are evicted from their lands and proprieties and lost family members and are still waiting to get information. Hence, "loss and awful events open a door that cannot be closed because violence continues and creates compounded traumas." This research has identified the need for refugees to access psychosocial and health services. The study highlights the needs of Palestinian refugees and the complementary services within camps which meet their resettlement needs of living. Political conditions and displacement forced them to live in crowded camps with water shortages, food, sanitation, essential health services, lack of infrastructure, open spaces for recreational purposes and shelter, and infectious diseases such as COVID- 19. In addition, the Israeli army constantly orders Palestinians to leave their homes and then turn them into military barracks. Results allow examining the psychological impact of turning Palestinian homes into military barracks.

These current study results concern the community culture, collective memory, and psychosocial effects of the negative self-image of the Palestinian refugee participants resulting from Nakba events. Hence, the outcomes are directly associated with the need for services that promote their well-being. It also makes them more effectively implied into society, regardless of whether they are "exiles" or not. The conclusion is that all refugees and community members affected by trauma should access specific and essential services under chronic, complex trauma and compound loss. The results could require international organizations, governments, and communities to intervene immediately to disclose information about missing persons during and after the Nakba because of its shocking effects on the lives of their families in particular and on the lives of Palestinians in general.

6.1.3 To articulate the risks of forcing refugees to adopt Western views of resettlement in diaspora camps, such as Jordan, Syria, Lebanon, and Iraq, and consequently assess the adverse effects of military invasions and assassinations. Findings could also apply information arising from this thesis to a critique of the policy of global indifference and discrimination in human rights, health risks, psychological responses, and do not accept the settlement because it aims to eliminate the Palestinian cause and its cultural achievements

This research is helpful for application to the general discourse regarding the effects of PTSD and life satisfaction among the Palestinian community. The current criticism regarding the claim of *"The old will die, and the young will forget"* Israel historians and anthropologists euphemistically called this "transfer" and often entertained the fantasy that Palestinians would not mind being uprooted from their historical homeland (Masalha, 2012). Therefore, this research will contribute to the need for inquiry from a holistic perspective into the perceived concerns about such assurances and examine the effects on the well-being of refugees who have experienced horrific events and compound traumas in general.

The findings are also relevant for consideration and application to the current debate regarding the impact of traumatic experiences on quality of life and life satisfaction. Clearly, other refugees who have experienced trauma will experience similar circumstances within their day-to-day lives, and we can generalize such experiences from the current research findings.

6.1.4 To assist Palestinian refugees in exploring and enhancing their psychological resilience strategies

Trauma-informed care has an important place in societies because many people feel inadequate. Media messages may also trigger or worse feelings of inadequacy in the prevailing culture, supporting the natural beauty of the lands and towns inside the Green Line and living there that are impossible for most refugees to attain and return to their lands and proprieties. Here, when refugees compare this image with perceived failings and feel inadequate, that would increase the stress. In reality, as researchers, we do not know what goes on in most other refugees' and Palestinian people's lives and minds, and often they

overlook the strengths and successes, so such comparisons are bound to do far more harm than good.

This study suggests that it is imperative to define the concept of generations, specifically the first generation. It is a comprehensive definition that includes the spouses and children of refugees and those deported persons abroad at the time of hostilities, and individuals who lost their livelihood and revoked their right to the residence by Israel. They infused ideas about the trauma of the Nakba with value systems based on the socio-cultural environment. The thesis has highlighted the importance of acknowledging and remembering that people/ cultures have ideas about the meaning of the right of return, a good practice relationship, creating sense, and what role a culture of martyrdom plays. Therefore, programs need to be grounded in the refugee's social, cultural, and religious/spiritual environment.

6.1.5 Advancing Knowledge on the trauma of the Nakba

An essential body of knowledge; may let the Palestinian and Arab scholars and therapists involved define trauma on their terms in exile and conflict in the Palestinian context instead of allowing psychological protocols to determine it for them. The findings could be used as a framework for best practice when offering culturally sensitive refugees who have experienced trauma guidance in the Nakba issue and creating meaning through the collective memory of trauma.

Additionally, these findings constitute an essential step in enhancing our understanding of the traumatic experiences and, for that matter, all types of trauma reactions and defense mechanisms and help identify treatments for refugees' psychological problems. The view that "The old will die and the young will forget" is not confirmed. Findings can add to the understanding of what is happening in the refugee's mind and support the hypothesis that Palestinian refugees have been exposed to extreme traumatic experiences during the Nakba events of 1948.

6.1.6 To indicate the need for further research into the understanding of the traumatic experiences of the Nakba are recommended using greater sample size and in various camps and areas, in so doing, to address the vast lack of specific information and address the need for mechanisms to identify further information needs about Palestinian refugees in diaspora, and the lack of knowledge and research among refugees exposed to traumatic events, experiences, and needs inside camps

As a finding of this research, it can be argued that the additional burden of being labeled the trauma within the political conflict and the community needs to be "*Cooldown*" regarding the issue of the right of return of refugees. Therefore, it requires recognizing the critical social policy perspective of refugees' specific knowledge and painful experiences, as well as a re-appraisal of their experiences within the current global discourse, which calls to disposal of the issue of refugees, the right of return, and encapsulation of their stories within existing knowledge and theory concerning refugees.

Specifically, this research provides shared insights into the experiences of refugees who have experienced many highly stressful events. Indeed, specific information about the affairs of the first generation of Palestinian refugees, who live in camps in the Palestinian territories or live in diaspora camps, is an area where there has been little prior research or knowledge. Furthermore, when assessing the broader traumatic experiences of Palestinian refugees, this research has identified many areas where community groups receive incongruent information and experience inadequate support when voicing concerns, primarily due to deliberate politics. Worse still, the policy does not account for the specific needs of Palestinian refugees in camps (as distinct from international emigrants and other refugees in the European countries who have received support services in various forms).

6.1.7 To contribute to public debates concerning PTSD among Palestinian refugees and that are passed down from generation to generation

To contribute to public debates concerning PTSD among Palestinian refugees and passed down from generation to generation. The worth of a study can be assessed by its contribution to culture and knowledge that enhances the collective memory of trauma as a lesson from the past to the future. This study also offers a view of Nakba and traumatic events that might expand our understanding when dealing with the subject of PTSD among other generations. It sheds further light into what Ibish (2018) stated: "we cannot mend the rupture of the Nakba." Most Palestinians want the right of return, and from a moral and legal perspective, their case is irrefutable. But politically, there is no chance of any such recovery, and it could contribute to public debates on the topic. The findings of this study will also contribute to this body of knowledge and be used to develop programs to improve the quality of life of refugees, especially among Palestinian refugees in the diaspora.

6.2 **Recommendations**

Based on the findings and discussion of this study, it made the following recommendations:

- 1. Social-psychological, economic, and health care programs are needful to take care of the traumatic experiences of the Nakba among Palestinian refugees.
- 2. Demand international organizations and governments to intervene immediately to disclose information on missing persons during the Nakba and after for its traumatic effects on the life of their families in particular, and on the life of the Palestinians in general.
- Further research is essential to expand the understanding of the traumatic experiences of the Nakba among the Palestinian refugee generations using a larger sample size and in more diverse settings.
- 4. Comparative studies of the traumatic experiences of the Nakba among three Generations of Palestine refugees in the diaspora are also recommended.
- 5. Further research is necessary to understand the traumatic experiences and posttraumatic stress disorder among Palestinian children and adolescents through demographic, social, and economic factors.
- 6. The concept of collective trauma, the social construction and social representations of trauma must be given utmost importance in the different research areas.

References

6.3 References

- Abu Al-Hasan, F. (2010). Comprehensive and Detailed Report on Prisoners in Israeli Jails. International Solidarity Foundation.
- Abu Ayesh, A. (2006). The Psychology of Loss. The Palestinian Center for Democracy and Conflict Resolution.
- Abu Baker, K. (2006). The Effect of Loss on the Mental Health of Palestinian Widows and Bereaved. Arabsynet e.Journal, (12), 89-94.
- Abu Baker, K., Shalhoub-Kevorkian, N., Aweidah, S., Dabit, E. (2004).Women, Armed Conflict and Loss: The Mental Health of Palestinian Women in the Occupied Territories. Women's Studies Center.
- Abu El-Hija, A. (2018 A, B, C). Intergenerational Transmission of Parental Nakba Related Trauma Experiences among the Palestinians Living in Israel [Doctoral Dissertation, University of Konstanz]. KON, KOPS. <u>http://nbn-resolving.de/urn:nbn:de:bsz:352-2-1x8e2v3pfnpur5</u>
- Abu Hein, F. (2001). Participation in Al-Aqsa Uprising Activities and its Relationship with Children Psychological and Emotional Problems: Children Desire towards Martyrdom and its Relationship with Some Variables. Journal of Al-Aqsa University, 5 (2), 182-231.
- Abu Hein, F. (2006). Psychological Effects of Prisons and their Relationship with Compatibility Strategies for Prisoners of the Gaza Strip Released from Israeli Prisons. Al-Aqsa University.
- Abu Hein, F. (2007). Exposure to Traumatic Experiences and its Relationship to the Psychosomatic Disorder of Palestinians Children: A Study of Psychological Trauma Following the Invasion of Beit Hanoun. Al-Azhar University Journal, 2(9), 88 151.
- Abu Najila, S (2001). Articles on Personality and Mental Health. Humanities and Social Development Center. Mansour Press.
- Abu Sitta, S. (1997). History of the Nakba. Palestinian Return Centre (Arabic version)
- Abu Sitta, S., Saah, D. (2020). Anatomy of a Massacre- Abu Shusha, Ramle District. Palestine Land Society.
- Abu Sitteh, S. (2001). The Right of Return Is Sacred, Legal and Possible. Arab Institute for Research & Publication.
- Abu Suhaiban, H., Grasser, L., & Javanbakht, A. (2019). Mental Health of Refugees and Torture Survivors: A Critical Review of Prevalence, Predictors, and Integrated

Care. International Journal of Environmental Research and Public Health, 16(13), 2309. Doi: 10.3390/ijerph16132309

- Abualkibash, S. (2020). The Exposure to Traumatic Experiences among the Palestinian Students in the West Bank. Bioscience Biotechnology Research Communications, Psychological Communications, 13(3), 1510-1519. http://dx.doi.org/10.21786/bbrc/13.3/78
- AbuKhoti, A. (2018). Calling the Phoenix: Integrating the Trauma of the Nakba into Palestinian Identity. Limina: A Journal of Historical & Cultural Studies, 24(1), 48-61. http://www.limina.arts.uwa.edu.au
- Adwan, E. (2012). Palestinian Refugee: Problematic of Definitions and Appropriate Solutions (2nd ed.). Wajeb Publishing House.
- Adwan, S., Ben-Ze'ev, E., Klein, M., Saloul, I., Sorek, T., & Yazbak, M. (2011). Zoom In: Palestinian Refugees of 1948, Remembrances: [English-Hebrew] (Vol. 2). Institute for Historical Justice and Reconciliation.
- Aijmer, G. (2000). Introduction: The Idiom of Violence in Imagery and Discourse. In G. Aijmer & J. Abbink (Eds.), Meanings of Violence: A Cross-Cultural Perspective (1–21). Berg.
- Ainsworth, M. (1985). Patterns of Attachment. Clinical Psychologist, 38(2), 27-29.
- Al-Assadi, A. (2004). Social Adaptation of Released Women Prisoners (Unpublished Master's Thesis, University of Baghdad). Google Scholar. (Arabic Version)
- Albadawi, S. (2017). Exploring the Issues of Denial and Blame in Relation to the Expulsion of Palestinians from Palestine in 1948. International Humanities Studies, 4(4), 18-34.
- Albadawi, S. (2021). Is the Right of Return Still Desirable and Sacred among Palestinian Refugees?. The British Journal of Politics and International Relations, 23(1), 43-59. https://doi.org/10.1177/1369148120933783
- Al-Bayoumi, W. (2015). Israeli Massacres in Palestine. PLO-Palestinian Labor and Planning Department.
- Al-Deeb, A. (1988). Personal and Social Compatibility of Adults: An Exploratory Study [Altawafuq Alshakhsiu Walaijtimaeiu Lilrrashidin: Dirasat Aistitlaeia]. Journal of Educational Studies, 3(11), 1-4.
- Alduraidi, H., & Waters, C. M. (2018). Depression, Perceived Health, and Right-of-Return Hopefulness of Palestinian Refugees. Journal of Nursing Scholarship, 50(2), 163-171. https://doi.org/10.1111/jnu.12363

- Alexander, J. Eyerman, R., Giesen, B., Smelser, N., and Sztompka, P. (eds). (2004) Cultural Trauma and Collective Identity: Toward a Theory of Cultural Trauma. University of California Press.
- Alimardani, M., & Elswah, M. (2021). Digital Orientalism: #SaveSheikhJarrah and Arabic Content Moderation. Middle East Political Science, University of Oxford. https://pomeps.org/digital-orientalism-savesheikhjarrah-and-arabic-contentmoderation
- Al-Khalidi, A., Al-Alami, D. (2009). Mental health and its relationship to adaptation and compatibility [Alsihat Alnafsiat Waealaqatuha Bialtakiuf Waltawafuq]. Al-Safa Publishing & Distribution House. (Arabic Version)
- Alkhatatneh, S. (2012). Introduction to Mental Health [Muqadimat Fi Alsihat Alnafsia]. Libya: Al-Hamed Publishing & Distribution House. (Arabic Version)
- Al-Khatib, M. (2007). Evaluating Resilience Factors in the Face of Traumatic Events in Palestine. IUG: Journal of Humanities Research, 15 (2), 1051-1088. http://dx.doi.org/10.33976/iugjhr.v15i2.1045
- Allen, M. P., & Parsons, N. L. (2006). The Institutionalization of Fame: Achievement, Recognition, and Cultural Consecration in Baseball. American Sociological Review, 71(5): 808-825. https://doi.org/10.1177/000312240607100505
- Al-Mizan Center for Human Rights. (2001) Palestinian Intifada. Retrieved 12 January 2021, from https://pulpit.alwatanvoice.com
- Almqvist, K., & Hwang, C. (1999). Iranian Refugees In Sweden: Coping Processes In Children And Their Families. Childhood, 6, 167–188. https://doi.org/10.1177/0907568299006002002
- Al-Quds Open University. (2000). Palestinian Community. Modern Arab Printing Press (Arabic version).
- Al-Sahli, N. (2018). The Resettling of Palestinian refugees is the Core of the Trump Deal. Middle East Monitor, Retrieved 3 March 2020, from https://www.middleeastmonitor.com/20180921-the-resettling-of-palestinianrefugees-is-the-core-of-the-trump-deal/
- Altawil, M., Nel, P. (2008A). What are the Possible Reasons for Different Reactions to Chronic Trauma in Gaza Strip?. GCMHP's 5th International Conference. Gaza Community Mental Health Programme.
- Altawil, M., Nel, P., Asker, A., Samara, M., Harrold, D. (2008B). The Effect of Chronic War Trauma among Palestinian Children. In M. Parsons (Ed) Children: The Invisible Victims of War-An interdisciplinary Study. Peterborough-England: DSM Technical Publications Ltd.

- American Psychiatric Association. (2013). Diagnostic and Statistical Manual of Mental Disorders: Diagnostic and Statistical Manual of Mental Disorders. 5th ed., Arlington, USA.
- American Psychological Association (APA). (2019). Trauma. Retrieved 10 February 2020, from <u>https://www.apa.org/topics/trauma/</u>
- Anderson, M., & Huddleston, E. (2012). Towards a Cognitive and Neurobiological Model of Motivated Forgetting. In True and False Recovered Memories (pp. 53-120). Springer, New York, NY. Doi: 10.1007/978-1-4614-1195-6_3
- Anshori, A. (2015). Fleming's Defense Mechanisms in Stephen Crane's the Red Badge of Courage. JEE, Journal of English and Education, 5(2), 1-20. https://doi.org/10.20885/jee.vol5.iss2.art1
- Arab Center for Future Studies. (2002). Features of the Palestinian Trauma through Decades of Aggression: The Psychology of the Intifada and the Specificity of the Pressures. www.mostakbaliat.com/trauma.html
- Asaad, M (1994). Behavioral Disorders. Dar Al-Jeel for Printing, Publishing and Distribution.
- As-Sahly, N. M. (1999). Development Indicators among Palestinian Refugees in Syria (1948-2000). Al-Majdal, 4: 16.
- Attari, A., Dashty, S. & Mahmoudi, M. (2006). Post-Traumatic Stress Disorder in Children Witnessing a Public Hanging in the Islamic Republic of Iran. EMHJ- Eastern Mediterranean Health Journal, 12 (1-2), 72-80.
- Awawda, W. (2010, March 30). Land Day Is Symbol of Palestinian steadfastness. Al Jazeera Media Network. www.aljazeera.net/news/reportsandinterviews/2010/3/30
- Babadji, R. (1996). The Right of Return of The Palestinian People and The Principles of Its Application. Institute for Palestine Studies (Arabic version).
- Bajraktarevic-Hayward, J. (2008). Beyond Individual- Community Level Intervention with Refugee Communities. http://www.psychvisual.com/media.sec/PV-544.pdf?productid=149
- Ballester, À. (2019, March 29). ¿Qué Es La Tierra Palestina? elDiario.es. www.eldiario.es/comunitat-valenciana/tierra-palestina_132_1624340.html.
- Banat, B. (2002). Arroub Camp Following Fifty-Four Years of the Nakba 1948-2002. International Christian Society (Arabic version).
- Banat, B. (2010), Palestinian Suicide Martyrs (Istishhadiyin): Facts and Figures (ISBN: 978-84-693-0719-9) [Tesis Doctoral, Universidad de Granada]. Dialnet.

- Banat, B. (2014). Sense of Community among Palestinians. Asian Journal of Social Sciences & Humanities, 3(4), 197-207.
- Banat, B. (2019). Life Orientation among Palestinians. King Juan Carlos University.
- Banat, B. (27-8, April 2014). Palestinian Refugees: Facts and Figures [Conference Session]. Al-Quds University, Main Campus, Abu Dies/ The National Statistical Week, Jerusalem.
- Banat, B., & Ajarma, K. (2017). Palestinian Culture and the Glorification of Suicide Martyr (Istishhady). International Humanities Studies, 4(1): 44-60.
- Banat, B., Entrena-Durán, F., & Dayyeh, J. (2018). Palestinian Refugee Youth: Reproduction of Collective Memory of the Nakba. Asian Social Science, 14(12):147-155. Doi:10.5539/ass.v14n12p147
- Baranova, V., Dontsov, A. (2019). Collective Memories and Cultural Trauma of Different Generational Groups. Social Psychology and Society, 10(2), 29-46. DOI: 10.17759/sps.2019100204
- Barley, N. (1997). Grave Matters: A Lively History of Death around the World. Henry Holt.
- Bar-Tal, D., and Antebi, D. (1992). Beliefs about Negative Intentions of the World: A Study of the Israeli Siege Mentality. Polit. Psychol. 13, 633–645. Doi: 10.2307/3791494
- Basoglu, M., Paker, M., Paker, O., Ozmen, E., Marks, I., Incesu, C., ... & Sarimurat, N. (1994). Psychological Effects of Torture: A Comparison of Tortured With Nontortured Political Activists in Turkey. American Journal of Psychiatry, 151(1), 76-81. DOI: 10.1176/ajp.151.1.76
- Bennabi, M. (1989). Milaad Mujtama [Birth of a Society], 1st Vol. Shabakat Al- 'Alaaqaat Al-Ijtimma'iyah [The Network of Social Relations], Trans. By A. Shaaheen. Al-Fikr Ed.
- Benziger, K. (2002). Imre Nagy, Martyr of the Nation: Contested Memory and Social Cohesion. East European Quarterly, 36(2): 171-190.
- Bergquist, G., Soliz, J., Everhart, K., Braithwaite, D., & Kreimer, L. (2019). Investigating Layers of Identity and Identity Gaps in Refugee Resettlement Experiences in the Midwestern United States. Western Journal of Communication, 83(3), 383–402. DOI: 10.1080/10570314.2018.1552009
- Bernstein, M. (1997). Celebration and Suppression: The Strategic Uses of Identity by the Lesbian and Gay Movement. American Journal of Sociology, 103(3): 531-565. https://doi.org/10.1086/231250

- Bichescu, D., Schauer, M., Saleptsi, E., Neculau, A., Elbert, T., & Neuner, F. (2005). Long-Term Consequences of Traumatic Experiences: An Assessment of Former Political Detainees in Romania. Clinical Practice and Epidemiology in Mental Health, 1(1), 1-11. https://doi.org/10.1186/1745-0179-1-17
- Bladek, M. (2019). Memory Work: The Second Generation: by Nina Fischer. Palgrave Macmillan Memory Studies.
- Blaikie, A., Hepworth, M., Holmes, M., Howson, A., Inglis, D., Sartain, S (2004). The Body: Critical Concepts in Sociology. Volumes 1–5. Routledge.
- Boltova, A, Hachaturova, M. (2013). The Role of Time Perspective in Coping Behavior. Psychology in Russia: State of Art, 3:120–131.
- Borer, M. I. (2010). From Collective Memory to Collective Imagination: Time, Place, and Urban Redevelopment. Symbolic Interaction, 33(1), 96-114. https://doi.org/10.1525/si.2010.33.1.96
- Bowlby, J. (1969). Attachment and Loss, Vol. 1: Attachment. Basic Books.
- Bowman, G. (1993). Tales of the lost land." Carter E., Donald J., Squires J. (a cura di), Space & Place: Theories of Identity and Location. Lawer & Wishart.
- Boyarin, D. (1999). Dying for God: Martyrdom and the Making of Christianity and Judaism. Stanford University Press.
- Braga, L. L., Mello, M. F., & Fiks, J. P. (2012). Transgenerational Transmission of Trauma and Resilience: A Qualitative Study With Brazilian Offspring of Holocaust Survivors. BMC psychiatry, 12(1), 1-11. https://doi.org/10.1186/1471-244X-12-134
- Bretherton, I. (1985). Attachment Theory: Retrospect and Prospect. Monographs of the Society for Research in Child Development, 50(1-2), 3–35. https://Doi.Org/10.2307/3333824
- Brewin, C. R., Andrews, B., & Valentine, J. D. (2000). Meta-Analysis of Risk Factors for Posttraumatic Stress Disorder in Trauma-Exposed Adults. Journal of Consulting and Clinical Psychology, 68,748–766. DOI: 10.1037//0022-006x.68.5.748
- Brockmeier, J. (2002). Remembering and Forgetting: Narrative as Cultural Memory. Culture & Psychology, 8(1): 15–43. https://doi.org/10.1177/1354067X0281002
- Brooking, E.T., & Campbell, E. (2021, December 8). How to End Israel's Digital Occupation. Foreign Policy. https://foreignpolicy.com/2021/12/03/palestinian-israeli-occupation-social-media-censorship-facebook-silicon-valley/
- B'Tselem. (2012, January). The Israeli Information Center for Human Rights in the Occupied Territories. Bedouin Community near Settlement Faces Expulsion.

http://www.btselem.org/video/2012/01/israel-plans-expel-tens-ofthousands-of-bedouins-west-ban

- Budairi, M., Tamari, S., Sabella, B., & Zagha, A. (1990). Palestinian Society in the West Bank and Gaza Strip. Dar Al-Aswar (Arabic version).
- Cambridge Online Dictionary. (2019). Refugee Camps. Retrieved March 18, 2020, from https://dictionary.cambridge.org
- Canetti, D., Hirschberger, G., Rapaport, C., Elad-Strenger, J., Ein-Dor, T., Rosenzvieg, S., et al. (2018). Holocaust from the Real World to the Lab: The Effects of Historical Trauma on Contemporary Political Cognitions. Polit. Psychol. 39, 3–21. Doi: 10.1111/pops.12384
- Cardozo, B., Kaiser, E., Gotway, C., and Agani, F. (2003). Mental health, social functioning, and feelings of hatred and revenge of Kosovar Albanians one year after the war in Kosovo. Journal of Traumatic Stress, 16(4), 351-360.10.1023/A:1024413918346
- Carlson, E. B., & Rosser- Hogan, R. (1994). Cross-Cultural Response to Trauma: A Study of Traumatic Experiences and Posttraumatic Symptoms in Cambodian Refugees. Journal of Traumatic Stress, 7, 43- 58. http://dx.doi.org/10.1002/jts.2490070106
- Carmil, D. and Carel, R. S. (1986). Emotional Distress and Satisfaction in Life among Holocaust Survivors: A Community Study of Survivors and Controls. Psychological Medicine, 16(1), 141-149. DOI: https://doi.org/10.1017/S0033291700002580
- Caruth, C. (1995). Trauma and Experience. The John Hopkins University Press.
- Caruth, C. (1996). Unclaimed Experience: Trauma, Narrative, and History. The John Hopkins University Press.
- Castelli, E. (2004). Martyrdom and Memory: Early Christian Culture Making. Columbia University Press.
- Chávez, E., Lara, C., Ontiveros-Uribe. (2006). An Empirical Study of Defense Mechanisms In Panic Disorder. Salud Mental, 29(6), 15-22.
- Cohen, M., Brom, D., & Dasberg, H. (2001). Child Survivors of the Holocaust: Symptoms and Coping after Fifty Years. The Israel Journal of Psychiatry and Related Sciences, 38(1), 3-12. PMID: 11381584
- Conboy, K., Medina, N., & Stanbury, S (Eds.). (1997). Writing on the Body: Female Embodiment and Feminist Theory. New York: Columbia University Press.
- Corey, G. (2009). Theory and Practice of Counseling and Psychotherapy (8th Ed.). Thomson Brooks/Cole.

- Cormack, M. (Ed.). (2002) Sacrificing the Self: Perspectives on Martyrdom and Religion. Oxford University Press.
- Cramer, P. (2015). Understanding Defense Mechanisms. Psychodynamic Psychiatry, 43(4), 523-52. Doi:10.1521/pdps.2015.43.4.523
- Cramer, P. (2020, January 28). Trump's Israeli-Palestinian Peace Plan Runs 181 Pages. These 2 Maps Tell You What You Need To Know. Jewish Telegraphic Agency. https://www.jta.org.
- Dajani, A. (1998). "Thaherat Al-Istishhad Fi Alwagea Al-Filestiny Almoaaser" [Istishhad Phenomenon in the Contemporary Palestinian Reality]. Journal of Al-Siyasa AlFilastiniyya (Palestine Policy), 5 (17), 30-43.
- Dalgaard, N., Diab, S., Montgomery, E., Qouta, S., Punamäki, R. (2019). Is Silence About Trauma Harmful for Children? Transgenerational Communication in Palestinian Families. Transcultural Psychiatry, 56(2) 398–427. DOI: 10.1177/1363461518824430 journals.sagepub.com/home/tps
- Dalgaard, N., Todd, B., Daniel, S., & Montgomery, E. (2016). The Transmission of Trauma in Refugee Families: Associations between Intra-Family Trauma Communication Style, Children's Attachment Security and Psychosocial Adjustment. Attachment & Human Development, 18(1), 69-89. http://dx.doi.org/10.1080/14616734.2015.1113305
- Danieli, Y. (Ed.). (1998). International Handbook of Multigenerational Legacies of Trauma. Springer Science & Business Media.
- Daoud, N., Shankardass, K., O'Campo, P., Anderson, K. & Agbaria, A. K. (2012). Internal Displacement and Health among the Palestinian Minority in Israel. Social Science and Medicine, 74, 1163-1171. DOI: 10.1016/j.socscimed.2011.12.041
- Davis, C. G., Nolen-Hoeksema, S., and Larson, J. (1998). Making Sense of Loss and Benefiting From the Experience: Two Construals of Meaning. J. Pers. Soc. Psychol. 75, 561–574. Doi: 10.1037/0022-3514.75.2.561
- Dayyeh, J. (2019). The Collective Memory of the Catastrophe-Nakba-and Resilience among Palestinian Refugee Youth in the West Bank. International Humanities Studies, 6(3): 34-36.
- Dayyeh, J., Banat, B., and Barmil, H. (2018). Traumatic Experiences of the Nakba: A Case Study of the First Generation. European Journal of Social Sciences, 57(3), 303-313. http://www.europeanjournalofsocialsciences.com/
- De Haene, L., Grietens, H., & Verschueren, K. (2007). From Symptom to Context: A Review of the Literature on Refugee Children's Mental Health. Hellenic Journal of Psychology, 4, 233–256.

- De Haene, L., Grietens, H., & Verschueren, K. (2010). Adult Attachment in the Context of Refugee Traumatisation: The Impact of Organized Violence and Forced Separation on Parental States Of Mind Regarding Attachment. Attachment & Human Development, 12(3), 249-264. DOI: 10.1080/14616731003759732
- Dekel, R., & Goldblatt, H. (2008). Is There Intergenerational Transmission Of Trauma? The Case of Combat Veterans' Children. American Journal of Orthopsychiatry, 78(3), 281-289. https://doi.org/10.1037/a0013955
- Dekel, S., Mandl, C., & Solomon, Z. (2013). Is The Holocaust Implicated In Posttraumatic Growth In Second-Generation Holocaust Survivors? A Prospective Study. Journal of Traumatic Stress, 26(4), 530-533. https://doi.org/10.1002/jts.21836
- DeSoucey, M., Pozner, J. E., Fields, C., Dobransky, K., & Fine, G. A. (2008). Memory and Sacrifice: An Embodied Theory of Martyrdom. Cultural Sociology, 2(1), 99-121. https://doi.org/10.1177/1749975507086276
- Deveaux, F. (2014). Freud and Psychoanalytic Theory. In R. Parsons, & N. Zhang Counseling Theory (pp. 80-108). SAGE Publications, Ltd. https://www.doi.org/10.4135/9781483399621.n4
- Droge, A. J. & Tabor, J.D. (1991). A Noble Death: Suicide and Martyrdom among Christians and Jews in Antiquity. Harper.
- Dumper, M. (2007). The Future for Palestinian Refugees: Towards Equity and Peace. Lynne Rienner Publishers.
- Dupuy, K.; Rustad, S. (2018). Trends in Armed Conflict, 1946–2017. Peace Research Institute Oslo (PRIO).
- Duran, E. and Duran, B. (1995). Native American Post-Colonial Psychology. State University of New York Press.
- Durkheim, E. (1951). Suicide: A Study in Sociology. Translated by: John Spaulding and George Simpson. Routledge & Kegan Paul Ltd.
- Durkheim, É. [1893] (1984). The division of Labor in Society. Trans. W. D. Halls. Free Press.
- Durkheim, É. [1912] (1995). The Elementary Forms of Religious Life, trans. by K. Fields. Free Press.
- El Sarraj, E., & Qouta, S. (2005). The Palestinian Experience. In J. López-Ibor, G. Christodoulou, M. Maj, N. sartorius & A. Okasha, Disasters and Mental Health (1st ed., pp. 229-238). John Wiley & Sons Ltd. West Suesex.
- El Sayed, A. (2014, December 8). After Germany paid billions, France paid Holocaust victims as well. SASA Post. https://www.sasapost.com/holocaust-payments/

- El-Khodary, B., Samara, M., & Askew, C. (2020). Traumatic Events and PTSD among Palestinian Children and Adolescents: The Effect of Demographic and Socioeconomic Factors. Frontiers in Psychiatry, 11, 4. https://doi.org/10.3389/fpsyt.2020.00004
- Endler N., Parker J. (1994). Assessment of Multidimensional Coping: Task, Emotion, and Avoidance Strategies. Psychological Assessment, 6:50–60. Doi 10.1037/1040-3590.6.1.50
- Entrena-Durán, F. (2009). Understanding Social Structure in the Context of Global Uncertainties. Critical Sociology, 35(4): 521-540. https://doi.org/10.1177/0896920509103982
- Entrena-Durán, F. (2010). Dinámicas De Los Territorios Locales En Las Presentes Circunstancias De La Globalización. Estudios Sociologicos, 28(84), 691-728.
- Epstein, S. (1991). Cognitive-Experiential Self-Theory: Implications for Developmental Psychology. In M. R. Gunnar & L. A. Sroufe (Eds.), the Minnesota Symposia on Child Psychology, (23). Self-Processes and Development (79–123). Lawrence Erlbaum Associates.
- Erakat, N. (2014). Palestinian Refugees and the Syrian Uprising: Filling the Protection Gap during Secondary Forced Displacement. International Journal of Refugee Law, 26(4), 581-621. https://doi.org/10.1093/ijrl/eeu047
- Erikson, K. T. (1976). Everything in its Path. Simon and Schuster.
- European Parliament. (2019, January). Supporting Holocaust Survivors. http://www.europarl.europa.eu/RegData/etudes/ATAG/2019/633155/EPRS_ATA(2 019)633155_EN.pdf
- Farina, B., Liotti, M., & Imperatori, C. (2019). The Role of Attachment Trauma and Disintegrative Pathogenic Processes in the Traumatic-dissociative Dimension. Frontiers in Psychology. 10: 933. Doi: 10.3389/fpsyg.2019.00933
- Farina, O. (2000). A Psychological Facing of the Child When Losing a Dear Person. Gaza Mental Health Program. (Arabic Version)
- Farook, L. (2017, April 27). Remembering the Deir Yassin Massacre Which Precipitated Palestinians Exodus of Palestinians. Albilad Daily Newspaper. www.albiladdailyeng.com/remembering-deir-yassin-massacre-which-precipitatedpalestinians-exodus/
- Fedroff, I. C., Taylor, S., Asmundson, G. J., & Koch, W. J. (2000). Cognitive factors in traumatic stress reactions: Predicting PTSD symptoms from anxiety sensitivity and beliefs about harmful events. Behavioural and Cognitive Psychotherapy, 28(1), 5-15. Doi:10.1017/S1352465800000023

- Felman, S. (1992). Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History. Routledge.
- Felsen, I. (1998). Transgenerational Transmission of Effects of Holocaust, in Danieli (Ed.). International Handbook of Multigenerational Legacies of Trauma. Springer.
- Fincham, K. (2010) Learning Palestine: The Construction of Palestinian Identities in South Lebanon [Doctoral Thesis, University of Sussex]. University of Sussex, Sussex Research Online. <u>http://sro.sussex.ac.uk/id/eprint/2483</u>
- Fine, G. (1996). Reputational Entrepreneurs and the Memory of Incompetence: Melting Supporters, Partisan Warriors, and Images of President Harding. American Journal of Sociology, 101(5): 1159-1193. https://doi.org/10.1086/230820
- Fine, G. (2001). Difficult Reputations: Collective Memories of the Evil, Inept, and Controversial. University of Chicago Press.
- Finklestein, M., & Solomon, Z. (2009). Cumulative Trauma, PTSD and Dissociation among Ethiopian Refugees in Israel. Journal of Trauma & Dissociation, 10(1), 38-56. https://doi.org/10.1080/15299730802485151
- Fischer, N. (2015). Memory work: The Second Generation. Palgrave Macmillan.
- Foa, E., & Jaycox, L. (1999). Cognitive-behavioral Theory and Treatment of Posttraumatic Stress Disorder. In D. Spiegel (Ed.), Efficacy and Cost-effectiveness of Psychotherapy (pp. 23–61). American Psychiatric Press.
- Foa, E., Steketee, G., & Rothbaum, B. O. (1989). Behavioral/Cognitive Conceptualizations of Post-traumatic Stress Disorder. Behavior Therapy, 20, 155–176.
- Fossion, P., Leys, C., Kempenaers, C., Braun, S., Verbanck, P., & Linkowski, P. (2013). Depression, Anxiety and Loss of Resilience after Multiple Traumas: An Illustration of a Mediated Moderation Model of Sensitization in a Group of Children Who Survived the Nazi Holocaust. Journal of Affective Disorders, 151(3), 973-979. https://doi.org/10.1016/j.jad.2013.08.018
- Frankl, V. E. (1959/1976). Man's Search for Meaning. Pocket.
- Freud, A. (1936). The Ego and the Mechanisms of Defense. Karnac Books.
- Fromm, M. G. (2018). Lost In Transmission: Studies of Trauma Across Generations. Routledge.
- Gandubert, C., Scali, J., Ancelin, M-I., Carriere, I., Dupuy, A-m., Bagnolini, G., Ritchie, K., Sebanne, M., Martrille, L., Baccino, E., Herm, A., Attal, J., Chaudieu, I. (2016). Biological and Psychological Predictors of Posttraumatic Stress Disorder Onset and Chronicity. A One-year Prospective Study. Neurobiology of Stress, 3, 61-67. http://dx.doi.org/10.1016/j.ynstr.2016.02.002

- Garrigues, L. (2013, August 2). Slave and Slaveholder Descendants Break Free of History's Trauma—Together: Responding to past traumas like slavery and acts of terrorism can heal us—and future generations. Yes Magazine. https://www.yesmagazine.org
- Gelder, K. (2019, November 2). Individual vs. Collective Trauma. https://www.psychologytoday.com
- German Reparations for Holocaust Victims. (2021, October 6). Monte Carlo Doualiya. https://www.mc-doualiya.com/ar
- Ghnadra, S. (2013). Effects of the 1948 War on the Mental Health of Palestinians Living in Israel [Unpublished doctoral dissertation, University of Haifa].
- Giacaman, R., Khatib, R., Shabaneh, L., Ramlawi, A., Sabri, B., Sabatinelli, G., Khawaja, M., Laurance, T. (2009). Health in the Occupied Palestinian Territory: Health status and health services in the occupied Palestinian territory. Lancet, 373, 837–849. https://doi.org/10.1016/S0140-6736(09)60107-0
- Giacaman, R., Rabaia, Y., Nguyen-Gillham, V., Batniji, R., Punamäki, R. L., & Summerfield, D. (2011). Mental Health, Social Distress and Political Oppression: The Case of the Occupied Palestinian Territory. Global public health, 6(5), 547-559. DOI: 10.1080/17441692.2010.528443
- Giladi, L., & Bell, T. S. (2013). Protective Factors for Intergenerational Transmission of Trauma among Second and Third Generation Holocaust Survivors. Psychological Trauma: Theory, Research, Practice, and Policy, 5(4), 384. https://doi.org/10.1037/a0028455
- Gillihan, S. (2016, September 7). TRAUMA: 21 Common Reactions to Trauma. https://www.psychologytoday.com
- Glucklich, A. (2001). Sacred Pain: Hurting the Body for the Sake of the Soul. Oxford University Press.
- Gölz, O. (2019a). Martyrdom and the Struggle for Power. Interdisciplinary Perspectives on Martyrdom in the Modern Middle East. BEHEMOTH-A Journal on Civilisation, 12(1), 2-13. 10.6094/behemoth.2019.12.1.1013
- Gölz, O. (2019b). The Imaginary Field of the Heroic: On the Contention between Heroes, Martyrs, Victims and Villains in Collective Memory. Helden. Heroes. Héros, 27-38. Doi: 10.6094/helden.heroes.heros. /2019/APH/04
- González-prendes, A., & Resko, S. (2012). Cognitive-behavioral Theory. In S. Ringel & J. Brandell (Eds.), Trauma: Contemporary Directions in Theory, Practice, And Research (pp.14-40). SAGE Publications, Inc. Doi: 10.4135/9781452230597.n2
- Gossman, N. (1997). The Martyrs: Joan of Arc to Yitzhak Rabin. University Press of America.

- Granqvist, P., Sroufe, L. A., Dozier, M., Hesse, E., Steele, M., Van Ijzendoorn, M., ... & Steele, H. (2017). Disorganized Attachment In Infancy: A Review of the Phenomenon and Its Implications for Clinicians and Policy-makers. Attachment & Human Development, 19(6), 534-558. https://Doi.Org/10.1080/14616734.2017.1354040
- Hafnawi, A. (1990). The Problem of Refugees: Roots and Causes. http://www.alqudsonline.com
- Hanafi S., Long T. (2010). Governance, Governmentalities, and the State of Exception in the Palestinian Refugee Camps of Lebanon. Journal of Refugee Studies, 23(2): 134–159. https://doi.org/10.1093/jrs/feq014
- Hasanain, S. (2010). The Experience Of From Bereaved Women to Another, From the Perspective of Holistic Support. (First Edition). Women's Studies Centre.
- Hassanein, A (2004). Traumatic Experiences and Family Support and Its Relationship to the Child's Mental Health [Unpublished Master Thesis, Islamic University of Gaza], IUGAZA, http://library.iugaza.edu.ps/thesis/61547.pdf
- Heart, B. (2003). The Historical Trauma Response among Natives and Its Relationship with Substance Abuse: A Lakota Illustration. Journal of Psychoactive Drugs, 35(1), 7-13. DOI: 10.1080/02791072.2003.10399988
- Hirschberger, G. (2018). Collective Trauma and the Social Construction of Meaning. Frontiers in Psychology, 9, 1441. https://doi.org/10.3389/fpsyg.2018.01441
- Hirschberger, G., Ein-Dor, T., Lifshin, U., Seeman, S., and Pyzczynski, T. (2017). When Criticism Is Ineffective: The Case of Historical Trauma and Unsupportive Allies. Eur. J. Soc. Psychol. 47, 304–319. Doi: 10.1002/ejsp.2253
- Hirst, W., & Manier, D. (2008). Towards A Psychology of Collective Memory. Memory, 16(3), 183-200. https://doi.org/10.1080/09658210701811912
- Horne, S., & Smith, J. E. (2015). Preparation of the Trauma Response in a UK Emergency Department. Trauma, 17(4), 250-257. DOI:10.1177/1460408615572364
- Horowitz, M. (1986). Stress Response Syndromes (2nd Ed.). Jason Aronson.
- Howson, A., & Inglis, D. (2001). The Body in Sociology: Tensions Inside and Outside Sociological Thought. The Sociological Review, 49(3): 297-317. https://doi.org/10.1111/1467-954X.00333
- Hussain, D., & Bhushan, B. (2013). Posttraumatic Growth Experiences among Tibetan Refugees: A Qualitative Investigation. Qualitative Research in Psychology, 10:2, 204-216. https://doi.org/10.1080/14780887.2011.616623

- Hussein, G. (2003). "Alirhab Alisraeli Washariyat Almoqawama Wal Al-Amaliyat Allstishhadiya" [Israeli Terrorism and Legitimacy of Resistance and Martyrdom Operations]. Zorai Press.
- Ibish, H. (2018, May 14). A 'Catastrophe' That Defines Palestinian Identity. https://www.theatlantic.com/
- Igarashi, Y. (2000) Bodies of Memory: Narratives of War in Postwar Japanese Culture, 1945–1970. Princeton University Press.
- Ingres, M. (2018, June 6). Gaza: Overwhelmed by Gunshot Wounds. International activity report, Médecins Sans Frontières. https://www.msf.org/international-activity-report-2018/gaza-overwhelmed-gunshot-wounds
- Irfan, A. (2017, February) Rejecting Resettlement: The Case of the Palestinians. Forced Migration Review. https://www.fmreview.org/resettlement/irfan
- Israeli authorities demolish Al-Araqib village for the 190th consecutive time. (2021, July 7). Maan News Agency. https://www.maannews.net/news/2044600.html
- Issa, N. (2007). The Memory of the Palestinian Child [Master Thesis, Birzeit University]. BZU Thesis.
- Iwanicka, K, Gerhant, A., & Olajossy, M. (2017). Psychopathological Symptoms, Defense Mechanisms and Time Perspectives among Subjects with Alcohol Dependence (AD) Presenting Different Patterns of Coping with Stress. Peerj, 1-19. Doi 10.7717/Peerj.35762/19
- Jacob, G. (1999). Psychology of War and Disaster: PTSD. Dar Al Farabi (Arabic version).
- Jacobson, L. B. (2003). Finding Means: UNRWA's Financial Crisis and Refugee Living Conditions. Volume I: Socio-Economic Situation of Palestinian Refugees in Jordan, Lebanon, Syria and the West Bank and Gaza Strip, 427(11).
- Jamieson, A. (2012, November 3). The Biology of Trauma: Re-conceptualizing Child Traumatic Stress. Positive Human Development. www.positivehumandevelopment.com
- Jansen, R. S. (2007). Resurrection and Appropriation: Reputational Trajectories, Memory Work, and the Political Use of Historical Figures. American Journal of Sociology, 112(4): 953-1007. https://doi.org/10.1086/508789
- Jarrar, N. (1995) Palestinian Forced Migration. Trans. S. Mahmoud. Academic Program for Forced Migration (Arabic version).
- Jedlowski, P. (2001). Memory and Sociology: Themes and Issues. Time & Society, 10(1): 29-44. https://doi.org/10.1177/0961463X01010001002

- Johnson, C. & Sautter, R.C. (2004). 26 Martyrs: 26 Martyrs for These Perilous Days. December Press.
- Kafafi, A. (1990). Mental Health [Alsihat Alnafsia]. Anglo-Egyptian press. (Arabic Version)
- Kahn, D. T., Klar, Y., and Roccas, S. (2017). For the Sake Of the Eternal Group: Perceiving the Group as Trans-Generational and Endurance of Ingroup Suffering. Pers. Soc. Psychol. Bull. 43, 272–283. Doi: 10.1177/0146167216684123
- Kamenka, E. (1976). The Nature and Evolution of an Idea. Edward Arnold.
- Katz, M. (2003). Prisoners of Azkaban: Understanding Intergenerational Transmission of Trauma Due To War and State Terror (With Help from Harry Potter). Journal for the Psychoanalysis of Culture and Society, 8(2), 200-207. Doi: 10.1353/psy.2003.0037
- Kaufman, S. (2000). In the Shadow of Death with Dignity: Medicine and Cultural Quandaries of the Vegetative State. American Anthropologist, 102(1), 69 83. https://doi.org/10.1525/aa.2000.102.1.69
- Kellerman, N. P. (2001). Psychopathology in Children of Holocaust Survivors: A Review of the Research Literature. Israel Journal of Psychiatry and Related Sciences, 38(1), 36-46. PMID: 11381585
- Kellermann, N. (2001). The Long-Term Psychological Effects and Treatment of Holocaust Trauma. Journal of Loss and Trauma, 6(3), 197-218. https://doi.org/10.1080/108114401753201660
- Khairat, S. (2020, January 29). Trump's Middle East Plan Denies Palestinians Right Of Return. Al Jazeera Media Network https://www.aljazeera.com/news/2020/01/trumps-middle-east-plan-deniespalestinians-return-200129073323171.html
- Khalidi, R. (1992). Observations on the Right of Return. Journal of Palestine Studies, XXI (2), 29-40.
- Khalidi, R., Samour, S. (2011). Neoliberalism as Liberation: The Statehood Program and the Remaking of the Palestinian National. Journal of Palestine Studies, 40(2), 6-25. https://doi.org/10.1525/jps.2011.XL.2.6
- Khamaysa, I. (2012). Traumatic Loss Experiences and Social Adaptation among the Families of the Palestinian Suicide Martyrs (Istishhadiyin) (Identifier No. 20913222) [Master's thesis, Al-Quds University]. AQU, DSpace Dissertations and Thesis.
- Khamaysa, I. (2014). The Psychological Effects of the Prisoners and Psycho-Social Adaptation among Released Prisoners from Israeli Prisons in West Bank from Year

2010 to 2012. SSRN: Social Science Research Network. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2423788

- Khamaysa, I. (2015). The Effect of Parental Deprivation at the Level of Self-Esteem, and Life Orientation among Palestinian Teenagers. Applied Research Journal, 1(3), 121-126. DOI: 10.2139/ssrn.2511894
- Khamaysa, I. (2018). Tribal Intolerance and Revenge among Palestinian Universities' Students. International Humanities Studies, 5(3), 1-14.
- Khamaysa, I. (2022). Life Orientation and Mental Health among Palestinian Refugees Living in Camps in the Occupied Palestinian Territories (Opt), forthcoming.
- Khamaysa, I. (2022). Symbols of Collective Memory among Palestinian Refugees: Land, Body, Dream and the Key of Return, forthcoming.
- Khamaysa, I., Lahmar, K. (2022a). La Cultura Del Martirio Y Los Actos De Suicidio Martirio En Los Campos De Refugiados Palestinos. Un Estudio En La Sociología Del Cuerpo Y La Psicología Social Del Martirio. In Durán Ruíz, F. J., and Said-Hung, E (Dirs.), Ensayos Sobre Migración Y Pandemia Global (pp. 113-119). Editorial Comares.
- Khamaysa, I., Lahmar, K. (2022b). La Glorificación Del Martirio Y Los Actos De Suicidio Martirio En Los Campos De Refugiados Palestinos. Un Estudio En La Sociología Del Cuerpo Y La Psicología Social Del Martirio. In Said-Hung, E (Ed.), and Durán Ruíz, F. J (Coord.), Menores, Migrantes En Tiempos De Pandemia (pp. 223-337). Editorial Comares.
- Khanfar, N. (2002). "Al-Filestiniyon Wthaqafat Al-Istishhad" [Palestinians and the Culture of Martyrdom]. Journal of Ru'ya (Vision), Palestinian State Information Service, 18, 201-205.
- Khouri, R .(2015, October, 12). Five generations of Palestinians, no surrender in sight. Agence Global, Belfer Center for Science and International Affairs. Harvard University. <u>https://www.belfercenter.org/publication/five-generations-palestinians-no-surrender-sight</u>
- Kimhi, S., & Even, S. (2004). Who are the Palestinian Suicide Bombers?. Terrorism and Policical Violence, 16(4), 815-840. https://doi.org/10.1080/095465590899740
- Klapp, O.E. (1954). Heroes, Villains and Fools, As Agents of Social Control. American sociological review, 19(1): 56-62.
- Klar, Y., Schori-Eyal, N., and Klar, Y. (2013). The "Never Again" state of Israel: the emergence of the Holocaust as a core feature of Israeli identity and its four incongruent voices. J. Soc. Issues 69, 125–143. Doi: 10.1111/josi.12007

- Kleinman, A., & Kleinman, J. (1994). How Bodies Remember: Social Memory and Bodily Experience of Criticism, Resistance, and Delegitimation following China's Cultural Revolution. New Literary History 25(3), 707–23. Doi:10.2307/469474
- Kolb, L., & Multipassi, L. (1982). The Conditioned Emotional Response: A Subclass of Chronic and Delayed Post-traumatic Stress Disorder. Psychiatric Annals, 12, 979-987. https://doi.org/10.3928/0048-5713-19821101-06
- Kwan, Y. (2020). Time-Image Episodes and the Construction of Transgenerational Trauma Narratives. Journal of Asian American Studies, 23(1), 29-59. https://doi.org/10.1353/jaas.2020.0001
- Lavabre, M. C. (2016). La "Mémoire Collective" Entre Sociologie De La Mémoire Et Sociologie Des Souvenirs? Archive Ouverte en Sciences de l'Homme et de la Société. (halshs-01337854)
- Lecoquierre, M. (2015). Israel's Invisible Villages: Towards The Disappearance Of The Negev Bedouin?. Justice Spatiale - Spatial Justice, Université Paris Ouest Nanterre La Défense, UMR LAVUE 7218, Laboratoire Mosaïques, 2015, Right to the Village,http://www.jssj.org/article/les-villages-invisibles-disrael-vers-la-disparitiondes-bedouins-du-neguev/. (halshs-01717423)
- Lesch, D. W., Frankel, B. (2004). History in Dispute: The Middle East since 1945. St. James Press.
- Leuzinger-Bohleber, M. (2008). Biographical Truths and Their Clinical Consequences: Understanding 'Embodied Memories' In a Third Psychoanalysis With A Traumatized Patient Recovered From Severe Poliomyelitis. The International Journal of Psychoanalysis, 89(6), 1165-1187. https://doi.org/10.1111/j.1745-8315.2008.00100.x
- Levetown, M. (2008). Communicating with Children and Families: From Everyday Interactions to Skill in Conveying Distressing Information. Pediatrics, 121(5), 1441–1460. Doi:10.1542/peds.2008-0565
- Levine, H. (2018, June 6). Gaza: Overwhelmed by Gunshot Wounds. International Activity Report, Médecins Sans Frontières.https://www.msf.org/international-activity-report-2018/gaza-overwhelmed-gunshot-wounds
- Lichtman, H. (1984). Parental Communication of Holocaust Experiences and Personality Characteristics among Second-Generation Survivors. Journal of Clinical Psychology, 40(4), 914-924. https://doi.org/10.1002/1097-4679(198407)40:4<914::AID-JCLP2270400408>3.0.CO;2-U
- Livingston, D. H., Tripp, T., Biggs, C., & Lavery, R. F. (2009). A Fate Worse Than Death? Long-Term Outcome of Trauma Patients Admitted to The Surgical Intensive Care Unit. Journal of Trauma and Acute Care Surgery, 67(2), 341-348. Doi: 10.1097/TA.0b013e3181a5cc34

- Loades, D. M. (1970). The Oxford Martyrs. Batsford Press.
- Lutz, J. (2018, June). Refugees Hope for return. Konrad-Adenauer-Stiftung: Foundation office Palestinian Territories. https://www.kas.de/web/palaestinensischegebiete/fluechtlinge
- MacDonald, K., Thomas, M. L., Sciolla, A. F., Schneider, B., Pappas, K., Bleijenberg, G., Bohus, M., Bekh, B., Carpenter, L., Carr, A., Dannlowski, U., Dorahy, M., Fahlke, C., Finzi-Dottan, R., Karu, T., Gerdner, A., Glaesmer, H., Grabe, H. J., Heins, M., . . . Wingenfeld, K. (2016). Minimization of Childhood Maltreatment is Common and Consequential: Results From a Large, Multinational Sample Using the Childhood Trauma Questionnaire. PLoS ONE, 11(1), e0146058. doi:10.1371/journal.pone.0146058
- Mahamid, F. (2020). Collective Trauma, Quality of Life and Resilience in Narratives of Third Generation Palestinian Refugee Children. Child Indicators Research, 1-24. https://doi.org/10.1007/s12187-020-09739-3
- Main, M., Kaplan, N., & Cassidy, J. (1985). Security in Infancy, Childhood, and Adulthood: A Move to the Level of Representation. Monographs of the Society for Research in Child Development, 50(1-2), 66-104. https://doi.org/10.2307/333827
- Maio, M., & Sciabolazza, V. (2021). Conflict Exposure and Health: Evidence from the Gaza Strip. Health Economics, 1-9. https://doi.org/10.1002/hec.4364
- Malle, B., Guglielmo, S., & Monroe, A. (2014). A theory of blame. Psychological Inquiry, 25(2), 147-186. Doi:10.1080/1047840X.2014.877340
- Manna', A. (2013). The Palestinian Nakba and its Continuous Repercussions. Israel Studies, 18(2), 86. https://doi.org/10.2979/israelstudies.18.2.86
- Marsella, A. J., & Christopher, M. A. (2004). Ethno-cultural Considerations in Disasters: An Over-View of Research, Issues, and Directions. Psychiatric Clinics of North America, 27, 521–539. https://doi.org/10.1016/j.psc.2004.03.011
- Masalha, N. (2012). The Palestine Nakba: Decolonizing History, Narrating The Subaltern, Reclaiming Memory. Zed books.
- Masalha, N. (2005). Catastrophe Remembered: Palestine, Israel and the Internal Refugees: Essays in Memory of Edward W. Said (1935–2003). Zed Books.
- Masri, W. (2008). Palestine Refugees: Reality and Solutions. Dar Jaleel (Arabic version).
- McEwen, B. S. (1998). Stress, Adaptation, and Disease: Allostasis and Allostatic Load. Annals of the New York Academy of Sciences, 840, 33–44. DOI: 10.1111/j.1749-6632.1998.tb09546.x

- McKell, C. (2015, May). Mental Illness in Palestinian Refugees Living In Refugee Camps in Jordan: Barriers to Access and Use of Mental Health Care Services and Recommendations to Overcome Such Barriers. Royal College of Psychiatrists. https://www.rcpsych.ac.uk/docs/defaultsource/members/sigs/volunteering-andinternational-vipsig/essay-prize-mckell-mentalillness-in-palestinian-refugees-injordan-barriers-to-access.pdf?sfvrsn=bdae18bb_2
- McNeely, C., Barber, B. K., Spellings, C., Belli, R., Giacaman, R., Arafat, C., ... & Mallouh, M. A. (2015). Political Imprisonment and Adult Functioning: A Life Event History Analysis of Palestinians. Journal of Traumatic Stress, 28(3), 223-231. DOI: 10.1002/jts.22015
- Médecins Sans Frontières (2020). Medical and Psychological Assistance to People Affected by the Ongoing Conflict in Palestine. https://www.msf.org/palestine
- Medline Plus (2004). Medical Encyclopedia: Traumatic Events. http://nlm.nih.gov/medlineplus/ency/article/001924.htm
- Mercier, C, Brochu, S, Girard, M, Gravel, J, Ouellet, R, Paré, R. (1992). Profiles of Alcoholics According To the SCL-90–R: A Confirmative Study. International Journal of Mentalhealth and Addiction 27:1267–1282. Doi 10.3109/10826089209047349
- Middle East Monitor. (2019, February). Israel Pharmaceutical Firms Test Medicines on Palestinian Prisoners. https://www.middleeastmonitor.com/20190220-israelpharmaceutical-firms-test-medicines-on-palestinian-prisoners/
- Milner, J. S., Thomsen, C. J., Crouch, J. L., Rabenhorst, M. M., Martens, P. M., Dyslin, C. W., ... & Merrill, L. L. (2010). Do Trauma Symptoms Mediate the Relationship Between Childhood Physical Abuse and Adult Child Abuse Risk? Child Abuse & Neglect, 34(5), 332-344. https://doi.org/10.1016/j.chiabu.2009.09.017
- Milshtein, M. (2021, January 25). The Trauma of the Nakba Is Here to Stay. Haaretz. Retrieved November 11, 2021, from https://www.haaretz.com/israelnews/.premium.MAGAZINE-the-trauma-of-the-nakba-is-here-to-stay-1.9939128
- Mireles, A. (2020). Sueño Del Retorno, Intacto En Corazón De Refugiadas Palestinas. Palestina Libre Organization (Online). www.palestinalibre.org/articulo.php?a=76092, Last accessed March 2, 2021.
- Moghadam, A. (2009). Motives for Martyrdom: Al-Qaida, Salafi Jihad, and the Spread of Suicide Attacks. Journal of International Security, 3, 46-78. https://doi.org/10.1162/isec.2009.33.3.46
- Mohammad, M., Morsi, K. (1986). Mental Health in the Light of Psychology and Islam [Alsihat Alnafsiat Fi Daw' Eilm Alnafs Wal'iislam]. Kuwait University.

- Mollica, R. F., McInnes, K., Pham, T., Fawzi, M. C. S., Murphy, E., & Lin, L. (1998). The Dose-Effect Relationships between Torture and Psychiatric Symptoms in Vietnamese Ex-Political Detainees and a Comparison Group. The Journal of nervous and mental disease, 186(9), 543-553. doi:10.1097/00005053-199809000-00005
- Mollica, R., Caspi-Yavin, Y., Bollini, P., Truong, T., Tor, S., & Lavelle, J. (1992). The Harvard Trauma Questionnaire: Validating a Cross-Cultural Instrument for Measuring Torture, Trauma, and Posttraumatic Stress Disorder in Indochinese Refugees. Journal of Nervous and Mental Disease, 180(2), 11-116. http://dx.doi.org/10.1097/00005053-199202000-00008
- Momani, F, A & Al Alzaghoul, R. (2009). Perceived Social Support among Victims and Families of the Amman Hotels Terrorist Explosions. Jordan Journal of Social Sciences (JJSS), 2 (3), 340-360.
- Monte Carlo Doualiya (11/05/2021). Sheikh Jarrah Neighborhood in East Jerusalem: The Whole Story of the Longest-Running Israeli Court Cases!. Available in: https://www.mc-doualiya.com/
- Montgomery, E. (1998). Refugee children from the Middle East. Scandinavian Journal of Public Health, 26(0), 1–152. DOI: 10.1080/14034949850153329
- Montgomery, E. (2011). Trauma, Exile and Mental Health in Young Refugees. Acta Psychiatrica Scandinavica Supplementum, 124(440),1-46. https://doi.org/10.1111/j.1600-0447.2011.01740.x
- Montgomery, E., & Foldspang, A. (2001). Traumatic Experience and Sleep Disturbance in Refugee Children from the Middle East. The European Journal of Public Health, 11(1), 18-22. https://doi.org/10.1093/eurpub/11.1.18
- Morina, N., Rushiti, F., Salihu, M., & Ford, J. (2010). Psychopathology and Well-Being in Civilian Survivors of War Seeking Treatment: A Follow-Up Study. Clinical Psychology and Psychotherapy Journal, 17(2), 79–86. https://doi.org/10.1002/cpp.673
- Morina, N., Schnyder, U., Schick, M., Nickerson, A., & Bryant, R. A. (2016). Attachment Style and Interpersonal Trauma in Refugees. Australian & New Zealand Journal of Psychiatry, 50(12), 1161–1168. Doi: 10.1177/0004867416631432
- Morris, B. (2001). The Tantura Massacre, 22-23 May 1984. Journal of Palestine Studies, xxx (3), 5-18.
- Muhawi, I., & Kana'na, S. (2001). Speak Bird, Speak Again: Palestinian Arab Folktales. Institute for Palestine Studies. (Arabic version)

- Mujik-Biz, L. (2020, April 9). CBT-Therapy for Trauma. Association for Behavioral and Cognitive Therapies (ABCT). http://www.abct.org/Information/?m=mlnformation&fa=fs_TRAUMA
- Mulvihill, M., & Farmer, D. (1999). The Treasury of Saints and Martyrs. Viking Juvenile.
- Musa, S. (2015) Traumatizing Experiences through Palestinian Generations from 1948 to 2011 and Its Relationship to Psychological Compatibility [Master Thesis, The Islamic University]. Iugspace, Iugaza, https://iugspace.iugaza.edu.ps/handle/20.500.12358/21288
- Nabulsi, K. (2003). Being Palestinian. Government and Opposition, 38(4), 479-496. doi:10.1111/1477-7053.t01-1-00025
- Nader K., Pynoos R., Fairbanks L., Al- Ajeel, M., & Al- Asfour, A. (1993). A Preliminary Study of PTSD And Grief Among the Children of Kuwait Following the Gulf Crisis. British Journal of Clinical Psychology, 32, 407- 416. http://dx.doi.org/10.1111/j.2044- 8260.1993.tb01075.x
- Najib, M., Banat, B., Radida, F., Labom, D., & Rabee, R. (2015). Traumatic Experiences among Mothers of Palestinian Prisoners. International Humanities Studies, 2(1), 1–19.
- Nakba Day. (2021, January 10). In Wikipedia. https://en.wikipedia.org/wiki/Nakba_Day
- Nashwan, A., Sobh, M., Khamaysa, I., Harahsheh, M., & Salem, H. (2021). Quality of Life among Elderly Syrian Refugees in Jordan: Quantitative Study. Dirasat: Human and Social Sciences, forthcoming.
- Nasser, A. (2001). Palestinian Refugees: The Right of Return. Pluto Press.
- Naveh, E. (1990). Crown of Thorns: Political Martyrdom in America from Abraham Lincoln to Martin Luther King, Jr. New York University Press.
- Neria, Y., Bravova, M., Halper, J. (2010). Trauma and PTSD among Civilians in the Middle East. PTSD Research Quarterly, 21(4),1-8.
- Neuner, F., Schauer, M., Karunakara, U., Klaschik, C., Robert, C., & Elbert, T. (2004). Psychological Trauma and Evidence for Enhanced Vulnerability for Posttraumatic Stress Disorder through Previous Trauma among West Nile Refugees. BMC psychiatry, 4(1), 1-7. https://doi.org/10.1186/1471-244X-4-34
- Niazi, A. (2019). Intergenerational Trauma in Second Generation Afghan American Males (Publication No. 13897012. [Doctoral Thesis, Alliant International University]. Alliant International University, ProQuest Dissertations and Theses Global.

- Nilsson, M., Badran, D. (2019). Conflicts and Relative Deprivation in Ein El Hilweh: Palestinian Refugees in the Shadow of the Syrian Civil War. Journal of Refugee Studies: 1-21, https://doi.org/10.1093/jrs/fez011
- Noor, M., Vollhardt, J. R., Mari, S., & Nadler, A. (2017). The Social Psychology Of Collective Victimhood. European Journal of Social Psychology, 47(2), 121-134. https://doi.org/10.1002/ejsp.2300
- Nora, P. (1996). Realms of Memory: The Construction of the French Past. Trans. by A. Goldhammer. Columbia University Press.
- Ocheing, R. (2008, April, 9). Power, Conflict and Peace: Stories of Women Survivours of Violent Coflict. A Paper Presented During WACC Congress. www.isis.org
- OHCHR. (2021, March). Thirteenth Periodic Report on the Human Rights Situation in the Occupied Palestinian Territory (A/HRC/46/63). https://www.ohchr.org/EN/HRBodies/HRC/Pages/NewsDetail.aspx?NewsID=2691 3&LangID=E
- Olick, J., & Robbins, J. (1998). Social Memory Studies: From "Collective Memory" to the Historical Sociology of Mnemonic Practices. Annual Review of sociology, 24(1): 105-140. https://doi.org/10.1146/annurev.soc.24.1.105
- Olick, J., Vinitzky-Seroussi, V., & Levy, D. (Eds.). (2011). The Collective Memory Reader. Oxford University Press.
- Olson, T. (2008). Can Defense Mechanisms aid in the Differentiation of Depression and Anxiety [Doctoral Thesis, University of Saskatchewan], USask, DSpace Principal, Electronic Theses and Dissertations.
- Ornelas, I. J., & Perreira, K. M. (2011). The Role of Migration in the Development of Depressive Symptoms among Latino Immigrant Parents in the USA. Social Science & Medicine, 73(8), 1169-1177. https://doi.org/10.1016/j.socscimed.2011.07.002
- Othman, I. (1999) Introduction of Sociology. Dar Al-Shurouk. (Arabic Version)
- Özüorçun-Küçükertan, N. (2013). Intergenerational Transmission Of Maternal War-related Trauma Experiences to Their Offspring's Well-Being among Turkish Cypriots: Mediator Role of Parenting Styles [Doctoral Dissertation, Middle East Technical University].METU Library. <u>https://etd.lib.metu.edu.tr/upload/12616611/index.pdf</u>
- Palestine in Arabic- Maps. (2000). Palestinian Refugees Displaced from Urban and Rural Area. http://www.palestineinarabic.com/map_nakba_E.html
- Palestine Network for Dialogue. (2012). The Battle of Al-Furqan and the Features of the Victory. https://www.paldf.net/forum/showthread.php?t=1071517

- Palestinian Central Bureau of statistics (PCBS). (2018, February). Preliminary Results of the Population, Housing and Establishments Census, 2017. https://www.sesric.org/imgs/news/1945-Preliminary-Results-Report-EN.pdf
- Palestinian Central Bureau of Statistics (PCBS). (2019). The International Day of Refugees 2019. http://www.pcbs.gov.ps
- Palestinian Central Bureau of Statistics (PCBS). (2020, May). On the 72nd Annual Commemoration of the Palestinian Nakba, the number of Palestinians Worldwide has Doubled about Nine Times. www.pcbs.gov.ps
- Palestinian Ministry of Health (MOH). (2021, May). Detailed Report: Israeli Aggression against the Gaza Strip 10-21/05/2021. http://www.moh.gov.ps/portal/en/
- Palestinian Return Center. (2020). The Percentage of Palestinian Refugees is the Highest Compared to any Group of Displaced Population in the World. Https://Prc.Org.Uk
- Pappé, I. (1999). The Israel/Palestine Question. Routledge.
- Pappé, I. (2006). The Ethnic Cleansing of Palestine. Oneworld Publications.
- Pappé, L. (2001). The Tantura Case in Israel: The Katz Research and Trial. Journal of Palestine Studies, 30(3), 19-39. DOI: 10.1525/jps.2001.30.3.19
- Parker, I. (2005). Qualitative Psychology: Introducing Radical Research. McGraw.
- Passia. (2002). The Palestine Question In Maps 1878-2000. Palestinian Academic Society for the Study of International Affairs.
- Peace, Conflict and Development (2008). Community Approaches to Coping with the Traumas of Violent Conflict. http://www.idrc.ca/en/ev-122220-201-1-DO_TOPIC
- Peddle, N. (2015). Trauma and the Palestinian Nakba [Master Thesis, University of Exeter]. ORE.<u>https://zochrot.org/uploads/uploads/3251612a79a9b32debc6331ba063e3e0.pd</u> <u>f</u>
- Perrucci, R., & Perrucci, C. (2014). The Good Society: Core Social Values, Social Norms, and Public Policy. Sociological Forum, 29(1), 1-30. DOI: 10.1111/socf.12078
- Peteet, J. (2005). Landscape of Hope and Despair: Palestinian Refugee Camps. University of Pennsylvania Press.
- Petrigh, C. (2006). No Freedom, No Future: Undocumented Palestinian Refugees in Lebanon. Forced Migration Review, 26(1): 15–17.
- Punamäki, R. L. (1986). Stress among Palestinian Women under Military Occupation; Women's Appraisal of Stressors, their Coping Modes, and their Mental Health. International Journal of Psychology, 21(1-4), 445-462. https://doi.org/10.1080/00207598608247601

Puppi, L. (1991) Torment in Art: Pain, Violence, and Martyrdom. Rizzoli.

- Qouta, S., Punamaki, R., & El Sarraj, E. (2003). Prevalence and Determinants of PTSD among Palestinian Children Exposed To Military Violence. European Child and Adolescent Psychiatry, 12, 265- 272. http://dx.doi.org/10.1007/s00787-003-0328-0
- Quiroga, J., & Jaranson, J. M. (2005). Politically-Motivated Torture and Its Survivors. Torture, 15(2-3), 1-111.
- Rabaia, Y., Saleh, M. F., & Giacaman, R. (2014). Sick or sad? Supporting Palestinian Children Living in Conditions of Chronic Political Violence. Children & Society, 28(3), 172-181. https://doi.org/10.1111/chso.12061
- Radwan, S. (2002). Mental Health [Alsihat Alnafsia]. Al-Masirah Publishing & Distribution House. (Arabic Version)
- Radwan, S. (2006). Psychological Effects of Traumatic Experiences. Journal of the Arab Network of Psychological Sciences, 3(12), 1-6.
- Radwan, S. (2018). Psychological Effects of Traumatic Experiences: Negliceted Sufferance. Arab Science Archive, 1-6.
- Rajan, V. (2019). Victimization and Psychopathology among Children in the Aftermath of Mass Trauma in Sri Lanka [Doctoral Thesis, University of Bielefeld]. UB, Publikationen an der Universität Bielefeld, <u>https://pub.uni-bielefeld.de/record/2941522</u>
- Rashed, H., Short, D., Docker, J. (2014). Nakba Memoricide: Genocide Studies and the Zionist /Israeli Genocide of Palestine. Holy Land Studies, 13(1), 1-23. DOI: 10.3366/hls.2014.0076
- Rasras, K. (2006). Mechanisms of intervention in times of crisis. Treatment and Rehabilitation Center for Victims of Torture.
- Rechtman, R. (2005). Remarks on the Fate of Psychoanalysis in the Social Uses of Trauma. Revue française de psychosomatique, 28, 27-38. https://doi.org/10.3917/rfps.028.0027
- Refugee Health Technical Assistance Center (RHTAC). (2011). Traumatic Experiences of Refugees. https://refugeehealthta.org/physical-mental-health/mentalhealth/adult-mental-health/traumatic-experiences-of-refugees/
- Reichert, J., & Bostwick, L. (2010). Post-Traumatic Stress Disorder and Victimization among Female Prisoners in Illinois. Illinois Criminal Justice Information Authority.
- Rizkalla, N., Arafa, R., Mallat, N., Soudi, L., Adi, S., & Segal, S. (2019). Women in Refuge: Syrian Women Voicing Health Sequelae Due to War Traumatic

Experiences and Displacement Challenges. Journal of Psychosomatic Research, 1-31. DOI: 10.1016/j.jpsychores.2019.109909

- Rosenfeld, M. (2002). Power Structure, Agency, and Family in a Palestinian Refugee Camp. International Journal of Middle East Studies, 34(3), 519-551. Doi:10.1017/S0020743802003057
- Rothbard, J., & Shaver, P. (1994). Continuity of Attachment Across the Life Span. In M.
 B. Sperling, & W. H. Berman (Eds.), Attachment in Adults: Clinical and Developmental Perspectives (Pp. 31–71). The Guilford Press.
- Rothbaum, B., Foa, E. & Hembree, E. (2007). Reclaiming Your Life Aftera Traumatic Experience, Workbook. Oxford University Press, Inc.
- Rousseau, C., Drapeau, A., and Platt, R. (1999). Family Trauma and Its Association with Emotional and Behavioral Problems and Social Adjustment in Adolescent Cambodian Refugees. Child Abuse & Neglect, 23(12), 1263–1273. DOI: 10.1016/s0145-2134(99)00100-3
- Sack, W. H., Clarke, G. N., & Seeley, J. (1995). Posttraumatic Stress Disorder across Two Generations of Cambodian Refugees. Journal of the American Academy of Child & Adolescent Psychiatry, 34(9), 1160-1166. https://doi.org/10.1097/00004583-199509000-00013
- Sagi, N. (1986). German Reparations: A History of the Negotiations. New York St. Martin's Press.
- Salam, N. (1994). Between Repatriation and Resettlement: Palestinian Refugees in Lebanon. Journal of Palestine Studies, XXIV (1), 18-27.
- Salam, W., & Mahfouz, S. (2020). Claims of Memory: Transgenerational Traumas, Fluid Identities, and Resistance in Hala Alyan's Salt Houses. Journal of Postcolonial Writing, 1-14. DOI: 10.1080/17449855.2020.1755718
- Salama, S. (2006). Palestinian Refugees, the Importance of the United Nations Relief and Works Agency for Palestine Refugees (UNRWA) and the Office of the United Nations High Commissioner for Refugees (UNHCR). Ramallah: Department of Refugee Affairs. (Arabic version)
- Samy, S. (2010a). Reparations to Palestinian Refugees: A Comparative Perspective. Routledge.
- Samy, S. (2010b). Would 'sorry'repair my loss? Why Palestinian refugees should seek an apology for their displacement. The International Journal of Human Rights, 14(3), 364-377. https://doi.org/10.1080/13642980802611145
- Sanbar, E. (2001). Out of place, out of time. Mediterranean Historical Review, 16 (1): 87-94. https://doi.org/10.1080/714004568

- Sarraj, E. E., Punamäki, R. L., Salmi, S., & Summer-field, D. (1996). Experiences of Torture and Ill-Treatment and Posttraumatic Stress Disorder Symptoms among Palestinian Political Prisoners. Journal of Traumatic Stress, 9(3), 595-606. Doi:10.1007/BF02103668
- Saul, J. (2006). Trauma And Performance: Constructing Meaning After Tragedy, Theater of Witness In Lower Manhattan Post 9/11. Trauma and Research Net of the Hamburg Institute for Social Research, St. Mortiz.
- Saul, J. (2007). Promoting community resilience in lower Manhattan after September 11, 2001 [monograph]. American Family Therapy Academy: Systemic Responses to Disaster; Stories of the Aftermath of Hurricane Katrina, winter 2007, 69–75.4
- Sayigh R. (1995). Palestinians in Lebanon: Harsh Present, Uncertain Future. Journal of Palestine Studies, 25(1): 37–54. https://doi.org/10.2307/2538103
- Scarry, E. (1985). The Body in Pain: The Making and Unmaking of the World. Oxford University Press.
- Schacter, D., Gilbert, D., Wegner, D., & Hood, B. (2011). Psychology: European Edition. Macmillan International Higher Education.
- Scheper-Hughes, N., & Wacquant, L (eds.). (2003) Commodifying Bodies. University of California Press.
- Schore, A. (2009). Attachment Trauma and the Developing Right Brain: Origins of Pathological Dissociation. Dissociation And The Dissociative Disorders: Dsm-v And Beyond. Routledge.
- Schudson, M. (1989). How Culture Works: Perspectives from Media Studies on the Efficacy of Symbols. Theory and Society, 18(2): 153-180. https://doi.org/10.1007/BF00160753
- Schwartz, B. (1996). Memory as a Cultural System: Abraham Lincoln in World War II. American Sociological Review, 61(5): 908-927. www.jstor.org/stable/2096461
- Scott, J., Stadling, S (1992). Counselling For Post-traumatic Stress Disorder. Sage Publication.
- Scott, S., & Morgan, D. (1993). Body Matters: Essays on the Sociology of the Body. Falmer.
- Serhan B., Tabari S. (2005). Palestinian Refugee Children and Caregivers in Lebanon. In Chatty D., Lewando Hundt G., (eds.) Children of Palestine: Experiencing Forced Migration in the Middle East (pp. 35-57). Berghahm.
- Shalev, A. Y. (2009). Posttraumatic Stress Disorder and Stress-Related Disorders. Psychiatric Clinics, 32(3), 687-704. DOI: https://doi.org/10.1016/j.psc.2009.06.001

- Sheikh Jarrah's Neighborhood in Jerusalem... The Whole Story. (10/05/2021). Ukraine Gate. https://www.ukrgate.com/
- Sheikh, T. L., Abdulaziz, M., Agunbiade, S., Joseph, I., Ebiti, B., & Adekeye, O. (2015). Correlates of Depression among Internally Displaced Persons after Post-Election Violence in Kaduna, North Western Nigeria. Journal of Affective Disorders, 170, 46-51. https://doi.org/10.1016/j.jad.2014.08.050
- Shilling, C. (1993). The Body and Social Theory. Sage.
- Shmotkin, D., Shrira, A., Goldberg, S. C., & Palgi, Y. (2011). Resilience and Vulnerability among Aging Holocaust Survivors and Their Families: An Intergenerational Overview. Journal of Intergenerational Relationships, 9(1), 7-21.DOI: 10.1080/15350770.2011.544202
- Shukair, A. (2014, January 30) Israeli Psychological Warfare in the Palestinian Territories. Al-Watan Voice. https://pulpit.alwatanvoice.com/content/print/319050.html
- Siriwardhana, C., & Stewart, R. (2013). Forced Migration and Mental Health: Prolonged Internal Displacement, Return Migration And Resilience. International Health, 5(1), 19-23. https://doi.org/10.1093/inthealth/ihs014
- Smith, J., Jarman, M., & Osborn, M. (1999). Doing Interpretative Phenomenological Analysis. In M. Murray & K. Chamberlain (Eds.), Qualitative health psychology: Theories and methods (pp.218-240). Sage.
- Smith, L. (1997). Fools, Martyrs, Traitors: The Story of Martyrdom in the Western World. Knopf.
- Sobani, S. (2007) The development of Palestinian population in the Diaspora and historic Palestine. Ramallah Center for Human Right Studies. (Arabic version)
- Solomon, Z. (1998). Trans-generational effects of the Holocaust: the Israeli research perspective. In Y. Danieli (Ed.), International handbook of multigenerational legacies of trauma (pp. 69–85). Springer.
- Solomon, Z., Kotler, M., & Mikulincer, M. (1988). Combat-Related Posttraumatic Stress Disorder among Second-Generation Holocaust Survivors: Preliminary Findings. American Journal of Psychiatry, 145(7), 865-868. https://doi.org/10.1176/ajp.145.7.865
- Somer, E., & Nizri, M. (2014). Ripples of Trauma and Resilience: Partner Relationships among Second-Generation Survivors of the Holocaust. Kavod: A Journal for Caregivers and Family, (4), 1-7.
- Sorek, T. (2015). Palestinian Commemoration in Israel: Calendars, Monuments, and Martyrs. Stanford University Press.

- Sorscher, N., & Cohen, L. J. (1997). Trauma in Children Of Holocaust Survivors: Transgenerational Effects. American Journal of Orthopsychiatry, 67(3), 493-500. https://doi.org/10.1037/h0080250
- Soto, A. (2008). Vulnerability, Resiliency, and Dignity: Psychosocial Dimensions of the Refugee Experience. Refuge, 25(1), 3–5.
- Sousa, C., Kemp, S., & El-Zuhairi, M. (2019). Place as a Social Determinant of Health: Narratives of Trauma and Homeland among Palestinian Women. British Journal of Social Work, 49, 963–982. Doi: 10.1093/bjsw/bcz049
- Staff, T., Cortellessa, E. (2008, August 25). US Set to Announce It Rejects Palestinian 'Right of Return' — TV Report. Time of Israel. https://www.timesofisrael.com/usset-to-announce-it-rejects-palestinian-right-of-return-tv-report/
- Stamm, B. H., Rudolph, J. M., Dewane, S., Gaines, N., Gorton, K., Paul, G. ... Ercolano, M. (1996). Stressful Life Experiences Screening. In B. H. Stamm (Ed.), Measurement of Stress, Trauma and Adaptation (pp. 317–322). Sidran Press.
- Stauffer, S. (2008). Trauma and Disorganized Attachment in Refugee Children: Integrating Theories and Exploring Treatment Options. Refugee Survey Quarterly, 27(4), 150– 163. doi:10.1093/rsq/hdn057
- Steiner, H., Araujo, K., & Koopman, C. (2001). The Response Evaluation Measure (Rem-71): A New Instrument for the Measurement of Defenses in Adults and Adolescents. American Journal of Psychiatry, 158(3), 467-473. https://doi.org/10.1176/appi.ajp.158.3.467
- Sterzing, C. (Ed.). (2011). Palästina Und Die Palästinenser: 60 Jahre Nach Der Nakba. Heinrich-Böll-Stiftung.
- Stevenson, A. (Ed.). (2010). Oxford Dictionary of English. Oxford University Press.
- Sulayeh, K. & Mormont, C. (2008). The Degree of Facing Violence and its Difference with Depression for the Palestinian Children in Gaza Strip. Journal of Islamic University, 16(2), 925- 947. DOI: http://dx.doi.org/10.33976/iugjhr.v16i2.988
- Suri, R. V. (2012). Trauma, causes of. In Figley, C.R., ed. Encyclopedia of trauma: an interdisciplinary guide (pp.674-675). Sage.
- Tahhan, Z. (2018, January 4). The Naksa: How Israel occupied the whole of Palestine in 1967. Jazeera Media Network. <u>https://www.aljazeera.com/features/2018/6/4/the-naksa-how-israel-occupied-the-whole-of-palestine-in-1967</u>
- Tanous O. (2021). Structural Violence and its Effects on Children Living in War and Armed Conflict Zones: A Palestinian Perspective. International journal of health services : planning, administration, evaluation, 207314211039096. Advance online publication. https://doi.org/10.1177/00207314211039096

- Thabet A., & Vostanis, P. (2000). Post-Traumatic Stress Disorder Reactions in Children of War: A Longitudinal Study. Child Abuse & Neglect, 24, 291- 298. http://dx.doi.org/10.1016/S0145- 2134(99)00127- 1
- Thabet, A. A., Abed, Y., & Vostanis, P. (2002). Emotional Problems in Palestinian Children Living in a War Zone: A Cross-Sectional Study. Lancet (London, England), 359(9320), 1801–1804. https://doi.org/10.1016/S0140-6736(02)08709-3
- Thabet, A., Abu Tawahina, A., El Sarraj, E. (2001). The Impact of House Demolitions on the Mental Health of Children and Mental hardness in the Gaza Strip. Gaza Mental Health Program.
- The Higher Movement Committee, Department of Media and Culture, Palestine (2005). Intifada data: The Palestinian National Liberation Movement – Fatah.
- The National Institute of Mental Health. (2019, May). Post-Traumatic Stress Disorder. https://www.nimh.nih.gov/health/topics/post-traumatic-stress-disorder-ptsd/
- The Plaestinian Central Bureau of Statistics (2010a). Al-Aqsa Intifada Martyrs. The Palestinian National Authority.
- The Plaestinian Central Bureau of Statistics (2010b). Report-The Number of Damaged Buildings. The Palestinian National Authority.
- The Tragedy of Sheikh Jarrah in Jerusalem...The Whole Story (Report). (2021 May, 6). Anadolu Agency. https://www.aa.com.tr/
- The United Nations Relief and Works Agency for Palestine Refugees (UNRWA). (2019, February). www.unrwa.org/palestine-refugees
- The United Nations Relief and Works Agency for Palestine Refugees (UNRWA). (2014, June). UNRWA Launches Ramadan Appeal for Palestine Refugees in Syria. http://www.unrwa.org/newsroom/press-releases/unrwa-launches-ramadan-appeal-palestine-refugees-syria-0
- The Village Of Al-Araqib Was Demolished For The 174th Time. (2020 February, 6). Arab48. www.arab48.com
- Tierney, L. M., McPhee, S. J., Papadakis, M. A. (2005). Current Medical Diagnosis & Treatment. Lange Medical Books.
- Tiltnes A. A. (2007) A Socio-Economic Profile of the Nahr El-Bared and Beddawi Refugee Camps of Lebanon. Fafo Institute for Applied International Studies.
- Tiltnes A. A., Zhang H. (2013) Progress, Challenges, Diversity Insights into the Socio-Economic Conditions of Palestinian Refugees in Jordan. Fafo Institute for Applied International Studies.

- Todorova, T. (2013). Bearing Witness to Al-Nakba in a Time of Denial In Matar, Dina And Harb, Zahra, Eds., Narrating Conflict in the Middle East: Discourse, Image and Communication Practices in Lebanon and Palestine. I.B. Tauris.
- Torres-Solanot, M. (2014, September 25). Palestina: La Llave Del Retorno. Palestina Libre Organization. www.palestinalibre.org/articulo.php?a=52706
- Tosone, C. (Ed.). (2021). Shared Trauma, Shared Resilience during a Pandemic: Social work in the time of COVID-19. Springer.
- Tovy, J. (2015). Destruction and Accounting: The State of Israel and the Reparations from Germany 1949 1953. Tel Aviv and Ramat Gan: Tel Aviv University and Bar-Ilan University.
- Tovy, J. (2020). Don't buy Volkswagen! The Herut Movement and the question of Israel-Germany relations 1951–1965. Holocaust Studies, 26(3), 283-305. https://doi.org/10.1080/17504902.2019.1582891
- Trijsburg, R. W., Spijker, A. V., Van, H. L., Hesselink, A. J., Duivenvoorden, H. J. (2000).
 Measuring Overall Defensive Functioning with the Defense Style Questionnaire.
 The Journal of Nervous and Mental Disease, 188(7), 432–439. DOI: 10.1097/00005053-200007000-00007
- Turner, B. (1984). The Body and Society: Explorations in Social Theory. Blackwell.
- U.S. Department of Health and Human Services (2014). Trauma-informed Care in Behavioral Health Services. Treatment Improvement Protocol (TIP) Series 57. HHS Publication No. (SMA) 13-4801. Center for Substance Abuse Treatment: Substance Abuse and Mental Health Services Administration.
- Ugland O. (2003). Difficult past, Uncertain Future: Living Conditions among Palestinian Refugees in Camps and Gatherings in Lebanon. Fafo Institute for Applied International Studies.
- Umer, M., & Elliot, D. (2019). Being Hopeful: Exploring the Dynamics of Post-traumatic Growth and Hope in Refugees. Journal of Refugee Studies, 1-23. DOI:10.1093/jrs/fez002
- United Nations (1948). United Nations General Assembly Resolution 194 (III). Geneva.
- United Nations Palestinian Rights Committee (UNPRC). (1978). The Right of Return of the Palestinian People. United Nations Information System on the Question of Palestine.https://unispal.un.org/UNISPAL.NSF/0/805C731452035912852569D100 5C1201
- United Nations Relief and Works Agency for Palestine Refugees in the Near East. (2019, December). Palestine Refugees. https://www.unrwa.org/palestine-refugees

- United Nations Relief and Works Agency for Palestine Refugees in the Near East-UNRWA. (2020, May). Distribution of Palestinian Refugee Camps in the West Bank and Gaza Strip. https://www.unrwa.org/where-we-work
- United Nations. (2018, November 9). The Question of Palestine: UNRWA Faces Greatest Financial Crisis in Its History Following 2018 Funding Cuts. <u>https://www.un.org/</u>
- UNRWA. (2017, July). Palestinian Refugee Camps. <u>https://search.un.org/results.php?query=refugee</u>
- UNRWA. (2020, May). Palestine Refugees. https://www.unrwa.org/palestine-refugees2
- Updegraff, J., Silver, R., & Holman, E. (2008). Searching For And Finding Meaning In Collective Trauma: Results From A National Longitudinal Study Of The 9/11 Terrorist Attacks. J Pers Soc Psychol, 95(3):709-22. Doi: 10.1037/0022-3514.95.3.709
- Vaage, A., Thomsen, P., Rousseau, C., Wentzel-Larsen, T., Ta, T., & Hauff, E. (2011). Paternal Predictors of the Mental Health of Children of Vietnamese Refugees. Child and Adolescent Psychiatry and Mental Health, 5(2), 1-11. https://doi.org/10.1186/1753-2000-5-2
- Vaillant, G. (1992). Ego Mechanisms of Defense: A Guide for Clinicians and Researchers. American Psychiatric Publishing.
- Valentine, K. (2005). Citizenship, Identity, Blood Donation. Body & Society, 11(2): 113-128. https://doi.org/10.1177/1357034X05052464
- Van Der Kolk, B. A., Blitz, R., Burr, W., & Hartmann, E. (1984). Nightmares and Trauma. American Journal of Psychiatry, 141, 187-190.
- Van Heemstra, H. E., Scholte, W. F., Ehring, T., & Boelen, P. A. (2020). Contextualizing Cognitions: the Relation between Negative Post-traumatic Cognitions and Posttraumatic Stress among Palestinian Refugees. International Journal of Cognitive Therapy, 1-14. https://doi.org/10.1007/s41811-020-00066-7
- Veronese, G., Castiglioni, M., Tombolani, M., & Said, M. (2011). "My happiness is the refugee camp, my future Palestine": Optimism, life satisfaction and perceived happiness in a group of Palestinian children. Scandinavian Journal of Caring Sciences, 26(3), 467–473. https://doi.org/10.1111/j.1471-6712.2011.00951.x.
- Veronese, G., Sousa, C., & Cavazzoni, F. (2021). Survival and Resilience among Palestinian Women: A Qualitative Analysis Using Individual and Collective Life Events Calendars. Violence against Women, 27(6-7), 900-917. https://doi.org/10.1177/1077801220914406

- Vignoles, V. L., Regalia, C., Manzi, C., Golledge, J., and Scabini, E. (2006). Beyond Self-Esteem: Influence of Multiple Motives on Identity Construction. J. Pers. Soc. Psychol. 90, 308–333. Doi: 10.1037/0022-3514.90.2.308
- Volkan, V. (ed.) (1997). Chosen Trauma: Unresolved Mourning. Bloodlines: From Ethnic Pride to Ethnic Terrorism. Farrar, Straus, & Giroux.
- Wagner-Pacifici, R., & Schwartz, B. (1991). The Vietnam Veterans Memorial: commemorating a difficult past. American journal of Sociology, 97(2): 376-420. https://doi.org/10.1086/229783
- Waqas, A., Rehman, A., Malik, A., Muhammad, U., Khan, S., Mahmood, N. (2015). Association of Ego Defense Mechanisms with Academic Performance, Anxiety and Depression in Medical Students: A Mixed Methods Study. Cureus, 7(9):e337. doi:10.7759/cureus.337
- Weber, M. [1922] (1978). Economy and Society. Berkeley: University of California Press.
- White, G. D. (2013). Conflict in Syria compounds vulnerability of Palestine refugees. Forced Migration Review, (44), S11.
- White, J., Manderson, L., Newman, L., Melvin, G. (2020). Understandings of Trauma: Contrasting Sudanese Refugees and Holocaust Survivors. Journal of Refugee Studies, 0, (0), 1-14. Doi:10.1093/jrs/feaa019
- Wiese, E. (2010). Culture and migration: Psychological Trauma in Children and Adolescents. Traumatology, 16(4), 142-152. Doi: 10.1177/1534765610388304
- Zahran, H. (1978). Applied Psychology [Eulim Alnafs Altatbiqi]. Dar A'alam Al-Kotob. (Arabic Version)
- Zerubavel, Y. (1995). Recovered Roots: Collective Memory and the Making of Israeli National Tradition. University of Chicago Press.
- Ziegler-Graham, K., MacKenzie, E. J., Ephraim, P. L., Travison, T. G., & Brookmeyer, R. (2008). Estimating the prevalence of limb loss in the United States: 2005 to 2050. Archives of physical medicine and rehabilitation, 89(3), 422-429. https://doi.org/10.1016/j.apmr.2007.11.005
- Zughair, R. (2010). Mental Health and Mental Illness [Alsihat Alnafsiat Walmarad Alnafsiu]. Al-Thaqafa Publishing & Distribution House. (Arabic Version)

Appendix (a). Sample Size Calculator



Request Your Free Quote

Research Aids

Research Aids

- Sample Size Calculator
- Sample Size Formula
- Significance
- Survey Design
- Correlation

"Best Survey Software"



TopTenReviews selected The Survey System as the Best Survey Software.

"The Survey System gains our highest marks for survey creation, analysis and administration methods, making it the best survey software in our ranking... This is the only product in our lineup that offers all features and tools we considered. For these reasons, The Survey System earns our TopTenREVIEWS Gold Award." <u>Read More</u>

Sample Size Calculator

This Sample Size Calculator is presented as a public service of Creative Research Systems <u>survey</u> <u>software</u>. You can use it to determine how many people you need to interview in order to get results that reflect the target population as precisely as needed. You can also find the level of precision you have in an existing sample.

Before using the sample size calculator, there are two terms that you need to know. These are: **confidence interval** and **confidence level**. If you are not familiar with these terms, <u>click here</u>. To learn more about the factors that affect the size of confidence intervals, <u>click here</u>.

Enter your choices in a calculator below to find the sample size you need or the confidence interval you have. Leave the Population box blank, if the population is very large or unknown.

Determine Sample S	ize
Confidence Level:	● 95% ○ 99%
Confidence Interval:	2.5
Population:	12182
Calculate	Clear
Sample size needed:	1365

Appendix (b). Questionnaire in English

The University of Granada Faculty of Social Sciences Doctoral Program in Migration Studies



Traumatic Experiences of the Nakba after 72 Years As Perceived By the First Generation

Dear Refugee,

The researcher is carrying out a first of its kind study in the country titled, **"Traumatic experiences of the Nakba after 72 years as perceived by the first generation"** as part of partial fulfillment for the requirement to obtain a Doctorate of Philosophy in Migration Studies. You were selected to be part of the study. Therefore, I highly appreciate your cooperation to fill out the attached questionnaire according to your own views. The study data will be used for research purposes only and it will be kept confidential. You are not requested to write your name or anything that denotes it.

Thank you for your cooperation.

Prepared By: Iyad Khamaysa Supervised By: Prof. Dr. Francisco Entrena Durán

Section One: General information

Please circle the answer that applies to you.

1)	Age		
2)	Gender	1. Male	2. Female
3)	Degree of religion	1. Practi	cing (Pious) 2. Practicing to certain extent (Middle) 3.
	Non practicing		
4)	Social Status	1. Single 2. Marri	ied 3. Other
5)	Number of children		
6)	Education level	1. Elementary and	d below 2. Secondary 3. Diploma 4. BA and above
7)	Region	1. West Bank 2. 0	Gaza Strip

Section two: questionnaire items

Please answer the following questions according to the following scale (1= Strongly agree, 2= Agree, 3= Neutral, 4= Disagree, 5= Strongly disagree)

No.	Traumatic Experiences	SA	Α	N	D	SD
1.	I was at risk of death					
2.	I was physically injured					
3.	I was hurt psychologically					
4.	I saw a case of torture					
5.	I saw a murder case					
6.	I was tortured in different forms					
7.	I was insulted					
8.	I lost consciousness					
9.	I was threatened					
10.	I was arrested					
11.	I was deprived of sleep					
12.	I exposed to extreme hot					
13.	I deprived of medical care					
14.	I exposed to extreme cold					
15.	I deprived of the food					

16.	I deprived of the water		
17.	I deprived of shower		
18.	I deprived of performing prayer		
19.	I deprived of my need		
20.	I was shot		
21.	I saw the devastation in my town		
22.	I saw our house destroyed		
23.	I used as human shields		
24.	I saw the massacres committed against Palestinians		
25.	I saw artillery shelling of destroyed Palestinian villages and cities		
26.	I recall the Nakba event		
27.	I have trouble sleeping related to images and thoughts of the Nakba		
28.	There are things that remind me of the Nakba		
29.	I get angry when I remember issues related to the Nakba		
30.	I get upset when I think of the Nakba event or remember it		
31.	I think of the Nakba event unintentionally		
32.	I feel I'm living the moment of the Nakba		
33.	I cannot express my feelings toward the Nakba		
34.	I have the feeling that the Nakba will happen again		
35.	The images of the Nakba do not disappear from my memory		
36.	I feel sorry for what happened to the Palestinians in the Nakba of displacement and loss		
37.	I feel that the Nakba event was not a natural issue		
38.	I am surprised by images of the Nakba incident in my mind		
Ľ		1 I	

39.	I feel very emotional when I remember the Nakba			
40.	I try not thinking about the Nakba event			
41.	Remembering the Nakba event causes physical reactions for me mostly difficulty breathing, increased heartbeat, and dizziness			
42.	I have disturbing dreams related to the Nakba			
43.	I avoid talking about the Nakba			
44.	I avoid situations that remind me of the Nakba			
45.	I will never forget the Nakba event			
46.	I think of the Nakba event with every pessimism year after year			

Please add any other notes in this regard after 72 years on the Nakba?

•••••	 	
		••••••

Thank you for your cooperation,

Iyad Khamaysa

Appendix (c). Questionnaire in Arabic



بسم الله الرحمن الرحيم

جامعة غرناطة، اسبانيا كلية العلوم الاجتماعية برنامج الدكتوراه في دراسات الهجرة

أخي اللاجئ / أختي اللاجئة

تحية وبعد،،،

يقوم الباحث بإجراء دراسة حول "الخبرات الصادمة لحدث النكبة كما يدركها الجيل الأول بعد مرور اثنان وسبعون عاماً، وقد وقع عليك الاختيار عشوائياً لتكون ضمن عينة الدراسة، لذا أرجو منك التعاون بتعبئة هذه الاستبانة بما يتوافق مع وجهة نظرك، علماً بأن بيانات الدراسة هي لأغراض البحث العلمي فقط، وسيتم الحفاظ على سريتها، ولا يطلب منك كتابة اسمك أو ما يشير اليك، شاكرين لك حسن تعاونك.

القسم الأول: معلومات عامة

الرجاء وضع دائرة حول رمز الإجابة التي تنطبق عليك

العمر سنة.
 الجنس 1. ذكر 2. أنثى
 درجة التدين 1. متدين 2. متدين إلى حد ما 3. غير متدين
 درجة التدين 1. متدين 2. متزوج/ة 3. غير دلك
 الحالة الاجتماعية 1. أعزب/اء 2. متزوج/ة 3. دبلوم 4. بكالوريوس فأعلى
 المؤهل العلمي 1. أساسي فما دون 2. ثانوي 3. دبلوم 4. بكالوريوس فأعلى
 مكان الاقامة 1. الضفة الغربية 2. قطاع غزة

القسم الثاني: فقرات الإستبانة

نرجو منك قراءة الفقرات الآتية بعناية، والاجابة عنها بوضع رمز × عند الاجابة التي تراها / ترينها مناسبة.

غير موافق بشدة	غير موافق	لا أوافق ولا أرفض	موافق	موافق بشدة	الفقرات	الرقم
					تعرضت لخطر الموت	.1
					تعرضت للإصابة الجسدية	.2
					تعرضت لأذى نفسي	.3
					شاهدت حالة تعذيب	.4
					شاهدت حالة قتل	.5
					تعرضت للتعذيب بمختلف أشكاله	.6
					تعرضت للاهانة والشتيمة	.7
					فقدت الوعي	.8
					تعرضت للتهديد	.9
					تعرضت للاعتقال	.10
					حرمت من النوم	.11
					تعرضت للحرارة الشديدة	.12
					حرمت من الرعاية الطبية	.13
					تعرضت للبرد الشديد	.14
					حرمت من الطعام	.15
					حرمت من الماء	
					حرمت من الاستحمام	
					حرمت من أداء الصلاة	.18
				<u> </u>	حرمت من قضاء حاجتي	.19
					تعرضت لإطلاق النار	.20

شاهدت الدمار الذي حل ببلدتي	.21
شاهدت بيتنا وهو يدمر	.22
استخدمت كدروع بشرية	.23
شاهدت المجازر التي ارتكبت بحق الفلسطينيين	.24
رأيت القصف المدفعي للقرى والمدن الفلسطينية المدمرة	.25
(استرجع حدث النكبة (أعيش أحداث النكبة في داخلي	.26
لدي مشاكل في النوم بسبب صور أو أفكار تتعلق بحدث النكبة	.27
هناك أشياء تذكرني بحدث النكبة	.28
أغضب عندما أتذكركل ما له علاقة بالنكبة	.29
أنزعج عندما أفكر بحدث النكبة أو أتذكره	.30
أفكر بحدث النكبة دون قصد	.31
أشعر وكأنني أعيش لحظة حدث النكبة	.32
لا أستطيع التعبير عن مشاعري تجاه حدث النكبة	.33
تنتابني مشاعر داخلية أن حدث النكبة سيحدث مرة أخرى	.34
ري صور النكبة لا تغيب عن ذاكرتي	.35
أشعر بالأسى على ما حل بالفلسطينيين في النكبة من تشرد وضياع	.36
أشعر بأن حدث النكبة لم يكن شيئاً طبيعياً	.37
أتفاجيء بصور متعلقة بحدث النكبة في ذهني	.38
تنتابني مشاعر انفعالية سيئة عندما أتذكر حدث النكبة	.39
أحاول عدم التفكير بحدث النكبة	.40
تذكري لحدث النكبة يسبب لي ردود فعل جسدية مثل ((صعوبة في التنفس، زيادة ضريات القلب، دوخة	.41
تراودني أحلام مزعجة تتعلق بحدث النكبة	.42

		أتجنب الحديث عن حدث النكبة	.43
		أتجنب المواقف التي تذكرني بحدث النكبة	.44
		لن أنسى حدث النكبة ما حييت	.45
		أفكر بحدث النكبة بكل تشاؤم عاماً بعد عام	.46

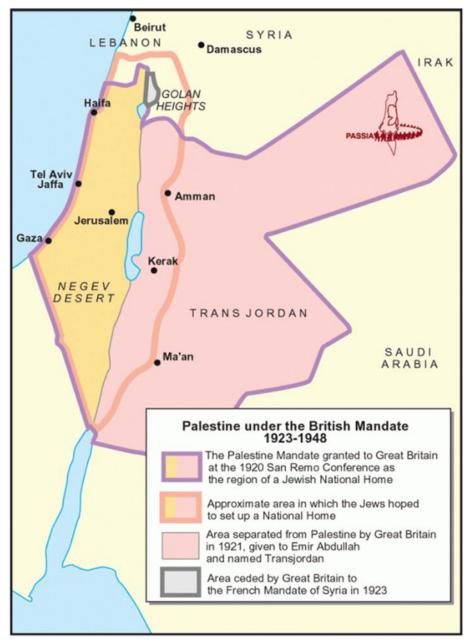
أرجو إضافة أية ملاحظات أخرى بهذا الخصوص بعد مرور اثنان وسبعون عاماً على النكبة؟

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اياد خمايسه

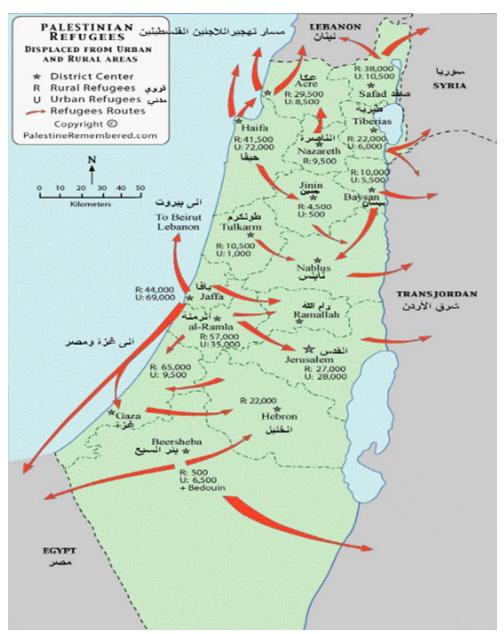
No.	Professor's name	University	Country
1.	Francisco Entrena Durán	University of Granada	Spain
2.	Sobhi Albadawi	Macquarie University	Australia
3.	Hasan Yahya	Michigan State University and	USA
		Jackson Community College	
4.	Abdel Aziz Mousa Thabet	York University	Canada
5.	Tiziana Chiappelli	University of Florence	Italy
6.	Hassan Karaki	Lebanese University	Lebanon
7.	Mohamad Toufic Houri	Beirut Arab University	Lebanon
8.	Mohamed Shishtawy	Benha University	Egypt
9.	Abdelmajid Naceur	Tunis University	Tunis
10.	Ayat Nashwan	Yarmouk University	Amman
11.	Kamel Lahmar	Mohamed Lamine Debaghine Setif 2	Algeria
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12.	Sharif Kana'na	Birzeit University	Palestine
13.	Bassam Yousef Ibrahim	Al-Quds University	Palestine
	Banat		
14.	Mahmoud Hammad	Al-Quds University	Palestine
15.	Rabee Owais	Al-Quds University	Palestine
16.	Hasan Barmil	Al-Quds Open University	Palestine
17.	Mohammed Namourah	Al-Quds Open University	Palestine
18.	Khaled Katalo	Al-Quds Open University	Palestine

Appendix (d). Group of Referees and Expert Arbitrators.



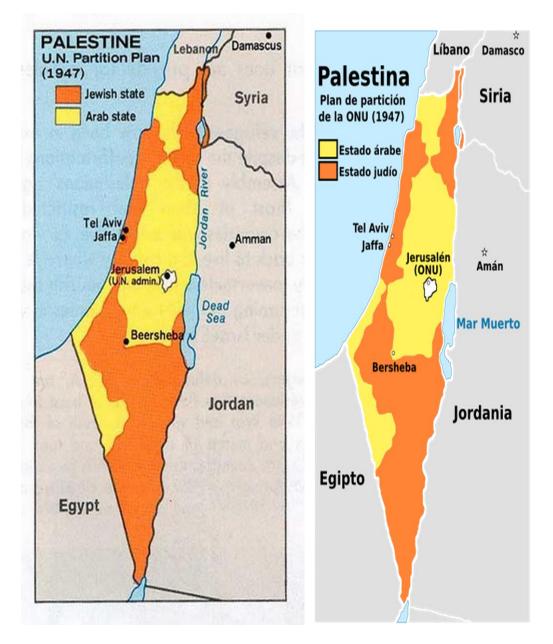
Appendix (e). Palestine under the British Mandate, 1923-1948.

Palestinian Academic Society for the Study of International Affairs (PASSIA)



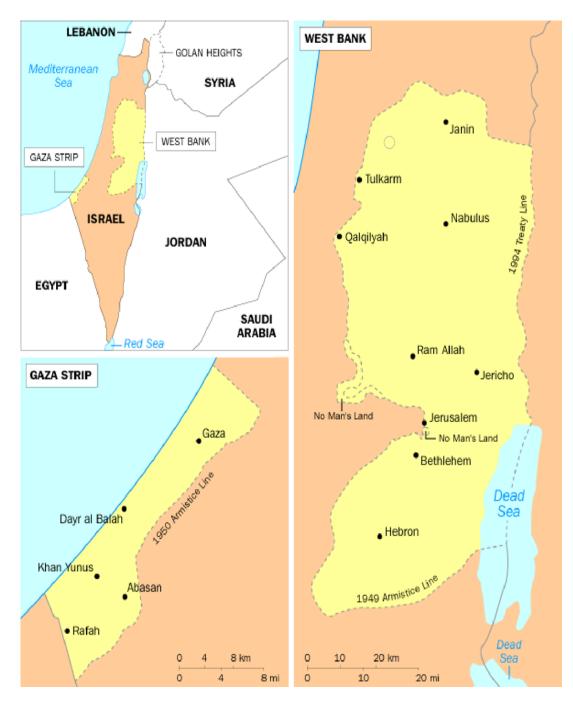
Appendix (f). Palestinian Refugees: Displaced from Urban and Rural Areas.

(Palestine in Arabic - Maps, 2000)



Appendix (g). Palestine UN Partition Plan, 1947.

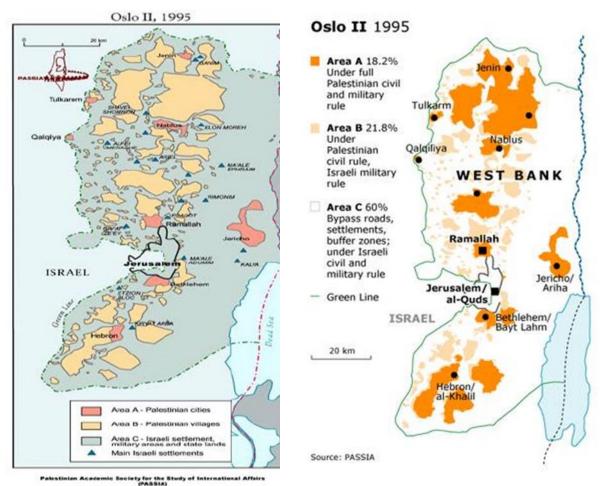
(Passia, 2002)



Appendix (h). Palestine: West Bank and Gaza Strip.

(Passia, 2002)

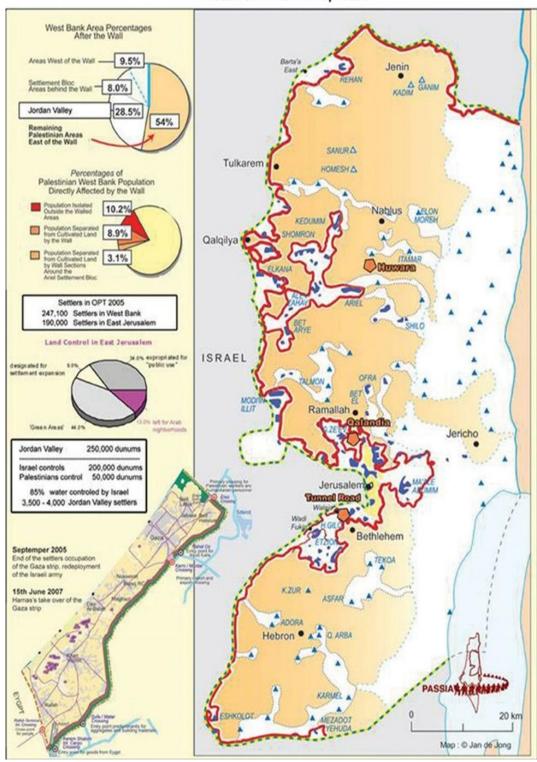
Appendix (i). The Oslo Accords between Palestinians and Israelis.



(PASSIA)

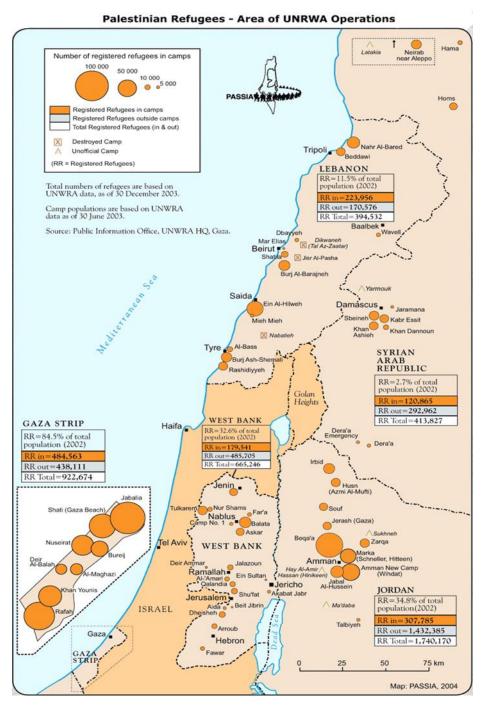
(Passia, 2002)

Appendix (j). Palestine: West Bank Separation Wall.

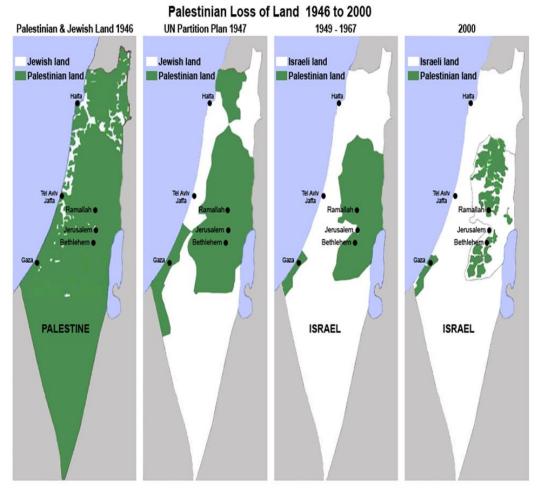


West Bank Wall - Map 2006

Appendix (k). Palestinian Refugee Camps.



(UNRWA, 2017)



Appendix (l). Palestinian Loss of Land, 1946-2000.

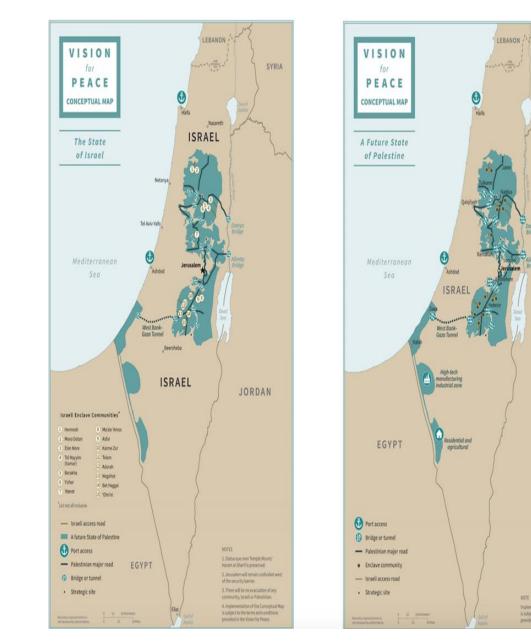
(Passia, 2002)

Appendix (m). Vision For Peace Conceptual Map: Trump's Israeli-Palestinian Peace Plan 2020.

SYRIA

All Muslims who come in peace will be welcome to visit and pray at the al-Aqsa Mosque.

JORDAN



(Cramer, 2020)

Appendix (n). Facilitating Mission Letter for Data Collection.



January 1, 2021

To Whom It May Concern

This is to certify that Mr. Iyad S. M. Khamaysa is PhD candidate in the program Migration Studies, University of Granada, Spain. He is Conducting Survey titled: *"Traumatic Experiences of the Catastrophe–Nakba–after 73 Years as Perceived by the First Generation"* as a part of partial fulfillment of the requirements to obtain a doctorate degree in Migration Studies.

I highly appreciated your assistance in facilitating his mission in this important subject, which will have a significant impact on the Palestinian Society and scholarly research in general.

Thank you for your anticipated cooperation.

Prof. Dr. Francisco Entrena Durán Department of Sociology University of Granada

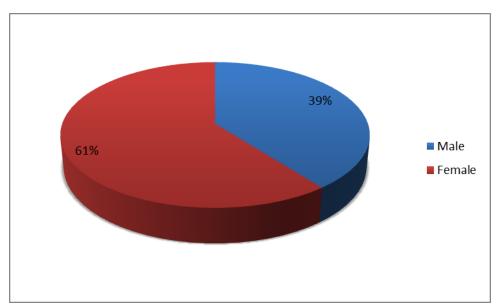


Figure (2). Distribution of the participants by gender.

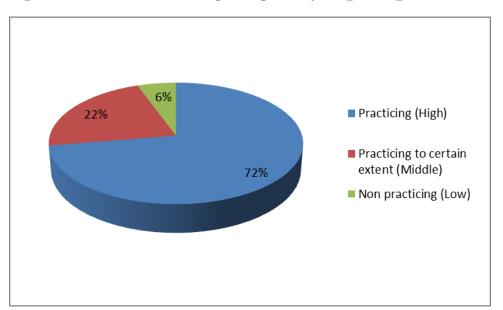


Figure (3). Distribution of the participants by religion degree.

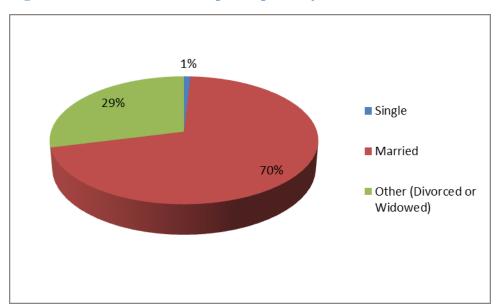


Figure (4). Distribution of the participants by social status.

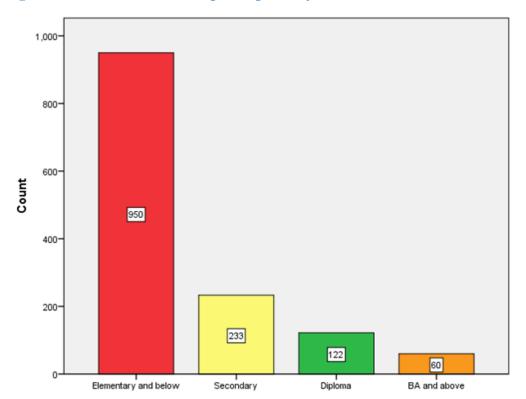


Figure (5). Distribution of the participants by educational level.

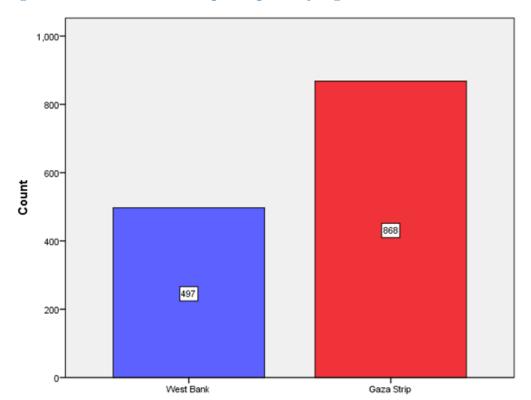


Figure (6). Distribution of the participants by region.

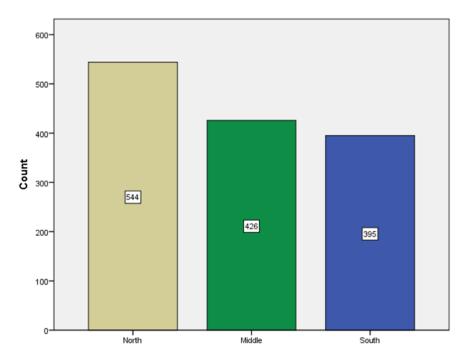


Figure (7). Distribution of the participants by place of residence.

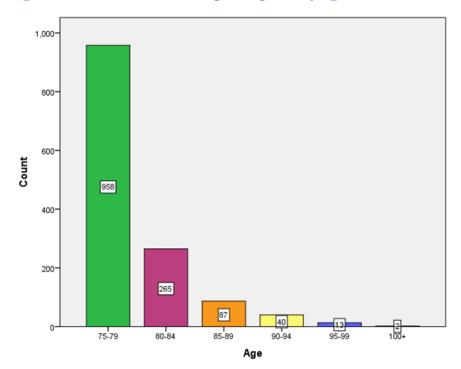


Figure (8). Distribution of the participants by age.

Figure (9). Indicators of traumatic experiences of the catastrophe –Nakba– after 72 years as perceived by the first generation.

