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Structural violence and sources of resistance among Palestinian children living under military occupation and political oppression

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ABSTRACT

The ongoing occupation in Palestine involves structural colonial oppression over the native population, depriving Palestinians of fundamental human rights. The set of political, social, economic, and environmental factors that result from the occupation has a lasting direct and indirect effect on the well-being of the children exposed to systematic violence. In this study, we explored the effect of systematic violence and military oppression in a group of 22 school-aged youths (M = 12.2; SD = 2.69, 45.5% girls) living in the West Bank. We identified factors associated with children's maladjustment to potentially traumatic environments and survival skills following a socio-ecological lens. Data were collected through biographical participative interviews. The TCA identified six themes: the pervasiveness of the Israeli violence; the unexpected costs of the pandemic; victims and perpetrators of intra-community violence; everyday acts of happiness (or normalcy); support from families, peers, and community; subverting negative situations, and fighting back. Children emerged as continuously engaged in adjustment and readjustment to inhuman living conditions, making normal what is abnormal in their development. The study draws attention to the political antecedent and determinants of the Palestinian children's actions and reactions to violence, highlighting the impossibility of exploring children's growth while avoiding political and human rights implications.

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Childhood; settler colonialism; oppression; well-being; narrrative instruments

Introduction

There are millions of children affected by armed conflict and political violence around the world, with the number estimated to reach 1.6 billion children, according to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA, 2019). The complex set of political, social, economic, and environmental factors resulting from the armed conflict has lasting direct and indirect effects on the physical and mental health of the children exposed, making it an issue of international concern

(Marcal, 2003). While education, health, and human security are among the central pillars of human rights, they are constantly undermined in armed conflict and political violence situations, jeopardizing the healthy psychosocial development of children and youths (Ehntholt & Yule, 2006; Rabaia et al., 2019). To date, the literature has extensively documented many social and psychological impairments in children and youths due to exposure to political violence and military oppression (Betancourt & Khan, 2008; Dimitry, 2012). Post-traumatic stress disorder is used to notify those situations characterized by re-experiencing the traumatic events faced by victims (e.g., flashbacks, repetitive thoughts), avoidance of trauma-related situations or memories, numbing of emotions, and increased arousal resulting in sleep and concentration-related problems (Itani et al., 2017; Kadir et al., 2019). In addition, symptoms commonly reported are those related to excessive anxiety (Montgomery & Foldspang, 2005; Yayan et al., 2020), depression (Kar, 2019; Oppedal et al., 2018), and emotional dysregulation resulting in a higher frequency of aggressive behaviors (Bosqui et al., 2017; Khamis, 2019). Exposure to armed conflict and intra-community violence has been widely linked within the literature (Cummings et al., 2017; Nuttman-Shwartz, 2019).

Especially in the last two decades, we find a heated debate about this prevalent focus on psychiatric disorders resulting from exposure to political violence. On the one hand, an exclusive emphasis on diagnosis and pathology risks ignoring children's capacities and resources to resist and reconstruct positive meanings (Betancourt & Khan, 2008; Cavazzoni et al., 2020; Veronese, Cavazzoni, et al., 2021). Indeed, the extreme pathologizing and victimizing children exposed to political violence threatens to deflect attention from children's resilience, recovery, and agentic capacities (Chatty, 2009; Punamaki, 2000). Aspects such as community resources, social support, ideological commitment, and sense of identity are often overlooked as mediating factors concerning the development of psychiatric disorders (Barber, 2008; Veronese et al., 2018). On the other hand, this focus on the pathology and symptoms of the individual, almost as the one responsible for their suffering, obscures attention from a more global discourse on the real cause of distress, such as military oppression and human rights violations (Jabr, 2018; Peltonen & Punamäki, 2010; Summerfield, 2002). The literature has long focused on the effects of violence on the individual and the microsystem, decontextualizing it from the larger, concurrent, and political environment in which it is embedded (Barber et al., 2014). Instead, frequency, duration, and proximity of exposure and the type, meaning or normativity of the violence experienced are crucial aspects of investigating to understand its impact (Smith et al., 2009). For example, Brunette and Figley (2017) have emphasized the importance of considering its aspects of continuity: historical oppression spans several generations and has its specific characteristics. It includes historical trauma and proximal factors that perpetuate oppression, such as marginalization, discrimination, poverty, and microaggressions (e.g., daily injustice and harassment, racism) (Evans-Campbell, 2008; Jabr, 2018; Walters & Simoni, 2009).

Communication sciences have been focused on the capabilities of individuals to experience war and systemic violence to react and reorganize affects and meanings in the wake of systematic oppression and dispossession (Buzzanell, 2010). Accordingly, in the Palestinian experience normalizing the abnormal might be considered a resilience strategy that individuals and communities foster to regain control of a reality characterized by uncertainty and transgenerational trauma (Buzzanell, 2018; Nguyen-Gillham

et al., 2008). Secondly, people tend to anchor their identities in a system of beliefs and traditions that guarantee continuity and coherence over uncertainty and identitarian fragmentation (Black & Lobo, 2008). In the case of a collectivistic society such as the Palestinian, when families maintain good levels of cohesion and communication, communal coping strategies and a sense of community enact well-being and functioning, contrasting historical and ongoing trauma and uncertainty both in Israel/Palestine and in the diaspora (Afifi et al., 2013, 2019). In contrast, a lack of communication in expressing the collective trauma might expand uncertainty, mistrust and insecurity (Afifi et al., 2016). Hence, in the Palestinian master narrative, the normalcy became the resistance to existence both individually and collectively (Rijke & Van Teeffelen, 2014). Therefore, Palestinian children engage in everyday acts of resistance that foster resilience and steadfastness against physical, psychological and cultural subjugation (Marshall, 2013). Resilience is displayed through simple gestures of familial kindness, micro-spatial reappropriations of expropriated (land, roads, and dwellings), for example, either during youths' demonstrations, collective ceremonies, weddings or cultural events, or time-honored family visits and trips (Simaan, 2018; Veronese et al., 2018; Veronese et al., 2017; Veronese et al., 2019). Such forms of everyday "resilient resistance" (sumud) challenge colonial powers' structures that aim at inferiorizing, passivizing and subjugating the colonized, controlling and dominating their airspace, ground and underground (Weizman, 2012). Settler colonialism systematically annihilates the axial structure of the indigenous patriarchal masculine traditional society through imprisonment, expulsion from the land and the job market, and humiliation that target mainly adults and men (Marshall & Sousa, 2017). Thus, children and youths try to creatively reinvent their psycho-emotional spaces through performative acts of resistance in daily agentic practices to reaffirm their competence and identity anchors for redemption and cultural resistance (Buzzanell, 2021).

From this perspective, it becomes crucial – for the present study – to briefly contextualize the kind of violence in Palestine, a context in which the dynamics of domination have characterized inter-communal relations for over 70 years (Kemp, 2020a). Ethnicpolitical violence in Palestine has been going on for more than three generations, subjecting children and adults to daily humiliation, violence, traumatic loss, and traumatized parenthood, hardly captured by the mainstream post-traumatic stress disorder diagnosis (Barron & Abdallah, 2015).

Palestinian children and the Israeli military violence

"Invasion is a structure, not an event" (Wolfe, 2006, p. 388). So, the United Nations has defined the Occupied Palestinian Territories (oPt) following the 1967 Israeli occupation, which occurred mainly in the West Bank and Gaza Strip (Giacaman et al., 2009). Following the British Mandate and the creation of the State of Israel in 1948, today, about 4.6 million Palestinians live as refugees, about 1.8 million in the OPT and the remaining 2.8 million in Lebanon, Syria, and Jordan (Sabatinelli et al., 2009). Since then, the Israeli government's policies of occupation and oppression of the Palestinian population can be understood by stepping outside the conventionally adopted "lens of exceptionalism" (Busbridge, 2018) but through settler-colonial studies (Busbridge, 2018; Greenstein, 2019). Just as settler colonialism does not follow the logic of exploitation but that of the elimination of the native population (Busbridge, 2018; Veracini, 2011), Israel's expansionist policy within Palestinian lands has increased every year since following 1948, through the construction of settlements, the demolition of Palestinian homes, and the expropriation of land (Bosqui et al., 2017; Salamanca et al., 2012; Shihade, 2012).

Oppression is defined as a "state of asymmetric power relations characterized by domination, subordination, and resistance, where the dominating persons or groups exercise their power by restricting access to material resources and by implanting in the subordinated persons or groups fear or self-deprecating views about themselves" (Prilleltensky & Gonick, 1996, p. 130). The ongoing military occupation involves structural colonial oppression over the Palestinian population (Busbridge, 2018). Palestinians are deprived of every basic right and are continuously at risk for their safety, of losing their lives, their homes, their land, as well as their ability to provide for the social and economic wellbeing of their families (Itani et al., 2017; Shalhoub-Kevorkian & Odej, 2018). In addition, actions such as curfews, daily invasions, movement restrictions, arbitrary checkpoint closures, and humiliations add to psychological, economic, physical, and cultural oppression and a geographic and family/community fragmentation (Barron & Abdallah, 2015; Shalhoub-Kevorkian & Odej, 2018). Furthermore, the attempt to criminalize, incarcerate, and legislate to remove the native population from the community and territory is the order of the day, including children (Kovner & Shalhoub-Kevorkian, 2018; Shalhoub-Kevorkian, 2015). As of August 31, 2020, according to data from the Israeli Prison Service, Israel held 4207 Palestinians in custody for "security" offences, including 153 children, and 355 in administrative detention without trial or formal charges (HRW, 2021a, 2021b). Studies of colonialism highlight how attacks on children have always played a prominent role (Fournier & Crey, 1997; Smith, 2004).

These conditions place individuals at risk for developing psychological disorders and distress, especially in the younger population (Bronstein & Montgomery, 2011). In addition to concerns for personal safety and the safety of loved ones, difficulties related to access to healthcare, education, movement, and experiences of discrimination have been linked to increased stress, anger, frustration, persecutory thoughts, and fear (Bryant-Davis & Ocampo, 2005; Cummings et al., 2017).

Numerous studies document the high rates of psychological and psychiatric disorders in Palestine, with high trauma-like symptoms, depression, aggressive behaviors, sleep and concentration disorders, and anxiety (El-Khodary & Samara, 2020; Thabet et al., 2018). However, especially in recent years, it is also possible to find scholars highlighting several protective factors concerning the effects of ethnic and political violence on children's psychological and behavioral development (Mahamid, 2020; Veronese et al., 2020). Freire (1970) previously described that indigenous peoples have never been passive recipients of historical trauma but have resisted oppression by demonstrating agency and resilience (Brunette & Figley, 2017). Active resistance, the ability to make meaning of lived experience, family and social support, a dynamic relationship with culture and community, as well as ideological engagement have all been highlighted as critical mediating factors (Cavazzoni et al., 2021; Shalhoub-Kevorkian & Odej, 2018). Care and support within the family (nuclear and extended) have been documented as protectors of mental health (Diab, Veronese, et al., 2018). Similarly, culture and community provide essential tools for "healing", though, for example, a sense of belonging and rebuilding, which can help the child recover (Punamäki et al., 2001; Veronese, Dhaouadi,

et al., 2021). Indeed, Palestinian history and community inspire generations and give a sense of collective purpose and pride (Harrold, 2020; Kemp & Pinto, 2009). Alongside family and community, school and education provide normalcy and opportunities for learning and competencies to overcome everyday challenges (Nguyen-Gillham et al., 2008; Veronese & Cavazzoni, 2020). Similarly, ideological engagement and resistance are ongoing efforts to respond to and transcend historical oppression and react to their own and their fathers' humiliation (El Sarraj, 1996; Kemp, 2020b; Kemp & Pinto, 2009). For example, Harrold (2020) notes how young people's ability to sustain the Great March of Return (Friday march against the occupation) in the Gaza Strip evokes a society that has not succumbed to the intended dissolution of the Israeli siege.

Thus, the present study explored the diverse everyday experiences of structural colonial oppression in children living in the Occupied Palestinian Territories. Our research aimed to investigate the main antecedents and determinants of risk and violence exposure in a setting characterized by settler-colonial violence and military occupation. Moreover, we investigated children's resilience and resistance processes, understood as survival strategies, such as communicational and agentic practices to protect their everyday lives and promote subjective well-being. Hence, to consider the micro-and miso- and macro factors operating within children's lived environment, our study was informed by socio-ecological theories and models (Johnson & West, 2018).

Method

Context

The Occupied Palestinian Territory (oPt), which includes the West Bank, Gaza Strip, and East Jerusalem, is characterized by more than 70 years of instability, military oppression, and settler colonialism imposed by the Israeli army. Gaza's residents are put through the wringer by an over-13-year blockade (restricting movement of people and goods in an embargo deemed illegal under international law) and continuous devastating attacks, limited access to electricity and water, and a devastated economy. Eighty per cent of Gaza's residents depend on humanitarian aid (Human Rights Watch, 2021b). Moreover, the situation deteriorated with the escalation between Gaza and Israel between May 10 and 21, 2021, after both the renewed Israeli attempt to ethnically cleanse the Sheikh Jarrah neighborhood and after the Israeli army stormed Al-Aqsa worshippers gathering for the Ramadan prayer, bringing a high number of civilian casualties, damage to infrastructure, and disruption of humanitarian activities and essential services (OCHA, 2021). At least 287 Palestinian have been killed (256 in Gaza and 31 in the West Bank), including around 70 children (OCHA, 2021). Around 9464 people have been injured across Palestine, mainly in the West Bank. Indeed, the Palestinian population of the West Bank lives within a continuous threat of socio-political violence, intimidation, checkpoints, displacement, and demolition (Bosqui et al., 2017). In recent years, several human rights associations have condemned how the Israel regime puts in place throughout the territory it controls (West Bank, East Jerusalem, Gaza Strip) a regime of apartheid (B'Tselem, 2021; Human Rights Watch, 2021a). At the time of writing (2021), the situation within Occupied Palestinian territories has been exacerbated by the Covid-19 outbreak that intercepted the deteriorated environmental conditions due to the ongoing



occupation. The lack of vaccines, the continued demolitions of Palestinians' houses, and the building of illegal settlements made the pandemic burdens more severe among the general population (HRW, 2021). According to the UN Office of Coordination for Humanitarian Affairs (OCHA), as of October 2020, Israeli authorities demolished 568 Palestinian homes in the West Bank and East Jerusalem, displacing 759 people (HRW, 2021a).

Participants

The participants were recruited between November and December 2020 from a pool of children who accessed a local center organizing psychosocial activities. Researchers targeted a purposive convenience sample of 22 participants across various settings (villages, cities, and refugee camps) in the West Bank. Participants were required to be in good health and not previously diagnosed with physical or psychological syndromes to be included in the study. The participants' age ranged from 8 to 16 years old (M = 12.2; SD = 2.69), and included 10 girls (45.5%) and 12 boys (54.5%). Ten participants came from an urban context (5 girls and 5 boys), five from a refugee camp (2 girls, 3 boys), and seven from a rural area (3 girls, 4 boys).

Instrument and procedures

Following APA ethical guidelines concerning child protection (APA, 2013) and with the approval of the Milano-Bicocca Institutional Review Board (N.368), both caregivers and participants were carefully informed about the aim of the task, the purposive confidentiality procedures, and their right to refuse or discontinue their participation at any time. All participants and families provided informed consent. Ad hoc trained social workers collected interview data. A counseling service was provided to those children who eventually were distressed by recalling potentially traumatic experiences during or after the activities. After the individual interview, all children took part in debriefing sessions encompassing relaxation tasks, cooperative play activities, and ventilation. The children's interviews ranged from about 25-90 min and were audiotaped, transcribed, and translated from Arabic to English by a local bilingual researcher. They were back-translated into Arabic and compared against the original interviews to check the translation.

The interviews aimed to construct a detailed biographical narrative focused on children's significant (positive or negative) experiences. To facilitate the narrative process and the use of language to create the narrative, we used some techniques from NET therapy (Narrative Exposure therapy, Schauer et al., 2004, 2017; KIDNET, for children, Onyut et al., 2005). Therefore, participants were given a rope to symbolize their life and aid in constructing a lifeline narrative (Gwozdziewycz & Mehl-Madrona, 2013). Once the rope was laid out, the researcher provided the child with stones and flowers, representing memories of significant events during the life periods of the lifeline. Hence, the child was encouraged to place the stones on the rope to represent sad, complex, or scary moments and the flowers to represent joyful moments.

After providing time to arrange flowers and stones in the lifeline, the researcher and child together explore the related events and the current and past emotional, cognitive, and behavioral reactions related to these events (Said & King, 2020). When examining both positive and negative experiences, the researcher was focused on uncovering the strategies implemented by the child to manage their complex situations (Gwozdziewycz & Mehl-Madrona, 2013). The rope helps remember and relocate within a particular time and a temporal sequence of participants' life experiences. Moreover, it consents to explore different moments of transition: the rope allows to see the alternation of flowers and stones, highlighting the strategies adopted by the child to overcome the challenging event (Schauer et al., 2011).

Data analysis was carried out following the principle of grounded theory (Saunders et al., 2009), and to extract the main themes from children's narratives, a thematic content analysis (TCA) was performed (Miller & Crabtree, 1999). The coding procedure took place in three main steps. First, one researcher conducted an open-coding analysis of the children's transcribed narratives. After that, the critical themes that emerged were coded and organized into categories by the two Palestinian researchers, who worked independently. Finally, all four authors discussed the categories and codes that emerged and retained the significant ones (Boyatzis, 1998).

Findings

The TCA identified three themes that captured the main elements driving insecurity, fear, and risks to participants' well-being and daily lives: the pervasiveness of the Israeli violence; the unexpected costs of the pandemic; victims and perpetrators of intra-community violence [Antecedents and determinants of violence]. Moreover, the adopted method allowed us to observe and identify all those resources (personal, family, social or community) that allowed participants to struggle against their burdensome, oppressive and violent contexts, recover well-being, and protect their quality of life. Three other main themes were identified: everyday acts of happiness (or normalcy), support from families, peers, and community, subverting negative situations and fighting back [Means to cope with violence]. The themes demonstrate the importance of moving across individual, family, community, and societal levels when examining the realities of children living in war and under structural oppression (Veronese, Cavazzoni, Russo, et al., 2019; Cavazzoni et al., 2022).

Antecedents and determinants of violence

Theme one: The pervasiveness of the Israeli violence

The importance of feeling safe about one's environment has been widely identified as a crucial aspect of a person's health and well-being (Cummings et al., 2013; McNeely et al., 2014). Political and military violence challenges children's perceptions of safety and security, actively compromising their psychological and physical well-being (Laor et al., 2003). As such, many of the stones placed by the children were starting points for narrating situations of fear, danger, and vulnerability related to the constant presence of the Israeli military forces.

This stone refers to the day when they [Israeli army] shot me. I still have nightmares. Sometimes I am proud; sometimes, I hide my difficult feelings. It is hard to feel safe again because they come here; they are here. You are never really safe. (boy, 16, refugee camp)

Participants recounted at least one direct experience involving the Israeli army, some because of a friend's or family member's arrest, some due to an invasion of their city, and some because they risked their lives, as in the quotation above. Events related to the presence of the Israeli occupying forces were connected to unpleasant, traumatic memories that were strongly connected to the present. Although embedded in a past life moment, the narratives shared a pervasive and present feeling of insecurity and unpredictability:

I am constantly afraid of catching a stray bullet. There is a girl.. Once, she was walking outside, and she was shot by accident by a stray bullet. In my area, stray bullets happen a lot. (boy, 12, city)

This stone refers to when I was in 9 grade. That day I was on my way back from school. There were fire shootings, and confrontations with the Israeli army. When I entered the camp, I heard voices calling and asking me to move back. I could not move, and I felt myself on the ground. I was sprawled on the floor. They carried me to the ambulance, and I thought I was losing my stomach. (boy, 16, city)

The presence of Israeli forces was experienced in the streets, during demonstrations, but also within the home itself, highlighting the children's distinct awareness that the army could invade at any time and in any place:

It was night. We knew the army was in the neighbourhood, so I got up and got dressed. We knew there was a possibility they would come to our house. We were all awake. (boy, 13, village)

This refers to the fear of the Israeli soldiers when they broke into my house and arrested my brother. We were sleeping. Suddenly they were right in front of us. I was asleep, and I did not wake up until someone woke me up. I was so scared. It was 4 am; I was scared and confused. They released him, but then they came to retake him. They stayed for a long time at our house, from 4 to 6 am. They ruined the house. (boy, 13, village)

Vulnerability feelings related to being the target of an attack or arrest by the army were narrated in the outdoor areas. Many participants highlighted how violence was perceived as permeating the private dimension of their homes and schools. Many children's narratives depicted that the army could unexpectedly enter the school in their domestic sphere.

This stone is for 4th grade. The Israelis broke into the camp and our school [UNRWA school] and threw several tear gas and sound bombs. The students threw stones at the army. One of the kids was hit by a rubber bullet in the leg because he was throwing stones. [...]. We were too young; we did not know what to do. (boy, 14, camp)

Each place was described as both safe and potentially unsafe simultaneously. In addition, perceptions and reactions related to reacting in the face of attacks changed as they retraced the rope and life stages. Some participants recounted when they were "too young to know what to do" (boy, 14, refugee camp) and thus the highly destabilizing experience of the first encounter with the Israeli army and its invasions. As they grew older, they described how they slowly got used to this unpredictable violence.

You always know that there is the chance that they will come to your house, so you get dressed. (boy, 13, village)

Accustomed to the aggressive and violent actions of the military, they were deeply aware of the price that they would have had to pay for any action – or inaction – in response:

I was in 7th grade when the Israelis broke into the school ... The army came to the school and started hitting and beating. They threw tear gas at the school gate. They took two kids. The other kids throw stones at them, but the army always provokes them. Me, I did nothing. It does not matter. They will harass you like this anyway. (boy, 14, city)

Therefore, children take responsibility for their behaviors and capabilities, expressing the awareness of being, in any case, under constant threat and insecurity by colonizers in an environment characterized by uncertainty and diffuse violence.

As outlined below in the next paragraph, the second theme from the children's narratives was strictly related to the current pandemic affecting already disrupted lives in occupied Palestine.

Theme two: The unexpected costs of the pandemic

The current ongoing pandemic outbreak of COVID-19 (Coronavirus Disease 2019) exacerbated the already challenging situation within the oPt and complicated access to essential resources, such as access to care, school, work, and interpersonal and community support.

It has not been easy with the arrival of the Coronavirus; this is Corona's stone. You stayed at home most of the time. No education or classes, no friends, or classmates. Not going out a lot or seeing friends. (boy, city, 14)

All children interviewed framed the arrival of COVID-19 as a disruptive event that forced them to forgo social relationships, outdoor activities, and interactions.

The Coronavirus affected all of us. People could no longer go to work. The school has also been affected. We started going to school with masks. We stopped attending each other's birthday parties; we could not play together or see each other. (girl, city, 10).

It is well documented in the literature that schools and education are significant sources of support for children's physical, psychological, and social well-being in areas of armed conflict (Winthrop & Kirk, 2008). The school provides a place to play, learn and socialize, which is even more crucial in the ongoing military and political oppression (Chatty, 2009; Nguyen-Gillham et al., 2008). If the Israeli occupation already affected children's perception of safety within the school, the pandemic prevented their access to it, confining them within their homes.

When I started school this year, I did not have any friends in my class. All of them were in other shifts. (girl, 14, city)

I put a stone because, with the Coronavirus, everything became different. I stopped hanging out with my friends, and we started school online. I am not saying I like school, but I did not realize how important school was to me until it became virtual. Also, the teachers do not teach in the same way. (boy, 14, city)

Moreover, the narratives highlighted how benefiting from online schooling was closely linked to the families' economic, housing and technological support possibilities. Several children complained of not being able to attend classes because of network difficulties, lack of appropriate space at home, or the absence of help from a parent because they were working:



We make online classes. I do not like them because I cannot concentrate. I did not understand a thing. My father and my mother work, and we are too many in the class to ask for help from the teacher. (boy, 11, village)

During the second semester, the corona pandemic came, and we stopped going to school for 6-7 months. We stopped knowing anything about our education. My school did not have online schooling. They just gave us homework. Then the communication was cut off for a long time. (boy, 15, camp)

Finally, the literature indicates how the school also plays a fundamental role as a space where children spend time playing and socializing, especially in contexts where outdoor areas might not be considered appropriate for girls and women's safety and security (Cavazzoni, Fiorini, and Veronese, 2021; Fincham, 2010).

We used to be able to play at school, but now with Coronavirus, the teachers forbid us to touch each other and play. My brother can play outdoors, in the street near our house. I cannot; there are only boys there. (girl, 10, city)

Accordingly, children outlined as COVID 19 became an amplifier of gaps and inequality resulting from patriarchal norms and colonial oppression, advancing oppressors' violence against the oppressed within the community, as well-expressed in the next section.

Theme three: Victims and perpetrators of community violence

The Israeli occupation and COVID-19 were not the only sources of danger and insecurity experienced by the children. Many stones were dedicated to episodes of violence faced within their communities. This was not a surprising finding, considering that "observing violence stimulates violence" (Boxer et al., 2013, p. 163). Several studies documented that exposure to violence increases a person's likelihood of engaging in risky or aggressive behaviors (Al-Krenawi & Graham, 2012; Vossoughi et al., 2016). This correlation becomes even more prevalent when children or young adults are exposed to structural violence (Kithakye et al., 2010; Qouta et al., 2008). Indeed, several respondents narrated episodes of particular fear or distress resulting from punitive or aggressive behaviors by significant adults, such as parents or teachers.

I was scared because I did not know there was a test at school. I was afraid of the teachers. I was also afraid of my parents; they get very, very angry if I do not get a good grade, and they punish me afterwards. (girl, 10, village)

I remember this teacher. I was afraid.. She used to scare us. When she came into the classroom, we were immediately afraid that she would punish us. [...] She punished me several times, even with physical punishment. (boy, 16, city)

Despite the awareness that "beating in school is prohibited" (15, boy, school), some participants recounted situations in which they had been victims of physical punishment:

That time the teacher beat me up because I was making noise. I felt sad, but I am also scared of getting beaten again. (boy, 8, village)

The teacher beat up the new student. He was late, so the teacher beat him up. I felt astonished and scared more than angry. (boy, 15, camp)

Several scholars have described a continuum between exposure to political violence and experiences of school, community, and domestic violence (Kemp & Pinto, 2009). The absence of possibilities and opportunities to give a more constructive or perhaps collective outlet to the losses and humiliations suffered and to the anger and frustration that the Israeli oppression conveys seems to be at the base of the development of psychological burdens and aggressive acts (Kemp & Pinto, 2009; Punamäki, 2009). Significant cross-sectional relationships have been shown regarding the number of acts of domestic violence and parental exposure to political violence (Clark et al., 2010; Cummings et al., 2010).

Furthermore, participants reported aggressive episodes between siblings and peers, both suffered and perpetuated.

I was in my house; I was ten years old. I had beaten my brother that night and had gone to sleep. I remember that he came into my room and hit me in the belly. They had to take me to the hospital because my leg was broken. I grabbed his phone and threw it out of the window with God's strength. (girl, 12, camp).

I could not stand him so much that once, on the way home, I grabbed him and pushed him to the ground and started beating him. I hurt him badly. [...] I had told him, "I will beat you", but he had not listened and kept bothering me. I asked my friend to help me to catch him, we ran after him, and I beat him up. (boy, 11, village)

Bullies' and peers' violence mirrored the effect of the internalized oppressor expressed via harassment and aggression as a form of non-reflective or unhealthy agency that pushes children in the attempt to regain control over their lives using masculine hegemonic behaviors as a way of redemption from subalternity and alienation (David, 2013; Freire, 1970).

In the following paragraphs, we outline different forms of reflective agency informing the Palestinian children's everyday actions.

Means to cope with violence

Theme four: Everyday acts of happiness (or normalcy)

Flowers and positive moments were enclosed in the possibility of reaching personal goals, fulfilling one's desires, and maintaining daily normality within challenging situations. Hence, the children retraced the importance of birthday parties, visits to parks, and trips with their parents as real moments for recovering happiness and well-being in the aftermath of traumatic experiences.

This flower represents my success in school. I strive and improve in school and my education. I want to study more and become a doctor. This is my goal. (boy, 13, city)

I was eight years old, and it was my birthday. I was thrilled because my friends had thrown me a surprise party! They brought me lots of presents and toys. (girl, 12, refugee camp)

Attempting to make life as normal as possible and preserving the various aspects of daily routine was fundamental to the well-being of children and youths, and it has been studied among the resilience and resistance capacities of the Palestinian people (Akesson, 2014; Nguyen-Gillham et al., 2008). Maintaining activities of daily living, such as time for play, fun, exploring places, and going to school, helps promote a sense of wellness in children.

I remember the trips we took to Haifa and Yafa. I love going to see the sea. The first time I saw the sea, I felt like flying. It was a wonderful feeling. Moreover, my family is always supportive. I feel safe and comfortable with them. (girl, 12, city)



Family trips remain an act of resistance to alienation and an attempt to reaffirm Palestinian children's right to move in colonized landscapes. Therefore, domestic warmth and social support are pivotal protective factors in children's growth.

Theme five: Support from families, peers, and community

The importance of the family, peer and social relationships emerged strongly to enjoy everyday life, despite ongoing oppression. Many flowers were linked to social aspects, with peers, family, and community.

This flower is for my family. We are together, we live all here in the same city. If one of us is sad, all of us are sad. If one is happy, we are all happy. We are all together, we are a family. (girl, 10, city)

I talked to my mother about it. She explained and told me what I would learn. She helped me; she relieved and reassured me. (boy, 16, city)

The social and communal dimensions emerged as critical in ensuring connectedness within a society fragmented, first by the Israeli occupation and then exaggerated by COVID-19. A robust social capital, consisting of family, peer groups, and other community members, is essential to people's well-being and helps them cope with stressful situations and feelings of isolation (Harel-Fisch et al., 2010; Veronese et al., 2017). High levels of social support in children exposed to structural oppression have lower risks of internalizing emotional problems or aggressive behaviors (Betancourt & Khan, 2008; Qouta et al., 2005). Parents, relatives, and community members were seen as a source of protection and security in the face of Israeli and intra-community violence and a place to learn how to express and manage one's emotions (Qouta et al., 2008; Sousa, 2013).

I talked to my mother about it. She was there listening to me, and I told her what the teacher was doing. She always helps me calm down, explains my mistakes, and behaves. She helps me to control my anger. (boy, 16, city)

My mother was very supportive when I told her that I was being bullied for wearing glasses. She even wore glasses for a while to make me happy. She helped me to get rid of negative feelings. Now I put a flower here to this moment because I came out stronger and with positive feelings. Now I do not get frustrated or even react to bullies. (girl, 10, village)

Similarly, positive relationships with friends and peers were linked to events perceived as sources of happiness and well-being. Being able to benefit from social relationships has positive and beneficial effects in childhood and allows children to access feelings of safety and closeness that activate possibilities for shared experience (Diab et al., 2014; Veronese & Cavazzoni, 2020).

I have a special friend I play with and who protects me. We are friends till today. He has always been a very supportive friend who treats me very well. He is like a brother to me. He understands me just by looking at me, and I feel very comfortable when we are together, walking or playing. (boy, 16, city).

Communicating kindness and mutual support is an agency's act that fosters positive feeling and well-being among children, despite the difficult living conditions, a means to fight back a sense of powerlessness and subvert alienating structures of power (see below).

Theme six: Subverting negative situations and fighting back

The children's life stories highlighted how they were aware of the violence and danger that pervaded their daily lives. Despite the adversity, they demonstrated to be active and engaged in creating - or preserving - their desires or needs.

They will not go away; they will continue to harass us because we are Palestinian. We must know this and continue in our lives, keep doing our things, and not let them stop us. I focus on my work, to succeed and feel strong. (girl, 12, city)

I do not care about bullies. I am responsible for my studies, and I also try to improve my interpersonal and social skills. I know that when we grow up, we will rely on ourselves and our social connections. (boy, 14, city)

Several participants showed that they have learned how to turn negative situations to reap possible benefits. For instance, explaining the flower following the stone representing the arrival of the pandemic, a 14-year-old girl from Ramallah explained to us that during the lockdown, she downloaded Instagram:

I have made many online friendships. I could not meet my friends, so I made a lot of new ones via the internet. One of them is my best friend. (girl, 14, city)

Similarly, other children explained their way of coping and benefit from this, displaying many strategies to regain control of their environment and lives:

Staying home was also a positive aspect of the quarantine. Being home allowed me to spend time with my family, feeling closer to each other. (girl, 14, city).

Alternating rocks and flowers highlighted moments of transition, allowing children to explain the resources and strategies activated to overcome or deal with a traumatic or stressful experience.

This stone refers to the day the Israelis entered the school. Nevertheless, I do not just remember it as a difficult time. I put a flower here to show how we can see things differently. I am also happy when I think of that moment when the soldiers came in, throwing stones at them. I feel good when I think about it. I feel that I could do something about what was happening, that I found a way to protect myself and fight back. (boy, 14, camp)

This flower is for when I overcame my fear of teachers yelling. I put this flower for this moment where I feel I have started to build my personality, and I have gotten used to these fears and difficulties. When it happens, I know how to deal with it within myself. (boy, 14, city)

Agentic and coping strategies emerged from participants' narratives, showing their ability to react to their adverse life contexts, find creative solutions and control the unpredictable environment. Children described episodes in which they took an active role in reacting to pervasive military occupation: "I went down and started to run behind the jeeps and throw stones" (boy, 15, camp). These actions, however dangerous, have a powerful healing potential (Das et al., 2001). Many studies indicate that an active role and an ideological commitment in the struggle for the liberation of their country have a significant protective value on the well-being of the person (Barber, 2008; Cavazzoni et al., 2020; Veronese, Cavazzoni, Russo, et al., 2019a, 2019b). For Palestinians, as stated by Habashi (2013), their survival strategies continually evolve through their experiences of oppression and their willingness to engage as active participants in the struggle for liberation, which is a response that emerges from the need to develop a sense of competence and control over their situation, despite the overall condition of instability (Cavazzoni, Fiorini, & Veronese, 2021; Habashi, 2013; Veronese et al., 2017; Veronese et al., 2018). Aspects of proactive aggression toward the occupier, and action-oriented struggle, are a coping class unique to oppression and therapeutic activities for the oppressed (Kira et al., 2014).

Discussion and conclusion

We explored the effect of systematic violence and military oppression on school-aged children and adolescents living on the oPt, West Bank. We identified factors associated with children's maladjustment to potentially traumatic environments and survival skills following a socio-ecological lens, including micro-, meso- and macro levels (Khoury-Kassabri, 2019; Kilanowski, 2017). TCA resulted in a conceptual model depicting the critical dimensions of violence and reactions to violence and oppression.

Micro-, meso-, macro- and Crono systems influenced the children's competence of adaptation to a living environment characterized by unpredictability, uncertainty, and ongoing violence in which they organize dimensions of violence and reaction to violence in a complex network of personal, family and community factors distributed along with the continuum between disease and ease (Giacaman, 2018; Veronese et al., 2020). Thus, children are continuously engaged in adjustment and readjustment to inhuman living conditions, making normal what is abnormal in their development and growth (Nguyen-Gillham et al., 2008). The pervasive presence of Israeli military violence in children's lives reproduces internal and community violence cycles where children take alternative positions as victims or perpetrators, agentively acting to subvert the sense of subjugation that the Israeli occupation is imposing on the Palestinian civil populations (Harsha et al., 2020). In such a process to reposition themselves from a sense of disease to ease, children can take up violent behaviors and bully peers as they have been bullied by community and family members, teachers, and Israeli soldiers. Behaviors identified as maladaptive and pathogenic in normal living conditions can turn into survival skills in chronic violence and structural subjugation conditions (Cavazzoni, Fiorini, & Veronese, 2021). The daily routines of violence saturated the Palestinian children's lives, making their survival strategies most often disabled because of the toxic environment in which they spent their childhood.

On the other hand, daily acts of personal, family and community decency, kindness, warmth, and solidarity are reinstituting a sense of competence and mastering of their existence (Marshall, 2013). Accordingly, communication sciences and scholarship suggested how both personal and collective resilience is activated through acts that "bounce back" the experience of violence and dispossession, creating a network of meanings throughout communicational processes capable of crafting normalcy and affirming identity anchors to confront colonial extractivist and dehumanizing powers (Black & Lobo, 2008; Buzzanell, 2010). Moreover, the enactment of the relational network might help children reinterpret the disrupted realities they are forced to confront, downplaying negative feelings and fostering positive emotions such as hope and a sense of competence (Buzzanell, 2004).

Hence, resilient communication fostering social networks, social support, and the capability to reshape a disrupted relational and living environment in positive sources of agency and survival allowed children to reverse structures of powers that contribute to the reproduction of governable subjects throughout pathologization and victimization (Marshall, 2014). Palestinian children confront their existence with the systematic attempt of colonial power to marginalize, inferiorize and humiliate the indigenous minority group through technologies of domination and subjugation pervasive in thee child's whole existence. Accordingly, the child's attempt to re-narrate their identity and move from a sense of disease to ease might be labeled as pathological, dysfunctional, and maladaptive by colonial scientific perspectives. Taking Fanon's perspective, children "for many years to come ... shall be bandaging the countless and sometimes indelible wounds inflicted on [their] people by the colonialist onslaught" (Fanon, 1961, p. 181). Fanon's teaching suggests how every single act of resistance to existence might have encompassed Western psychological medicine labels as antisocial and risky attitudes. Such psychological, emotional, and behavioral reactions could be seriously considered a possible salutogenic route in which children struggle for their own and community survival (Hilton, 2011).

In terms of the crono-system, the dimension of time emerged as a crucial node contextualizing the Palestinian children's network of violence and reaction to violence. Children expressed the critical concern to readjust to the contemporary pandemic challenges that added suffering and a sense of suffocation to already disrupted living conditions. The COVID-19 experience exacerbated the lack of freedom of movement and self-determination, exposing children to emotional and psychological burdens resulting from the settler-colonial and military violence (AlKhaldi et al., 2020). Moreover, COVID-19 arose as a trigger of the Palestinian children's historical and transgenerational trauma in the way it amplified the individual and social burdens of decades of military occupation and political violence (Hammoudeh et al., 2020). Constraints in movement, disruption in the health and educational system, pervasive mass surveillance, and territorial segregation during COVID-19 became severe threats to the Palestinian children's developmental opportunity and agentic competencies. Accordingly, in our study, children reported additional attempts to react to abnormal living conditions in the global pandemic (Radwan & Radwan, 2020).

In sum, the political antecedent and determinants of the Palestinian children's actions and reactions to violence emerged as a novel opportunity for reflection in our study. The network of violence and reaction of violence determining the Palestinian children's growth and development could not be studied, avoiding political and human rightsrelated implications (Diab et al., 2020). In addition, the pandemic emergency completely uncovered the urgent need to act to ease the colonial subjugation of the minority indigenous population in Palestine (Marshall & Sousa, 2017; Makkawi, 2017). Children's agentic competencies and survival skills might be mobilized and empowered by promoting participative and liberatory interventions enrooted in the Palestinian tradition of resistance and resilience. Thus, purely clinically informed western intervention might result in ineffective or pathologizing decisions (Veronese & Cavazzoni, 2020). In so doing, clinicians, social workers, as well as policymakers should have the responsibility to act as agents of social change rather than exclusively media of resocialization and readaptation of children to a system that produces and reproduces dynamics of subjugation and acquiescence to an oppressive status quo (Diab, Veronese, et al., 2018, 2020).

As for communication sciences, the main lesson learned from the work with children living under oppression is to operate as researchers and practitioners to give voice to children that have been excluded from the discursive space by colonizing and patriarchal powers in Palestine (Couldry & Curran, 2003; Dutta, 2008). Listening and dialogue might help children empower agency over alienating lives, structural violence, and passivizing and victimizing humanitarian interventions that reproduce subalternity instead of promoting civic participation in the struggle for existence (Dutta & Basu, 2008). Therefore, "the goal of the dialogue is not to operate within the structures to continue reifying the *status quo*, but to change the structures to address the inequities and injustices perpetrated by them" (Dutta, 2011, p. 169).

The thickness of the Palestinian children's network of violence and reaction to violence requires caution when generalizing our results. First, the Occupied Palestinian territories are characterized by a substantial complexity and diversity that require sophisticated research designs and procedures. Moreover, the system of violence and settler colonialism in the oPt are continuously transformed and evolved, requiring ongoing adjustments and adaptations to the oppressed child population. We recommend mixed methods, quantitative-qualitative and ethnographic approaches for future advancement of the research in contexts characterized by colonial violence and ongoing violation of fundamental human rights.

In conclusion, the authors would have acknowledged their positioning when they were (and are) engaged in qualitative research in contexts of extreme violence and political oppression. We firmly believe that, as researchers and clinicians, scholars engaged in research in war and violence-affected zones must unequivocally and unapologetically politically position themselves, in our case, to the part of the wretched of the heart and the oppressed (Fanon, 2007). Mainly when scholars belong to nations with long-standing and ongoing traditions of colonization and oppression of indigenous populations, if they seek to maintain an ethical and morallysounding path to research, they must acknowledge and include in their work the historical and political determinants of violence and oppression, as well as scientifically and practically act to reduce gaps between oppressors and oppressed. Thus, we recognize and acknowledge that our language could have resulted in somehow unbalanced and political apprizement. In an age of urgent need for global change, this is a moral imperative for the whole scientific community in the Global North.

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