

RECONSIDERING TRAUMA: TOWARDS A PALESTINIAN COMMUNITY PSYCHOLOGY

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This article explores two contesting discourses about Palestinian political captives who experienced interrogation and torture by the Israeli security service (shabak). The first concerns the intersecting discourses of trauma and human rights as constituted by humanitarian psychiatry and the second is the discourse of sumud, a Palestinian construct engaged in anticolonial struggle. The discourses of trauma and human rights represent the Palestinian captive as an agentless, individualized, depoliticized victim to be treated by psychiatrists and defended by human rights activists. These discourses, which became hegemonic in the post-Oslo Agreement era, conceal the subjectivity of sumud and the form of anticolonial politics it generates. Based on the conceptions and praxis of sumud, the article offers preliminary reflections about a resistant community psychology in the Palestinian colonial condition. © 2014 Wiley Periodicals, Inc.

To reflect on context-specific ontological and epistemological bases of a paradigm for community psychology within the Palestinian colonial order, this article explores the contesting discourses and practices regarding Palestinians in general and Palestinian political captives in particular. I examine 2 distinct discourses on Palestinian political captives exposed to torture in Israeli colonial interrogation centers. The first discourse, located within humanitarian psychiatry at the intersection of the conceptions of “trauma” and “human rights,” is mainly concerned with the condition of “victimhood.” The other is the discourse of *sumud*, a Palestinian anticolonial construct promoted by Palestinians living under the colonial order, which constantly subjects Palestinians to arrest, interrogation, and torture. The discourse of *sumud* is the praxis of struggle wherein the subject can be a victim and resisting hero.

I first encountered the praxis of *sumud* in 1999, when I moved to the city of Ramallah and had a chance to converse with Palestinian strugglers and listen to their interrogation

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JOURNAL OF COMMUNITY PSYCHOLOGY, Vol. 43, No. 1, 76–86 (2015)

Published online in Wiley Online Library (wileyonlinelibrary.com/journal/jcop).

© 2014 Wiley Periodicals, Inc. DOI: 10.1002/jcop.21712

experiences. I observed, then with confusion, the humor and laughter Palestinian strugglers expressed about the torture they and their companions had undergone, and also sensed the pride that *sumud* in the interrogation instigated. My confusion was partially influenced by my academic training as a clinical psychologist and the readings and studies of trauma and posttraumatic stress disorder. Subsequently, I undertook a doctoral-related ethnographic study on the interrogation encounter, for which I conducted in-depth interviews with Palestinian strugglers who engaged in *sumud*.¹

Sumud embodies a radical alterity to the conceptions, sensibilities, attachments, and practices of humanitarian psychiatry. *Sumud* is the refusal to confess or reveal secrets to interrogators despite the cruelty of the physical and psychological torture employed by the interrogators. In an enactment of *sumud*, the Palestinian voluntarily endures the suffering of the continual torture to protect the secrets regarding the self, the comrades, and the revolutionary organization. The tradition of *sumud*, which emerged among Palestinian strugglers and their communities in the late seventies, reached ascendancy during the first Intifada (1987–1993).²

The subjectivity of *sumud* is an anticolonial subjectivity centered on collectivity and sacrifice, and contains political–ethical dimensions. In this sense, torture and pain suffered throughout the interrogation acquire political meanings that transform the ways in which they are conceived and felt. The liberal tradition of human rights and its concern with individuality coexisted in tension with the tradition of *sumud* since the late 70s. Human rights and related psychological discourses proliferated among Palestinians living in the 1967 occupied territories during the nineties after the signing of the Oslo Accords in 1993. In the post-Oslo-Accord era associated with the emergence of human rights and psychological organizations, the liberal human rights tradition became hegemonic, and consequently assumed the power to regulate and generate subjectivities and forms of politics.

The discourses of trauma and human rights are constituted by the liberal traditions and moral sensibilities that consider pain and suffering as intolerable in modern–liberal societies and call for its elimination by law. Although torture persists in modern–liberal states, it is enacted in secrecy. Torture has become an aspect of policing that is represented as governmental activity directed at defending interests of society (Asad, 2003, p. 104). Within the logic of the liberal humanitarian tradition, the agentless victims of torture should be defended and treated by human rights activists and psychiatrists, respectively.

This article aims to examine the workings of the psychological–human rights discourses and how they operate through generating a mode of subjectivity and a form of politics that exclude the subjectivity of *sumud*. I analyze the psychological–human rights discourses as a formation of power. This analysis aims to help us understand how Palestinian subjects, interrogated and tortured by the *shabak*, are fabricated or positioned by these discourses, the power techniques they secure and disguise, the assumptions they naturalize, and the norms they mobilize and exclude.³ This critique presented here, which aims to reveal the disciplinary, regulatory, and productive operations inherent in the liberal human rights and trauma discourses, may be perceived by psychological–human rights activists as irresponsible and detrimental to their relentless efforts to eliminate, or at

¹The ethnographic research was assisted by the International Dissertation Research Fellowship Program of the Social Science Research Council, the Wenner-Gren Foundation, and the Middle East Research Competition Program. The writing of the dissertation was assisted by the Harry Frank Guggenheim Foundation.

²For a genealogy of the praxis of *sumud* in the interrogation, see Lena Meari (2014).

³Wendy Brown and Janet Halley (2002) propose these types of questions as illustrative of the possibilities offered by the employment of critique.

least decrease, the suffering of Palestinians tortured by the *shabak*. I suggest that a dismissal of the critique I offer here as irresponsible arises from an assumption that psychological–human rights-oriented work is the only imaginable and legitimate way of enacting political and human emancipation. The hegemonic liberal gaze of psychological–human rights work inordinately dwells on the “oppressed”⁴ and their redemption from oppression.

I first discuss the construction of the hegemonic “universal” notion of trauma and its subjective and political implications. The second section traces the means and implications of the travel of the trauma paradigm to colonized Palestine, which characterized the post-Oslo era and was intertwined with other forms of material and discursive transformations. The third section discusses political captivity within the colonial condition in Palestine. It reads the interrogation from the perspective of *sumud* and illustrates the political meanings attached to torture and pain by Palestinian strugglers involved in the praxis of *sumud*. Finally, I offer a preliminary reflection on a resistant community psychology in the colonial condition of Palestine, inspired by the conceptions and practices of *sumud*.

Psychological Trauma, its Travel to Palestine and its Contestation by sumud

The notion of psychological trauma had been established within the last few decades as a universally accepted means to refer to individual subjects and communities exposed to violence. Fassin and Rechtman (2009) describe trauma as a single signifier that explains present suffering to past violence; the mark left by a tragic event on an individual victim, witness, or perpetrator; and the shared imprint of historical experience on a group. Trauma as a signifier has traveled to many parts of the world, including colonized Palestine. The discourses of human rights and trauma invaded Palestine in the post-Oslo era through Palestinian organizations that work at the intersection of mental health and human rights, such as the Gaza Community Mental Health Program (GCMHP), founded by the psychiatrist Eyad El-Sarraj in Gaza, and The Treatment and Rehabilitation Centre for Victims of Torture (TRC), founded by the psychiatrist Mahmud Sehwal in the West Bank. These agencies have adopted and deployed trauma discourses within work centered on political incarceration and the torture of Palestinian political captives.

GCMHP was founded in 1990 to work with three major target groups: children, women, and victims of organized violence and torture (GCMHP, n.d.), and is defined as a “knowledge-based institution to enhance the capacity of the community in dealing with mental health problems based on the principles of justice, humanity, and respect for human rights” (GCMHP, n.d.). It aims to help ex-detainees to overcome their trauma.

The TRC, founded in 1997, adopted the concept of trauma in the context of violations committed by Israel during the 50 years of occupation of the Palestinian lands, linking torture and the psychological traumas as individual experience (TRC, n.d.). The TRC was constituted as a healing space wherein victims of interrogation and torture can talk about their brutalizing experiences (TRC, n.d.).

The formations of the two organizations demonstrate that, first, trauma discourses were introduced to Palestine by nongovernmental organizations working on mental health and human rights issues. Like other Palestinian organizations, they have international institutional links with funders and other professional groups. Second, the

⁴The positionality of the oppressed and the binary of the oppressed vs. agent is central to liberal thought. See Talal Asad 2003 and Saba Mahmood 2005.

discourses of trauma have been framed as knowledge-based discourses, that is, promoting neutral scientific knowledge and hence excluding the political field of anticolonial struggle. Third, the discourses of trauma have been employed in work with three main groups: children, women, and victims of torture (political captives). Finally, these groups suggest that the link between torture and trauma is inevitable. They appropriate the context-specific Palestinian experiences into universal, unified, imagined psychological experience.

The development of the notion of trauma is situated within developments in the field of psychiatric knowledge and expertise, which claim neutrality and therefore exclude the political dimensions of interrogation and military violence experiences. In contrast to the scientific effort promoted by TRC and other organizations to establish the link between torture and psychological trauma, Rula, a Palestinian political ex-captive suggests this about the advocates of the trauma model:

[They] have no awareness of the experience of *sumud* in the interrogation and how this experience forms the way in which torture is perceived and experienced within this political culture. Palestinians who confront the interrogators and defy them are empowered by this experience. I am not claiming that torture does not affect Palestinians, but it affects them in a different way than the one suggested by the language of trauma.

In Rula's account, *sumud* is posed as a different way of experiencing the violence of torture. This perception does not deny the effects of torture, but frames it within a distinct language and practices of resistance. It opens a space for imagining a different frame for conceiving the Palestinian experiences of torture.

The Empires of Trauma and Human Rights

In what can be considered as an ethnographic effort to challenge the hegemony of the "Empire of Trauma," Fassin and Rechtman (2009) trace the historical and social construction of trauma, its regime of truth, and its political uses. The authors argue that the constructed relation between trauma and the victim of violence has a dual genealogy: one scientific and the other moral. The notion of trauma and posttraumatic stress disorder (PTSD) has been established at the intersection between psychiatric and human rights discourses, which belong to the scientific and moral fields, respectively.

This intersection has given birth to humanitarian psychiatry, which emerged in the late 1980s and is practiced widely by organizations such as the French *Doctors without Borders* and *Doctors of the World* working in different parts of the world, including colonized Palestine (Fassin & Rechtman, 2009). Humanitarian psychiatry is a social invention that "introduced new definitions and new descriptions, new players and new structures" (Fassin & Rechtman, 2009, p. 171) to the arena of suffering arising from violent and natural events regardless of the causes. Humanitarian psychiatry belongs more to the humanitarian field than psychiatry; it was "an ethical practice, at the service of victims, before it became a medical discipline presupposing a diagnosis" (Fassin & Rechtman, 2009, pp. 175–177).

Summerfield (2001) argues that PTSD is an invention rather than a discovery of psychiatric objective diagnosis and that it is a legacy of the United States war in Vietnam. Antiwar activists promoted the diagnosis as a form of care for the veterans through establishing their victimhood and guaranteeing them "recognition" and compensation (Summerfield, 2001, p. 95). As a result, a conflation between suffering and trauma become

naturalized and had traveled worldwide. Summerfield (2001) links the social constructs of psychology with personhood: The mode of personhood produced by trauma affects what the subject feels, thinks, says, does, and expects.

Further, PTSD turns pain into a technical problem that can be quantified, measured, and treated by experts. Summerfield (1999) also critiqued the globalization of Western cultural trends and the associated medicalization of distress and the rise of psychological therapies. Concepts such as PTSD reinscribe the hegemony and legitimacy of expertise arising from the West. Hence, Summerfield poses the questions, “Whose knowledge is privileged and who has the power to define the problem?” (Summerfield, 1999, p. 1449). Summerfield points out that humanitarian interventions are invested with power and ideology and that when people are medicalized by being defined as “traumatized,” the need for knowledgeable experts to treat them is legitimated.

The role played by humanitarians in establishing the discourses of trauma and transferring them to different parts of the world indicates the convergence of the categories of the psychic and the moral. The same convergence can also be found at the core of the discourses of human rights. Trauma and human rights discourses share the same subject: the “victim” to be psychologically treated by mental health professionals, and legally defended by human rights activists. Further, for both trauma and human rights specialists, the “otherness” of the “victim”—the “sufferer”—needs to be eliminated. That is, the victim had to acquire a universal imagined (Western-like) psychological structure and human characteristics to be recognized as such. However, the elimination of otherness proved to be problematic and unsuccessful in Rwanda, Africa (see Fassin & Rechtman, 2009, pp. 184–185).

Talal Asad (2003) investigates the “human” presupposed by human rights. He contends that the subjectivity of the human of human rights is compatible with the culture of Western norms and styles of life that “includes particular attitudes to the human body and to pain” (Asad, 2003, p. 148). The establishment of the human of human rights includes a specific perception of the way in which pain and suffering are experienced. Within humanitarian psychiatry, experiences of pain and suffering are perceived through the notion of trauma. Hunt (2007) identifies three main qualities of human rights in the secular political world: equality, universality, and naturalness. She argues that these qualities of rights gained their direct political expression for the first time in the second half of the 18th century through the American Declaration of Independence of 1776 and the French Declaration of the Rights of Man and Citizen of 1789 (Hunt, 2007, p. 21).

To obtain legitimation for human rights, people had to be seen as alike and perceived as “separate individuals who were capable of exercising independent moral judgment” (Hunt, 2007, p. 27). Thus, moral autonomy was a precondition for acquiring human rights, and those perceived as less than fully capable of moral autonomy, such as children, slaves, the propertyless, and women, all of whom were at first excluded from the community of the bearers of “human rights.”

Autonomy and empathy, according to Hunt’s (2007) narrative, are cultural practices that involve physical as well as emotional dimensions. “Empathy depends on the recognition that others feel and think as we do” (Hunt, 2007, p. 29) and autonomy requires the person’s bodily separation. Autonomy and empathy, claims Hunt (2007), materialized over several centuries while individuals pulled themselves away from the webs of community and “had become independent agents both legally and psychologically” (Hunt, 2007, p. 29). Hunt (2007) traces the sensibilities towards torture and how it became unacceptable. She states that accounts of torture produced “imagined empathy” through new views of pain: “Novels generated it by inducing new sensations about the inner self. Each

in their way reinforced the notion of a community based on autonomous, empathetic individuals who could relate beyond their immediate families, religious affiliations, or even nations to greater universal values” (Hunt, 2007, p. 32).

Hunt’s (2007) historical account confirms Asad’s (2003) assertion that the human being presupposed by human rights is a subject that “is an autonomous individual who seeks pleasure and avoids pain.” (Asad, 2003, p. 53). Although these concepts might be specific to modern cultures, Asad (2003) states: “in an interdependent modern world, ‘traditional cultures’ do not spontaneously grow or develop into ‘modern cultures.’ People are pushed, seduced, coerced, or persuaded into trying to change themselves into something else, something that allows them to be redeemed” (Asad, 2003, p. 154) as humans. This process of redemption is not possible without “the exercise of political power that often presents itself as a force for redeeming ‘humanity’ from ‘traditional cultures.’ Or—and this comes down in the end to the same thing—as the force for reclaiming rights that belong inalienably to man in a state of nature” (Asad, 2003, p. 154).

Asad’s (2003) claims and Hunt’s (2007) historical accounts of human rights point to the interrelation between the constructed psychic structure and human rights. Both trauma and human rights discourses presuppose a specific Western-like imagined human who possesses specific psychic sensibilities and characteristics. This construct had been positioned as universal and was transferred to different parts of the world. This specific human construct established the depoliticized victim to be redeemed by specialists. In the section below, I argue that the Palestinian political captive does not fit into the narrow construct of trauma and human rights.

The Right to Trauma: The Travel of Trauma to Palestine

Rosemary Sayigh (2013) criticizes the exclusion of the Palestinian Nakba (catastrophe) from the field of trauma studies. She argues that the selection of cases to be included in the trauma literature reflects an ideological Eurocentric choice and perception of suffering. Although I agree with her critique of the exclusion of the violence of colonialism from the range of factors that causes suffering in the modern world, I question the political implications of the possible inclusion of the violent experiences of Palestinians into trauma studies. I contend that the inclusion of Palestinian captives’ experiences into the discourses of trauma may contain detrimental subjective and political ramifications for their anticolonial struggle. The uncritical adoption of the concept and language of trauma to represent the Palestinian experiences of violence contains the danger of depoliticizing and decontextualizing matters of social justice, occupation, and dispossession. Several studies illustrate how this process of decontextualization is naturalized through a focus on trauma as an individual experience.

For instance, the study by Al-Krenawi, Graham, and Sehwal (2004) considers the consequence of political violence in Palestine since the first Al Aqsa Intifada through an accent on the nature of loss, PTSD, the affect on family functioning, and the political and collective nature of trauma (2004). The study, through its focus on trauma, equalizes the experiences of all victims of violence, both Palestinians and Israelis; it constructs Palestinian–Israeli experiences as symmetrical with no good or bad victims. In so doing, it produces political effects that reduce trauma to individual psychological suffering (even if the familial, collective and political violence is discussed); the history of colonization and the ongoing effect of power relations are concealed.

This terminology reflects the work of depoliticization inherent in the discourse of trauma. Fassin and Rechtman (2009) point out that prior to the introduction of

psychiatry into the humanitarian arena, the language through which injustices were addressed centered on ideas of resistance rather than resilience. The oppressed were defined as heroes, instead of agentless victims. The emphasis was on the nature of social movements and campaigns for national liberation. The language and concepts of the pretrauma era steered away from overly psychologizing political and social experiences. Psychiatry's emphasis on victims, suffering, and trauma redefined the shaping influence of politics and colonialism on both the individual and the collective psyches.

Although the discourses of trauma had taken over many mental health subjects from children to women to Palestinian political captives, I will focus on the latter. In an issue of the *Journal of Traumatic Stress*, several articles describe the Palestinian captives' experiences of trauma. In Eyad El Sarraj et al.'s (1996) article titled "Experiences of Torture and Ill-Treatment and Posttraumatic Stress Disorder Symptoms Among Palestinian Political Prisoners," they document the torture encounters of 550 Palestinian political ex-prisoners from the Gaza Strip. The study adopted a reductionistic quantitative approach to establish a link between torture and subsequent disorders, such as depression, anxiety, and PTSD, and extended the discourses of trauma to a cohort of former political captives who did not seek formal psychological help. In the focus on trauma, the study did not recognize the former prisoners' own meanings and perceptions of the colonial power and their involvement in resisting Israeli occupation.

Similarly, a 2010 article, titled "Nature of Torture, PTSD, and Somatic Symptoms Among Political Ex-Prisoners," also registered "that both physical and psychological torture methods are dangerous for political prisoners' mental health, indicated by the elevated level of PTSD symptoms, especially so when combined" (Punamaki, Qouta, & El Sarraj, 2010, p. 534). Another article published in the *Journal of Traumatic Stress*, titled "The Relation of Appraisal, Coping Efforts, and Acuteness of Trauma to PTS Symptoms Among Former Political Prisoners" (Kanninen, Punamaki, & Quota, 2002), involving 103 male ex-prisoners from the Gaza Strip, does not explore how the enactment of *sumud* may have shaped the outcome of the interrogation encounter.

The infiltration of the discourses of trauma should be read within the larger post-Oslo scene in Palestine, which constituted a shift in the Palestinian political culture. The object of the Oslo Accords has been the transformation of colonial relations of antagonism while preserving colonial conditions of domination. The Oslo Accords intended to be a framework for future "coexistence" between Palestinians and Israelis amidst the continuation and intensification colonial domination and dispossession. Post-Oslo era witnessed a "liberal turn" in terms of the political culture, economic plans, and modes of subjectivity, which became saturated with liberal forms of politics and the process of the reproduction of liberal individual sentiments and attachments. This transformation has its own frames of reference, operations, and consequences that are different from those of *sumud*.

Post-Oslo transformations are engaged with creating individual autonomous subjects with liberal sensibilities that depart from the collective selfhood cultivated through *sumud*. In the post-Oslo era, the only way for Palestinians to be "recognized" in the international arena characterized by imbalance of power relations and with bias toward the Israeli colonizers was through the subjectivity of the individualized victim: the victim of human rights violations and of psychological trauma. The constructed subjectivity of the victim necessitates highlighting suffering and has no space for anticolonial struggle or *sumud* as bases for support and solidarity. In the context of the liberal turn, the body of work on trauma in Palestine is "reductionist, positivistic and individualistic in nature and scope" (Makkawi, 2009, p. 85).

Political Captivity from the Perspective of Sumud

Within the colonial condition in Palestine, political captivity, mass incarceration, and systematic physical–psychological torture of Palestinian captives have been widely employed as colonial techniques aiming at spreading terror, suppressing any form of anticolonial resistance, and reasserting the reality of the Zionist settler-colonial project over Palestine and the Palestinians. The interrogation encounter had become a condensation point for the colonial encounter that Palestinians had to confront. From the perspective of *sumud*, the interrogation is considered a war of wills. The torture is not conceived of as a traumatizing experience or a violation of human rights, but rather it is perceived as a colonial technique to be confronted, as reflected in the narratives of interrogation and torture that I present below.

Khaled, who had his first interrogation experience in 1995, in an interview on his interrogation experience, states that the question concerning the interrogation for him was “Who is going to break the other? Me or the interrogators and the Shabak?” This does not mean that Khaled did not suffer in the interrogation or that there were no moments of weakness throughout the interrogation. Yet Khaled transcended his suffering and the moments of weakness, and instigated his rebellious powers, as the following part of his narrative shows:

One moment in the middle stage of the interrogation I was totally exhausted, isolated from my world, community, friends, family, and comrades. I was starving, my body collapsed, and my psychological state was at an all time low. I started to think about scenarios I could tell the interrogators that would result in the least damage to my comrades and organization. I began to prepare what to say to the interrogators. I put my head under the water and suddenly I felt of myself as raffish and immoral. I asked myself, “How could I get to this state? I don’t deserve to be trusted by my comrades and organization.” I gathered myself and suddenly felt like a lion—a powerful being. This was a critical point in the interrogation that transformed me from one stage to another. From that point on, I had energy, as if the first day of the interrogation, a stage of defiance, confrontation, and *sumud*.

Khaled’s experience expresses the ways in which the enactment of *sumud* in the interrogation transforms the subject and strengthens him. Khaled had been affected by the multiple physical and psychological torture techniques; yet instead of ridding himself from suffering through providing a confession, he incarnated his comrades and transcended his weakness.

Mohammad, whose first interrogation experience took place at an early age, says that he had read books on the interrogation and the practice of *sumud*, and had extensive conversations with comrades who practiced *sumud*. His interrogation was not easy, as he described it:

The main techniques used during my interrogation were continuous shabah (tying up) in different painful positions in cold weather in the shabah yard, playing nonstop annoying music along with a great deal of insults and threats attempting to elicit horror in me. The interrogators exploited the fact of my young age and were constantly saying, “You are still a kid, we will break you and destroy your future. You have to confess.”

Despite his young age and the cruelty of the torture techniques employed on him, Mohammad does not refer to his interrogation experience as traumatizing:

The whole thing was very interesting to me and I felt at that moment that I am practically employing all my theoretical knowledge. This was a challenge for me. During the whole interrogation, the interrogators were telling me, "Tell the story, there are five confessions against you." And I would repeatedly say, "I have nothing to tell, they are liars." During the entire interrogation, I felt that I had a strange power that I discovered within myself. This power was fueled by my readings, beliefs, values, and relationships that I thought about all the time.

Throughout the interrogation, Mohammad derived his power from various sources: readings, beliefs, values, and relationships formed throughout the struggle against colonization. Within the colonial order in Palestine, arrest, interrogation, and torture become expected common experiences that Palestinian strugglers face and confront. The harsh interrogation experience is thus associated with challenging and destabilizing the colonial power relations. To face the interrogation and the torture employed within it, Palestinians-in-*sumud* had two options, as articulated by Iyad, another former detainee I held conversations with:

Within the condition of continuous hitting and shabah, there are two options: You either become submissive and servile or you challenge. To choose the latter option, you pay a price. But from the beginning I had decided on practicing *sumud*. I was mobilized by the readings and discussions I had and by the social environment that adopts *sumud*. For me, *sumud* is not a word; it is something that was baptized by the blood of people like Ibrahim El-Ra'ii, Mohammad Al-Khawaja, and others. In the cell, you think about the people you want to protect and not your own condition and physical pain. And you perceive the interrogator as someone you can defeat.

As Iyad expresses, the enactment of *sumud* engages the transcendence of the individual pain and the embodiment of the collectivity of strugglers. Iyad's conceptions as well as the conceptions and practices articulated by other Palestinians-in-*sumud* are concealed from the human rights and trauma discourses, which constitute the tortured Palestinian as an apolitical individualized victim in need of protection and treatment and not as a political struggler for freedom who embodies the collectivity of strugglers.

Many other interviews with Palestinians-in-*sumud* illustrate that the praxis of *sumud* constitutes a Palestinian political-psycho-affective subjectivity. It destabilizes the colonial power relations that are characteristic of the interrogation and consequently shifts the perceptions and meanings of torture, pain, and suffering. *Sumud* in the interrogation perceives the interrogation as a site for struggle in which the Palestinian confronts the interrogators. This perception negates the idea of the Palestinian captive as an agentless subject whose human rights are violated and who will inevitably be traumatized as a result of the violent interrogation and torture.

Colonial violence has been part of the lives of Palestinians and not constricted to the realm of incarceration and torture. Therefore, Palestinian captives perceive torture as another means of colonial violence to be faced and resisted. The cultivation of *sumud* in the interrogation involves the nurturing of a political relational subjectivity as opposed to the individual that liberal human rights and psychological discourses need and promote.

As illustrated above, *Sumud* is not merely a skill to be trained in; it transcends to become a psychoaffective state of mind and a political–ethical mode of being that becomes part and parcel of the public culture.

Towards a Palestinian Community Psychology

The discourses of trauma and human rights, which infiltrated post-Oslo Palestinian mental health research and practices, work through claiming universality and individualizing and depoliticizing subjects, as well as constituting subjects as victims in need of redemption. Drawing on such a critique, I want to offer a few suggestions for the form of Palestinian community psychology needed in colonized Palestine, particularly in areas of work concerned with political incarceration and Palestinian political captives.

Paradigms for community psychology in Palestine should be situated within the structural colonial system and the Palestinian anticolonial struggle. As such, enactments of community psychology focused on the consequences of colonial violence on the Palestinian subject should be wary of the uncritical adoption of trauma discourses, its associated diagnosis, and ways of constituting subjectivities. In contrast to the individualized and depoliticized enactments contained in trauma work, critical enactments may obtain significance when the subject of *sumud* is recognized as a collective, relational, and politicized-resistant subject. The latter characteristics form the internal powers of the Palestinian subject that should be recognized in any kind of work with Palestinians. The trauma and human rights that inform current community psychology practice work through concealing the empowering aspects of Palestinians and their praxis of struggle by asserting their victimhood and need for help and treatment.

Community psychology in Palestine should affirm the ideas of resistance and the legitimacy of the anticolonial struggles as part of the conceptions and preservation of mental health. Struggle and dignity are the main resources that Palestinians in general and Palestinian political captives in particular own and through which they confront the attempts of humiliation practiced by the colonists in the interrogation centers. Palestinians perceive torture that political captives encounter as part of the broader colonial violence that should be faced and confronted. Enactments of community psychology would need to critically understand how and why colonial violence, in particular the violence of torture, is not necessarily experienced as a traumatic event to be treated by professionals. Palestinian community psychology would need to interpret why Palestinian prisoners may choose to understand torture as the inevitable harsh cost of their engagement in the struggle for liberation and social justice.

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