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LAND ACKNOWLEDGMENT

Voices Against Torture is published on the Unceded Homelands of the displaced xwməθkwəy̓ m (Musqueam), sel̓í ̓lw̓ itulh (TsleilWaututh), and sḵwxw̱ ú7mesh (Squamish) Coast Salish peoples. We pay respect to the Elders past and present and are grateful for the many diverse Indigenous peoples who, over generations, cared for these shared Traditional Territories. We recognize the truth of violence, the painful history of genocide, and the forced removal that took place on this Ancestral Land. We are committed to the everyday actions that can help transform colonial impacts and help us move towards a culture of healing. This also means to us deeper alignment with the values rooted in anti-oppression and universal trauma-informed care, supporting a society based on equity, equality, and justice. We hold ourselves globally accountable to all human rights and to all Traditional Custodians of the Land wherever they now exist or compelled to co-exist. We comprehend that this Land Acknowledgement is a small but essential step in our ongoing process of remaining in right relations and continuum towards transparency and accountability.

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Editorial

In today's world, intrastate conflicts are driven by global players' conflicting geo-political and geo-economic interests. This unfortunate situation will likely continue shadowing different regions and countries, at least in the near to medium future. The resourceful developing regions and countries shall remain vulnerable to the onslaught of intrastate conflicts and wars. 'The New Confessions of an Economic Hit Man' (John Perkins, February 2016) explicates this thesis. The science of sociology of conflicts and peace further informs the underlying and precipitating factors involved in conflicts and civil wars, as well as possible approaches to contain the onslaught.

Given the present escalation at the global level, efforts to contain the damage caused by these conflicts and civil wars by helping secure basic human rights as the basis of human security must continue. As the saying goes, peace is not the absence of conflicts but the presence of justice; the efforts to promote peace must seek a just world. The human rights doctrine and the Convention against Torture provide some common ground on which such a movement could hinge.

Nelson Mandela said peace is not just the absence of conflicts but creating an environment where all can flourish regardless of social markers of difference. A just system alone can enable peace to flourish in societies and countries, affording equal opportunities for all. In the absence of a just system and the presence of a prevailing apartheid system, not only the risk of intrastate conflicts and civil wars is likely to be heightened, but poverty, hunger, malnutrition and disease will entrench beyond control in the world's vulnerable regions, plaguing the future of humankind. When the five permanent members of the United Nation's security council (USA, Russia, China, France, and the UK) are also in the top 6 weapons producers in the world (along with Germany), and these weapons make their way into all of the 50+ active armed conflicts around the world, we know that something is deeply twisted in our global thinking about peace and security.

In 2024, we have continued to witness horrific violence on the part of States in Sudan, Myanmar, Syria, and Afghanistan, among others, including also Israel's ineffective and overblown response to the terrorism and hostage-taking they were subject to. Tens of thousands of Palestinians - elderly, women, youth and children, have lost their lives in Gaza, with thousands more now living with disabilities and malnutrition, let alone beginning to discuss the intergenerational trauma inflicted and perpetuated through this Genocide. Despite the decision in favour of an immediate ceasefire by the International Court of Justice and most UN member states and the demand of civil society across the globe, the violence and forced displacement continue unabated. Many survivors and descendants of the victims of the 20th-century Genocide perpetrated against the Jewish people are also adding their voices to the growing calls for an end to the violence in Gaza.

There is, therefore, a need to strengthen the UN Human Rights Council, the #UnitedagainstTorture movement, other human rights arms and watchdogs, and the human rights enforcement mechanisms at global and national levels to secure a peaceful world for generations to come.

Farooq Mehdi and Frank Cohn

HUMAN RIGHTS OUTLOOK

To what extent does the ECOWAS-AU Gambian intervention ensure durable peace in Africa: Reflections on durability, impunity, deterrence, and human rights.

Prize F.Y. McApreko

Abstract

With the objective of contributing towards strengthening subsequent African-led interventions in the larger framework of African Solutions to African Problems, this paper engages critical discourse analysis in a reflection on the durability or otherwise of the 2016 UNSC-backed ECOWAS-AU intervention, which mediated in the aftermath of President Yahya Jammeh's refusal to accept presidential elections which he lost in The Islamic Republic of The Gambia. This case is analyzed in close comparison with circumstances leading former Liberian President Charles Taylor into exile before being hauled to the International Criminal Court (ICC) in The Hague for trial. Both cases are investigated in the light of human rights, "African Hospitality," impunity, deterrence and durability of such ad hoc interventions. It calibrates the strength of "African Hospitality" against international norms/law and examines the place of precedents and their possible implications on future occurrences. It makes the case that while the span of "African Hospitality" needs to be properly defined for exhaustive clarity, such interventions as those that encouraged former Charles Taylor to seek exile in Nigeria as well as the one that persuaded Yahyah Jammeh to seek exile in Guinea need to be configured such that they reflect the African Union's avowed position of zero tolerance for illegitimate regime change and its fight against impunity. It identifies that both the Liberian and Gambian interventions share shortcomings along fault lines of human rights, durability, impunity and deterrence. The study concludes that the failure to address these concerns could weaken public confidence in such interventions and compromise the interventions' durability. It proffers a portfolio of policy interventions that could strengthen such prospective interventions.

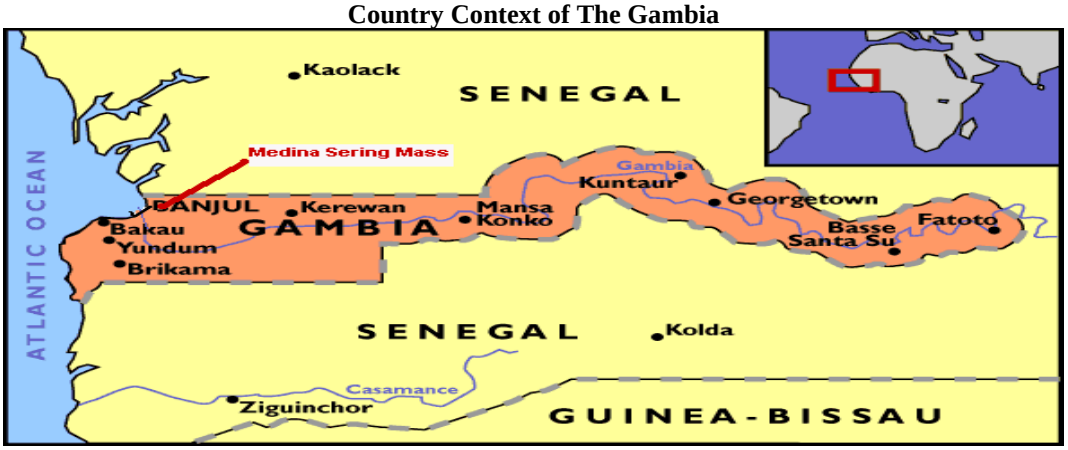
Keywords: *Durable Peace, Election Integrity, Human Rights, Deterrence, Impunity.*

Introduction

In 2016, president Yahya Jammeh's refusal to recognize presidential election results, which he lost, incurred the wrath of the Economic Community of West African States (ECOWAS) and the African Union (AU). It courted international condemnation, culminating in a UNSC-backed ECOWAS AU intervention. This paper examines the extent to which the intervention effectively addresses concerns of (i) human rights, (ii) impunity, (iii) deterrence and (iv) durability in Africa. These benchmarks are critical because they are inherent in the AU's philosophy of African Solutions to African Problems (AfSol) in its renewed flagship interest of zero tolerance for impunity, *coup d'états* and abhorrence for undemocratic regime change. This paper analyzes what it perceives could pass for a possible lacuna that might be exploited in the name of precedence in subsequent times. The overall objective is to contribute to shaping policy interventions toward addressing the identified benchmarks in a more exhaustive manner. The paper derives inspiration from the latter part of Point 14 of the Protocol, which calls for the pursuit of continuous peaceful and political resolution of the crisis.[1] It examines the extent to which Points 13, 12, 11, 9, 8 and especially **7** of the Protocol contribute to the quest for durable peace in The Gambia and Africa. This is even more critical given that presidential elections in Africa appear to make global headlines for election-related violence.

[1] See Appendix 1 for full version of the Joint Declaration.

Country Context of The Gambia



Map of the Gambia

Source:http://www.3rdwarescouts.org.uk/gambia/index.php?page=Medina+Sering+Mass

Country:	Islamic Republic of The Gambia.
Region:	West Africa.
Capital:	Banjul.
Current President: (Since 2017).	Adama Barrow
Immediate past President:	Yahya Jammeh.
Population:	Under Two Million.
Size: (Approximately).	4000 sq miles

One of Africa's smallest countries with an area of about 4,000 square miles, The Gambia lies between latitudes 13 and 14 degrees north and latitudes 13 and 17 degrees west. It is a small strip of land mass, almost entirely engulfed by Senegal, except for some 50 miles of coastline washed by the Atlantic Ocean in the westernmost part of West Africa. It is popular for its friendly beaches, which attract thousands of international tourists.

Brief Background to the Crises

The Gambia's political narrative under discussion traces its historical antecedents to the 1st December 2016 presidential elections in which former president Yahya Jammeh disregarded the democratic voice of the electorates. His 22-year reign as president suffered a nose dive as he lost power for which he initially conceded defeat. On 5th December, the country's electoral commission revised the results following counting irregularities that were reported in some areas. However, the recount did not impeach the overall outcome of the election, as it left Adama Barrow in a clear lead. Yet Yahya Jammeh declined that verdict. This was to set the tone for The Gambia's crisis as it provoked panic, which dashed hopes for the renaissance of a peaceful and functioning democracy. Lieutenant Yahya Jammeh himself has a political history dating as far back as 22nd July 1994 when he enthroned himself as president by ousting The Gambia's first president, Sir Dawda Kairaba Jawara, in a bloodless *coup d'état*. By 1996, he had metamorphosed into an elected president, winning his second term in 2001 in a largely considered free and fair election. In 2006, he won a third term as president and survived a fourth consecutive presidential term in 2011 in a widely criticized election. Then, in 2016, he failed in his bid to wield power, but he refused to concede defeat. Results declared by the country's Independent Electoral Commission put Adama Barrow at 263,515 votes (45.5%); Yahyah Jammeh at 212,099 (36.7%); and a third candidate, Mama Kandeh at 102,969 (17.8%).[2]

On 9th December, however, Yahya Jammeh uttered and stood by a dramatic declaration which would eventually catapult him into exile:

"After thorough investigation, I have decided to reject the outcome of the recent election. I lament serious and unacceptable abnormalities which have reportedly transpired during the electoral process … I recommend fresh and transparent elections which a God-fearing and independent electoral commission will officiate."

Locating the Crisis in Continental Context

In order to appreciate the Gambian crisis, it is appropriate to recall portraits of Africa's post-colonial governance trajectory since they have close cognates with the continent's political and historical overview. Africa's post independence political treatise is replete with distasteful accounts of military *coup d'états* and of

[2] "Gambia's Jammeh loses to Adama Barrow in shock election result"
Available at: https://www.bbc.com/news/world-africa-38183906
Retrieved: 11thNovember, 2020.

leaders, some of whom have held onto power by fair or foul means, including by usurping state machinery and state institutions to fortify their illegitimate occupancy of the presidency. Others have altered the state Constitution to give illegitimate legitimacy to their reign through unpopular referenda. Such challenges have been recorded in Burundi, Cameroon, Chad, the Republic of Congo, Djibouti, Guinea, Ivory Coast, Rwanda, Togo and Uganda[3].

In some cases, military leaders who seized political power through the barrel of a gun ended up transforming themselves into civilian rulers. The then Gambia's president was a former military leader who led The Gambia first as a military leader and Chairman of the Armed Forces Provisional Ruling Council (AFPRC) from 1994.

In Ghana, a country credited as a beckon for democracy in West Africa, the late Flt. Lt. Jerry John Rawlings came into leadership through a military *coup d'état* not once but twice: first on 4th June 1979, then on 31st December 1981. He presided over the affairs of the country and peacefully handed over power to democratically-elected Dr. Hilla Babini Limann, only to be dethroned by the same Jerry John Rawlings who had earlier handed over power to him. Rawlings then disowned his military posture in favour of civilian leadership and subsequently won two consecutive presidential elections in 1992 and 1996, serving a total of two decades before he peacefully handed over power at the end of a constitutionally mandated two terms in office. Several democratic elections have since characterized Ghana's governance system. This has not been the case in other parts of Africa. In Zimbabwe, Mr. Robert Gabriel Mugabe ruled Zimbabwe for four straight decades short of only three years, until he was literarily forced out of power by the military amidst days of public protests. A Black Nationalist leader, he established a one-party state over which he presided as president until 21st November 2017, when he bowed to military and political pressures in a revolt that revolved around accusations that he was making skirmishes to position his wife, Grace Mugabe, who had managed to become so politically active, rising rapidly to evolve as head of the Zimbabwe African National Union-Patriotic Front (ZANU-PF)[4], thus making her an automatic member of the Union's politburo, to succeed him.

Adem K Abebe [5] bemoans the syndrome of seeking extended mandate over what Constitutional provisions because it is suggestive that Africa is far from dismantling the (in) famous practice of "president for life", often characterized by suffocating effects on democracy and stability coupled with oppression and shrinking of civil and political liberties among others. As he notes, Africa is home to as many as seven of the ten longest-serving presidents in the world, citing the likes of Cameroon's Paul Biya, who has been in power since 1982, and Equatorial Guinea's Teodoro Obiang Nguema Mbasogo, holding onto power since 1979, but he also admits:

> ***In the last two decades, the continent, through the African Union (AU), has developed relatively effective ways of putting a halt to unconstitutional changes of government in the form of coups d'état. This policy effectively protects incumbent leaders. However the AU has yet to successfully tackle the problem of imperial presidencies.***

Numerous other African countries replicate different forms of such worrying circumstances. In the end, they tend to tarnish credible elections while assuming postures of power-drunk incumbency. Such has been Africa's post-colonial leadership snapshots, which have partly led to a series of military *coup d'états,* 'justified' as one of the only viable options for getting rid of despotic regimes, but it is also a system which the newly established AU abhors.

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[3] "Tampering with national constitutions is a threat to stability in Africa".
Available at https://reliefweb.int/report/world/tampering-national-constitutions-threat-stability-africa
Retrieved 20thMay, 2021.

[4] The ZANU-PF is a political organization which remained Zimbabwe's ruling party since the country attained political independence from white minority in 1980. The Organization was led for many years by Robert Mugabe, first Prime Minister with the Zimbabwe African National Union (ZANU): then as president from 1987 after a merger with the Zimbabwe African People's Union (ZAPU). However, the name ZANU-PF was retained throughout the reign of Mugabe.

[5]Adem K. Abebe "Africa's attempts to abandon practice of presidents for life suffers another setback"
Available at: https://theconversation.com/africas-attempts-to-abandon-practice-of-presidents-for-life-suffer-another-setback-144434
Retrieved:15thNovember, 2020.

Regional Intervention in the Gambia

Grounded in the vision of ensuring peace, good governance, and development in Africa, the continent's leadership took historic steps earlier in 2002 to disestablish the then ineffective Organization of African Unity (OAU) and replaced it with a more effective African Union[6], whose Constitutive Act equipped it with enhanced administrative mechanisms that empower it to intervene in matters of member states than its predecessor, including in cases of unconstitutional changes of government. This represented an important departure from the then OAU's "ineffective" doctrine of non-interference to a more engaging doctrine of non-indifference. The AU has since sought to carve a niche for itself in regional interventions[7] and the evolving philosophy of African Solutions to African Problems (AfSol). This enhanced mandate of the AU justified and facilitated the UNSC-backed ECOWAS-AU regional intervention in the aftermath of Gambia's post-2016 presidential election.

Thus in a well-coordinated diplomatic intervention which ensured an eventual transfer of political power from ex-president Yahya Jammeh to president Adama Barrow, the former's regime had been effectively dismantled such that even his own kith and kin African leaders failed to rally behind him. Even the Gambian army, over which he once superintended as Commander-in-Chief, tactically or technically shied away from offering him the anticipated loyalty as combined regional forces headed to The Gambian frontiers without facing the slightest resistance. Sustained and scaled-up pressure, with some African forces deploying combat equipment to the troubled state and intensified negotiations, eventually struck him to cooperate in bringing finality to his 22-year leadership dominance. So it came to pass that Yahya Jammeh finally fled into exile in Equatorial Guinea via Guinea Conakry on 21st January 2017, in accordance with Point 12 of the 14-point Joint Protocol on the Gambia.

Inauguration of Adama Barrow in the Gambian Embassy in Senegal

Three days earlier, on 19th January, amidst tensions and uncertainties, President Adama Barrow was made to take the Oath of Office as President of the Republic of The Gambia at the Gambian Embassy in neighbouring Dakar-Senegal. It was an unprecedented ceremony attended by Western Ambassadors to Senegal, the UN envoy for West Africa, and ECOWAS officials. To a large extent, the event endorsed the dearth of concern that the ECOWAS, AU, and the international community have regarding illegitimate leadership. It is particularly of great concern to this paper that, by this event, The Gambia has become one of the fewest African countries that have ever witnessed such symbolic political power transfer, except perhaps for what transpired at independence on 18th February 1965. Sadly, the subsequent swearing-in of President Adama Barrow into office in his native Gambia on the day that commemorated the country's independence anniversary at the independence stadium, unfortunately, did not serve this purpose either: It was an inauguration which only added to the checkered political history of The Gambia that throughout its two decades of independence, it had never witnessed a political handing over ceremony. Then again, of the only two presidents it has ever had since independence, one was sworn into office twice: once on Senegalese soil, then the other on The Gambian soil.

An Appraisal of the 14-Point Protocol

The prime place of this joint intervention is neither being contested nor underestimated. In the opinion of this paper, the intervention marks one of the most fulfilling tasks which the AU has undertaken since its coming into being. It is also particularly significant for several reasons, especially as it demonstrates the AU's capacity to engage in peaceful interventions and appropriate dialoguing mechanisms, even at the peak of political upheavals within member states. Next, it lends legitimacy to the AU's resolve to effectively implement its flagship founding doctrine of non-indifference inherent in its Constitutive Act. It further demonstrates promising leverage of the willingness of African leaders to deal with African problems tactfully. On the whole, it contributes significantly to demonstrating that Africa's leadership is coming to terms with the fact that if lasting peace and democracy are to prevail, then the sanctity of electoral credibility must be allowed to reign above all other interests at all times.

The fact that the intervention was successful without shedding even a single drop of blood is particularly held in high esteem by proponents of peace. While some international institutions, well-meaning figures, and thousands of people the world over generally lauded the intervention as a historical milestone and a victory for democracy in West Africa, others have hailed it, especially for its peaceful character. For instance, at the end of a two-day Board meeting of the Media Foundation for West Africa (MFWA) in the Senegalese capital, Dakar, on 25th and 26th January 2017, the first of its 10-point resolution noted in part:

"The Board highly commends the ECOWAS for its resilient efforts that ensured the resolution of the Gambian political crisis and the peaceful transfer of

[6] The AU is the African Union which had come to replace the OAU in 2002.
[7] Appendix 2 provides for various AU interventions on the continent.

power to H.E. President Adama Barrow, who won the December 1, 2016 presidential elections…"[8]

Chair of the Mo Ibrahim Foundation, on his part, expressed hope that this would herald the beginning of socio-economic development based on respect for human rights, freedom of expression and the rule of law, adding:

"However, this demarche should not in any way condone impunity for violations, atrocities and abuses that are related to the 22 years of authoritarian rule…"[9]

Cameron Duodu, a well-respected Ghanaian journalist, commended ECOWAS for being able to get rid of Yahya Jammeh without firing a single shot and opined that this should count as one of the greatest achievements of ECOWAS. He observes that the West African regional block's strict posture on the issue is admirable and adds: "The block needs to devise ways by which citizens of a misruled nation can get back their money and justice from a fleeing tyrant[10].

It is fairly self-evident that despite its remarkable successes, the intervention leaves in its wake some grey areas which, when not given appropriate and delicate attention, could be usurped into luring The Gambia back into bedlams. This paper joins the thousands of peace proponents worldwide in applauding the joint, determined and sustained initiative for a well-executed task. However, to promote enhanced intervention strategies for future interventions, this paper leaps further to walk a path less walked by generally appraising portions of the Declaration and the intervention.

Was it a Tale of one Gambia with two Presidents?

It is the contention of this paper that The Republic of The Gambia had been made to assume a delicate situation of "one Gambia with two presidents" at the time of President Adama Barrow's inauguration: one in the person of Yahya Jammeh, then holding onto power and resident at the Presidential Palace in Banjul, and the other, Adama Barrow, lurking in self-imposed exile in neighbouring Dakar-Senegal. This paper respectfully believes that an enhanced aura of human security could have prevailed if this dualism was averted, given its capacity to have triggered violent clashes between followers of both leaders, especially viewed against the teaming followership of Yahya Jammeh even at his point of departure into exile.

Convictions for this concern reside in the ruinous account of how Liberia was enmeshed in an eight-year (1989-1997) Civil War which left about 250,000 deaths[11]. It is recalled that this deadly engagement survived on the orders of two faction leaders whose dictates and wishes were so atrociously executed with blighted devotion by their various rebel supporters. Sadly, 1999 opened the corridors to a second wave of this intrastate war in which once again, as is in many violent conflicts, it was the rebel groups who represented the followership of their respective leaders, who held peace to ransom by unleashing violence and heinous crimes against innocent unarmed civilians, sometimes spreading into neighbouring states. Similar circumstances are traceable to innumerable intrastate wars fought across Africa, as happened in Sierra Leone's civil wars, notably 1991-2002. The high number of votes secured in favour of Yahya Jammeh, together with those who might not have voted for Adama Barrow, indicated that Yahyah Jammeh wielded substantial followers. The sheer number of Gambians who still demonstrated allegiance to the fleeing Yahya Jammeh demonstrates this. It suggests an indication that there could have been high casualty levels if Yahya Jammeh had wanted to fight back, though he would have still lost.

Relevance of this Concern

Concerns for this paper are invoked, among others, by the fact that, on 16th January 2020, *Deutsche Welle (DW),* one of Germany's most authoritative international broadcasters, published a write-up captioned: *"Gambia: Thousands march for ex-ruler Yahya Jammeh's return."* The write-up reveals the power of followership and the extent to which such a support base could go. In it, a purported 26-year-old supporter of the exiled Yahya Jammeh is quoted as telling the AFP: *"We need [Jammeh] 100 percent. We are ready to die for him".* For emphasis, the second and third paragraphs of the write-up are quoted below:

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[8] The Gambia: MFWA Commends ECOWAS, Urges President Barrow To Undertake Reforms, Available at: http://peacefmonline.com/pages/local/news/201702/304953.php Retrieved, 3rd February, 2017.

[9] Mo Ibrahim Salutes Gambians, Commends ECOWAS. Available at: http://m.myjoyonline.com/marticles/world/mo-ibrahim-salutes-gambians-commends-ecowas Retrieved: 20thMarch, 2017.

[10] Cameron Duodu, Available at:https://www.pambazuka.org/democracy-governance/ecowas-has-done-well-%E2%80%A6 Retrieved, 2nd February, 2017.

[11] Liberia Country Profile, Available at: https://www.bbc.com/news/world-africa-13729504 Retrieved: 11thNovember, 2020.

"Yahya Jammeh supporters in Gambia gathered on the outskirts of the capital, Banjul, on Thursday carrying banners, placards and photographs of the former president, who ruled from 1994 until January 2017 when he fled into exile. The protesters from the Alliance for Patriotic Reorientation and Construction party (APRC) demanded that regional and international bodies honour an agreement allowing Jammeh, who is in exile in Equatorial Guinea, to return".

The above quote is reported to be a follow-up to audio in which exiled Yahya Jammeh asserted his right to return to The Gambia, citing the Joint Declaration under discussion, which had made rounds the previous week. Other portions read:

"Before Jammeh left here for exile, there was an agreement for him to come back into the country after three years," she said, referring to a promise by the United Nations, together with the Economic Community of West African States (ECOWAS) and the African Union (AU), to work with Gambia's government to ensure Jammeh is "at liberty to return to The Gambia at any time of his choosing".

In a sharp rebuttal, however, spokesperson Ebrima Sankareh indicates that the Government never signed any such document, emphasizing:

"Jammeh "consistently references an accord that he claimed was signed by UN, AU and ECOWAS, and Gambia's government as well," ... "I have talked to President Barrow about it, and the president has never signed any accord or agreement with President Jammeh. He [Barrow] has never seen one and has never been shown one…"

He told BBC that if Yahya Jammeh returns to The Gambia without permission, "the Gambian government cannot guarantee his safety and security." Meanwhile, Mr. Jatta, the interim leader of Mr. Jammeh's Alliance for Patriotic Reorientation and Construction party, contends that Mr. Jammeh should be allowed to live in peace in The Gambia rather than be put on trial over allegations of human rights abuses, warning that any attempt to arrest Mr. Jammeh would lead to "bloodshed", emphasizing: "Nobody will dare to arrest him." All these eventually elicit legitimate questions such as: What are the limitations to Yahya Jammeh's right to return to The Gambia, especially as a former Head of State and a native? Who determines Yahyah Jammeh's right to return to The Gambia, and after how long? What is the scope of understanding for using the word "Temporary" as used in paragraph 12 of the Declaration? To what extent does his return to The Gambia at any given point threaten or not threaten the relative peace in The Gambia? Within what parameters should his return be sanctioned, considering point 12 of the Declaration? It would appear that such seeming indefiniteness in portions of the Declaration leaves a communication gap that could be exploited to the advantage of whoever invokes it to the detriment of the other. Consider again that: Whereas Point 8 of the Protocol states:

"ECOWAS, the AU and the UN commit to work with the Government of The Gambia to prevent the seizure of assets and properties lawfully belonging to former President Jammeh or his family and those of his Cabinet members, government officials and Party supporters, as guaranteed under the Constitution and other Laws of The Gambia";

Point 9 provides that:

"*In order to avoid any recriminations, ECOWAS, the AU and the UN commit to work with the Government of the Gambia on national reconciliation to cement social, cultural and national cohesion.*

Cognizant that one of the fundamental objectives of the Constitutive Act of the AU is to condemn and reject impunity, this paper is concerned about the extent to which Point 8 contributes to addressing the impunity conundrum. In order to make the portion that emphasizes prevention of seizure of lawful asserts locally relevant to the Gambian scheme of affairs as it stands, perhaps there ought to have been some elements of accountability which effectively established what lawfully belongs to Yahya Jammeh and his regime members so that they are not unnecessarily "harassed" for what legitimately belongs to them. Unfortunately, the Declaration appears either silent or unclear on this. This paper contemplates that if the doctrine of rejecting impunity must succeed, a provision that downplays accountability in any form undermines the march against impunity by upholding an implied indemnity or immunity. On account of this, the paper opines that Provision **7** of the Protocol sadly fails to advance this important cause. The paper is inclined to believe that President Adama Barrow's declaration of intent to establish a Truth, Reconciliation and Reparations Commission (TRRC) to investigate any possible crimes committed by Yahya Jammeh, yet cautioning non-prosecution might be interpreted as tacitly endorsing essential elements of immunity and impunity:

Otherwise, how does the world determine what rightly belongs to Yahya Jammeh and what does not, especially at a time when he already stands accused in the court of some public for allegedly depleting the Gambia's economic wealth by flying away a fleet of luxury cars and other items that were reportedly loaded into a cargo plane at his behest? How does the Gambia reconcile with news that his departure was associated with the disappearance

of huge sums of money from The Gambia's state coffers within weeks of his hesitant departure? How does The Gambia deal with legacies of alleged human rights abuses for which Yahya Jammeh's regime stands accused? These are legitimate concerns whose exhaustive answers would add finesse to the Declaration while advancing the AU's avowed stance against impunity.

As Point **7** provides,

"*ECOWAS, the AU and the UN urge the Government of The Gambia to take all necessary measures to ensure that there is no intimidation, harassment of former regime members and supporters, in conformity with the Constitution and other laws of The Gambia"*

Without prejudice, the intent and investigation of alleged crimes could be interpreted as tacit "harassment" and "intimidation". If this is right, then the premises of the intended TRRC would appear potentially moribund at birth and may not inure to the needed durable peace, rule of law and social justice. This is because, with time, these polemic intervention strategies would have set distasteful precedents that could become the norm rather than the exception. It is imperative that this is prevented by ensuring that effective deterrence is upheld where and when applicable to promote accountability.

Is "African hospitality": a Case for Immunity or Impunity?

1) Point 10 of the Protocol speaks to the idea of offering "African hospitality" and states:

"ECOWAS, the AU and the UN underscore strongly the important role of the Gambian Defense and Security Forces in the maintenance of peace and stability of The Gambia and commit to work with the Government of The Gambia to ensure that it takes all appropriate measures to work to ensure that host countries that offer "African hospitality" to former President Jammeh and his family do not become undue targets of harassment, intimidation and all other pressures and sanctions, support the maintenance of the integrity of the [Defense and] Security Forces and guard against all measures that can create division and a breakdown of order"

Learning from how precedents impact comparable subsequent events, and especially because this intervention is African-led and could be seen positively in the limelight of Afsol, this paper seeks to question the extent and context of "African hospitality" as used: "What exactly does 'African hospitality' constitute, especially captured in inverted commas?" This inquiry finds legitimacy in precedence reminiscent of a June 2003 incident when Nigeria offered asylum, or call it "African hospitality" to former Liberian president Charles Ghankey Taylor in a slightly comparable circumstance, also as a way of fostering peace in the then war-torn Liberia. It took the international community, and especially the human rights fraternity, only a short time to proclaim that Nigeria's act of "African hospitality" was inconsistent with international law and, therefore, could not be sustained.

Facts of the case under reference are that, under the auspices of African leadership, led by then Nigerian president Olusegun Obasanjo and former South African president Thabo Mbeki, and some members of the international community, a peace deal was brokered within some specific parameters that encouraged Charles Taylor to relinquish his presidency of Liberia, leave and never directly or indirectly interfere with Liberia's politics for the sake of peace. This was underpinned by assurances that Charles Taylor would be granted safety from arrest and prosecution. It also entailed the provision of a safe and reasonable accommodation in Nigeria for himself and his family for the foreseeable future. Two years into that "foreseeable future", the pressure was mounted from within and outside Africa, arguing that Nigeria's provision of asylum (African hospitality) to Charles Taylor was an attempt to shield him and was inconsistent with international law[12]. There was an outpour of public outcry from interest groups, notably Civil Society Organizations (CSOs) and Non-governmental Organizations (NGOs) rejecting this 'African hospitality'. In a public document dated 11th August 2005, Amnesty International, under the banner of Campaign Against Impunity, submitted:

"Two years after Liberian President Charles Taylor fled for exile in Nigeria, Nigerian President Obasanjo should no longer allow Taylor to escape prosecution for crimes against humanity and war crimes committed during Sierra Leone's civil war"[13].

[12] Amnesty International Press Release, "Liberia: Nigeria's offer of "asylum" to President Taylor flouts international law" Available at: https://www.amnesty.org/fr/wp-content/uploads/2021/06/afr340152003en.pdf Accessed: 2nd February, 2024.

[13]Amnesty International Press Release, AFR 44/o18/2005, News Service No 219.

The opening statement of paragraph 4 of the afore-mentioned document noted further:

"Nigeria is swimming against the tide of international justice…It is high time Nigeria did the right thing… "

This evokes the dilemma that if the trump card for pursuing Charles Taylor's departure from Liberia was in the interest of peace, how different is the case of Yahya Jammeh, and how did Charles Taylor's case eventually involve pursuing human rights? Whether the case for Yahya Jammeh will remain at the level of peace or it will eventually tow the footprints of Charles Taylor, only time will tell, but what would be the locus of the current "African hospitality" under which Yahya Jammeh resides in exile? Believing that durable peace and its derivatives are some of the highest aspirations among the world's virtues, such establishment and sustenance are driven by people and their social arrangements, including political order. This justifies durable peace as a process rather than an event, and just as Galtung (2000) observes:

Peace is a revolutionary idea; peace by peaceful means defines that revolution as nonviolent. That revolution is taking place all the time; our job is to expand it in scope and domain ... to work for peace is to work against violence by analyzing its forms and causes, predicting in order to prevent it, and then acting preventively and curatively since peace relates to violence much as health relates to illness (Galtung, 2000: xi).

This quote resonates with the position of this paper that durable peace can neither be established in a vacuum nor be built upon frameworks of injustices and disregard for human rights. Identifying with and taking inspiration from the reasoning that peace is not the mere absence of manifest war or violence, this paper sees the need to tackle the imperatives for seeking the establishment of structures and policies that have the capacity to contain a durable regime of positive peace in a post-Yahya Jammeh Gambia. This lends true meaning to the objective of the 14-Point Joint Declaration on The Gambia towards "*reaching a peaceful resolution to the political situation in The Gambia".* The same should hold in comparable circumstances in the rest of Africa. In this context, therefore, some pertinent questions that have already been raised include: *"How does The Gambia deal with the legacies of decades of alleged human rights abuses, atrocities and other crimes levelled against the Yahya Jammeh regime?* If not handled well, these unanswered questions could become the Achilles' Heels of the Joint Declaration. This paper is afraid that this might come back to hurt the intended objectives of the Declaration in the future. They could also potentially compromise the streams of trust when applied to a comparable situation in the future. This paper's position is that if such interventions are to be effective and sustainable, then such Declarations must show robust in-built mechanisms that should not leave questions subject to future interpretations. In this regard, the scope and span of "African Hospitality" should be exhaustively well-defined and not framed ambiguously. Particularly, how do all these relate to news making rounds that the Gambian Government intends to prosecute ex-dictator Yahya Jammeh?[14]

Durability and Lessons Learnt

Lessons learnt from the two "African hospitality" contexts discussed lead this paper to contemplate the extent to which the Gambian intervention inures to the realization of durable peace. Learning from the Liberian context, it is unclear the extent of durability that the intervention might have had were it not for Charles Taylor's failed escape attempt and his consequent arrest and surrender to the ICC. In the hypothetical case that he had managed to return to Liberia, the durability of peace could have suffered. Again, if he had successfully fled from Nigeria, durable peace would have been in question, irrespective of where Charles Taylor might have found himself. In the context of The Gambia, if the Declaration as implemented so far is robust enough to withstand possible agitations comparable to the Liberian situation, that might be good enough. However, should The Gambia later follow in the footprints of Liberia, what would become the fate of Yahya Jammeh? Would other African leaders be convinced enough when offered "African Hospitality"? When does "African Hospitality" become good or bad? "African Hospitality" truly needs clarity. To what extent could future Declarations contain the interests of perpetrators and victims? These are food for thought whose responses would be considered in an intended Part II of this paper. Until then, however, there is certainly the need for change, but where do we find the needed change?

Theory of Change and Deterrence

This paper draws on the United Nations Development Assistance Framework (UNDAF) 2017 to propose a theory of change. UNDAF identifies the theory of change as a method that explains how a given intervention, or set of interventions, is expected to lead to a specific development change, drawing on a causal analysis based on the available evidence (United Nations Development

[14] Gambian Government plans to prosecute ex-dictator Jammeh, Available at: https://www.africanews.com/2022/05/26/gambian-government-plans-to-prosecute-ex-dictator-jammeh/ Retrieved:14th March, 2023.

Assistance Framework [UNDAF 2017]). In order to make such actions as discussed above unattractive to leaders who might be considering variants of such actions, this paper proposes the incorporation of the theory of change in ad hoc intervention documents such that, rather than almost entirely 'pampering' offending leaders out of office, the intervention protocols should consider incorporating bold statements that warn perpetrators of the implications of their actions and inactions. This will ensure that perpetrators are not seen to be shielded with immunity for life. The theory of change should incorporate essential elements of deterrence that make such conduct unattractive to potential perpetrators. As Stachowiak (2010) notes, the theory of change as a concept has strong roots in multiple disciplines with increasing connections with sociology and political science. Deterrence in itself is seen as a strategy to shape another's perception of cost and benefits to persuade threatening behaviour (Kersanskav (2020: 9). This makes deterrence useful here because its operational model is one of preventive rather than responsive, thereby creating a forward-looking and strategic approach (Kersanskav (2020: 7). By engaging deterrence as part of the theory of change, both concepts complement each other in reinforcing the AU's renewed interest in zero tolerance for undemocratic regimes. Next, the principal factor that underpins deterrence will ensure that the cost of an undemocratic regime is higher than that of the other way round. This will provide reasonable caution in the minds of potential perpetrators regarding perceived immunity while assuring the citizenry of no indemnity.

Conclusions

This paper submits that the pursuit of accountability, justice and human rights must not be disengaged from the quest for durable peace in Africa; otherwise, the continent might end up pursuing negative peace at the expense of a flourishing positive peace. At over 60 years of political independence, Africa has come of age and must be seen to be doing the right things at the right times. Africa's resolve to adapt representative democracy underpins the view that the continent and its leadership appreciate elections as one of the linchpins around which democracy revolves. Therefore, it must unlearn the disrespect for dictates of democratic decisions through the electoral process. Africa's leadership must learn to appreciate that political power is only transient and not a preserve; that if they refuse to relinquish power when due, time and circumstances will eventually repudiate and condemn them to their fate. AU leadership must maintain and strengthen tough, decisive postures with despotic regimes, albeit tactfully and peacefully, with coercive diplomacy rather than the threat of a combined force. African leaders must at all times envisage being held accountable for their commissions and omissions during their tenure of office. The 2017 UNSC-backed ECOWAS-AU Protocol on the Gambia is most appropriate. However, Points 13, 12, 11, 9, 8 and 7, as discussed above, leave a penumbra of unclarity and uncertainty in the beautiful skies under which the good people of The Gambia currently live in relative peace. This detracts from the otherwise excellent shine and *finesse* of the Declaration and its implementation. If poorly managed, this detraction could come back to haunt and hurt the good people of The Gambia.

Policy Recommendations

On account of the above discussions, it is hereby recommended for subsequent interventions that:

(1) As much as possible, interventions that seem to create 'double leadership' simultaneously should be avoided so that followership of the factions do not take undue advantage to unleash violence and disorder;
(2) In the context of an exiling Head of State, the provision of explicit modalities for his or her return to the native country in line with international human rights law and the Constitution of the state involved would help preserve peace and order;
(3) Providing for concerns relating to probity, accountability, and justice in line with the fight against impunity might be helpful in securing promises for sustainable peace;
(4) In some cases, it is important that offenders are held accountable for their commissions and or omissions;
(5) One challenge facing many African states has to do with the "election security and credibility deficits" of the electoral system. For instance, whether Yahya Jammeh's call for a recount of election results was legitimate or not, the recount altered the final results, and though its magnitude was not substantial enough to overturn the results, it failed to protect and promote the entire electoral system in its well-deserved trust and integrity. This is very critical, and though not the responsibility of the Declaration, it serves a good purpose for stakeholders to strengthen the integrity of elections.

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APPENDIX 1

Joint Declaration by the Economic Community of West African States, the African Union and the United Nations on the Political Situation of the Islamic Republic of The Gambia

1. Following the Decision of the Summit of the ECOWAS Authority taken on 17th December 2016 in Abuja, Nigeria, Mediation efforts, including visits to Banjul, were undertaken by the Chair of the Authority of ECOWAS Heads of State and Government, HE President Ellen Johnson Sirleaf, the Mediator, HE President Muhammadu Buhari and Co-Mediator on The Gambia, HE former President John Dramani Mahama, along with HE President Ernest Bai Koroma to mediate on the political impasse with Sheikh Professor Alhaji Dr. Yahya A. J. J. Jammeh.

2. Following further mediation efforts by HE President Mohamed Ould Abdel Aziz of the Islamic Republic of Mauritania and HE President Alpha Conde of the Republic of Guinea Conakry with HE Sheikh Professor Alhaji Dr. Yahya A. J. J. Jammeh, the former President of the Republic of The Gambia, and in consultation with the Chairperson of the ECOWAS Authority of Heads of State and Government, the Chairperson of the African Union and the Secretary-General of the United Nations, this declaration is made with the purpose of reaching a peaceful resolution to the political situation in The Gambia.

3. ECOWAS, the AU and the UN commend the goodwill and statesmanship of His Excellency former President Jammeh, who with the greater interest of the Gambian people in mind, and in order to preserve the peace, stability and security of The Gambia and maintain its sovereignty, territorial integrity and the dignity of the Gambian people, has decided to facilitate an immediate peaceful and orderly transition process and transfer of power to President Adama Barrow in accordance with the Gambian constitution.

4. In furtherance of this, ECOWAS, the AU and the UN commit to work with the Government of The Gambia to ensure that it assures and ensures the dignity, respect, security and rights of HE former President Jammeh, as a citizen, a party leader and a former Head of State as provided for and guaranteed by the 1997 Gambian Constitution and other Laws of The Gambia.

5. Further, ECOWAS, the AU and the UN commit to work with the Government of The Gambia to ensure that it fully guarantees, assures and ensures the dignity, security, safety and rights of former President Jammeh's immediate family, cabinet members, government officials, Security Officials and party supporters and loyalists.

6. ECOWAS, the AU, and the UN commit to working with the Government of The Gambia to ensure that no legislative measures are taken by it that would be inconsistent with the previous two paragraphs.

7. ECOWAS, the AU and the UN urge the Government of The Gambia to take all necessary measures to assure and ensure that there is no intimidation or harassment of former regime members and supporters, in conformity with the Constitution and other laws of The Gambia.

8. ECOWAS, the AU and the UN commit to work with the Government of The Gambia to prevent the seizure of assets and properties lawfully belonging to former President Jammeh or his family and those of his Cabinet members, government officials and Party supporters, as guaranteed under the Constitution and other Laws of The Gambia.

9. In order to avoid any recriminations, ECOWAS, the AU, and the UN have committed to working with the Government of The Gambia on national reconciliation to cement social, cultural, and national cohesion.

10. ECOWAS, the AU and the UN underscore strongly the important role of the Gambian Defence and Security Forces in the maintenance of peace and stability of The Gambia and commit to work with the Government of The Gambia to ensure that it takes all appropriate measures to support the maintenance of the integrity of the [Defence and] Security Forces and guard against all measures that can create division and a breakdown of order.

11. ECOWAS, the AU and the UN will work to ensure that host countries that offer "African hospitality" to former President Jammeh and his family do not become undue targets of harassment, intimidation and all other pressures and sanctions.

12. In order to assist a peaceful and orderly transition and transfer of power and the establishment of a new government, HE former President Jammeh will temporarily leave The Gambia on 21 January 2017, without any prejudice to his rights as a citizen, a former President and a Political Party Leader.

13. ECOWAS, the AU and the UN will work with the Government of The Gambia to ensure that former President Jammeh is at liberty to return to The Gambia at any time of his choosing in accordance with international human rights law and his rights as a citizen of the Gambia and a former head of state.

14. Pursuant to this declaration, ECOWAS will halt any military operations in The Gambia and will continue to pursue peaceful and political resolution of the crisis. ***Done this 21st day of January 2017 in Banjul, The Gambia***

Available at: https://unowas.unmissions.org/joint-declaration-ecowas-au-and-un-political-situation-islamic-republic-gambia

Fundamental Human Rights Within Communication Perspective

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Abstract

The Universal Declaration of Human Rights underscores the profound significance of the right to communicate, encompassing freedom of opinion and expression and language-related rights without discrimination. Specifically, Article 19 of the declaration holds a pivotal role in exploring the interplay between communication rights and various editions of the International Journal of Speech-Language Pathology; the focal point revolves around the multifaceted theme of communication rights, delving into it from four distinct vantage points. Firstly, it scrutinizes the overarching rights of every individual to engage in communication, emphasizing the fundamental nature of this aspect in the broader context of human rights. The discussion then shifts to communication rights specifically pertaining to individuals with communication disabilities, acknowledging the unique challenges they face and advocating for inclusion. Additionally, the special issue examines children's communication rights, recognizing the significance of fostering a communicative environment conducive to their development and expression. Lastly, it explores communication rights in the context of language, unravelling the intricacies associated with linguistic rights and their intersection with broader human rights principles. Throughout the discourse, the special issue underscores the critical nexus between the human right to communication and its alignment with various national and international declarations, policies, and practices, thereby contributing to a comprehensive understanding of this vital facet of human experience. The featured articles encompass diverse global perspectives, offering firsthand narratives from individuals whose right to communicate has faced challenges or has been preserved. Additionally, the review proposes a three-step approach to bolster communication rights: recognizing individuals, adapting communication styles, and dedicating time to active listening. Envisioning the future advocacy for communication rights, there is a potential to draw insights from the methodology employed in formulating the Yogyakarta Principle.

Keywords: *Human Rights, International Law, Communication Rights. Yogyakarta Principles, Peace.*

Introduction

Communication is a fundamental aspect of human existence, serving as a cornerstone for interaction across personal and global spheres McEwin & Santow, (2018). The ability to convey and comprehend messages is crucial for societal cohesion. While traditional forms of communication, such as speaking, listening, reading, and writing, are prevalent, alternative modes, such as sign languages and online audio/video communication, also play significant roles. However, individuals facing challenges in utilizing these modes, or those relying on unconventional communication methods, may encounter barriers, creating hurdles for effective interaction. Communication obstacles can surface due to limitations at the individual level or societal influences, creating a disproportionate impact on various groups, including those with communication disabilities, children, and individuals who are not proficient in the prevalent languages of their communities Anyanwu, C. (2018).

The obstacles these groups face are exacerbated by the intersection of personal limitations and societal factors, creating a collective barrier to effective communication. Those with communication disabilities experience heightened challenges, facing significant impediments in expressing themselves. The intricate interplay between individual constraints and broader social dynamics further complicates their ability to communicate seamlessly. We must look at and deal with the person and the community to overcome these challenges. This helps create a friendly place for everyone to communicate well. Children may find it harder to get through these obstacles.

Furthermore, individuals who do not possess proficiency in the dominant languages of their communities experience a pronounced effect, exacerbating the disparities in communication accessibility. Addressing these challenges necessitates a comprehensive approach that recognizes and mitigates both individual and societal contributors to foster a more inclusive communicative environment. Addressing these barriers is imperative to ensure the inclusive participation of all individuals in

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various programs, services, and opportunities Farrugia-Bernard, A.M. (2017).

Educational initiatives must prioritize awareness to alleviate ignorance about diverse communication methods. Attitudinal barriers can be dismantled through fostering empathy and understanding of different communication needs. Overcoming physical obstacles, such as inaccessible environments, is crucial for facilitating communication for all individuals. Comprehensive policies and programmatic enhancements are essential to dismantle systemic limitations that impede effective communication for those with diverse needs.

International Conventions and Declarations on the Right to Communication

The right to communicate is a fundamental human right upheld by international conventions and declarations. Article 19 of the Universal Declaration of Human Rights asserts, "Everyone has the right to freedom of opinion and expression, including the freedom to hold opinions without interference and to seek, receive, and impart information and ideas through any media and regardless of frontiers." This emphasizes that individuals, regardless of age, status, ability, or communicative capacity, possess the right to communicate (United Nations, 1966a)

The concept of the right to communicate extends beyond mere freedom of opinion and expression, encompassing a broad spectrum of rights and freedoms that transcend language distinctions. It encapsulates a comprehensive set of entitlements beyond the simple freedom to express one's views (United Nations,1948). This notion recognizes that communication rights are not constrained by language differences, emphasizing the inclusivity of various aspects of expression. The right to communicate thus signifies a holistic framework that embraces diverse forms of communication rights, transcending linguistic boundaries. This universal right plays a vital role in fostering equality, justice, and human dignity. Encompassing freedom of expression, the right to information, and universal access to information is not a novel and independent right but a collective term that encapsulates various existing rights. The Universal Declaration of Human Rights underscores that every individual is entitled to all rights and freedoms without any language-based differentiation, highlighting this right's inclusive and fundamental nature (United Nations, 1948).

Various regional and international treaties define freedom of expression as a human right, emphasizing the significance of access to communication services. Some treaties also outline legitimate restrictions on communication, ensuring a balance with other rights and interests (United Nations, 1966a).

The process of individual communication empowers people to report human rights violations to the United Nations. This procedure applies to parties that acknowledge the committee's authority to investigate individual complaints about breaches of particular human rights treaties (United Nations, 1965).

Fundamentally, the right to communicate is a global human right that encompasses freedom of opinion and expression, access to information, and the utilization of any media to convey messages and ideas. It plays a vital role in the quest for equality, justice, and the safeguarding of human dignity (United Nations, 1989).

Numerous international instruments explicitly underscore the imperative to respect and uphold human rights and fundamental freedoms "without distinction of language." Notable among these is Article 2 of the Universal Declaration on Human Rights (United Nations, 1948), along with Articles 2, 4, 14, 24, and 26 of the International Covenant on Civil and Political Rights (United Nations, 1966a). The International Covenant on Economic, Social and Cultural Rights (United Nations, 1966b) further emphasizes this principle in Article 2, as does the Declaration on the Right to Development in Article 6. (United Nations, 1986). The Convention on the Rights of the Child (United Nations, 1989) also encompasses the significance of non-discrimination based on language in Articles 2, 29, 30, and 40. The Universal Declaration on Cultural Diversity (UNESCO, 2001) reinforces these commitments through article 5, and the Declaration on the Rights of Peasants and Other People Working in Rural Areas (United Nations, 2015) echoes this sentiment in Article 10. These collective provisions constitute a robust framework within various international agreements and declarations, collectively striving to advance and safeguard human rights globally (United Nations, 2007a).

The articles from these international instruments collectively highlight the paramount importance of upholding human rights and fundamental freedoms without discrimination based on language. Encompassing declarations ranging from the foundational Universal Declaration on Human Rights to more specific agreements like the Convention on the Rights of the Child and the Declaration on the Rights of Peasants, these provisions underscore a shared commitment to fostering a world where linguistic diversity does not serve as a basis for differential treatment (Carroll et al., 2017). This comprehensive framework reflects a global consensus on the principle that the dignity and rights of individuals, as enshrined in

these instruments, are to be universally respected and protected, irrespective of linguistic distinctions. Through these collective efforts, the international community aims to promote inclusivity and prevent discrimination on the grounds of language, contributing to the broader goal of ensuring human rights are enjoyed by all (Hersh, 2017, p. 40).

The commitment to respecting and safeguarding human rights and fundamental freedoms "regardless of language" is explicitly outlined in multiple international instruments, including: The significance of communication rights transcends mere facilitation of freedom of opinion, expression, and language; it serves as a cornerstone for the realization of various other fundamental human rights. Effective communication catalyzes social and political engagement, fostering an environment where individuals can voice their perspectives without fear of reprisal. When these communication rights are upheld, people find it easier to exercise their right to work, as open and transparent communication channels enable the dissemination of information about job opportunities, skills development, and workplace conditions. Additionally, access to information through effective communication supports the right to education by ensuring that knowledge is shared widely, empowering individuals with the tools they need to pursue learning and personal development (Marshall & Barrett, 2017, p. 45).

Moreover, the impact of communication rights extends to the broader realization of human rights. Transparent and accessible communication facilitates the exchange of ideas, enabling individuals to participate in civic activities and advocate for social justice. It acts as a bridge for communities to connect, share experiences, and collectively address challenges, enhancing overall quality of life. In essence, the protection and promotion of communication rights create an enabling environment where the full spectrum of human rights, including work, education, and civic participation, can flourish.

These rights are codified in various international agreements, including the Universal Declaration on Cultural Diversity, the Declaration on the Rights of Indigenous Peoples, and the International Covenant on Civil and Political Rights. Furthermore, specific communication rights are outlined for individuals with disabilities, underscoring their fundamental right to influence the conditions of their existence through communication and actively participate in communication interactions (et,al Hersh, 2017).

The essential freedom of opinion, expression, and language plays a pivotal role in enabling individuals to exercise a range of fundamental human rights, including the right to work, education, marriage, property ownership, self-determination, freedom of religion, and social security. These liberties form a foundational framework for individuals to fully realize and enjoy their inherent rights and contribute to a society that values diversity and individual agency. Those with communication and language differences from the mainstream may encounter challenges in fully engaging in societal activities without targeted support. For example, individuals with aphasia post-stroke may struggle to express themselves, impacting their identity, competence display, and overall participation in life. In the twenty-first century, effective communication is vital for success, as highlighted by the Australian Bureau of Statistics, which found that people with communication disabilities often face employment restrictions and limited participation in outside activities (et al. Hersh, 2017).

In the contemporary context, communication rights are crucial, encompassing freedom of expression, democratic control of media, cultural engagement, linguistic entitlements, educational access, privacy preservation, assembly freedom, and the right to self-determination. These rights ensure inclusiveness and access to communication tools and prevent exclusion. Protected by Article 19 of the UN Universal Declaration of Human Rights, freedom of expression is fundamental, allowing individuals to express thoughts, share information, and advocate for societal improvements without fear or interference. It serves as a cornerstone for other human rights, fostering an open society where people can access justice and enjoy their fundamental rights (United Nations,1966a).

The National Joint Committee's Communication Bill of Rights emphasizes that individuals with disabilities have the fundamental right to influence their conditions through communication. It outlines specific communication rights to be guaranteed in daily interactions, including the right to social interaction, maintaining relationships, requesting desired objects, actions, events, and people, and participating fully in communication interactions (et,al.Marshall & Barrett, 2017, p. 45).

Furthermore, communication rights and freedom of expression are inherent human rights that are crucial for empowering individuals to exercise their rights, engage in society, and access justice. These rights are indispensable for fostering inclusion, averting exclusion, and ensuring effective communication and self-expression without fear or obstacles.

Global Initiatives Focused on Upholding Communication Rights

In 1974, UNESCO received a report aimed at facilitating active participation in communication, resulting in subsequent resolutions, charters, and declarations to

promote communication rights globally. A pivotal milestone was the establishment of the Universal Declaration of Communication Rights in 2014, garnering support from more than 10,000 individuals. This declaration underscores communication as an inherent human right, emphasizing the importance of enabling people to engage in the communication process. This declaration, a collaborative effort among various international speech and language organizations, emphasizes the recognition of communication as a basic human right and advocates for individuals with communication disabilities to access the necessary support for realizing their full potential （Mulcair, Pietranton, & Williams, 2018).

International organizations like the United Nations and the World Health Organization strongly advocate for communication rights through language diversity. This includes the right to freedom of expression, access to information, and universal access to information. The Universal Declaration of Human Rights, translated into over 500 languages, is the most translated document globally (The United Nations, 2007b. The UN consistently demonstrates its commitment to language diversity through resolutions and designated days, such as International Mother Language Day on February 21, established in 1999. The International Year of Languages in 2008 and the International Year of Indigenous Languages in 2019 further highlight the UN's ongoing efforts to recognize and celebrate global linguistic diversity and multilingualism (International Communication Project, 2014).

Communication rights include freedom of expression, democratic media governance, and fair media ownership, encompassing active participation in culture, linguistic rights, the right to education, and privacy. Assembly and self-determination are integral aspects connected to the overarching right to communicate, emphasizing freedom of expression without language-based discrimination (United Nations, 2017a).

UNESCO's 1974 report spurred global efforts for enhanced communication rights, leading to resolutions and the 2014 Universal Declaration of Communication Rights. Endorsed by 10,000 individuals, this declaration, a product of collaboration among international speech and language organizations, underscores communication as a fundamental human right. It specifically advocates for those with communication disabilities to access necessary support for their full potential, promoting the broader concept of global communication rights.

International bodies like the United Nations and the World Health Organization strongly advocate for communication rights, emphasizing the importance of language diversity. The right to communicate includes essential human rights like freedom of expression, the right to information, and universal access to knowledge. The Universal Declaration of Human Rights, available in over 450 languages, holds the record as the most translated document worldwide, symbolizing a commitment to ensuring these rights are accessible and understood by diverse populations globally (Murphy et al, 2017).

The United Nations has further demonstrated its commitment by adopting resolutions and dedicating specific days to acknowledge and celebrate language diversity and multilingualism. UNESCO designated International Mother Language Day on November 17, 1999; it has been observed annually since February 21, 2000. The day aims to raise awareness about linguistic and cultural diversity and advocate for the preservation and protection of all languages. It was established in honor of the 1952 Bengali Language Movement in Bangladesh. Furthermore, the United Nations General Assembly declared 2008 as the International Year of Languages and 2019 as the International Year of Indigenous Languages (et,al.Mulcair, 2018).

Communication rights encompass freedom of expression, emphasizing unbiased expression regardless of language and ensuring individuals can voice their opinions without discrimination （De Luca (2017).

Democratic media governance is part of communication rights, advocating for equitable practices within media systems to ensure diverse representation.

Media ownership and control are addressed in communication rights, aiming for transparency and preventing monopolies that may restrict diverse perspectives.

Participation in one's culture is vital, recognizing individuals' rights to engage in and contribute to their cultural communities.

Linguistic rights, education rights, privacy rights, assembly rights, and self-determination collectively form communication rights, ensuring a comprehensive framework for diverse and inclusive communication.

Communication Rights of All People

Article 19 of both the Universal Declaration of Human Rights and the International Covenant on Civil and Political Rights asserts the universal right to freedom of opinion and expression. This encompasses seeking, receiving, and conveying information without geographical constraints. However, legal limitations may be imposed to safeguard the rights of others, national security, public order, or public health and morals. It is crucial to emphasize that these communication rights are applicable universally, irrespective of citizenship（The United Nations 2007b).

Fostering communication rights is a key step toward greater inclusivity and participation in civil society. Although digital communication technologies can aid in achieving this goal, challenges arise, particularly concerning automation and machine learning issues. To ensure genuine social progress, it is essential to prioritize a diverse range of voices in decision-making processes. This can be accomplished by emphasizing equal access to media and its technologies, ensuring the involvement of traditionally marginalized individuals in media, and advocating for the common ownership of knowledge, tools, and technologies that are freely and openly shared with the public (United Nations, 2017a).

The role of civil society organizations is paramount in safeguarding human rights and promoting inclusion. Utilizing communication for social change, these organizations can advance their objectives through advocacy, direct action, and influencing their constituencies via various channels, including dialogue, mass media, and online interactions. Transparency, accountability, communication, collaboration, and inclusion are crucial elements for addressing the challenges faced by civil society organizations in advocating for and protecting human rights, especially in challenging contexts (McLeod & McKinnon, 2007).

Ensuring Communication Rights for People Experiencing Communication Disabilities

Individuals with communication inability may experience challenges in receiving, sending, processing, and comprehending concepts through verbal, nonverbal, and graphic symbol systems （McCormack et al, 2018, p. 142). These difficulties can arise from hearing, speech, and language conditions, leading to impaired communication. Communication disorders, including speech, language, and hearing disorders, can impact a person's communication ability. Various factors, such as neurological damage, hearing loss, cleft lip and palate, intellectual disability, and other health conditions, can contribute to the development of these disorders. Approximately 5-10% of Americans are estimated to have some form of communication disorder(Australian Bureau of Statistics, 2017a). Early intervention is crucial, especially for children, and treatment often involves collaboration with a speech-language pathologist (Australian Bureau of Statistics, 2017a）.

Assistance in Communication for Individuals with Communication Challenges

Article 21 of the Convention on the Rights of Persons with Disabilities (CRPD) is a pivotal provision that centers on safeguarding the communication rights of individuals with disabilities (United Nations, 2006) It places a strong emphasis on upholding the principles of freedom of expression, unrestricted access to information, and the utilization of accessible formats and technologies for effective communication. The article explicitly advocates for the implementation of measures to guarantee that individuals with disabilities can exercise their right to freedom of expression and opinion, ensuring an equal standing in seeking, receiving, and imparting information and ideas (Khoja & Shesha, 2018).

Additionally, it emphasizes the importance of delivering information in accessible formats, advocating for the use of sign languages and other inclusive communication methods. It also encourages media outlets and private entities to ensure their services are accessible to individuals with disabilities (United Nations, 2006, Article 21).

Crafted by the National Joint Committee for Communication Needs of Persons With Severe Disabilities, the Communication Bill of Rights highlights the essential principle of universal access to meaningful communication. It aims to secure equitable opportunities for individuals facing severe disabilities, fostering an inclusive society where effective communication is a fundamental right establihing the essential entitlement of individuals with disabilities to influence their circumstances through communication. This encompasses the right to engage actively in communication exchanges and access information in an inclusive manner. It guarantees that individuals with disabilities can utilize communication to navigate their own lives and contribute to society (Rvachew & Folden, 2017).

（Madill, Warhurst, and McCabe，2017) sheds light on the existing challenges and disparities in access to communication specialists and suitable assessment and intervention resources for those with communication disabilities globally. It underscores the pressing need for innovative solutions and advocacy efforts to empower individuals with communication disabilities to fully engage and contribute to society. In essence, Article 21 of the CRPD and the Communication Bill of Rights collectively stress the imperative of ensuring equal access to communication, information, and technology for people with disabilities while urging concerted efforts to overcome the obstacles and inequalities present in this critical domain.

Rights to Communicate for Children.

The United Nations Convention on the Rights of the Child (CRC) articulates specific provisions regarding children's communication rights. (McCormack, McLeod, McAllister, & Harrison, 2010). Articles 12 and 13 focus on freedom of expression （United Nations, 1989). Articles 2, 29, 30, and 40 also address language and communication rights, emphasizing the child's right to

express views, freedom of expression, and access to interpreters if language barriers exist (United Nations, 1989.

Having ratified the CRC in December 1990, Australia is obligated to ensure the fulfillment of children's rights outlined in the convention. The CRC mandates that the Australian Government report every five years detailing its efforts to protect and promote these rights, acknowledging progress and challenges. stralia has yet to ratify the Optional Protocol to the CRC on a Communications Protocol, designed for individual children to file complaints about specific rights violations (Doell and Clendon (2017).

In the educational context, the enactment of children's communication rights is crucial, recognizing that linguistic competence is often a prerequisite for free expression. It is imperative for adults to be cognizant of these rights, fostering attitudes that support children's communication and participation. This involves adopting a human rights perspective, involving active listening, collaboration with educators, and an approach that builds communication skills based on capabilities(Gillett-Swan & Sargeant, 2017).

To summarize, the CRC and associated documents stress the significance of upholding children's communication rights, encompassing freedom of expression, information access, and support for diverse communication forms. Governments, organizations, and adults must work collectively to ensure the respect and promotion of these rights, particularly in educational and everyday settings. Additional information can be found in resources from the UN Committee on the Rights of the Child, Communication Rights Australia, and the Children's Rights Report 2019 by the Australian Human Rights Commission (McCormack, McLeod, McAllister, & Harrison, 2010).

Communication Rights Relating to Language

The preservation of language and its implications for individuals, communities, and education is an increasingly significant topic. Studies indicate that fostering a child's native language is not only feasible but should be actively encouraged due to its substantial positive effects on cognitive and social development. Moreover, acknowledging the importance of one's home language and culture is essential for aiding individuals facing communication disabilities. (Simons & Fennig, 2017). Language disorders, such as specific language impairment, can significantly impact a person's ability to understand, express, and process language, underscoring the significance of supporting multilingualism and the preservation of home languages. In an era of growing global inter-disconnectedness, the role of governments and professionals, including speech-language pathologists (SLPs), is gaining prominence in championing multilingualism and home language preservation (McLeod, Fuller & Verdon, 2016). Consequently, the future of language maintenance hinges on promoting and respecting linguistic diversity within individuals and communities, recognizing the myriad societal benefits it brings.Pietiläinen, 2011).

The Future

Ensuring communication rights requires considering how human rights apply universally to individuals with communication disabilities, children, and diverse linguistic communities. To promote and enhance the right to communicate, it is crucial to recognize individuals, adapt communication styles, and allocate time for active listening. Established in 2006, the Yogyakarta Principles are a non-legally binding set of guidelines that address human rights concerning sexual orientation and gender identity. Acting as an interpretive tool for human rights treaties, these principles offer potential guidance for future analysis and interpretation of communication rights. Developed collaboratively with United Nations experts, these principles cover a range of rights, including universal human rights, equality, fair trial, employment, social security, and the highest standard of health. In 2017, they were expanded to address gender expression.

Conclusion

In conclusion, the abstract provides a comprehensive overview of the profound importance of communication rights within the framework of human rights. By delving into the Universal Declaration of Human Rights and various international conventions, the abstract underscores the universal nature of the right to communicate, emphasizing its role in promoting equality, justice, and human dignity.

The four focal points of the abstract rights of all individuals to communicate, communication rights of those with disabilities, communication rights of children, and language-related communication rights offer a nuanced exploration of the diverse challenges and opportunities within the realm of communication rights. From recognizing individual needs to adapting communication styles and dedicating time to active listening, the proposed three-step approach provides a practical foundation for advancing communication rights across different contexts.

The exploration of international efforts and initiatives, including those by UNESCO and the United Nations, highlights the global commitment to championing communication rights. The recognition of communication rights as a fundamental element for the realization of other human rights underscores its far-

reaching implications for societal inclusion and individual well-being.

The abstract also brings attention to the challenges faced by specific groups, such as individuals with communication disabilities, emphasizing the need for targeted support and advocacy. It addresses the role of civil society organizations, technology, and education in safeguarding and promoting communication rights.

The abstract envisions a future where principles guiding communication rights could draw inspiration from methodologies like the Yogyakarta Principles. This suggests a potential framework for analyzing and interpreting communication rights within the broader landscape of international human rights law.

The abstract calls for a holistic understanding of communication rights, r

ecognizing its pivotal role in shaping societal interactions, inclusiveness, and the realization of individual potential. As the world continues to evolve, the pursuit of effective communication rights remains integral to fostering a global environment that values diversity, respects individual expression, and upholds the principles of equality and justice.

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RESEARCH

A Dichotomy of Religious Coping in Afghan Migrants

Javeria Farooq, Nelofar Kiran Rauf & Muhammad Usman

Abstract

The dichotomy of religious coping caters to both positive and negative ways to cope with trauma and distress. The present study aims at investigating the prevalence of Positive and negative religious coping among Afghan migrants in Pakistan. To measure religious coping (RCOPE-Brief) by Pargament et al. (1998) was used. %). The total sample consists of one hundred and thirty-five participants, including 81 males and 54 females, with an age range between 18 to 35 years. Data collection employed non-purposive and snowball sampling techniques, and data was collected from Islamabad/Rawalpindi. Results of the study showed that Afghan migrants are inclined more towards using positive religious coping than negative religious coping. %) Most of the sample reported that they feel more "connected and collaborated to God" and seek "God's forgiveness, love, care and strength" to cope with trauma and stress. Most of the Afghan refugees perceive that their suffering and trauma is God's punishment; they believe that God has abandoned them, and they also blame devils as responsible for their trauma and suffering. Positive religious coping represents a significant adaptive mechanism for Afghan migrants, enabling them to draw strength, support, and meaning from their religious beliefs and practices in the context of migration and resettlement.

Key Words: *Positive religious coping, Negative religious coping, Afghan Migrants*

Afghan migrants refer to individuals who have moved from Afghanistan to another country for various reasons, such as seeking asylum, better economic opportunities, or escaping conflict and persecution in their home country. Most refugees experience horrific events while migrating. They experience a variety of traumas before leaving their native country, such as violations of human rights, the death of family members due to homicide, imprisonment, or torture, and the effects of war. They frequently experience sexual and physical assault while travelling to their desiredlocation, as well as abuse by traffickers and authorities. Refugees suffer additional difficulties after they settle in their new country, including post-migration stresses, a sense of displacement and isolation, social marginalization that can turn hostile, and a struggle to achieve their fundamental needs for life (Gagliardi, 2021).

Pakistan is home to an estimated 1.4 million Afghan migrants, including 54% males and 46% females (Hirad et al., 2023). Afghan migrants have grown to be a major concern over time for Pakistan due to factors like diminishing donor support, housing shortages, an unstable economy, refugee fatigue, and the threat of growing terrorism, which created tension in Pak-Afghan relations (Khan, 2017). Afghan migrants are subjected to various challenges, including economic, imprisonment, education, improper healthcare, documentation, occupation and gender disparity etc.

Religion is a source of complex thinking with a variety of impacts on coping techniques. People frequently turn to God when they are facing hardship. Since they think every problem comes from God and only God can take it away from them. Researchers frequently refer to it as a "double-edged sword" since it may develop resilience while also influencing or contributing to negative ideas about oneself, others, and the community, which can alter PTSD symptoms (Pargament, 2022). Afghan trauma survivors, the majority of whom identified as Muslims, displayed this complexity (Ghorbani et al., 2021). Religion, spirituality, and faith are frequently found to play an important part in helping Islamic refugee populations cope with hardships, stress, and trauma (Hasan et al., 2018).

Religious coping is a dichotomous phenomenon consisting of positive religious coping and negative religious coping. Generally, positive religious coping is considered helpful, while negative religious coping is maladaptive. Positive religious coping is characterized by a close relationship with God and a belief that life has a deeper meaning and a sense of spiritual belonging, while negative religious coping strategies are characterized by a shattered worldview and a religious conflict (Abu Raiya et al., 2018).

Positive religious coping methods typically involve seeing stressors as important, viewing God as their companion, valuing and appreciating God's love and care, expressing their protected relationships with inspiring force, forming connections with others with sacred sense, and having a generous worldview (Pargament et al., 2011). As a result, they frequently prove to be beneficial for persons who are under stress. On the other hand, Pargament et al. (2011) described negative religious coping mechanisms in which individuals believe that stress is a punishment that God

has given to them and also get solutions for their stressor by relying on God, who they will not have believed will assist them, so in short negative religious techniques are staying under stress, depending and struggling with oneself, with other people, and with divine. These individuals, therefore, had a higher potential for negative outcomes.

Previous studies have highlighted the role of religious coping on mental well-being. According to Harrison et al. (2001), religious coping involves connecting with others, getting support from the religious community, framing stressful events in a positive light, and having a collaborative relationship with a higher power. These factors all tend to be associated with a lower risk of depression. On the other hand, negative reframing of stressful situations and interpersonal conflicts within the religious community consists of components of religious coping that appear to increase the likelihood of depressive symptoms (Harrison et al., 2001). Ano & Vasconcelos (2005) conducted meta-analysis studies on religious coping and its relationship with adapting to stressful events.

Their findings demonstrated that using religious coping strategies resulted in favourable psychological outcomes, including acceptance, hope, life satisfaction, optimism, spiritual growth, and stress-related growth.

According to a study on Syrian and Palestine refugees in Jordan, religious coping leads to and plays a significant influence on psychological resilience among Muslim refugees (Skalisky et al., 2020). There have been many studies based on religious coping, religiosity and mental well-being of migrants. However, this study particularly focuses on whether positive religious coping is more prevalent or negative religious coping among Afghan migrants.

Method

Instrument

In order to gauge the positive and negative religious coping in Afghan migrants living in Pakistan, a brief Religious coping scale (RCOPE) developed by Pargament et al. (1998) was used. Positive religious coping (PRC) comprises seven good attributes, such as "looking for a stronger connection with God." Negative religious coping (NRC) comprises seven negative traits, such as "thought whether God has abandoned me". It was scored on a Likert scale with a range of 1 to 4, and each attribute was given a score. (1 = never; 2 = rarely; 3 = sometimes; 4 = a great deal). The overall alpha reliability for the PRC was .93, and for NRC, it was .79 for the present study.

Sample

A non-probability purposive and snowball sampling technique was used to obtain data from one hundred and thirty-five Muslim Afghan migrants. Most of the sample lies in the age range between the age group of 18 to 25 years (n = 68), and 60% males & 40% females participated in the study. Most participants were single (N = 85), belonging to middle-class socioeconomic status (n = 98), and fifty-six participants were Afghan passport/visa holders. Their year of arrival in Pakistan was between 2011 to 2023. All participants of the study can easily understand the English language.

Procedure

After securing permission from the ethical research committee at the National Institute of Psychology, Quaid-i-Azam University, Islamabad, data was collected from various scattered Afghan communities living in Pakistan. Information about the Afghan migrants living in Pakistan was acquired from the attaché officer of the Afghan embassy and the International Organization of Migrants (IOM) Pakistan. After securing written and oral consent from each participant, data was collected on a self-report form containing questions related to their religious coping practices. After data collection, the data

was analyzed using the Statistical Package for Social Science-20 (SPSS-20).

Results

In order to obtain results related to the positive and negative use of religious coping by Afghan migrants, a descriptive analysis was done. Results were presented in bar graphs depicting the percentages obtained by sample on each item and a composite of both Positive religious coping (PRCOPE) and Negative religious coping (NRCOPE). Moreover, to obtain the strength of the relationship through Pearson correlation analysis and to see the gender differences, an Independent t-test was also computed.

Figure 1: Percentages related to Positive Religious Coping (PRCOPE)

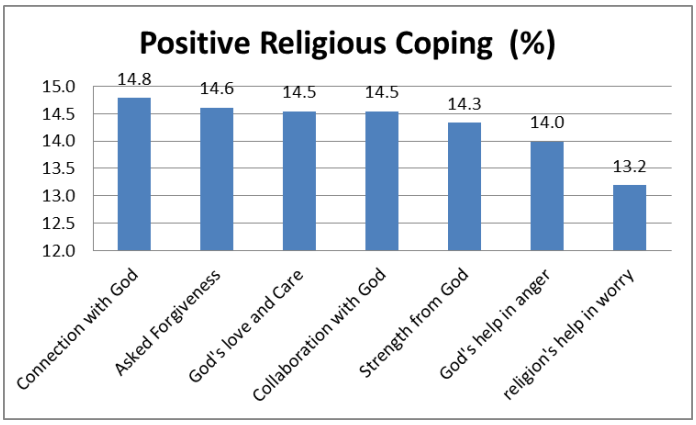
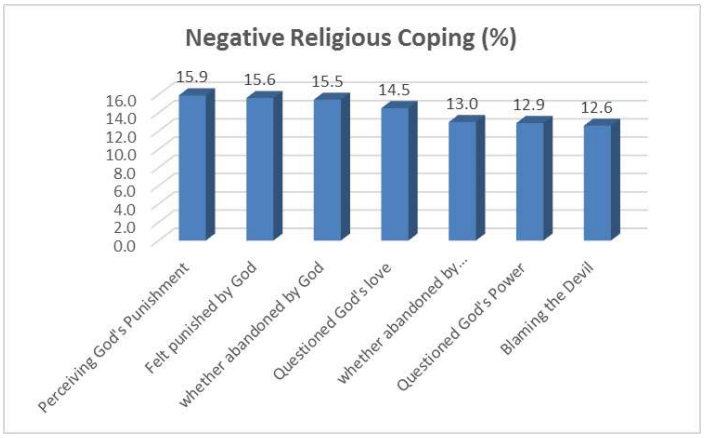
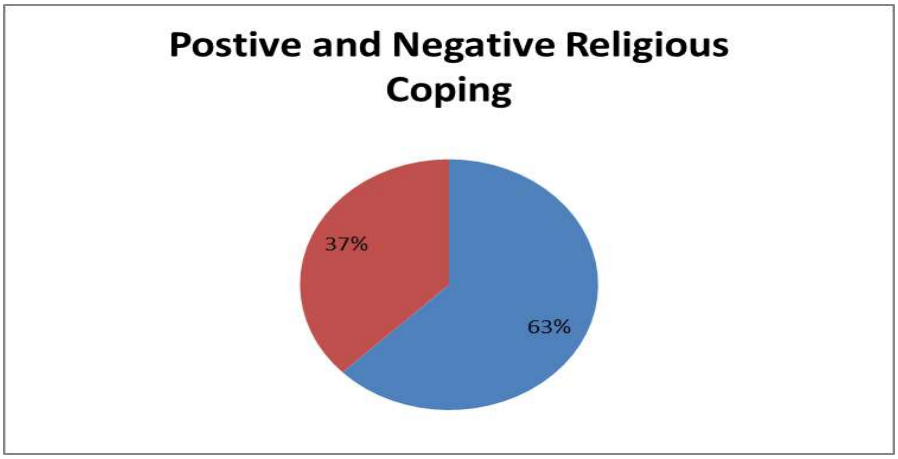


Figure 2: Percentages related to Negative Religious Coping (NRCOPE)



The above bar graphs (figure 1) show that most of the Afghan migrants (14.8 %) feel more "connected and collaborated to God," and 14.6% to 14.5% seek "God's forgiveness, love, care and strength" to cope with trauma and stress. Fourteen percent to 13.2% of the sample use religious as a positive way to cope with anger and distress in trauma. On the other hand (figure 2) depicts the use of negative religious coping, and results show that most of the Afghan Migrants 15.9% perceive that their suffering and trauma are God's punishment, 15.6 % felt that God punishes them, 15.5% believe that God has abandoned them, 14.5 % question God for His love and power (12.9%). Whereas 12.6 % blame devils as responsible for their trauma and suffering.

Figure 3: Percentages related to Positive Religious Coping (PRCOPE) and Negative Religious Coping (NRCOPE)



The above pie chart (figure 3) shows that 63% of Afghan Migrants use positive religious coping and 37 % use negative religious coping to deal with adversity. So, overall, most of the sample is inclined towards the use of positive coping as compared to negative coping.

Table 1

Mean Differences between Gender on positive religious coping and negative religious coping (N =135)

	Male (n =81)		Female (n = 54)				
Scales	*M*	*SD*	*M*	*SD*	*t*	*p*	*Cohen`s d*
PRCOPE	21.43	6.31	21.20	6.69	.20	.84	-
NRCOPE	12.71	4.55	12.68	4.45	.03	.96	-

Note. M Mean, *SD*= Standard deviation, PRCOPE = Positive religious coping, NRCOPE = Negative religious coping.

Results in Table 1 show no significant mean differences exist between male and female Afghan migrants on the use of positive and negative religious coping.

Table 2

Correlation matrix for items of positive religious coping in the study (N = 135)

Sr.	Items	1	2	3	4	5	6	7
1	Connection with God	-	.73**	.66**	.72**	.67**	.71**	.50**
2	God`s love and care	-	-	.72**	.72**	.67**	.72**	.59**
3	God`s help in anger	.-	-	-	.66**	.59**	.59**	.54**
4	Collaboration with God	-	-	-	-	.75**	.74**	.63**

5	Strength from God	-	-	-	-	-	.69**	.63**
6	Asked forgiveness	-	-	-	-	-	-	.59**
7	Religion`s help in worry	-	-	-	-	-	-	-

Note. RCOPE= Religious coping, PRC= Positive religious Coping, NRC= Negative religious Coping, *p<.05; ** p<.01

Table 3

Correlation matrix for items of negative religious coping in a study (*N* = 135)

Sr.	Items	1	2	3	4	5	6	7
8	Whether abandoned by God	-	.37**	.36**	.42**	.37**	.22**	.24**
9	Felt punished by God	-	-	.56**	.29**	.29**	.38**	.31**
10	Perceiving God`s punishment	.-	-	-	.43**	.25**	.21*	.17*
11	Questioned God`s love	-	-	-	-	.50**	.23**	.44**
12	Whether abandoned by the church	-	-	-	-	-	.36**	.40**
13	Blaming the devil	-	-	-	-	-	-	.51**
14	Questioned God`s power	-	-	-	-	-	-	-

Note. RCOPE= Religious coping, PRC= Positive religious Coping, NRC= Negative religious Coping, *p<.05; ** p<.01

Table 1 & 2 shows a moderate to strong significant correlation between different domains of positive religious coping among the study sample. At the same time, a moderate to weak correlation exists between different domains of negative religious coping among Afghan migrants.

Discussion

Religious beliefs and practices often serve as a primary framework through which Afghan migrants interpret and navigate their experiences of migration and resettlement. Religious coping, which involves drawing on religious beliefs and practices to manage distressing situations, can be an important aspect of mental health support for Afghan migrants. Results of the present study showed Afghan migrants are inclined more toward the use of positive religious coping.

Positive religious coping encompasses a range of adaptive strategies grounded in religious beliefs and practices that facilitate individuals' ability to cope with stress, trauma, and adversity. These strategies may include seeking comfort and solace in prayer, finding meaning and purpose in religious teachings, relying on social support networks within religious communities, and engaging in acts of charity and service as expressions of faith (Abu Raiya et al., 2018; Ano & Vasconcelos., 2005). For Afghan migrants, these religious coping mechanisms provide a sense of continuity, connection, and resilience amidst the disruptions and challenges of migration.

One aspect of positive religious coping among Afghan migrants is the preservation of cultural and religious traditions (Hasan et al., 2018; Khan, 2017). For many Afghan migrants, maintaining religious rituals, such as daily prayers, fasting during Ramadan, and celebrating religious holidays, fosters a sense of belonging and identity in their new environments. These practices provide spiritual nourishment and serve as markers of cultural heritage and community cohesion, enabling Afghan migrants to uphold their religious and cultural identities amidst acculturation pressures.

Moreover, positive religious coping among Afghan migrants often involves drawing strength and support from religious communities and networks. Mosques, Islamic centers, and other religious institutions serve as vital hubs for socialization, mutual assistance, and collective solidarity among Afghan migrants. These spaces offer opportunities for prayer, fellowship, and shared religious activities, fostering a sense of belonging and camaraderie that mitigates feelings of isolation and alienation (Abu Raiya et al., 2018; Harrison et al., 2001; Skalisky et al., 2020.

Additionally, positive religious coping may empower Afghan migrants to find meaning and purpose in their experiences of migration and adversity. Islamic teachings emphasize resilience, patience, and trust in the divine decree (qadar), encouraging individuals to persevere in the face of challenges and hardships. By interpreting their migration journeys through a religious lens, Afghan migrants may derive a sense of purpose and transcendence, viewing their struggles as tests of faith and opportunities for spiritual growth.

Furthermore, positive religious coping can contribute to the promotion of psychosocial well-being and mental health among Afghan migrants. Studies have shown that religious involvement and spirituality are associated with lower levels of psychological distress and greater subjective well-being among migrants and refugees (Abu Raiya et al., 2018; Ano & Vasconcelles., 2005; Pargament et al., 2011; . Engaging in religious practices, seeking guidance from religious leaders, and finding solace in religious teachings can provide Afghan migrants with a sense of hope, resilience, and inner peace amidst the uncertainties and stressors of migration.

In conclusion, positive religious coping represents a significant adaptive mechanism for Afghan migrants, enabling them to draw strength, support, and meaning from their religious beliefs and practices in the context of migration and resettlement. By preserving cultural traditions, fostering community ties, finding purpose in adversity, and promoting psychosocial well-being, religion serves as a vital resource for resilience and coping among Afghan migrants as they navigate the challenges and opportunities of life in new host countries. However, it's essential to recognize that the experiences of religious coping are diverse and multifaceted, influenced by individual differences, cultural backgrounds, and contextual factors. Future research and interventions should acknowledge and build upon the strengths of religious coping while also addressing the unique needs and challenges faced by Afghan migrants in diverse cultural and social contexts.

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Appendix

Religious Coping Scale

The following items deal with ways you coped with the negative events in your life. Try to rate each item separately in your mind from the others. Circle the answer that best applies to you.

Not at all	**Somewhat**	**Often**	**A Great deal**
1	**2**	**3**	**4**

1.	Looked for a stronger connection with God.	1 2 3 4
2.	Sought God's love and care.	1 2 3 4
3.	Sought help from God in letting go of my anger.	1 2 3 4
4.	Collaborated with God to implement my plans.	1 2 3 4
5.	I tried to see how God might be strengthening me inthis situation.	1 2 3 4
6.	Asked forgiveness for my sins.	1 2 3 4

7.	Focused on religion to stop worrying about my problems.	1 2 3 4
8.	Wondered whether God had abandoned me.	1 2 3 4
9.	Felt punished by God for my lack of devotion.	1 2 3 4
10.	Wondered what I did for God to punish me.	1 2 3 4
11.	Questioned God's love for me.	1 2 3 4
12.	Wondered whether my religious community had abandoned me.	1 2 3 4
13.	Decided the devil made this happen.	1 2 3 4
14.	Questioned the power of God.	1 2 3 4

CASE STUDIES

Implementation of Wellbeing Programs in Schools

Rajiv Shahi

Since Seligman et al. (2009) coined the phrase 'Positive education,' it has garnered mass attention and is being implemented globally in various education settings. Green & Lloyd (2021) back up the importance of positive education in schools and claim that it is crucial now more than ever. To implement positive education in schools, school counsellors (SC) and psychologists play an integral role (Green & Lloyd, 2021). Evidence-based programs have shown that SCs have positively impacted the well-being of students and school staff members (Dulagil et al., 2016). Considering the growing importance of positive education (Seligman et al., 2009), SCs and psychologists play a key role in well-being services. Nonetheless, Green & Lloyd (2021) assert that despite the major role played by SCs in bringing about positive changes to students' and staff's well-being, they are not included as key resources when it comes to making and implementing decisions regarding well-being services.

Many barriers prevent schools or the education system from incorporating SCs in the decision-making process of wellbeing practices within the school. However, this essay will only focus on three main barriers: mindsets within educational systems, role ambiguity, and workload.

Barrier 1: Mindsets within Educational Systems

One significant barrier that inhibits the utilization of school counsellors and psychologists as key resources in implementing well-being programs is the prevailing mindsets within educational systems. Historically, the role of school counsellors or psychologists has been associated primarily with providing individual counselling to students (Dekruyf et al., 2013). This narrow perception may prevent them from being seen as valuable assets in program development, implementation, and leadership. Bozkurt (2014) states that leadership roles for counsellors in schools are disputed due to lingering conventional mindsets within educational systems. Administrators and teachers often struggle to perceive school counsellors as leaders because their role has not historically been associated with leadership responsibilities (Bozkurt, 2014). As a result, their expertise and perspectives may not be fully integrated into schools' decision-making processes and leadership structures.

Additionally, principals' duties assigned to school counsellors may divert their focus from their intended tasks and roles (Sadana & Kumar, 2021). The professional status of school counsellors within schools may not be perceived as influential enough to pioneer leadership roles among other staff members. Thus, due to the historically assigned roles of SCs coupled with the mindsets towards them, schools are reluctant to involve them in the leadership and implementation of wellbeing services.

Barrier 2: Role Ambiguity

Likewise, the ambiguous roles of SCs seem to be another factor contributing to the assertion made by Green & Lloyd (2021). It seems that the responsibilities and duties of school counsellors are determined by the school's line management, leading to a lack of clear definition and understanding of their role (Bettman & Digiacomo, 2022). A survey conducted by Bryan & Griffin (2010) further supports this claim. Some counsellors were instructed to only be involved in students' mental wellbeing issues, while others had to include staff members; some had limited assistance from the school, while others had more (Bryan & Griffin, 2010).

Moreover, due to the ambiguity and conflict surrounding the role, school counsellors frequently find themselves assigned unrelated tasks that divert their attention from their main responsibilities and have a negative effect on their professional standing (Bozkurt, 2014). For example, SCs are expected to do different things from different stakeholders (principals, students, parents), each demanding their own thing, making it harder for SCs and even impacting their effective practice (Sadana & Kumar, 2021).

Furthermore, the organizational structures within the school also contributed to the role ambiguity of SCs and psychologists in the school. The organizational structures within schools may not provide clear pathways for the integration of school counsellors or psychologists into leadership roles. Hierarchies, role definitions, and decision-making processes can hinder their involvement and limit their influence in program implementation (Schmaling & Linton, 2017). This makes it difficult to involve SCs in the implementation of wellbeing programs when their roles within the parameters of school vary.

Barrier 3: Workload

Finally, the practice of psychology also requires considerable investment in developing one's own expertise, and the work is demanding and often emotionally draining. Some psychologists may feel they have limited time and energy left to devote to leadership activities (Atli, 2018). The lack of overt focus on leadership competencies in psychology training programs may also mean psychologists, in general, lack the confidence to engage in leadership activities and do not foresee their career incorporating leadership positions, and even if they do, the historically low number of psychologists holding such positions means there are few role models or mentors to support professional growth (Roufeil, 2018).

Like many professions, psychologists who step into leadership positions can feel like they are cut off from their discipline and feel professionally isolated. Within the educational system, school counsellors or psychologists' professional identity and status may not be perceived as equivalent to that of other school leaders, undermining their authority and restricting their involvement in shaping and leading school wellbeing programs and services. This discrepancy in perception can create a hierarchical imbalance that hampers the recognition of school counsellors and psychologists as equal contributors to the leadership and implementation of well-being initiatives (Rockinson-Szapkiw et al., 2013). This perception can undermine their authority and limit their involvement in shaping and leading school well-being programs and/or services.

School Counsellors and Psychologists as Leaders

Despite mindsets within the educational system towards the SCs & psychologists, their ambiguous roles, and their workload, there is a growing recognition of the valuable contributions school counsellors and psychologists can make to implementing well-being programs (Geesa et al., 2019). Past studies have indicated that school counsellors who employ leadership abilities have the capacity to initiate beneficial transformations in domains such as mental health support and crisis management (Dekruyf et al., 2013). This can be seen in the work of Betters-Bubon and Schultz (2017), who depict how an elementary school counsellor took a leadership role in establishing a holistic collaboration between the school, families, and the community. This initiative addressed various challenges, such as geographic, linguistic, and cultural barriers, by ensuring that students and families had equitable access to school resources. As a result, the school counsellor was able to meet the needs of parents and students by increasing the students' school participation (Betters-Bubon & Schultz, 2017). This was only possible because the SC was allowed to formulate and implement her well-being program as a leader within the school.

Additionally, many scholars advocate for including these professionals in program development, evaluation, and collaboration with other stakeholders (Zuković & Slijepčević, 2022). They emphasize the importance of leveraging their expertise in mental health, counselling, and support services to enhance the effectiveness of such programs. An increasing body of research demonstrates the positive impact of school-based counselling and psychological interventions on student well-being, academic performance, and overall school climate (Yerbury, 2021). These studies underscore the potential benefits of involving school counsellors or psychologists in leadership and implementation roles within well-being programs. One example of school counsellors acting as leaders in implementing Multi-Tiered Systems of Support (MTSS) is described by Goodman-Scott & Ziomek-Daigle (2022). Their case study observed an elementary and middle school where school counsellors played integral roles in MTSS. These counsellors' involvement in MTSS expanded their leadership responsibilities within the school setting, highlighting their ability to drive systemic change, collaboration, and advocacy. This example demonstrates how school counsellors can assume leadership roles in implementing MTSS, contributing to the program's overall success and students' well-being (Goodman-Scott & Ziomek-Daigle, 2022).

How can Counsellors Sustain Leadership Roles?

Although there are some examples where school counsellors and psychologists have been used as key resources in the leadership or implementation of well-being programs in school, it is not ubiquitous, which is what Green & Lloyd (2021) assert. We still have a long way to go before SCs are used as key resources in formulating and implementing wellbeing programs because of the mentioned barriers: mindsets towards school counsellors and psychologists in the education system, their ambiguous roles, and their workload in the school. Therefore, addressing these barriers and promoting a more comprehensive understanding of school counsellors' or psychologists' expertise and potential contributions to the leadership and implementation of well-being programs is essential.

To overcome the barriers mentioned, according to Bozkurt (2014), school counsellors can employ evidence-based and accountable counselling services coupled with a strong foundation of knowledge, awareness, and problem-solving skills related to positive education. They should also believe firmly in the value of their roles as leaders and advocates, particularly in establishing connections between the school, family, and

community, which is crucial for sustaining positive education (Barrow, 2021). Likewise, collaboration among school administrators, teachers, and counsellors is essential, allowing counsellors to assume leadership roles that complement rather than overlap with others (Kristjánsson, 2012). Additionally, independent evaluation models can help counsellors overcome power dynamics that hinder their advocacy roles. Finally, supporting national policies is crucial for legitimizing this transformation of the counsellor's role within schools (Bozkurt, 2014).

Conclusion

All in all, the assertion made by Green and Lloyd (2021) regarding the underutilization of school counsellors and psychologists as various scholarly kinds of literature support key resources in implementing well-being programs. The barriers that prevent school counsellors and psychologists from assuming leadership positions in program implementation include mindsets within educational systems, role ambiguity, and workload. These barriers stem from historical perceptions, lack of clear role definitions, organizational structures, and the demanding nature of their work.

However, there is a growing recognition of the valuable contributions that school counsellors and psychologists can make to implementing well-being programs. Examples of their leadership roles can be seen in initiatives such as developing comprehensive partnerships, addressing barriers to access, and driving systemic change. Studies also highlight the positive impact of their involvement on student well-being, academic performance, and school climate.

To sustain leadership roles, school counsellors and psychologists can employ evidence-based practices, develop strong problem-solving skills, and establish connections between the school, family, and community. Collaboration among stakeholders, independent evaluation models, and support from national policies are also crucial in overcoming the barriers and promoting the involvement of school counsellors and psychologists as key resources in well-being program implementation.

Hence, it addresses the identified barriers and promotes a comprehensive understanding of school counsellors' and psychologists' expertise and potential contributions to fully leverage their skills and leadership capabilities to benefit students and the overall school community.

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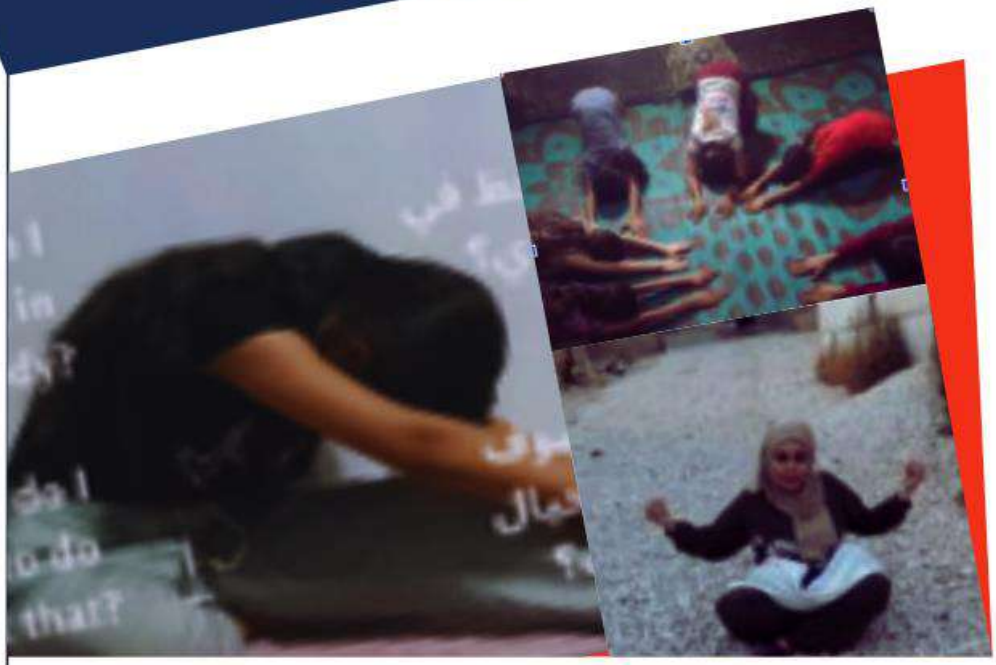


ART & SCIENCE OF HEALING

Return to Tepaza: Exploring the EFASS-Framework of Brief Integrative Dynamic Psychotherapy in the Rehabilitation of Refugees and Torture Survivors

Lukasz Felczak

Over the course of my personal life – including as part of my own vocational training – I have been privileged to receive both brief and long-term psychotherapy. In 2012, through my Employee and Family Assistance Program (EFAP), I received five (5) sessions of solution-focused psychotherapy (SFT). In late 2013 and early 2014, at the Vancouver Association for Survivors of Torture (VAST), I received about twenty (20) sessions of brief integrative psychotherapy, combining expressive arts therapy (EXAT) (McNiff, 1992) and Focusing (Gendlin, 2007). Lastly, as part of my own training as an expressive arts therapist, I completed a long-term course of open-ended EXAT, lasting approximately three years and more than sixty (60+) sessions.

Each of these psychotherapeutic experiences and encounters have been positive. In retrospect, I would say that the short-term therapies that I received were no less positively impactful in my life than the long-term expressive arts therapy. Not only did these brief psychotherapies connect me to invaluable personal and social resources, but just as importantly, they allowed me to process and integrate intergenerational and early life traumas. More than this, and taken together, I have internalized both the therapies and the therapists who helped cultivate both around me, and indeed within me, a felt-sense of safety, self-worth, and newfound vitality (Dewan et al., 2018).

As an expressive arts therapist who now works at the complex intersection of clinical, cultural, and ethical considerations at VAST, the purpose of this paper is to reflect on the benefits and limitations of brief psychotherapy in the rehabilitation of trauma and torture survivors. This paper will also outline and expand upon my preferred brief integrated dynamic psychotherapy framework and provide a clinical rationale for this choice. Ethical and cultural considerations will also be addressed.

Benefits of Brief Psychotherapy

As an organization of devoted volunteers, community engagement staff, social workers, psychologists, psychiatrists, and other clinical staff, VAST works alongside settlement agencies, primary care providers, legal representatives, and various government bodies and agencies to support the complex psychosocial and mental health needs of refugees residing on the unceded First Nations territories of British Columbia, Canada. VAST offers free and integrative group and individual psychotherapy. Individual psychotherapy is typically limited to between 8-15 sessions. As such, the application of brief psychotherapy models is foundational to the psychotherapeutic services that VAST provides.

In this context, there are several benefits to using brief psychotherapy. Firstly, brief psychotherapy modalities are cost-effective. This is critical to operating a not-for-profit organization like VAST ethically, responsibly, and viably. Secondly, the brevity of treatment means that treatment becomes more accessible to a greater number of persons in need, which in turn supports equitable service delivery. Thirdly, brief therapies focus on the present and the future, both critical loci of change in any psychotherapeutic process (Dewan et al., 2018). Fourthly, brief psychotherapies are guided in many ways by the *butterfly effect*, namely by the principle that in non-linear systems, such as the human nervous system, a small present-moment change can produce surprising and significant impacts on the system (Iwakabe, 1999; Weiss et al., 2015). Fourthly, brief psychotherapies tend to be focused, realistic, specific, and concrete in their treatment goals; these are therapy characteristics that have been shown to promote positive psychotherapeutic outcomes (Dewan et al., 2018). Fifthly, brief psychotherapies can offer corrective experiences and remedy attachment injuries and traumas so common among therapy-seeking populations (Fosha, 2021a). Lastly, intelligently integrated brief psychotherapy modalities, alongside astute case conceptualization, can offer ethically designed and culturally safe psychotherapeutic encounters among culturally diverse and heterogeneously traumatized and under-resourced clinical populations. From an ethical perspective, brief psychotherapy can integrate trauma-informed best-practices to minimize the risk of re-traumatization. While culturally sensitive practice can foreground the importance of collaboration, client-centred exploration and meaning-making are part of each psychotherapeutic

intervention. In the context of working at VAST, this means avoiding, as much as possible, the top-down imposition of western, euro-centric modes and models of understanding human nature, including, but not limited to, human pain and suffering.

Limitations of Brief Psychotherapy

There are several limitations to brief psychotherapy. Brief psychotherapies can be limited in terms of the therapeutic gains achieved within such a limited time. Clients with complex presenting issues – including complex developmental trauma histories – are likely to benefit in only a limited way from brief psychotherapy (Dewan et al., 2018). Secondly, in terms of therapy duration, the one-size-fits-all model fails to recognize complex client needs beyond symptom reduction. For instance, helping support the basic interpersonal need for authentic connection may be difficult for some persons to develop or maintain outside of a formal therapeutic encounter. Also, brief psychotherapies may be limited in terms of addressing the complex needs that clients may have in association with especially protracted and painful life experiences, such as the complex grief associated with the sudden death of a spouse or child, significant or sudden disability, chronic pain, or otherwise significant vocational or occupational transitions. Thirdly, complex presentations involving recurring and protracted childhood trauma, neglect, and/or attachment injury may require prolonged – and focused – psychotherapy to adequately integrate, through both process and content-centred corrective experiences, the massive dose of disavowed and dissociated psychic content often associated with these presentations (Schimmenti et al., 2016).

Many clients at VAST – especially, and not surprisingly, those clients with histories of secure attachment – benefit from the brief integrative dynamic psychotherapies that VAST offers. However, clients who report histories of torture and developmental trauma and clients who must cope with the heightened stress of on-going financial hardship and family separation may require longer-term psychotherapy and clinical monitoring.

The EFASS-Framework of Brief Integrative Dynamic Psychotherapy

The core and foundational framework that I learned as a client at VAST, and which I am now expanding upon as part of my own educational development as a clinician, is a brief integrative dynamic psychotherapeutic framework that integrates principles, techniques, and best-practices from various somatic-experiential-psychodynamic modalities, incorporating elements from EXAT (Mcniff, 1992), Focusing (Gendlin, 2007), Accelerated-Experiential Dynamic Psychotherapy (AEDP) (Fosha, 2021a), Somatic Experiencing (SE) (Levine, 2010), and Sensorimotor Psychotherapy (Ogden, 2006), and which taken together one could call *EFASS-Brief Integrative Dynamic Psychotherapy*.

Additionally, I am also interested in exploring the potential of MDMA-Assisted Psychotherapy (MA-PT), which has been shown to effect significant and safe treatment gains for treatment-resistant posttraumatic stress disorder (TR-PTSD) (Barone et al., 2019; Ching et al., 2022; Illingworth et al., 2021; Jerome et al., 2020; Mithoefer et al., 2011; Mithoefer et al., 2013). Since TR-PTSD tends to be over-represented among torture survivors (Baker, 1992; Hárdi et al., 2011; Miller, 1992; Sapporta et al., 1992; Somnier et al, 1992), MDMA-Assisted EFASS Brief Integrated Dynamic Psychotherapy may better support individuals who experience difficulties accessing treatment gains with other psychotherapeutic approaches and modalities.

Each of these brief psychotherapy modalities, on their own and in various degrees of best-fit-for-client integration, can be generalized by the following therapeutic ethos: “make the implicit explicit, and the explicit experiential” (Fosha, 2021b, p. 33).

Each of these brief psychotherapy modalities, wholly or in part, are also characterized by the following shared therapeutic modus operandi:

- Inviting the client to stay present with their own inner experience.
- Fostering willingness to explore new and unexpected perceptions.
- Cultivating attention to the client’s account of their inner experience.
- Observing a delicate balance between focusing on inner experience in an open-ended way.
- Co-creating a therapeutic space where therapist and client can surrender to the process without controlling or over-determining its outcome.
- Cultivating in the therapist and client a recognition that therapy is a non-linear process that may shift and resolve in unexpected ways.
- Abiding by the foundational principle that a human being’s inner healing intelligence, in conjunction with the ‘*medicine,’* will bring forth whatever experiences are needed for healing and growth so that anything that arises is viewed as part of the healing process.
- Recognizing that the therapist’s role is often to follow rather than guide.
- Abiding by the core belief that facing painful experiences is a path towards healing. (Ruse et al., 2008)

Additionally, each of these modalities, individually or within the proposed integrative framework, is specifically designed, in one way or another, to produce in-session innovative moments (IM). IMs are markers of clinical change in which the patterned problem or problems related to a client's suffering are challenged by in-session experiences (Nasim et al., 2019; Nasim et al., 2021). Research has found that therapy sessions for recovered clients have more IMs than therapy sessions for unchanged clients. Also, it has been found that IMs and outcomes improve over the course of treatment and have been positively correlated with client session impact ratings (i.e., client perceived session positivity, smoothness, and depth), as well as with therapist positivity ratings of sessions.

The EFASS-Brief Integrative Dynamic Psychotherapeutic framework combines psychotherapeutic techniques and processes to activate and transform implicit memory systems and schemata. It does so in a way that powerfully and effectively fosters IMs of resourcefulness and corrective experience. This basic and guiding clinical ethos and method run countercurrent and in clear opposition to two (2) broadly related etiological currents in the pathogenic process:

1. The pathogenic survival-based disavowal and dissociation of both implicit and explicit psychic experience (Schimmenti et al., 2016), and
2. The pathogenic experience of "overwhelming aloneness in the face of emotionally overwhelming experience" (Tunnel et al., 2021, p. 89).

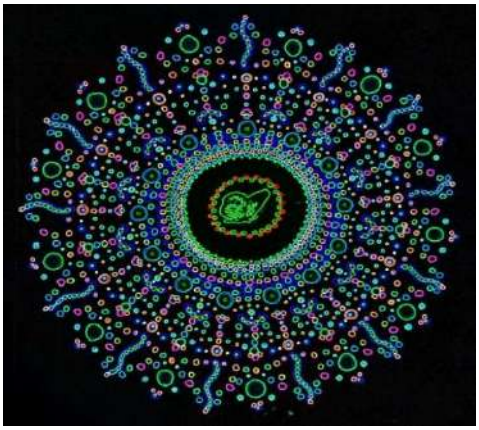
Clinical Rationale for Use of the EFASS-Brief Integrative Dynamic Psychotherapy Framework in the Rehabilitation of Refugees and Torture Survivors

Congruent with expert prediction on the future of psychotherapy (Norcross et al., 2022), the clinical rationale for offering EFASS-Brief Integrative Dynamic Psychotherapy at a center for the rehabilitation of refugees and torture survivors, is based primarily on the common factors model of psychotherapeutic treatment efficacy (Dewan et al., 2018).

Firstly, this integrative framework offers a diverse array of therapeutic interventions that, much as like tailored pharmacology, can offer activities and experiences that are more congruent with intrinsic client strengths, resources, interests, skills, and manners of organizing and processing information and present-moment phenomenological experience (Ogden et al., 2006). The capacity to tailor treatment in this way can foster more deeply culturally congruent, collaborative, trusting, and open experiences between client and therapist, which has been shown to improve treatment efficacy (Dewan et al., 2018). Secondly, psychodynamic interventions that promote IMs have been shown to predict positive treatment outcomes, and this may be especially the case with primary and secondary presentations of unresolved trauma, which have been shown to be over-represented in implicit memory structures and systems (Gregoire et al., 2020). Lastly, EFASS-Brief Integrative Dynamic Psychotherapy can foster client hope (Dewan et al., 2018) by providing a core rationale or myth/story of healing. For example, by conceiving and communicating to the client that *healing is connected to an exploration of the embodied emotional imagination in the context of a supportive, kind, and accepting therapeutic relationship*.

Return to Tepaza

In the aftermath, and in the still reverberating destruction of the Second World War, the Algerian-born French writer Albert Camus, returned to the town of Tepaza, where he had spent the best days of his youth (Than, 2014).



From there, as he gradually regained a better sense of himself, he wrote a letter to a friend. *"In the middle of winter*," he wrote, *"I have discovered within me an invincible summer."* (p. 60). Such has been not only my experience as a fortunate recipient of brief – but potent – integrative somatic, imaginative, and attachment-based psychotherapy, but I have also had the privilege – through effectively integrated brief dynamic psychotherapies – of witnessing clients at VAST reconnect to the shared and invincible summer within themselves, and this amidst the softening thaw of so many seemingly endless winter.

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Community-Led Trauma Center Trauma-Sensitive Yoga: Interrupting Cycles of Trauma in the Refugee Experience

Viann Nguyen-Feng, Emily Lapolice, Farah Houssami, Leila Johnson, Khansa Hamoud, Fedaa Almudahi, Aziza Makboul

Abstract

This symposium aims to share findings of a pilot "train-the-trainer" intervention of the Trauma Center Trauma-Sensitive Yoga Community Leader (TCTSY-CL) certification held at United Nations refugee camps in Lebanon and Palestine. TCTSY is a trauma-informed, body-based approach to trauma care that has the potential to expand cultural inclusivity. The insidious effects of everyday traumas and fear present in refugee camps become somaticized, and then passed down in generational cycles. Such embodied healing approaches allow for connection to interoceptive (in-body) senses and expand cultural inclusivity by allowing for healing pathways outside of Western medicine talk therapy, which contains structures that lack relevance within refugee settings. Embodied healing approaches, versus stricter mental health licensing requirements, also allow for "train-the-trainer" approaches like the one we will describe in this symposium. Our proposed symposium would comprise three parts: (1) invitation to practice TCTSY; (2) review of mixed-method evidence for the program's feasibility, acceptability, and usability; (3) panel discussion from community leaders and on-the-ground implementers.

Groundwork for the TCTSY-CL program began in-person in 2018 in Lebanon, followed by the Aida Refugee Camp, Palestine. The full 30-hour certification was then offered online in 2021–2023 and graduated seven women, four of whom are mothers and two of whom were pregnant during the training. The program was deemed feasible given the null attrition rate. Written and orally transcribed accounts pre-, peri-, and post-training provide evidence for the program's acceptability. Post-training data regarding the amount of in-community TCTSY offered provides evidence for the usability of TCTSY-CL. In sum, effects of the program were meaningful in vivo, notably introducing terms such as "trauma-sensitive yoga" and "interoception" into Arabic vernacular. Through the "train-the-trainer" TCTSY-CL model, participants are now able to teach, practice, and integrate trauma-sensitive yoga throughout their communities, keeping knowledge within communities even after providers from the outside leave.

Presented at the Vancouver Association for Survivors of Torture Symposium, "Community-Led Trauma Center Trauma-Sensitive Yoga: Interrupting Cycles of Trauma in the Refugee Experience" shared findings of a pilot "train-the-trainer" intervention of the Trauma Center Trauma-Sensitive Yoga Community Leader (TCTSY-CL) certification held at United Nations refugee camps in Lebanon and Palestine. TCTSY (Emerson, 2015; Emerson et al., 2009; Emerson & Hopper, 2011) is an evidence-based (e.g., Zaccari et al., 2023), trauma-informed, and body-based approach to trauma care that has the potential to expand cultural inclusivity. Incorporating a body-based approach into trauma care is critical, as the insidious effects of everyday traumas and fear present in refugee camps become somaticized and then passed down in generational cycles. Such embodied healing approaches allow for connection to interoceptive (in-body) senses and expand cultural inclusivity by allowing for healing pathways outside of Western medicine talk therapy, which contains structures that lack relevance within refugee settings. Embodied healing approaches, versus stricter mental health licensing requirements, also allow for "train-the-trainer" approaches like the one described in the present symposium. The present symposium comprised three parts: (1) invitation to practice TCTSY; (2) theoretical underpinnings and review of mixed-method evidence for the program's feasibility, acceptability, and usability; (3) panel discussion from community leaders and on-the-ground implementers.

TCTSY is the first yoga-based empirically validated clinical intervention for complex trauma or treatment-resistant PTSD (Center for Trauma and Embodiment, 2024). Based on 20 years of research (e.g., Center for Trauma and Embodiment, 2024), this model has been utilized globally in many diverse settings by social workers, mental health clinicians, educators, community leaders, and additional healthcare providers. This collaboratively developed intervention for trauma treatment has not only been scientifically informed and rigorously tested over the past two decades, TCTSY has also been adapted across cultures and contexts with a commitment toward empowering survivors of trauma as the experts of their own healing journey. The theoretical underpinnings of trauma theory, attachment theory, and

neuroscience were explored, with a focus on decolonizing approaches to healing that are centered in community and resilience.

Concepts surrounding transgenerational trauma and transgenerational resilience were then explored, with an emphasis on noting how prenatal trauma-sensitive yoga may intercept the passing of transgenerational trauma. The presentation then discussed the lifetime percentage of depression and anxiety disorders among individuals with at least one Holocaust survivor parent, with none, one, or two parent(s) diagnosed posttraumatic stress disorder (Yehuda et al., 2014). The presentation emphasized that trauma is stored in the body, and that to heal trauma, we cannot ignore the body and all the bodies that came before us, providing an experiential exercise from Vietnamese monk and author, Thích Nhất Hạnh (1990). Then, the presentation discussed yogic philosophy around human habitual tendencies in ways of perceiving, moving, thinking, and acting arising from three general sources: nature, nurture, and ancestors (Stone, 2018). Although these aspects of nurture are outside of one's control and may not be readily changeable given how a maternal parent's ovarian germ cells develop five months in utero (Sadler, 2012), there are aspects of "nurture" that are malleable and can facilitate transgenerational trauma as well as transgenerational resilience. Transgenerational trauma and resilience (Goodman, 2013) are derived from Western and ecosystemic components, both directly and across generations, and each area has its own possibility of resilience. The presentation then discussed potential strategies to promote adult neurogenesis (Sapolsky, 2017), particularly with the ideas of learning and moving.

Given this strong theoretical underpinning for TCTSY and its potential effects down generational lines, TCTSY seemed important to implement in the community. Groundwork for the TCTSY-CL program began in person in 2018 in Lebanon, followed by the Aida Refugee Camp, Occupied Palestinian Territory. The full 30-hour certification was offered online in 2021–2023, and seven women graduated, four of whom were mothers and two of whom were pregnant during the training. The program was deemed feasible given the null attrition rate. Written and orally transcribed accounts pre-, peri-, and post-training provide evidence for the program's acceptability. Below is one such account by Khansa Hamoud, TCTSY-CL:

"In the Refugee Camp 013 where I live, there is a story —a healing journey of a refugee child. Gamila [pseudonym] joined my TCTSY sessions, which I have been facilitating in the Bekaa Valley region since last summer. Gamila had lost her father tragically while fleeing the conflict-ridden areas of Syria. However, despite the many reasons for staying in grief, the yoga sessions offered a positive change for Gamila.

When Gamila began to immerse herself in the world of meditation, interoceptive movement, and rhythm coordination she noticed she felt different. She felt an improvement in herself; a shift in her troubled mind, feeling more calm and a greater capacity to deal with her sense of loss and shock. She also noticed feeling more available to interact positively with her peers in the camp and participate in more social activities. Over time now, yoga has become an integral part of Gamila's life. In addition to its positive impact on her mental health, her body strength and flexibility improved too.

Gamila feels a desire to support others and volunteers to help manage the yoga sessions for the children in the camp. She is compelled to support the same sense of safety and serenity she gained from yoga for others going through similar experiences. Gamila's story is an ongoing journey of healing: pain and loss and of positive transformation. We look at it as a source of inspiration for others in the camp."

Post-training data regarding the amount of in-community TCTSY offered provides further evidence for the utility of TCTSY-CLs. In sum, the effects of the program were meaningful in vivo, notably introducing terms such as "trauma-sensitive yoga" and "interoception" into Arabic vernacular. Through the "train-the-trainer" TCTSY-CL model, participants are now able to teach, practice, and integrate trauma-sensitive yoga throughout their communities, keeping knowledge within communities even after providers from the outside leave.

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Gamila and a Journey of Healing

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Community-Led Trauma Center Trauma-Sensitive Yoga: Interrupting cycles of trauma in the refugee experience

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TORTURE TODAY

A Disturbing Reality: Israel's Psychological Warfare Targeting Children

Lailla Balmehdi

*'Despite the fact that international norms reaffirm that civilians, especially children, generally should not be brought before military courts**, Israel remains the only country in the world to automatically and systematically prosecute children in military courts''*** Defence for Children, 2023.

Israel's treatment of Palestinians is multifaceted, extending beyond the physical to include psychological warfare tactics aimed at the most vulnerable population - children. This article explores the various dimensions of Israel's psychological warfare strategies directed at Palestinian children, examining the impacts and ethical implications.

The Gaza Strip and the West Bank have been deeply affected by the trauma resulting from Israel's violence, leading to significant psychological disorders among the population. Despite this, there is a dearth of reports focusing on the psychiatric conditions affecting children and adolescents and the treatment strategies employed. The Gaza Strip presents a unique scenario where children are routinely exposed to traumatic events related to Israel's occupation of the Palestinian Territories, contributing to the escalation of post-traumatic stress disorder (PTSD) among them.

Palestinian children, akin to adults, confront arrest, prosecution, and imprisonment within Israel's military detention apparatus, a system characterized by a stark absence of fair trial protections. Since 1967, Israel has enforced dual legal frameworks in the same region, subjecting Israeli settlers to civilian law while imposing military law on Palestinians in the occupied West Bank.Remarkably, Israel stands alone globally in consistently trying children in military courts devoid of fundamental legal safeguards, with an estimated 500 to 700 Palestinian children prosecuted annually, according to Defense for Children International Palestine (DCIP).

Since 2000, roughly 13,000 Palestinian children have been detained, interrogated, and incarcerated by Israeli military authorities, constituting approximately 3 out of 4 Palestinian child detainees experiencing physical violence at the hands of Israeli forces.

Notably, children as young as 12 years old fall under this punitive regime, with a staggering 59% experiencing night-time arrests, 86% not informed of the reason for their arrest, 97% having their hands bound, 89% being blindfolded, 75% subjected to physical violence, 58% subjected to verbal abuse, humiliation, or intimidation during or after their arrest, 54% transferred from the place of their arrest on the floor of a military vehicle, 80% subjected to strip searches, 42% denied adequate food and water, 31% denied access to a toilet, 66% not properly informed of their rights, 97% interrogated without a family member present, 55% shown or made to sign a paper in Hebrew, a language most Palestinian children do not understand, 36% threatened or coerced, 25% subjected to stress positions, and 23% detained in solitary confinement for interrogation purposes for a period of two or more days. The interrogation process typically lacks familial presence and involves intimidation tactics, linguistic barriers, and threats, perpetuating a cycle of coercion and trauma for Palestinian child detainees.

Despite considerable scrutiny from U.N. human rights entities such as the Committee on the Rights of the Child, the Committee Against Torture, the U.N. Working Group on Arbitrary Detention, and the Special Representative of the Secretary-General on Children in Armed Conflict, alongside numerous governmental and non-governmental organizations, Israeli authorities persistently neglect to enact substantive reforms to halt their illegal treatment of Palestinian child detainees. This reality is epitomized by the prevalence of charges, primarily stone-throwing, levelled against children, with thousands of Palestinian children subjected to military detention over the last two decades, making them "the only children in the world who are systematically prosecuted in military courts," according to Save the Children and Defence for Children. The arrest of up to 880 Palestinian children by Israeli forces in the current year underscores the gravity of the situation, enabled by Israel's draconian military legislation.

Criticism from human rights groups has long targeted Israel's application of military law, a legal framework selectively imposed on Palestinians in occupied territories, in stark contrast to the enhanced rights enjoyed by Israeli settlers under civilian law. Save the Children's findings indicate a distressing reality, with 86% of detained children experiencing physical abuse, 69% subjected to strip searches, and 42% sustaining

injuries during arrests. Meanwhile, counterparts in Israeli settlements typically face summons for police questioning during daylight hours, with parental presence at the station.

The prevalence of stone-throwing charges reflects a broader strategy aimed not solely at deterring such actions but also at exerting control over Palestinian communities. Many children face arrest during nighttime raids, and some endure administrative detention without trial, raising myriad human rights concerns, including traumatic arrest procedures and abusive treatment by Israeli soldiers. Such systematic violations contravene the U.N. Conventions on the Rights of the Child, ratified by Israel in 1991.

Moreover, the disproportionately high conviction rate exceeding 99% in military courts is indicative of coercive interrogation tactics, which often result in “guilty” pleas due to the expedient route they offer out of custodial detention. Legal representation is often an afterthought, with children only granted access to a lawyer post-interrogation through private means or charities like DCIP. The fundamentally flawed nature of these legal proceedings further underscores the erosion of justice within this system, wherein challenging a charge may result in indefinite detention until trial conclusion.

Ill-treatment of Palestinian children in the Israeli military detention system appears to be widespread, systematic, and institutionalized.

This assertion is grounded in the recurring reports and the sheer volume, consistency, and persistence of these claims. UNICEF's comprehensive examination, encompassing documented cases of grave violations of child rights, coupled with interviews with Israeli and Palestinian legal professionals and Palestinian children, lends further weight to this assertion.

The observed pattern of maltreatment encompasses a range of egregious practices, and this mistreatment extends into court proceedings, where children face further infringements on their rights, including shackling, denial of bail, imposition of custodial sentences, and even transfer outside occupied Palestinian territory to serve sentences within Israel. Such practices not only isolate children from their families but also disrupt their education, compounding the injustices they face.

These practices flagrantly contravene international law, which safeguards all children against mistreatment when they come into contact with law enforcement, military, or judicial institutions. The indiscriminate application of military law and the operation of military courts in the West Bank are ostensibly justified under the Hague regulations and the Fourth Geneva Convention. However, these legal frameworks stipulate that such measures should be temporary and solely for ensuring security, which stands in stark contrast to Israel's protracted use of military courts over 56 years—a far cry from a temporary solution.

Israel's unique status as the sole nation systematically prosecuting children in military tribunals is a profound concern, particularly given the prevalent charge of stone-throwing, a practice often shrouded in ambiguity regarding culpability. While acknowledging the gravity of stone-throwing, it remains unconscionable to subject children to nighttime arrests, interrogation without legal representation, and the absence of parental notification—a stark departure from the protections afforded in civil courts.

Israel's actions are not only in violation of the UN Convention on the Rights of the Child, which it ratified in 1991, but also reflect a departure from international norms regarding the age of criminal responsibility and the treatment of juvenile offenders. Despite raising the age of majority from 16 to 18 in 2011, Israel continues to sentence 16 and 17-year-olds as adults, exacerbating the injustices within the legal system.

Administrative detention, originally intended as a temporary measure during the British Mandate, has morphed into a punitive tool, with Palestinians subjected to prolonged detention without trial—a practice that flouts the Fourth Geneva Convention's prohibition on transferring and holding prisoners outside occupied territory.

The scale of Israel's detention apparatus is staggering, with thousands of Palestinians currently incarcerated, including children. These figures, coupled with reports of physical and psychological torture during detention, underscore the urgent need for accountability and reform within Israel's justice system.

The assertion that Israel has effectively turned the occupied Palestinian territories into an "open-air prison" through widespread, systematic, and arbitrary detentions of Palestinians since 1967 is underscored by Francesca Albanese, the UN Special Rapporteur on human rights in the occupied territories. Albanese's findings, presented at a press briefing in Geneva and outlined in a report to the UN Human Rights Council, reveal the stark reality faced by Palestinians under Israeli occupation.

Since 1967, more than 800,000 Palestinians, including children as young as 12, have been subjected to arrest and detention by Israeli forces, a fact corroborated by a six-month investigation involving consultations, testimonies, and a comprehensive review of primary and public sources. The report exposes the blurring of lines between Israel's security concerns and the criminalization of ordinary Palestinian life, with Palestinians often

presumed guilty without evidence, detained without charge or trial, and subjected to brutal treatment in Israeli custody.

Albanese highlights unlawful detention practices that could constitute international crimes, condemning Israel's imposition of martial laws that solely target Palestinians while Jewish-Israeli settlers residing illegally in the same areas are governed by Israeli domestic law. This dual legal system, according to Albanese, serves as the linchpin of Israel's apartheid regime, perpetuating a cycle of discrimination, persecution, and breaches of due process against Palestinians.

Moreover, the year 2022 witnessed a surge in deadly violence against Palestinian children in the occupied territories, particularly in the West Bank and Gaza Strip. Israeli forces intensified arrest operations and incursions into Palestinian cities, resulting in numerous casualties, including children. The targeting of Palestinian children, exemplified by the tragic events in the Jenin and Nablus governorates, underscores the systemic violence and impunity perpetuated by Israel's military occupation.

The prevalence of post-traumatic stress disorder (PTSD) among Palestinian children and adolescents exposed to political violence further elucidates the profound psychological impact of Israel's occupation. A systematic review and meta-analysis revealed a staggering trauma prevalence of 88.4%, highlighting the urgent need for mental health support and intervention in Palestine.

The existence of Palestinian children is profoundly impacted by the omnipresent spectre of fear and the enduring weight of trauma resulting from the protracted Israeli occupation. This pernicious reality not only transgresses their fundamental human entitlements but also deprives them of the innocence and protection inherently associated with childhood.

During a side event organized by Defence for Children International (DCI), the UN Special Rapporteur on the situation of human rights in the occupied Palestinian territories, and Amnesty International, held in Geneva on 12 July 2023, UN experts and civil society voiced concerns over the severe human rights violations faced by Palestinian children due to the ongoing illegal occupation of Palestinian territory.

The event featured speakers such as Miloon Kothari, Commissioner of the Independent International Commission of Inquiry on the Occupied Palestinian Territory, Khaled Quzmar, President of the DCI Movement & Director General of DCI-Palestine, Budour Hassan from Amnesty International, and Francesca Albanese, Special Rapporteur on the situation of human rights in the Palestinian territory occupied since 1967.

Israeli military courts, lacking basic safeguards for fair trials, detain and prosecute an estimated 500 to 700 Palestinian children annually. According to Khaled Quzmar, Palestinian children are subjected to ill-treatment, torture, and violations of their rights from the moment of arrest, often in violent night raids.

Despite international norms stipulating that civilians, especially children, should not face military courts, Israel remains the sole country to routinely prosecute children in such courts. Special Rapporteur Albanese highlighted the systematic criminalization of ordinary acts of life under occupation, leading to severe sentences for minor infractions.

The deprivation of liberty experienced by Palestinian children is arbitrary by default, as Israeli authorities systematically disregard fundamental protections for a fair trial. Amnesty International's Budour Hassan noted delays in accessing legal representation, coerced confessions, and punitive sentencing practices.

The most egregious cases involve administrative detention, where Palestinian children are held without charge or trial based on undisclosed evidence. Commissioner Kothari emphasized that this stems from the illegal occupation, while Special Rapporteur Albanese underscored the expansion of settlements as constituting a war crime.

Budour Hassan emphasized that the military court system operates within an apartheid framework, systematically violating Palestinian rights. Commissioner Kothari condemned terrorist designations against NGOs, including DCI-Palestine, urging their rescission to protect vulnerable children.

The Global Study on Children Deprived of Liberty underscores the harmful impact of detention on children, both physically and psychologically. Of the 1254 patients examined, 23.2% exhibited symptoms indicative of post-traumatic stress disorder (PTSD)., 17.3% exhibited symptoms of anxiety disorder (excluding PTSD or acute stress disorder), and 15.3% presented symptoms of depression. Notably, PTSD was more prevalent among children aged 15 years or younger, while depression was the predominant symptom observed among adults. Factors significantly associated with PTSD in children included witnessing murder or physical abuse, receiving threats, and experiencing property destruction or loss. Psychological care, primarily in the form of individual, short-term psychotherapy, was provided to 65.1% of patients, with approximately 30.6% requiring psychotropic medication. Therapy sessions for children were longer compared to adults.

A sample of 1,029 school pupils aged between 11 to 17 years participated in the study, with 51.8% being female

and 48.2% male. The War-Traumatic Events Checklist (W-TECh) and Post-Traumatic Stress Disorder Symptoms Scale (PTSDSS) were employed for data collection.

The findings revealed that a significant majority of children and adolescents experienced personal trauma, witnessed trauma inflicted on others, and observed the demolition of property during the war. Boys were found to have a higher exposure to these traumatic events compared to girls. The prevalence of DSM-V PTSD diagnosis stood at 53.5%. Moreover, those who experienced personal trauma witnessed trauma to others, and observed property demolition were more likely to be diagnosed with PTSD, even after adjusting for demographic and socioeconomic variables. Notably, personal trauma emerged as the strongest predictor of PTSD, followed by witnessing trauma and observing property demolition.

The study underscores the intricate relationship between war-related traumatic events, PTSD, and demographic and socioeconomic factors among Palestinian children and adolescents in the Gaza Strip. Interventions aimed at mitigating psychological symptoms and enhancing resilience should consider these factors, including gender, age, socioeconomic status, and residential location, to tailor effective strategies for support and intervention.

Interviews conducted by Save the Children reveal the distressing experiences of former child detainees. Issa recalls being subjected to verbal threats and physical violence during interrogation, while Fatima describes being assaulted and handcuffed by Israeli forces at a military checkpoint. Such traumatic events leave lasting scars, both physically and psychologically.

The psychological toll of detention is profound, with nearly half of the children interviewed struggling to return to normalcy. Mahmoud, detained at 17, reflects on heightened anger and trust issues post-release, echoing sentiments shared by many former detainees. The cycle of trauma perpetuated by the Israeli occupation exacerbates emotional distress, compounding the challenges faced by these vulnerable children.

The aftermath of trauma prompts a surge in international humanitarian interventions ostensibly aimed at assuaging the psychological repercussions afflicting Palestinian children. However, while these initiatives purport to address the multifaceted ramifications of violence, they concurrently risk engendering a depoliticization of the prevailing occupational milieu. By construing the occupation primarily through the prism of individualized trauma, these interventions marginalize the collective struggle for Palestinian self-determination.

Scholarly inquiry has shed light on the enduring prevalence of PTSD among Palestinian children, with exposure to chronic violence intricately linked to heightened levels of anxiety, depression, and traumatic stress. Despite emergent initiatives aimed at ameliorating the psychological toll, persistent debates abound regarding the long-term psychosocial repercussions and the inherent resilience of Palestinian youth.

Moreover, the discourse of trauma, while instrumental in foregrounding the psychological exigencies attendant to systemic oppression, concurrently risks diluting the inherently political nature of occupational violence. By rendering political strife amenable to medical intervention, this discourse serves to obfuscate the underlying socio-political realities undergirding the occupation.

In light of these considerations, while trauma relief initiatives may furnish temporary palliative measures, they simultaneously run the risk of perpetuating a narrative of Palestinian victimhood, thereby perpetuating structural power imbalances and impeding collective efforts toward self-determination. Eventually, the framing of Palestinian suffering within the confines of trauma discourse effectively circumscribes their political agency, relegating them to a state of perpetual dependency on external actors for governance and protection.

The discourse concerning Palestinian children within the framework of trauma and humanitarian suffering is intricate and deeply enmeshed within broader socio-political dynamics. This discourse not only influences perceptions of Palestinian youth but also informs the strategies and interventions undertaken by humanitarian organizations. Central to this discourse is the construction of childhood trauma and the subsequent mobilization of particular subjectivities through humanitarian aid narratives.

One salient aspect of this discourse is its portrayal of Palestinian children as both victims and potential agents of violence, framing their experiences predominantly through the lens of trauma and psychological distress. This discourse often marginalizes the broader structural violence inherent in the occupation, choosing instead to focus on individualized suffering and the perceived necessity for psychological intervention. Consequently, the occupation itself becomes obfuscated, relegated to the periphery, while the emphasis remains on addressing the psychological well-being of children.

Moreover, an underlying assumption permeates this discourse: that all Palestinian children growing up under occupation are inherently traumatized, and failure to promptly address this trauma may engender future

violence and aggression. This assumption reflects a pervasive belief in the notion that exposure to violence inevitably begets individual aggression—an idea rooted in the intuitive perception that one's environment profoundly shapes one's psyche.

As a result, trauma discourse not only constructs an image of Palestinian children as vulnerable to suffering but also as potentially threatening. Consequently, humanitarian relief projects aimed at addressing trauma in Palestinian children often seek to cultivate rational and self-managing subjects, framing the issue primarily as a psychological matter rather than a political one. This paradigmatic shift effectively transforms the problem of occupation into a question of individual psychology, with the psyche of Palestinian youth positioned as the focal point of intervention.

While major international NGOs wield considerable influence in propagating humanitarian psychiatric relief in Palestine, the pervasive nature of trauma discourse extends beyond these organizations to encompass smaller, community-based initiatives. Palestinian community organizations adeptly navigate the language of trauma to secure international support, demonstrating a remarkable degree of flexibility and creativity in their pursuit of survival.

However, it is imperative to acknowledge the inherent limitations in framing Palestinian suffering solely within the discourse of trauma. While ostensibly aimed at alleviating suffering, humanitarian interventions may inadvertently constrain political agency by demanding victims relinquish their agency in exchange for sympathy and assistance. By reducing the multifaceted realities of occupation to individualized trauma narratives, these interventions risk depoliticizing Palestinian resistance and perpetuating a cycle of dependency on external aid.

To attain a more nuanced understanding of how Palestinian children negotiate and contest the discourse of trauma and humanitarian suffering, a methodologically rigorous approach is indispensable. We can elucidate how Palestinian youth reproduce and contest dominant narratives surrounding trauma by synthesizing critical discourse analysis with participatory research methods. It is crucial to strive towards empowering Palestinian children to become active agents in shaping their own narratives, moving beyond the constraints of victimhood to explore the diverse ways in which they resist and navigate their experiences within the larger framework of occupation.

The discourse surrounding Palestinian children's experiences of trauma and humanitarian suffering is complex, intersecting with broader socio-political dynamics. Within this discourse, children are often depicted as passive victims of unidentified violence, positioning them as recipients of external intervention rather than as political actors capable of understanding, resisting, and healing from violence within their wider community. This portrayal not only underscores the assumption that Palestinian children are inherently traumatized but also implies dire consequences if this trauma remains unaddressed, suggesting a link between past violence and future social and behavioural issues.

For instance, international NGOs targeting war-affected Palestinian children frame their mission around improving physical and mental health, offering alternatives to violence, and providing safe spaces for children to release frustration. This approach suggests a belief that Palestinian children lack alternatives to violence and require external intervention to mitigate potentially violent reactions. Similarly, funding proposals for art therapy and education programs emphasize the need to improve psycho-social health, encourage tolerance, and channel potentially dangerous emotions and energy into positive, creative activities.

Moreover, projects such as computer education programs appeal to international donors by presenting internet-related activities as forms of psychological support and avenues for self-expression, framing education as a means to heal trauma, build skills, and promote peace. However, underlying these initiatives is the implicit assumption that empowering Palestinian children through education and self-expression will transform them into peaceful and productive global citizens, thus averting the risk of radicalization.

This narrative of trauma relief programs linking individual healing to personal productivity overlooks the broader political context of occupation and reduces the violence of occupation to individual psychological symptoms and developmental hurdles. However, ethnographic research with Palestinian children challenges these assumptions, revealing diverse responses to violence, including empowerment and resistance.

Children acknowledge the psychological toll of occupation and demonstrate resilience and solidarity within their communities. They use creative tools learned from humanitarian projects to engage in political resistance and collective storytelling, challenging dominant narratives of victimhood and trauma. Through photography and video projects, they highlight the ongoing effects of occupation on their communities, emphasizing collective struggle and resilience rather than individual suffering.

Empirical evidence, as delineated in a study featured in ‘Frontiers in Psychiatry’ (2022), underscores the

ubiquitous exposure of Palestinian children and adolescents to traumatic events. A staggering majority have encountered personal trauma (88.4%), witnessed the harrowing effects of trauma upon others (83.7%), and beheld the demolition of property (88.3%). Notably, the prevalence of Post-Traumatic Stress Disorder (PTSD) diagnoses stands at an alarming 53.5%, with discernible correlations between exposure to traumatic events and heightened susceptibility to PTSD, even after statistical adjustments for demographic and socioeconomic covariates. Among the traumatic incidents, personal trauma emerges as the most salient predictor of subsequent PTSD manifestation, followed by the witnessing of trauma and the observation of property demolitions.

While trauma discourse initially provided a platform for Palestinian narratives within the humanitarian sphere, it has also constrained children's political agency by pathologizing their experiences and prescribing individualized solutions. However, children's interpretations and responses to trauma reveal a more nuanced understanding of resilience and resistance within the context of occupation. By challenging dominant narratives and reclaiming their agency, Palestinian children actively construct their own narratives and advocate for their rights within a broader global context.

For over seven decades, Palestinian children have been exposed to escalating levels of trauma resulting from enduring conflicts with Israel. This sustained exposure to danger and violence has created a marginalized societal group that has become the subject of extensive research aimed at understanding the psychological ramifications of near-constant warfare. This article explores the burgeoning literature examining the continuous traumatic stress experienced by Palestinian children amidst the occupation and chronic warfare, shedding light on the profound psychological effects of their war trauma experiences.

Children enduring man-made disasters, such as war, inevitably suffer profound psychological, emotional, and behavioural consequences. While research has drawn parallels between the effects of war on children and survivors of natural disasters, ongoing investigations seek to elucidate the enduring psychological impact of warfare on children. This exploration spans various regions worldwide, highlighting the universal challenges faced by children exposed to war-related trauma.

Generations of Palestinians have borne the brunt of recurrent wars and conflicts since the British occupation in 1917, with the situation escalating in Gaza over the past decade. From the First Intifada to the most recent hostilities in 2021, Palestinian children in Gaza have been subjected to relentless trauma characterized by widespread devastation and loss of life. The cyclical nature of conflict has left an indelible mark on these children, perpetuating a cycle of fear, loss, and psychological distress.

The protracted conflict in Palestine has profoundly affected the mental health of children, manifesting in a range of psychological symptoms and behavioural challenges. Studies have documented alarming rates of depression, anxiety, and post-traumatic stress disorder (PTSD) among Palestinian children, exacerbated by constant exposure to violence, loss, and displacement. Despite the resilience exhibited by many children, the cumulative effects of war trauma continue to cast a long shadow over their lives, hindering their development and well-being.

This reframing aims to capture the essence of the original text while presenting it in a more concise and structured format.

Exploring the ordeals faced by Gaza's children, who have endured the horrors of war and still wrestle with its aftermath, underscores the significance of their voices in comprehending and validating their anguish. Wa'ad, a 16-year-old girl from Beit Lahia, bears the weight of depression, causing her to withdraw socially. She articulates her feelings about the war, expressing a profound sense of psychological entrapment and fear: "*War is utterly horrifying. I feel trapped and terrified, with nowhere safe, not even my own home. I'm exhausted by it all. We're just children, yet there's no sanctuary for us. I'm weary of hearing about war. I live in constant fear and discomfort. All my hopes and dreams have been shattered."*

Dr. Qadih, a psychologist, highlights the stark reality faced by Palestinians, lamenting the lack of international aid and attention to their plight. He emphasizes the urgent need for comprehensive psychological care to address the deep-seated trauma afflicting Palestinian children: "*The children of the war remain neglected by the international community, overlooked in their suffering. Physical wounds are acknowledged, but emotional scars go unnoticed. We need to recognize the psychological toll on Palestinian children—a vast majority of whom require extensive therapy. Our resources are stretched thin, unable to meet the overwhelming demand for psychological support.*"

Dr. Owaida, echoing this sentiment, underscores the necessity of addressing the root causes of Palestinian suffering: "*Limited resources hinder our efforts, but the solution lies beyond psychological intervention. Ending the occupation and the cycle of violence is paramount. As psychologists, we can only do so much. We cannot*

promise safety in times of war. Our focus must be on holistic healing, addressing the trauma inflicted on Palestinian children and their families." [29]

Children's drawings vividly capture the trauma of their experiences—bombed homes, military tanks, and the loss of loved ones—a poignant reflection of the violence that pervades their lives. These visual narratives underscore the urgent need for comprehensive mental health care tailored to each child's unique needs, emphasizing long-term therapy to facilitate healing and resilience.

The grim reality faced by Palestinian children demands global attention and action. Their suffering, compounded by years of conflict and neglect, necessitates robust support systems and advocacy efforts to secure their well-being. Ending the cycle of violence and securing a future of peace and dignity for Palestinian children must be a priority—a responsibility shared by all humanity.

Israel stands alone in its routine prosecution of children within its military court system, devoid of fundamental safeguards for fair trials. Abdullah recounts being forcibly taken from his home enduring multiple detentions over the course of a year, a scenario all too familiar in occupied Palestine. Stone-throwing, deemed a "security offence" often leads to lengthy imprisonment, even for children as young as 12. This alarming trend is well-documented, with NGO Save the Children shedding light on the dire situation. Presently, over 200 Palestinian children languish in Israel's overcrowded Ofer, Damon, and Megiddo Prisons, enduring squalid conditions and limited access to healthcare. Save the Children's report reveals harrowing accounts of abuse and torture, portraying a stark reality where children suffer dehumanizing treatment.

From arbitrary arrests to coercive interrogations, children's rights are routinely violated throughout the detention process. The lack of accountability and disregard for international law only exacerbate their suffering, highlighting the urgent need for comprehensive support and advocacy.

The international community must hold Israel accountable for its violations of children's rights, demanding an end to impunity. The Convention on the Rights of the Child, ratified by Israel, mandates imprisonment as a last resort and for the shortest duration possible, yet these principles are routinely flouted.

Concrete steps must be taken to safeguard the well-being of Palestinian children, ensuring their rights are respected and upheld. The time has come for collective action to bring an end to the cycle of abuse and injustice endured by Palestinian children at the hands of the Israeli occupation.

Israel's psychological warfare targeting Palestinian children represents a grave violation of human rights and ethical standards. The international community must condemn these tactics and work towards a just and peaceful resolution to the Israeli-Palestinian conflict.

Every child matters. Reclaim The Narrative

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Effects of Torture on the Lives of Migrants and their Rehabilitation: A Review

Hammad Ahmed Hashmi

The United Nations defines torture as: *"Any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind."(United Nations Convention against Torture and Other Cruel UNCAT article).*

The impactful effects of torture on migrant populations are lasting and far-reaching. By exploring the physical, psychological, and social consequences of this atrocious act of torture, an urgent global issue is brought to light, especially highlighted in the Gaza-Palestine. With the rising number of individuals seeking refuge in foreign lands, the vulnerability of migrants to various forms of abuse, including torture, has become a vital concern. Thus, this article strives to raise awareness and understanding of the thoughtful impact of torture on the well-being and integration of migrants with rehabilitation. The article discusses the physiological, psychological, and social toll the survivors have taken by being subjected to mental and physical torture. It's extremely necessary to approach these survivors and their needs in a manner that takes into account their experience and suffering with care, understanding and empathy. A multidisciplinary community approach is essential in addressing their needs and providing them with the support they require to join a welcoming society with dignity and pride.

Key Words: *Torture, Impacts, Migrants, Rehabilitation*

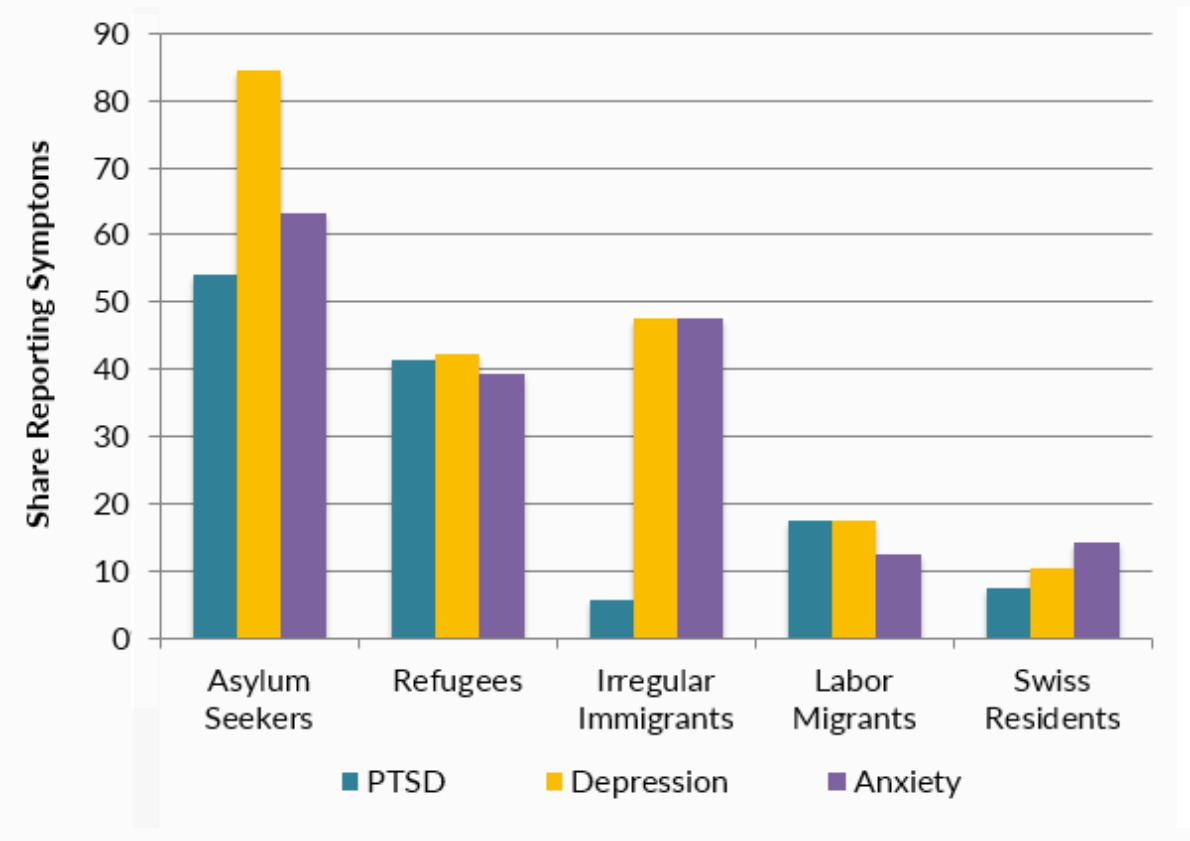
Source: https://www.freedomfromtorture.org/news/where-does-torture-happen-around-the-world

1.

Introduction: The article will first provide context and a brief history of the global migration crisis and highlight the plight faced by millions of refugees who are forced out of their homes and are in search of a better life that is safe and provides them with opportunities to rejoin society. The introduction also focuses on the abuse and torture these migrants have to face at the hands of human traffickers, authorities, or even fellow migrants. The introduction highlights the disturbing reality that most people are ignorant without empathy. The most common Impacts of Torture on migrants' Mental Health are;

a. Post-traumatic stress disorder (PTSD)
b. Depression
c. Anxiety
d. Somatic Symptoms

A study was conducted in Switzerland which defines asylum seekers as those individuals waiting for their claims to be processed; refugees as those whose asylum claims have been accepted and who have received permanent residence; irregular immigrants as those without legal status; labour migrants as those who arrived for work with pre-issued visas; and Swiss residents as individuals without a migration background, i.e. at least third generation.

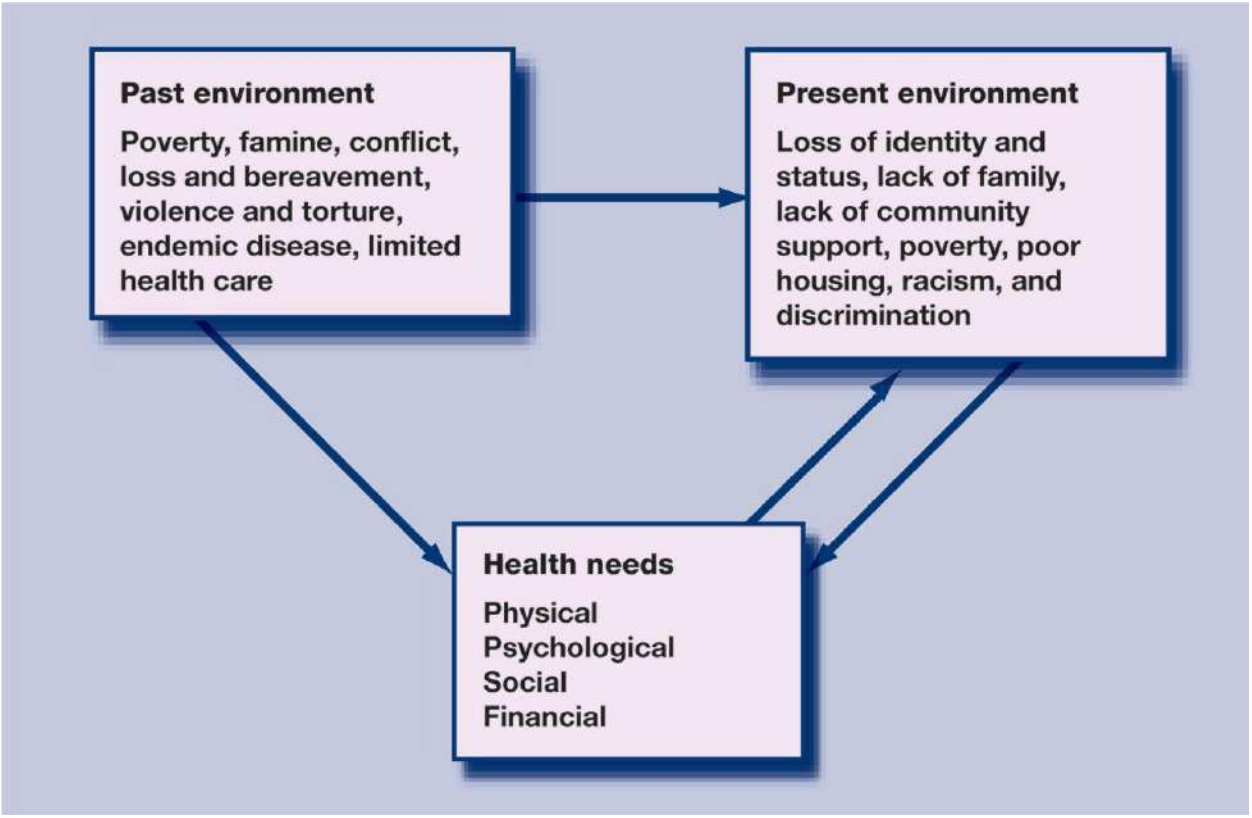


Rates of Reported Mental-Health Symptoms by Migrant Group and Resident Status in Switzerland.

Source*:* Martina Heeren et al., "Psychopathology and Resident Status – Comparing Asylum Seekers, Refugees, Illegal Migrants, Labor Migrants, and Residents," *Comprehensive Psychiatry* 55 (2014): 818-25.labour"

2.

Physical Consequence: The article aims to highlight the physical ramifications and long-term consequences of torture. These will be discussed with the help of medical professionals and survivors' data with details of injuries sustained by migrants that often range from physical trauma to chronic health conditions. Impediments like accessing proper medical care and rehabilitation add another layer of intricacy to the migration struggle of refugees.

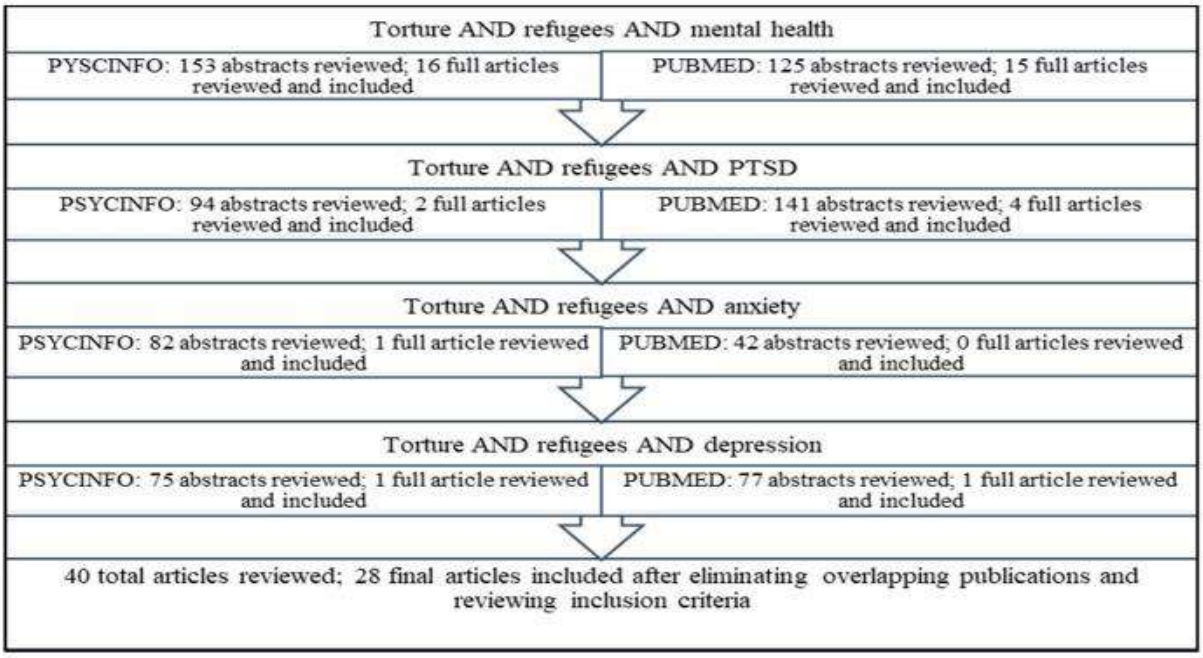


Model of health effects of forced migration and refugee status
Source: Asylum seekers, refugees, and the politics of access to health care: a UK perspective**.** Keith Taylor. British Journal of General Practice 2009; 59 (567): 765-772. **DOI:** https://doi.org/10.3399/bjgp09X472539

3.

Psychological Toll: This section delves into one of the most troubling consequences of torture, which is the psychological issues associated with torture, which vary from PTSD, anxiety disorder, depression, and a variety of stress-related illnesses. These issues become a major problem during the rehabilitation process, especially when mental health issues are still stigmatized in many societies with a flare of social taboos. This section highlights the need for appropriate support and care provided by mental health practitioners. In April 1982, F. Auodi and G. Cowgill., PhD conducted a research study on 41 Latin American refugees who arrived in Canada between 1977 to 1979, and the findings are given below in Tables I, II & III.

Source: Figure 1: "Risk Factor Affecting the Mental Health of Refugees" from Chesoi, Madalina and Martin McCallum, Mental Health Needs of Refugees in Canada, HillNotes, Library of Parliament, Ottawa, 20 June 2022, Pierre Willan.



Source: Protocols established during the study of Hiba Abu Suhaiban et al-2019

Table I
Methods of Torture
(N = 41)

PHYSICAL	
Beatings	40
Slapping, kicking and punching	40
Rifle butt	32
Beating with heavy whip, baton, stick	25
Electrical torture	27
Cold water torture	15
Application of cigarettes/chemicals/hot water	5
Broken bones	11
Sexual molestation (touching, stripping, attempted rape)	14
Rape	6
Starvation (food and water)	16
Starvation/Minimal food (2 days)	12
Water deprivation (2 days)	15
Other forms of torture (bag, bright light, nail removal, hanging by fingers)	12
PSYCHOLOGICAL	
Verbal abuse	32
False accusations	35
Threatened with Execution	31
Execution of self	23
Execution of family, friends	13
Sham Executions	12
Other forms of torture (for example, excrement abuse)	12

Table II

Symptoms After Torture
(N = 41)

Psychosomatic	38
Pains, headaches	22
Nervousness	33
Insomnia	28
Nightmares, panic	14
Tremors, weakness, fainting, sweating, diarrhea	26
Behavioural and Personality Changes	20
Withdrawal, irritability, aggressiveness, impulsiveness	13
Suicide attempt	4
Sex dysfunction (severe)	5
Affective	39
Depression (crying)	29
Fear	12
Anxiety	36
Mental Function	18
Confusion, disorientation	5
Memory disturbance	12
Loss of concentration, attention, blocking	13
Physical Damage (history and examination)	31
Scars, burns	21
Fractures	8
CNS — deafness	5
Weight loss	10
Other (teeth broken, lost, torn tendon, skin rash)	11

Table III

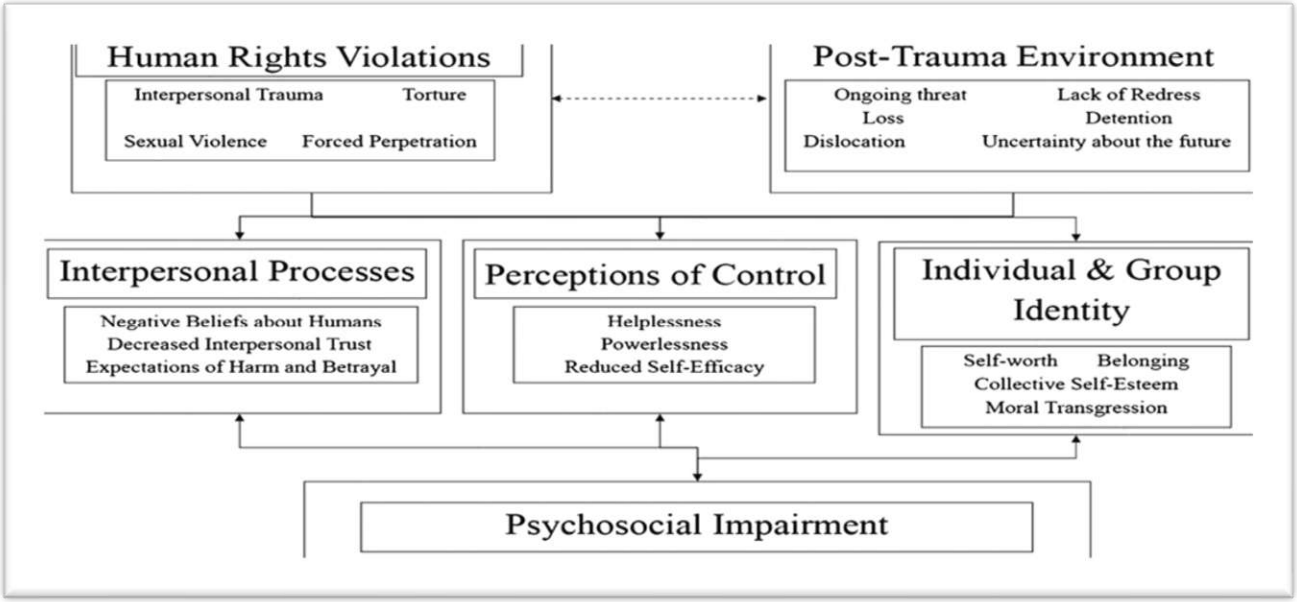
Medical Care of Torture Victims
(N = 41)

Patient Seen/Treated by Doctors	19 (21)*
Army/Navy Unit	7
Public Hospital	5
Private doctors	9
Not seen	22
Doctor Behaviour (21 doctors)	
Collaborating	
(Approving, allowed torture to continue)	4
Neutral	
(Never spoke to patient or inquired about injuries, never offered comfort)	12
Ethical	
(Comforted and protected patient)	5

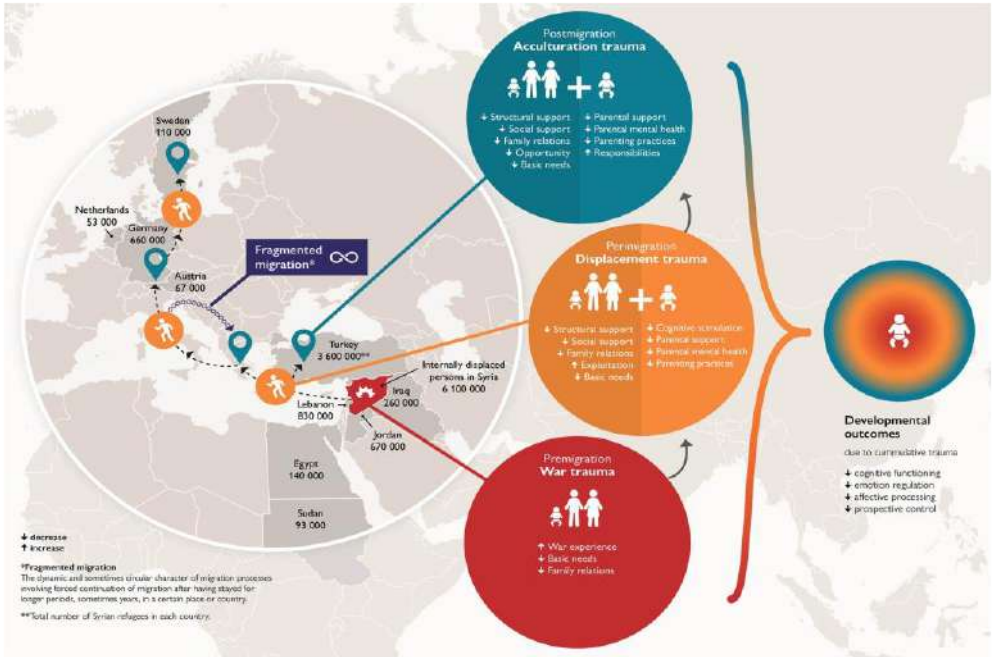
*Some patients seen/treated more than once by different doctors.

4.

Impact of Torture on Migrants' Mental Health: Survivors of torture often experience a range of physical and psychological consequences, including post-traumatic stress disorder (PTSD), depression, anxiety, and somatic symptoms. These conditions can significantly impede their ability to integrate into host societies by affecting their cognitive abilities, social interactions, and overall well-being.



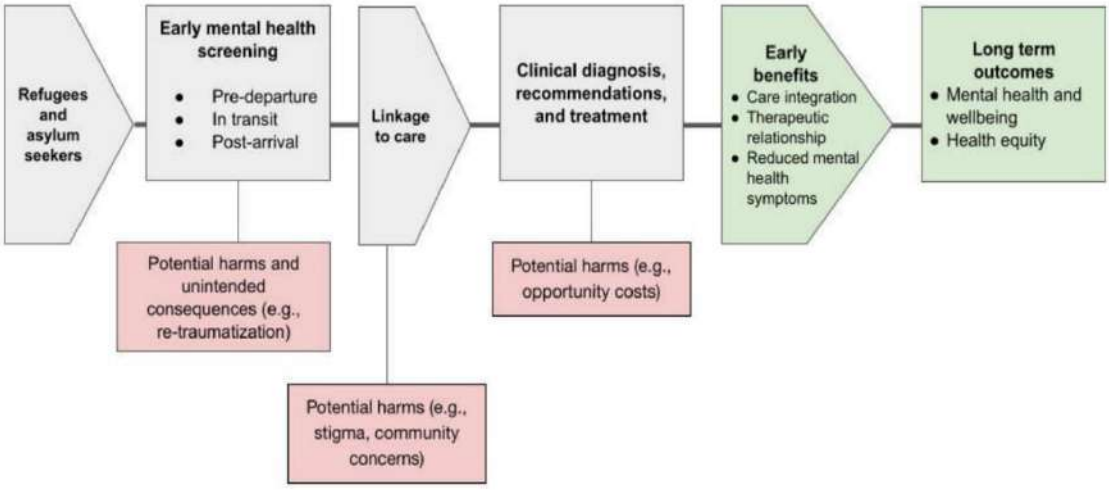
Mechanism of Psychological Injury (Trauma) following human rights violations
DOI:10.1111/CPSP.12064 Corpus ID: 205036618



5. Access to Healthcare Services: Migrants who have experienced torture may face barriers in accessing healthcare services due to factors such as language barriers, lack of knowledge about available services, fear of persecution, and stigma associated with mental health issues.

Medical professionals play a crucial role in providing culturally sensitive care and support to survivors of torture, helping them address their physical and mental health needs

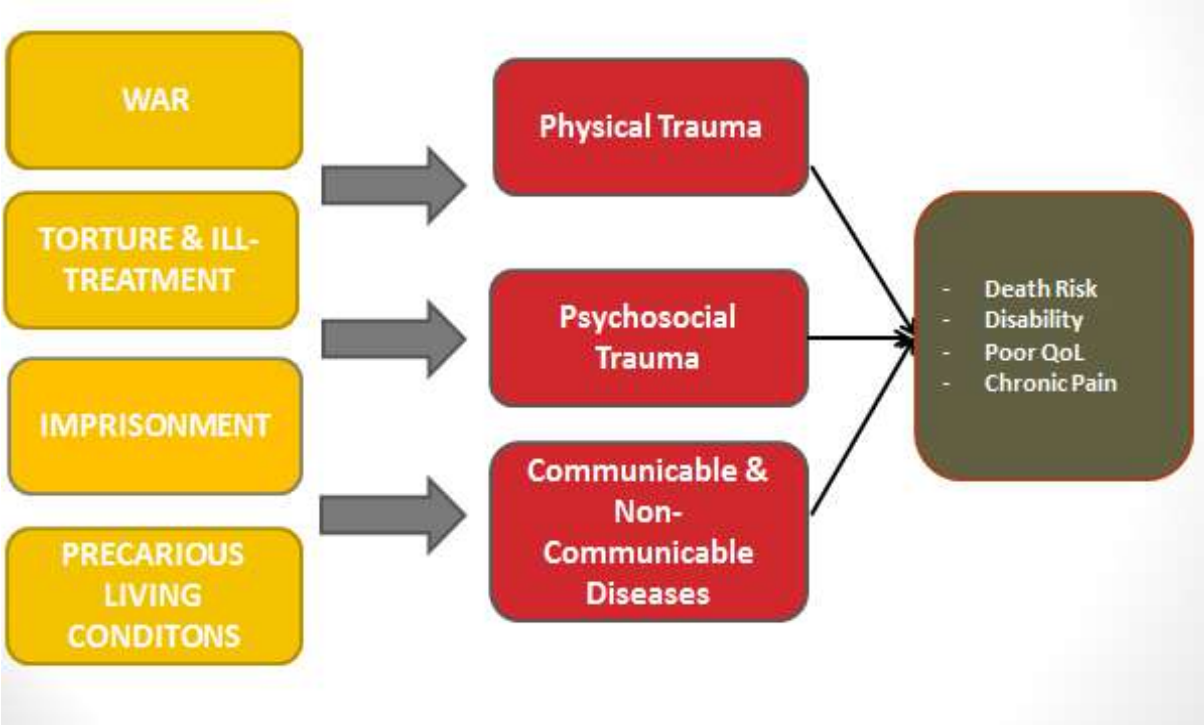
.



Logic model of mental health screening along the resettlement pathway. **Source** https://www.mdpi.com/1660-4601/19/6/3549

6. Social Integration Challenges: Survivors of torture may encounter difficulties in social integration, including challenges in building social networks, securing **employment, and participating in community activities. The psychological trauma resulting from torture can affect their ability to trust others and engage in social interactions, leading to feelings of isolation and alienation.**

Source:Figure: prepared by the Library of Parliament using data obtained from Branka Agic et al., *Supporting the Mental Health of Refugees to Canada*, Mental Health Commission of Canada, January 2016, p. 6.



Experience_of_Refugees.png (Courtesy: Zafer Altunbezel)

7. Role of Support Services: Organizations and support services specializing in assisting survivors of torture play a vital role in facilitating their integration into host societies. These services often provide counselling, legal assistance, vocational training, and advocacy to help survivors rebuild their lives and regain a sense of dignity and autonomy.

8. Access to Healthcare Services:

- **Medical professionals** play a crucial role in providing culturally sensitive care and support to survivors of torture by;
- Helping them address their physical and mental health needs amiably and compassionately
  a. Impediments
     (1) Language barriers
     (2) Lack of knowledge about available services
     (3.) Fear of persecution
     (4) Stigma associated with mental health issues

9. Social Integration Challenges:

a.Survivors of torture may encounter difficulties in social integration;

1) Language Barrier
2) Challenges in building social networks.
3) Securing employment
4) Participating in community activities
5) The effect of trauma affects their ability to trust others and engage in social interactions, leading to feelings of isolation and alienation.

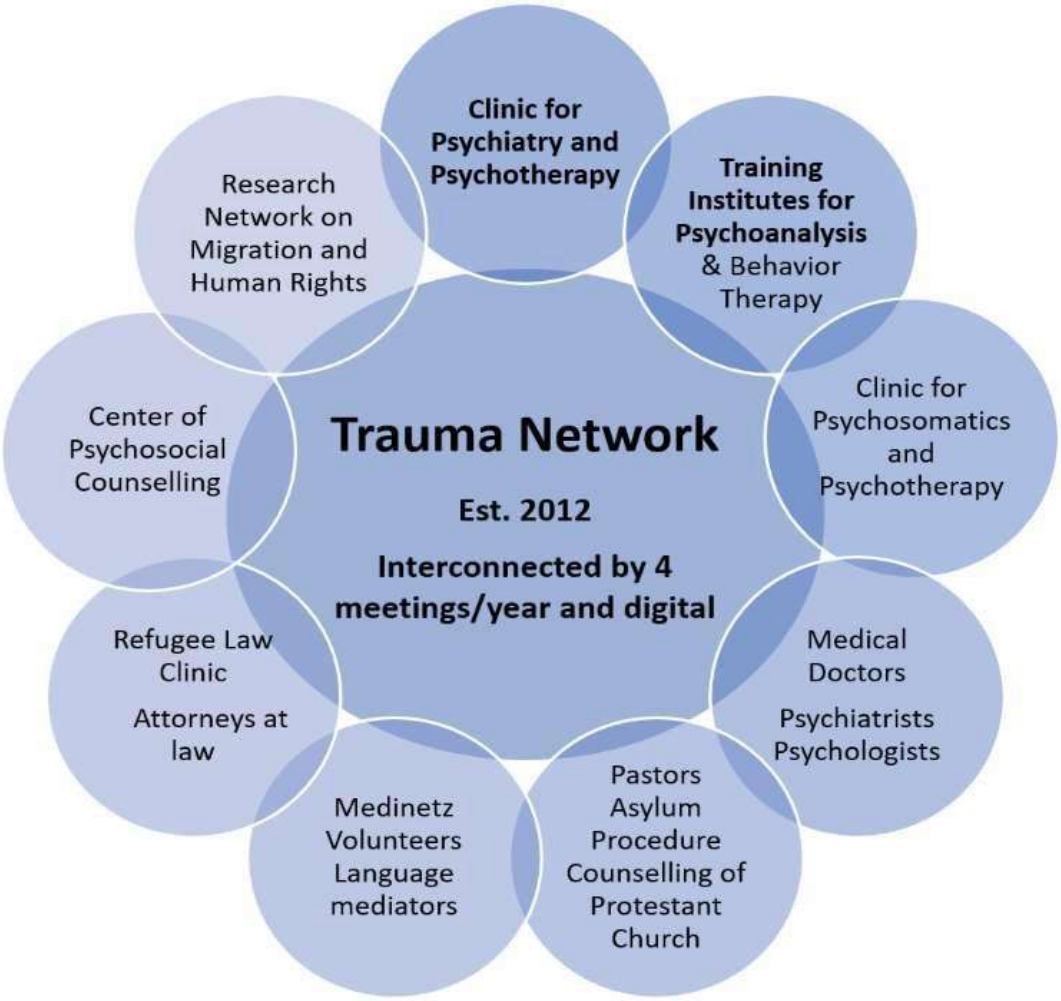
10. Role of Agencies (Govt., NGOs) in Rehabilitation of immigrants and those in need, like the survivors of torture and the Policy Implications:

Addressing the needs of torture survivors requires a multi-faceted approach that involves policymakers, healthcare providers, social workers, and community organizations. Policies should focus on promoting access to specialized healthcare services, enhancing cultural competency among healthcare professionals, and creating inclusive social policies that support the integration of migrants, including survivors of torture. Organizations and support services specializing in assisting survivors of torture play a vital role in facilitating their integration into host societies.

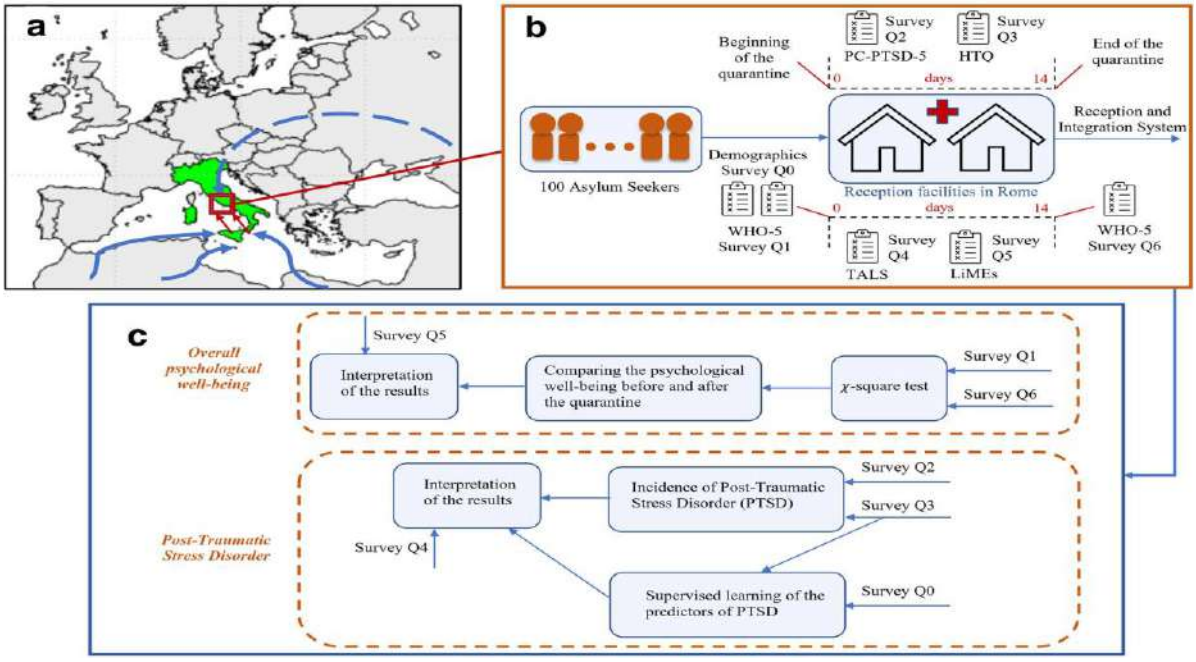
These services often provide;

- Counselling
- Legal assistance
- Vocational training

- Advocacy to help survivors rebuild their lives and regain a sense of dignity and autonomy with matching pride.



Actors in the trauma network in Middle Hesse for refugee care, hosts bolded. All actors are interconnected and support each other according to need within the framework with their specific competencies (e.g., supervision, legal advice, medical support and treatment, psychotherapy).
Source: https://doi.org/10.3390/ijerph192013436



Source: Migrants' mental health recovery survey in Italian reception facilities
https://www.nature.com/articles/s43856-023-00385-8

11. Human Rights Standpoint: It's essential to recognize that torture is a violation of human rights, and principles of justice, accountability, and respect for human dignity should guide efforts to support survivors. Upholding human rights standards is critical in addressing the root causes of torture and preventing its recurrence in the future.

Social Integration and Stigma: The impact of torture on migrants' ability to integrate into host societies will be explored viz literature & studies. It addresses the stigma attached to survivors of torture, both within migrant communities and among the local population. The article examines the social barriers to communal integration and social taboos, including discrimination, mistrust, and the fear of disclosing past traumas.

12. Way Forward

Policy Implications: Addressing the needs of torture survivors requires a multi-faceted approach that involves policymakers, healthcare providers, social workers, and community organizations. Policies should focus on promoting access to specialized healthcare services, enhancing cultural competency among healthcare professionals, and creating inclusive social policies that support the integration of migrants, including survivors of torture.

Human Rights Perspective: It's essential to recognize that torture is a violation of human rights, and principles of justice, accountability, and respect for human dignity should guide efforts to support survivors. Upholding human rights standards is critical in addressing the root causes of torture and preventing its recurrence in the future.

13. Recommendations: a.Let us call "spade a spade" and denounce torture regardless of ethnicity, creed, religion or colour

b. We need to empower our world bodies so that the plight of the victims is heard and addressed too, in a befitting manner

a) We should work together in harmony with each other and promote global peace.
b) It's essential to recognize that torture is a violation of human rights by global actions.
c) Concerted efforts be made to support survivors and should be guided by principles of justice, accountability, and respect for human dignity.
d) Upholding human rights standards is critical in addressing the root causes of torture and preventing its recurrence in the future.

14. Conclusion: The article concludes by promoting inclusive measures to address the devastating effects of torture on migrants. It emphasizes the need for international cooperation, increased awareness, and the development of trauma-informed policies to support

survivors. The role of organizations which help in the rehabilitation of migrants with known devastating impacts of torture must be highlighted. By shedding light on the multifaceted consequences of torture, it is recommended to seek the attention of the world bodies and social organizations to initiate prompt actions and, through awareness, generate empathy toward the most vulnerable members of the global community—those who have endured the unimaginable consequences in their pursuit of a better life as a migrant, especially its need has significantly raised in the conflicts in Gaza Palestine and other global issues, affecting the lives of refugees seeking refuge in new international destinations a way away from their native localities and loved ones.

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Useful Links.

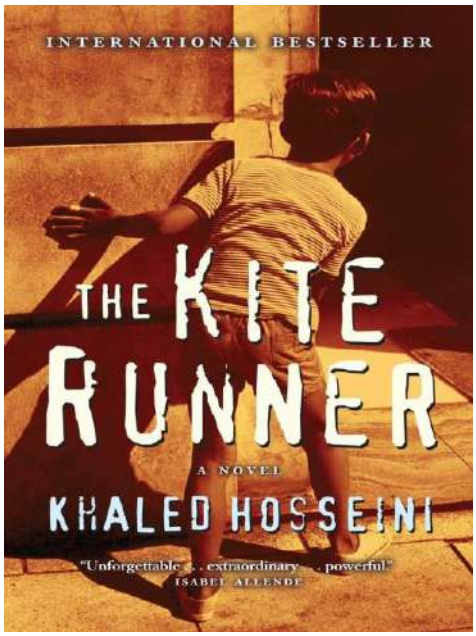
- **http://www.cpt.coe.int/**
- **https://www.ohchr.org/en/hrbodies/hrc/home**
- **https://www.hrw.org/**
- **https://www.amnesty.org/en/**
- **https://euromedmonitor.org/en**
- **https://www.doctorswithoutborders.org/**
- **https://www.unhcr.org/**
- **https://www.fidh.org/en/**
- **https://www.icrc.org/en**

BOOK REVIEW

The Kite Runner

Author: Khalid Husseini

Reviewer: Mahrukh Qureshi



I recently read The Kite Runner by Khalid Husseini. I love reading an actual book, holding it in my hands, reading it page by page, and getting so absorbed that I forget all sorts of distractions. Books can impact us due to our mental state and what is happening worldwide while reading. Yes, I am talking about the wars: Russia-Ukraine and Israel-Palestine. I must say that several times while reading the book, I thanked God for what I had: a sense of security, fearlessness, freedom, pride, a house to live in, warm clothes and countless other blessings! We all live with qualms and struggles, and reading this book made me realize my worries were meaningless compared to what The Kite Runner's characters had gone through due to their dilemmas and the Soviet-Afghan war!

The Kite Runner portrayed Afghanistan when it was a prosperous, peaceful country and, what it became after the Soviet-Afghan war and then the Taliban era, how the war changed the country, lives and culture forever! It is a story told in twenty-five chapters of Amir and Hassan, two half-brothers living in the same house, yet with a massive difference in the degree of status, respect, education, courage, and loyalty. Hassan lived a life of a loyal servant to Amir and his friend to have fun, fly kites, and play, yet he never expected treatment equal to Amir and never enjoyed the status Amir enjoyed living at his dad's house. Hassan lived in a small servant quarter. He remained unaware that Amir was his half-brother, whereas this was unveiled to Amir only after Hassan was killed in Afghanistan years after they had parted. Hassan has taken care of Amir's big house with all his love and loyalty since Amir fled from Afghanistan at a young age with his dad to save their lives. Hassan could not go with them despite his dad having wished him to.

Hassan was a sincere friend, an innocent and loyal soul not cognisant of feelings of jealousy. Amir would always read his books to him, as Hassan did not have the privilege of learning to read. Hassan had so many challenges in his life being thin-lipped Hazara considered as a low caste; his mother ran away when he was very young, his real dad abandoned him just for the sake of pride and honour, he got raped while Amir stayed protected, yet lived with guilt all his life that he made no efforts to save him. Hassan confessed to stealing, which he was not responsible for; Amir hid some valuables under his mattress to escape Hassan's friendship and guilt. He was Amir's friend only when Amir wanted to. Hassan suffered at the hands of fate, family, friends and the war!

Amir lived a life of privilege. The privilege of honour and pride, wealth, education, and servants. Yet, he always felt that his dad did not love him as he desired. Amir was perhaps jealous of how his dad loved Hassan, too. Amir's dad was only his, and this was the lie he lived with. His dad once said to Amir when he was young:

There's only one sin, only one. And that is theft. Every other sin is a variation of theft.

At that early age, Innocent Amir was oblivious to the fact that his dad was a thief, too! His theft was not telling the truth that Hassan was Amir's illegitimate brother. His dad was miserable when he and Amir left for Pakistan and then escaped to the US, and Hassan stayed back in Afghanistan. Amir's dad lived all his life in punishment for his theft and could not confess his theft to his son, Amir and died of cancer without seeing Hassan ever again since he left Afghanistan.

Amir and his dad left their pride back in Afghanistan when they flew. They made it to Pakistan and then to the US with a fresh start as immigrants. Their journeys were not easy and were full of traumatic and cruel experiences. Amir and his dad had a rough start in the US. Nonetheless, they stayed connected with the Afghan community, resulting in Amir getting married to the Afghan woman he fell for at the traditional Afghan wedding, which had many guests and lavish food and music.

Amir's wife had run away with a man a few years back and was brought back home by his dad after a short while. Amir's wife opened up to Amir before marriage, and he accepted her regardless of whether this was known in the community and they judged her for her past. On the other hand, Amir remained unable to lift the weight off his chest by sharing his secrets with his wife. He considered her luckier and more courageous since telling the truth must have made her feel lighter forever. He became a writer, and his wife was passionate about teaching and enjoyed her job. Amir's dad passed away soon after his marriage. Amir and his wife lived a good life but could not have children. Adoption kept coming under discussion; however, it could never materialize.

Hassan's memories and miseries could never set Amir free. Yet he could never try to connect with or inquire about him from someone. One day, suddenly, when he got a call from Rahim Khan requesting to see him, he took him back to Pakistan in his late thirties. He showed Amir Hassan's family photo with his son and asked him to bring him from Afghanistan as Hassan and his wife already sacrificed their lives in Afghanistan, not agreeing to give Amir's house to the Taliban's possession. Amir did not agree to go to Afghanistan initially but ended up going there in search of Hassan's son. The journey was difficult, and finding Sohrab, Hassan's son, was even harder. He went to the orphanage where he was supposed to find Sohrab. They told Amir that Sohrab was taken by force by the Taliban as they would always pick a girl and sometimes a boy. The purpose was obvious: sexual assault! If the orphanage did not agree, all children could be at risk.

Amir was shocked to hear that just like his father, Sohrab also got abused. By this time, he was adamant that he would find Sohrab no matter what, and he did. Yet again, this wasn't easy. He encountered another shock when he reached where Sohrab was supposed to be found. Sohrab was in Assef's possession, the same person who abused Hassan in his childhood. Sohrab was an innocent child and was getting inhuman treatment by Assef and his servants. Assef challenged Amir to fight him to get Sohrab. He desired to insult Amir and had great confidence in his capabilities and Amir's inability to fight. The fight happened in a closed room in Sohrab's presence. Assef was right, and Amir was getting badly beaten by Assef. It was Sohrab who, in the end, saved Amir's life by hitting Assef in his eye, and they both escaped.

Rescuing Sohrab from Afghanistan to Pakistan was again another test. After Amir's recovery from his injuries in Pakistan, he approached the US embassy to bring Sohrab with him. After a considerable struggle, he brings him to the US. Amir was a different person now. He had witnessed inhuman acts and was much more courageous than ever before to disclose his and his dad's thefts, more religious than ever before, praying for Sohrab's life and recovery.

Sohrab's war experiences, killing of his parents, poverty, abuse, experiences at an orphanage, helplessness, powerlessness, having no say in choosing what kind of life he wanted and where, and struggle to survive made him someone who did not want to develop eye contact with anyone, interact or talk or even smile. Amir would spend his life taking care of Sohrab only in the hope that he could someday return to life!

The wars do not only kill; they destroy generations and humankind. The damage done is irrecoverable! No religion on earth permits this. The wars start and don't end; the rest of the world only condemns, delivers speeches, sends aid, protests, shares videos, prays, and appeals, yet the wars linger. It's time to end all wars, ceasefire and learn to live in peace.

About Reviewer
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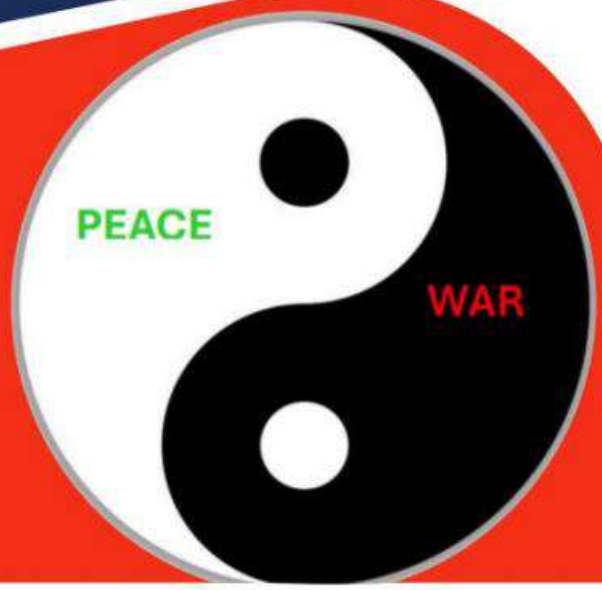

MEDICAL & CLINICAL SCIENCES

War, Torture and Trauma in Preadolescents from Gaza Strip: Two Different Modalities of PTSD

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Abstract

The aim of the present study was to assess the impact of past traumatic war experiences on preadolescents in the Gaza Strip, which could be useful for psychological intervention with current and future child victims. Participants were 521 preadolescents from the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) schools, aged 11 and 13 years old. Sections I to IV from the Iraqi Version-Arabic of Harvard Trauma Questionnaire was used to assess trauma experiences and Post-Traumatic Stress Disorder (PTSD). The results show that the preadolescents in the Gaza Strip witnessed the destruction of their homes and the murder of family members and friends. A quarter of the individuals assessed either suffered torture or witnessed others undergoing it, including sexual assaults. Almost half of them experienced a lack of food and clean water. The traumatic and torture experiences seriously affected preadolescents' mental health as 26.29% met the criteria for the diagnosis of PTSD. The data analysis revealed two PTSD modalities, with the severity of impact depending on whether social implications were involved. Further research is required to check whether these two modalities fit to PTSD and complex PTSD. Understanding the effects of past wars on preadolescents in Gaza and distinguishing between different PTSD types could enhance comprehension of the impacts of current attacks on child victims. It can also aid in determining the type of intervention needed to minimize the impact on the mental health of Palestinian youth, enhancing their resilience through psychological and social support.

Keywords: *War Victims, Psychological Trauma, Children, Post-Traumatic Stress Disorder, Social Support*

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Introduction

In the last decade, armed conflicts and human rights violations have increased worldwide. Of particular severity are situations of ethnic cleansing that result in the forced displacement and extermination of thousands of people. Minors are the most vulnerable victims in these conflicts. Since October 2023, following an attack by Hamas, the State of Israel launched an assault on the Gaza Strip and the West Bank, resulting in over 26,000 deaths by January 2024, with approximately half being children. Thousands of children have been injured, witnessed the murder of their relatives, had to leave their homes, and lacked basic supplies to survive. These events are currently under investigation by the International Court of Justice in The Hague as potential genocide. Understanding the psychological impact that previous attacks had on surviving children could aid in future psychological interventions for the new victims.

Preadolescents in war zones may face severe developmental impacts due to traumatic experiences, particularly related to torture, with limited specific studies in this age group (Dimitry, 2012). Existing research focuses on younger and older populations, revealing that children and adolescents are significantly affected by war situations (Barber, 2008). Mental health studies indicate that minors from war zones often exhibit pathologies such as posttraumatic stress disorder (PTSD), anxiety, and depression (Bronstein & Montgomery, 2011; Dimitry, 2012; Slone & Mann, 2016).

Determining factors influencing the effects include exposure level, age, gender, family factors, socio-economic adversity, coping strategies, belief systems, social support, and religiosity (Dimitry, 2012; Lustig et

al., 2004; Richardson et al., 2021; Slone & Mann, 2016). Low social support is recognized as a PTSD risk factor (Bryant, 2019), and parental responses to trauma play a crucial role (Hiller et al., 2018). The relationship between social support and PTSD is intricate, with social support potentially buffering the effects of adverse childhood experiences (ACE), while ACE may negatively impact social support (Jones et al., 2018; Wang et al., 2021).

A meta-analysis focused on social support as a PTSD predictor found complex relations, varying based on types of traumatic events (Zalta et al., 2021). PTSD, associated with traumatic experiences, has faced criticism for diagnostic criteria (Manzanero et al., 2021; McNally et al., 2014). Some argue that PTSD is a cognitive pathology related to memory processes, where perceptions of traumatic memories predict post-traumatic stress symptoms (Brewin, 2001; Brewin et al., 1996; Manzanero et al., 2020; Manzanero & Morales-Valiente, 2024; McGuire et al., 2021).

Adolescents experiencing forced displacement due to combat with traumatic events may meet PTSD criteria (Panter-Brick et al., 2009). The association between PTSD and the number of traumatic experiences suggests a link between intensity, coping strategies, resilience, and the manifestation of traumatic pathology. Repeated exposure to traumatic events may erode resistance, leading to symptoms and psychological disorders.

Traumatic experiences' effects extend beyond PTSD, encompassing psychosocial elements impacting the well-being and quality of life of child victims in war zones (Thabet & Thabet, 2016; Veronese et al., 2017).

The Case of the Gaza Strip

The whole Palestine region, and the Gaza Strip in particular, have undergone a persistent conflict for decades that has implied repetitive exposure to violence and war and that have clearly eroded the psychological well-being, health, and quality of life of children population (D'Andrea et al., 2023; Manzanero et al., 2021; Massad et al., 2009; Shank et al., 2023; Shehadeh et al., 2015; Thabet et al., 2014, 2009; Thabet & Thabet, 2016; Thabet & Vostanis, 1999, 2000), adding urgency to the need to understand and address the implications of war-related trauma in this population.

In general, the severity of psychological disorders in minors exposed to war-related violence depends on the quantity of the traumatic events suffered (Thabet & Vostanis, 1999). In any case, there are important individual differences (Kolltveit et al., 2012; Punamaki, 2002) and resilient strategies (Betancourt et al., 2013; Tol et al., 2013). Several studies have found that girls in Gaza would be more vulnerable to war-related stressors than boys (Kolltveit et al., 2012; Panter-Brick et al., 2009; Thabet et al., 2014).

Also, there are many stressors that affect minors in war situations (Lustig et al., 2004). Most of the studies (Kadir et al., 2019) point out, among the most frequent, the lack of medical attention and diseases related to unsanitary conditions and lack of food, exposure to toxins (which increase the medium and long-term prevalence of cancer), environmental and meteorological factors, exposure to violence and extreme trauma (primary or secondary), social and geographical changes, and sexual assaults. APA (2000) defined extreme trauma as directly experiencing, witnessing, or learning about events that involve actual or threatened death or, serious injury, or other threats to physical integrity.

Sometimes, traumatic experiences in war situations correspond to what has been defined as torture (Kadir et al., 2019; Quiroga, 2009). According to Article 1 of the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (UNCAT), adopted by the United Nations's General Assembly in its 39/46 resolution of December 10th, 1984, "torture" shall be understood as any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person in order to obtain information or a confession from him or a third party, to punish him for an act he has committed, or is suspected of having committed, or to intimidate or coerce that person or others, or for any reason based on any type of discrimination when said pain or suffering is inflicted by a public official or another person in the exercise of public functions, at his instigation, or with his consent or acquiescence. Article 2 specifies that in no case may exceptional circumstances, such as a state of war or threat of war, internal political instability or any other public emergency, be invoked as a justification for torture.

In addition, sexual assaults have been reported in war situations against minors on numerous occasions (Kadir et al., 2019). In the case of Palestine, the Public Committee Against Torture in Israel (PCATI) documented, during 2005-2012, 60 cases of sexual abuse (4% of all files in this period), 36 reports of verbal sexual harassment, either directed toward Palestinian men and boys or toward family members and 35 reports of forced nudity; 15% of the attacks were against minors (Weishut, 2015).

Context and Objectives of the Current Study

On July 8th, 2014, the Israeli Army launched an attack against the population of the Gaza Strip that lasted 51 days, causing the death of 2,251 people, 551 of them children, 299 women and 64 unidentified. During the conflict, 11,231 Palestinians were injured, including

3,436 children. This attack caused the destruction of infrastructures, particularly water supplies and sewerage, while the destruction of dwellings left more than 500,000 people homeless. During this time, 118 UNRWA (United Nations Relief and Works Agency for Palestine Refugees in the Near East) installations were damaged, including 83 schools and 10 health centers. In total, over 12,600 housing units were totally destroyed, and almost 6,500 sustained severe damage. Almost 150,000 additional housing units sustained various degrees of damage and remained inhabitable. The conflict led to a massive displacement crisis in Gaza, with almost 500,000 persons internally displaced at its peak. Approximately 50,000 of them took refuge in UNRWA schools. Other people found refuge with family or friends in overcrowded conditions and lack of essential resources (UNRWA, 2014).

Consequently, this study assessed exposure to traumatic events and posttraumatic symptoms in preadolescents from the Gaza Strip between December 30th, 2014, and May 17th, 2015. The study's objectives were: (1) to determine the prevalence of exposure to traumatic events among male and female children aged 11 to 13 living in the Gaza Strip, and (2) to examine the symptoms of traumatic stress in these children.

Method

Participants

A total of 521 preadolescents (11-13 years old) from the Gaza Strip (Palestine) with a mean age of 11.62 years (SD = 0.73), 225 girls (43.2%) and 296 boys (56.8%), participated in the study. They resided in five areas of the Gaza Strip: Rafah, Khan Yunis, Wustah, Gaza City, and North Gaza. All of them attended UNRWA elementary schools.

Material

The assessment is based on the application of the Harvard Trauma Questionnaire (HTQ1) developed by the Harvard Program in Refugee Trauma (Mollica et al., 1992). The sections I to IV from Iraqi Version-Arabic of the Harvard Trauma Questionnaire (HTQ; Shoeb et al., 2007) allows to obtain information about the effects of war in the participants:

- First section enumerates 39 traumatic events in a yes/no question.
- Second section include 35 yes/no questions about torture experiences.
- Third section measures physical effects of war (injury and starvation), composed by three items with several types of responses depending on the information requested.
- Fourth section measures psychological symptoms of trauma and is composed of 44 items that evaluate the severity or intensity of the symptoms on a 4-point Likert scale (1 = not at all, 2 = a little, 3 = quite a bit, and 4 = extremely). The first 16 items aim to measure PTSD symptoms according to DSM-IV criteria, with a threshold of 2.5 or higher. The other 28 items quantify what the authors name "refugee specific", which evaluates the impact that the traumatic events could have had on their perception of their own daily life. The overall scale of section 4 also considers a threshold value of 2.5 or higher.

Procedure

For the purpose of this study, the UNRWA schools in the Gaza Strip were asked in writing by the Department of Psychology of the Al-Azhar University-Gaza for their collaboration in the application of the HTQ trauma questionnaire. When approval was obtained, psychologists who worked with the families went to the schools to meet the children and their parents. The purpose of the study was explained, and the children's parents were asked for their consent to apply the test. The instruments were applied in individualized interviews by psychologists from UNRWA schools between December 2014 and May 2015, several months after the Israeli army carried out attacks on the Gaza Strip from July until August 2014.

Data Analysis Techniques

The first perspective of data analysis explored variables one by one or relationships of couples of variables. To do that, data exploration and analysis used several tools based on the research questions to answer. Cronbach's alpha was calculated to measure scale reliability. Analysis of variance (ANOVA) and chi-squared ($\chi 2$) were used to test statistically significant differences, and eta-squared ($\eta 2$) to assess effect size.

The second perspective of data analysis explored a large or complete set of assessed variables. Multidimensional scaling (MDS) was used to permit 3D dimensionality reduction (Nguyen & Holmes, 2019) and data visualization (Walny et al., 2019) of complex data. Specifically, classic metric MDS was used. Those graphs reflect data distribution, so it is possible to see, for example, if people with and without PTSD are somehow grouped. Interesting visual groupings are analyze using machine learning (ML), also called data science (DS), tools to check group arrangements beyond apparent visual arrangement. That way, evidence (or a lack of it) is obtained to support those groupings. Support vector classifier (Vapnik, 1998) (SVC), multivariate logistic regression (MLR), and k-means (Yadav & Sharma, 2013) nearest centroid classifier (Levner, 2005) (KM-

NCC) are used to get global support. Additionally, one-way ANOVA (group comparison) and η2 are used to detect the most relevant variables, differentiating identified groupings.

Additional data analysis ML techniques are used, providing additional insights through its different data analysis perspectives. "(…) machine learning enables more rigorous exploration and holds the potential to advance theory formation in developmental psychology and other fields. Machine learning is an umbrella term for methods that learn patterns from data through automated model build" (Van Lissa, 2023, p. 2). Although ML methods are still a novelty in psychological research, its use is growing fast in all areas of psychological research (Orrù et al., 2020), as educational psychology (Levy et al., 2020; Luan and Tsai, 2021), clinical psychology (Dwyer et al., 2018), and social psychology (Kumar et al., 2019). Because these techniques used here are still not very widely known, they are shortly described in a foot note2.

Samples with missing data were removed for DS analysis, implying a reduction of 8.6% of data samples. Data imputation using average values decreases data variability (Hastie et al., 2009), making grouping identification difficult. To prevent higher values bias being favored in algorithm training, Likert-type items were rescaled from [1, 2, 3, 4] values to [-1.5, -0.5, 0.5, 1.5]3.

Ethical Information

Children's participation in the study was voluntary and approved by their family members or caregivers. All the children and their families who participated in the study had the necessary psychological support. This study was part of the research project about the assessment of psychological trauma in vulnerable refugees and asylum seekers (children and women), and was approved by the Ethic Committee from [masked institution]. It was endorsed by UNHCR-Spain and declared of interest to the European Union, and it was possible thanks to the collaboration of the UNRWA schools. After the attacks of the summer of 2014 the UNRWA's Community Mental Health Programme assisted refugees in the Gaza Strip, asserted that children who could present physical and psychological needs were adequately cared for. They collectively support children and families, not only through individual and group counselling, but targeted interventions aimed at enhancing psychosocial resiliency and well-being. Along the armed conflict, UNRWA provided humanitarian assistance (including non-food-items, food, water, psycho-social support) to internally displaced persons in 90 of 156 UNRWA school buildings, with the remaining school buildings either unsafe or damaged. On 23rd August, 2014, a record-high of 292959 internally displaced persons were counted in 85 UNRWA school buildings (UNRWA, 2014).

Results

The results are reported by grouping the responses of the participants to the four sections of the questionnaire applied in "traumatic war events", "torture experiences", "physical effects", and "mental health". Also, two more sections were added, "sexual abuse" and "posttraumatic stress disorder".

Traumatic War Events

The results of the participants are reported separately on the questions raised about the experience of events related to the war, and in a different section of those situations that go beyond combat situations and can be considered torture according to the UNCAT (1984). The Cronbach's alpha of the section in this sample was .844.

Table 1 shows the traumatic situations to which the preadolescents were exposed in order from highest to lowest frequency. As can be seen, the majority witnessed the destruction of residential areas and religious sites and were confined to try to protect themselves from bombings and violence. A large number of preadolescents were exposed to fighting and witnessed the presence of corpses. About half of the children studied had to leave their homes and witness chemical attacks. Around 40 % of their friends or family were injured as a result of the fighting and shelling, were forced to internally displaced in the Gaza Strip to underserved areas, and witnessed some people being injured. Around a third of the minors witnessed deaths, executions of civilians, and lacked shelter to protect themselves from the war. About 20 percent lost friends in violent deaths and their property was destroyed. Around 10 percent or less witnessed their homes being searched, suffered the disappearance of friends and the violent death of a relative, were victims of complaints that put them at risk of death, and were searched on occasion.

The evaluated preadolescents suffered an average of 10.77 traumatic events throughout the 51 days of the war. No statistically significant differences were found in the number of traumatic experiences according to gender, $F(1, 519) = 1.559$, $p = .212$, $\eta2 = .003$; age, $F(2, 518) = 1.690$, $p = .186$, $\eta2 = .006$; or the place of residence, $F(4, 516) = 1.261$, $p = .284$, $\eta2 = .010$.

Torture Experiences

This section collects the data found from the responses of the evaluated preadolescents to the questions related to experiences that could be considered torture, cruel, inhuman or degrading treatment or punishment (see Table 2).

Table 1

Children Who Experienced Different Types of Traumatic War Events, Ordered by Frequencies from Highest to Lowest

Traumatic War Events	*n*	%
Witnessed shelling, burning, or razing of residential areas	440	84.45
Witnessed mosques desecration or destruction	378	72.69
Confined to home because of outside shelling and violence	364	69.87
Exposed to combat situation (explosions, artillery fire, shelling)	331	63.53
Witnessed corpses	329	63.15
Forced to flee from his/her home	279	53.76
Witnessed chemical attacks on residential areas	262	50.48
Serious physical injury of family member or friend from combat situation or shelling	225	43.19
Forced to leave his/her hometown and settle in a different part of the country with minimal services	211	40.58
Witnessed someone being physically harmed	210	40.31
Witnessed murder	192	36.85
Witnessed mass execution of civilians	162	31.09
Lacked shelter	153	29.42
Murder or violent of friend's death	107	20.54
Property looted or destroyed	102	19.73
Disappearance of a friend	71	13.65
Was he/she present while someone searched his/her home for people or things	60	11.54
Murder or violent death of family member (brother, sister, parents, etc.)	56	10.75
Disappearance of a family member (brother, sister, parents, etc.)	43	8.27
Someone informed on you placing you and your family at risk of injury or death	43	8.27
Searched	27	5.18

Table 2
Children Who Experienced Different Types of Torture and Cruel, Inhuman, or Degrading Treatment, Ordered by Frequencies from Highest to Lowest

Torture	n	%
Witnessed torture	147	28.21
Witnessed the arrest, torture, or execution of important family members	98	18.81
Forced to destroy someone's property	50	9.60
Forced to inform on someone placing them at risk of injury or death	42	8.06
Tortured (i.e., while in captivity you received deliberate and systematic infliction of physical and/or mental suffering)	40	7.68
Forced to harm someone physically	35	6.74
Imprisoned	35	6.73
Used as a human shield	30	5.76
Witnessed sexual abuse or rape	29	5.57
Family member (brother, sister, parents, etc.) kidnapped or taken as a hostage	24	4.61
Friend kidnapped or taken as a hostage	22	4.23
Sexually abused or raped (i.e., forced sexual activity)	16	3.07
Kidnapped or taken as a hostage	13	2.50

Forty preadolescents (7.68%) reported having been tortured while being held. Around a quarter of the preadolescents evaluated reported that they witnessed torture and a fifth that such torture, arrests, or executions were against relatives. Between 8 and 9 percent were forced to destroy their property or to expose someone, putting their lives at risk. Some 30 teenagers were used as human shields, forced to cause physical harm to other people, taken prisoner, or witnessed sexual assaults and rapes. Around 25 children had suffered the kidnapping of relatives or friends, and 13 were themselves kidnapped or taken hostage.

As can be seen in Table 2, 16 minors (3.07%), 10 girls and 6 boys, were sexually assaulted. Most of the sexual assaults occurred against younger children; 10 children were 11 years old, 4 were 12 years old, and 2 were 13 years old. Even more minors witnessed sexual abuse and rape, this event being reported by 29 minors (5.57%), 14 girls and 15 boys.

Table 3

Scores of Mental Health Symptoms, Ordered by Frequencies from Highest to Lowest

	Not at all		*A little*		*Quite a bit*		*Extremely*		*N*
	n	%	*n*	%	*n*	%	*n*	%	
Recurrent thoughts or memories of the most hurtful or terrifying events	73	14.0	198	38.0	143	27.4	107	20.5	521
Irritability, nervousness, lack of patience, and anger outbursts	112	21.5	155	29.8	130	25.0	124	23.8	521
Feeling irritable or having outbursts of anger	119	22.8	161	30.9	128	24.6	111	21.3	519
Feeling that child has no one to rely upon but god	191	36.7	105	20.2	102	19.6	121	23.2	519
Feeling as though the event is happening again	132	25.3	189	36.3	130	25.0	70	13.4	521
Feeling a need for revenge	201	38.6	111	21.3	84	16.1	124	23.8	520
Tired soul	163	31.3	172	33.0	86	16.5	98	18.8	519
Avoiding activities that remind child of the hurtful event	147	28.2	186	35.7	112	21.5	73	14.0	518
Feeling that child has less skills than child did before	153	29.4	180	34.5	110	21.1	77	14.8	520
Recurrent nightmares	139	26.7	204	39.2	114	21.9	64	12.3	521
Difficulty concentrating	152	29.2	181	34.7	123	23.6	65	12.5	521
Ruminations, poor concentration, lack of initiative, boredom, sleep problems, tiredness, and somatic complaints	172	33.0	164	31.5	102	19.6	83	15.9	521
Sudden emotional or physical reaction when reminded of the most hurtful events	156	30.0	176	33.8	134	25.8	54	10.4	520
Difficulty paying attention	161	30.9	180	34.5	118	22.6	62	11.9	521
Feeling jumpy, easily startled	170	32.8	178	34.4	97	18.7	73	14.1	518
Avoiding thoughts or feelings associated with the hurtful vents	169	32.4	175	33.6	115	22.1	62	11.9	521
Feeling unable to make daily plans	157	30.2	205	39.3	114	21.9	44	8.4	520
Having difficulty dealing with new situations	157	30.2	197	37.9	130	25.0	36	6.9	520
Feeling exhausted	175	33.6	197	37.8	82	15.7	67	12.9	521
Sensation of the heart being squeezed	191	36.9	165	31.9	100	19.3	62	12.0	518
Less interest in daily activities	170	32.7	194	37.2	115	22.1	41	7.9	520
Trouble sleeping	172	33.0	204	39.2	97	18.6	48	9.2	521
Feeling on guard	181	34.9	192	37.0	91	17.5	55	10.6	519
Spending time thinking why God is making child goes through such events	218	41.8	145	27.8	89	17.1	69	13.2	521
Poor memory	221	42.5	153	29.4	88	16.9	58	11.2	520
Feeling of tightness in the chest and a choking sensation	234	44.9	153	29.4	71	13.6	63	12.1	521
Feeling as if child don't have a future	239	46.0	143	27.5	83	16.0	55	10.6	520
Troubled by bodily pain or physical problems	255	49.1	146	28.1	71	13.7	47	9.1	519
Feeling no trust in others	234	45.2	183	35.3	66	12.7	35	6.8	518
Inability to remember parts of the most hurtful events	226	43.6	201	38.8	62	12.0	29	5.6	518
Feeling that others don't understand what happened to him/her	262	50.4	150	28.8	76	14.6	32	6.2	520
Feeling others are hostile to child	261	50.1	158	30.3	69	13.2	33	6.3	521
Unable to feel emotions	261	50.3	163	31.4	68	13.1	27	5.2	519
Feeling powerless to help others	256	49.2	179	34.4	63	12.1	22	4.2	520
Hopelessness	295	56.7	146	28.1	48	9.2	31	6.0	520
Feeling detached or withdrawn from people	300	57.6	138	26.5	53	10.2	30	5.8	521
Feeling humiliated by their experience	319	61.3	108	20.8	64	12.3	29	5.6	520
Feeling that child is the only one who suffered these events	311	60.0	121	23.4	58	11.2	28	5.4	518
Finding out or being told by other people that child has done something that child can't remember	297	57.0	154	29.6	50	9.6	20	3.8	521
Feeling guilty for having survived	351	67.5	103	19.8	50	9.6	16	3.1	520
Feeling as though child is split into two people and one of him is watching what the other is doing	366	70.2	88	16.9	49	9.4	18	3.5	521
Blaming himself/herself for things that have happened	367	70.4	97	18.6	41	7.9	16	3.1	521
Feeling ashamed of the hurtful or traumatic events that have happened to child	372	71.4	89	17.1	45	8.6	15	2.9	521
Feeling that child is a jinx to himself/herself and his/her family	391	75.0	72	13.8	41	7.9	17	3.3	521

Physical Effects

Seventy-seven preadolescents (14.8%) were physically harmed, 35 (6.7%) informed about physical injuries due to nearby explosions, and 47 (9.03%) about serious physical injury from combat situation. No statistically significant differences were found based on gender or age. Nor were statistically significant differences found for "serious physical injury from combat situation" based on gender, age or residence.

Due to the confinement and food shortages, and due to supply problems during the 51 days of attacks on the Gaza Strip, 233 children (44.72%) suffered from "food and drinking water shortages", and 36 (6.9%) reported having suffered "starvation" that resulted in a weight loss of between 0 to 15 kg. (M = 4.50, SD = 3.31).

Statistically significant differences were found for "lack of water and food" as a function of age, $\chi 2(2, N = 521) = 6.737$, $p < .05$, and gender, $\chi 2(4, N = 521) = 4.275$, $p < .05$, with boys and younger ones being the most affected. No statistically significant differences were found in starvation based on gender or age.

Asked about medical care, 196 preadolescents (37.69%) informed that they suffered from diseases without being able to access to medical care or medicine because of war.

Mental Health Effects

Table 3 shows the data collected regarding some aspects related to the mental health of the preadolescents evaluated, ordered from highest to lowest frequency. The Cronbach's alpha of the section in this sample was .96. Considering the symptoms that the evaluated preadolescents present, we found that 137 (26.29%) would have PTSD. No statistically significant differences were found according to age, $\chi 2(2, N = 521) = 2.933$, $p = .231$; gender, $\chi 2(1, N = 521) = 0.028$, $p = .867$; or the place of residence, $\chi 2(4, N = 521) = 2.715$, $p = .607$.

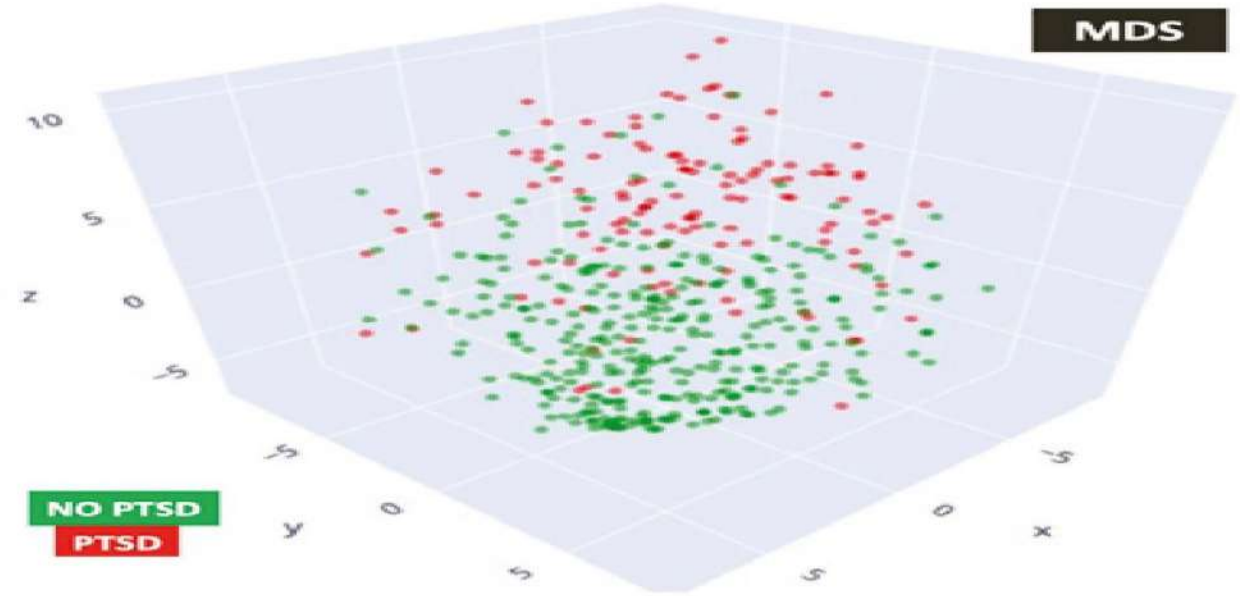
DS techniques were used to analyze data distribution and variable relationships. MDS were used to reduce dimensionality from 44 dimensions data points (psychological variables) to its equivalent 3 dimensions (3D) data points. The 3D points obtained were plotted as a 3D scatterplot graph (Figure 1). PTSD diagnose presence or absence is shown through color.

In this case, two aspects are especially useful for a better understanding of symptoms: data distinguishability and data distribution. Data distinguishability tells us if we can distinguish, separate, psychological data considering PTSD diagnoses. This graph visualizes the war effects in psychological variables and PTSD. Data distribution in each group shows individual differences both on participants meeting and not meeting PTSD DSM criteria.

Data can be visually distinguished based on PTSD diagnoses. Data distribution is also different based on PTSD condition. So, the effect of war, torture, and the rest of traumatic experiences, show among participants how psychological state move away (towards the upper area) from psychological well-being. It can be seen, as per Figure 1 shows, how red data points (PTSD) have displaced from what can be considered a preserved psychological health as shown by green data points (no PTSD).

Figure 1

Data Distribution per PTSD Diagnosis[4]



Note. The fit measure for the data transformation was R2 = .90, with $p < .05$, indicating a fit good enough to get insight from this figure.

To get beyond what graphically appears to be the case and get classification quality measured, SCV and LR were used, scoring its correct classification degree from psychological data to PTSD diagnoses. Both models used all 44 psychological variables as predictor variables, and PTSD diagnoses (absence or presence) as target variable. In both cases 60% of data were used to train the model and 40% was used to test it. A 50 folds cross validation process was done to calculate average accuracy.

SVC models shown an average accuracy of .84. LR models shown a similar average accuracy of .83. Both models were able to classify well, so adolescents with and without PTSD can be correctly classified to that level of accuracy. The effect of mental health state as per PTSD disease is clearly recognizable at the detailed level of psychological variables.

Data distribution shows greater variability among PTSD (red points) compared to no PTSD (green points). In this analysis, PTSD points have an average distance to its centroid a 6.4% higher than no PTSD points. Figure 1 shows how individual differences increase in PTSD condition. These individual differences show different ways of traumatic experience. These reaction differences could be linked to traumatic experiences and show difference among protection/risk factors, as social support.

Figure 2

Data distribution per Variable Group, and PTSD Diagnosis[5]

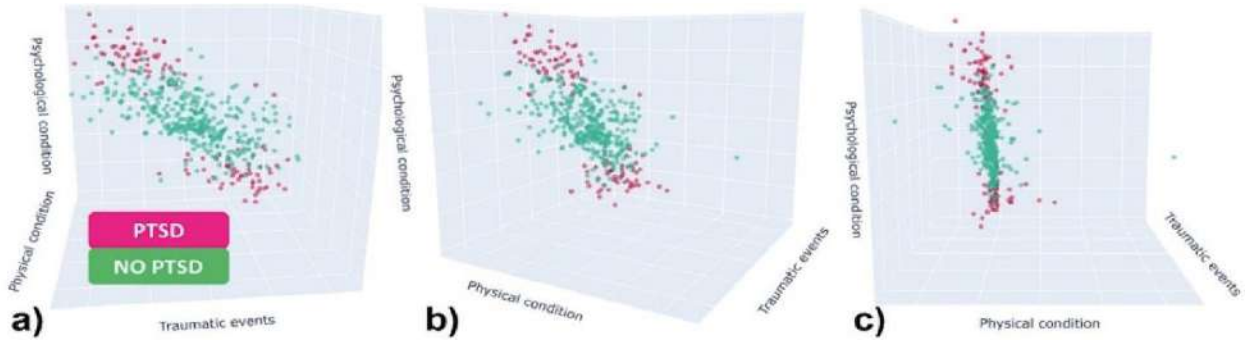
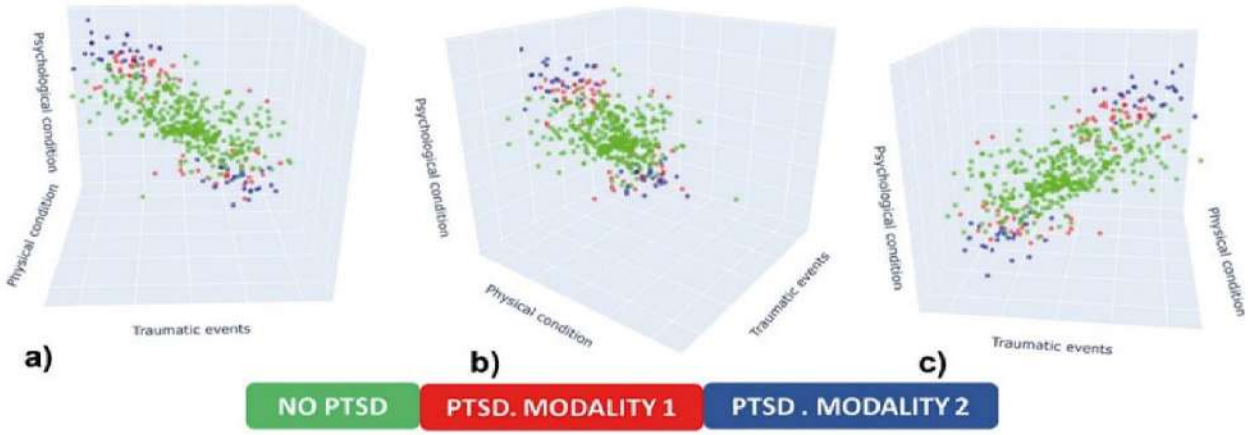


Figure 3

Data Distribution per Variable Group, and PTSD Diagnosis. PTSD Modalities Highlighted[6]



To dig deeper on PTSD data variability, we reduced all variables linked to trauma to one value. The same was done with physical condition and psychological variables. Each participant dataset was, then, reduced to a three-dimensional (3D) point, each value corresponding to each variable group (trauma, physical condition, and psychological variables). This 3D points are graphically represented in Figure 2.

This transformation showed a fit of R2 = .68, with p < .01. This fit is not very high, so the graphic can suggest insights, but they are in clearly need, at the end, of hypothesis testing and effect size analysis to get back to a high level of confidence.

Figure 2 suggests two modalities of PTSD. In order to check how these two distinguishable modalities are distributed for PTSD diagnosed participants, a k-means clustering model with all 44 psychological variables to get two categories was trained and used to classify all PTSD participants in one of the two categories. That information was added, producing Figure 3.

Figure 3 suggests two modalities linked to PTSD severity. Non PTSD cases are located at a central area, having PTSD cases at two sides. It looks like the closer cases (red points) have less severe PTSD, while the more distant cases (blue points) have a more severe PTSD. This hypothesis was tested, and its results corroborated it: F (0.999, 1, 115) = 14.193, p < .05/44 (Bonferroni adjusted), η2 = .110, corresponding to a medium size effect. PTSD severity was calculated as the average over the 16 items linked to PTSD DSM diagnosis.

It was not observed any relation of PTSD modalities to sex, F(0.999, 1, 115) = .260, p = .611, or age, F(0.999, 1, 115) = .252, p = .617.

Once the two PTSD modalities can be distinguished, it is relevant to know what variables, beyond those used to diagnose PTSD, best distinguish both modalities. Table 4 shows the six variables having statistically significant differences and showing largest effect sizes.

Table 4

ANOVA Results and η2 Effect Size of Main Variables Distinguishing PTSD Modalities

Item	*F* value	*p*	η^2
22 - Feeling unable to make daily plans	56.41	< .01/44*	.329[1]
31 - Feeling no trust in others	48.33	< .01/44*	.296[1]
34 - Feeling powerless to help others	47.82	< .01/44*	.294[1]
35 - Feeling ashamed of the hurtful or traumatic events that have happened to child	47.82	< .01/44*	.294[1]
36 - Feeling humiliated by their experience	53.74	< .01/44*	.318[1]
37 - Feeling that child is a jinx to himself/herself and his/her family	71.11	< .01/44*	.382[1]

Note. Fcrit(0.999, 1, 115) = 14.49; 1η2 >.14, large effect size.
*p < .01/44 (Bonferroni adjusted).

With the exception of the first one, related to executive functions (HTQ/IV item 22), the rest (HTQ/IV items 31, 34-37) are linked to social aspects: trust, unable to help other, feeling ashamed or humiliated (both social emotions), or feeling as a jinx. Based on that, it looks like having a socially preserved modality and a socially weakened modality. Average responses to those items per modality are shown at Figure 4.

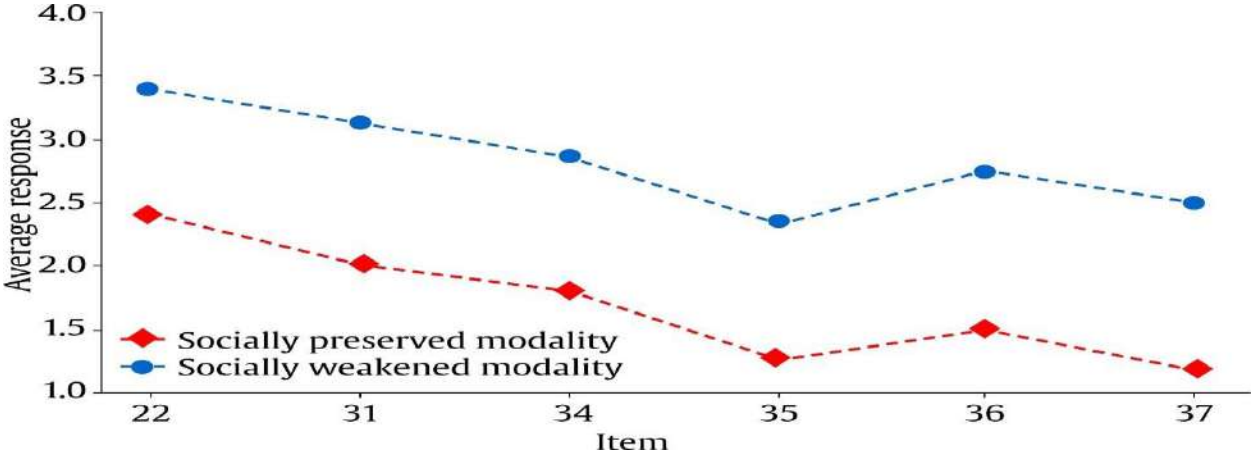


Figure 4
Main Variables Distinguishing PTSD Modalities Average Values.

Those items are related to interpersonal difficulties and, in a lesser degree, with affect dysregulation, two of the three clusters featuring complex PTSD (CPTSD) (Hyland et al., 2017). HTQ part IV item 27 has been identified as the one at HTQ differencing both syndromes (Elklit, 2014). There was a significantly statistical difference between the two, as expected, but its effect size was smaller than the items selected.

There is a constantly wide distance between average responses by both modalities, preserved across all six items. Considering prevalence, socially preserved modality was 57.3% of PTSD cases. Socially weakened modality represented a 42.7%.

Due to its relation to PTSD severity, having a classification criteria could be useful for both future research and practical purposes. A NCC model was trained for the identification of PTSD modalities. A 100 folds cross validation process was done to calculate an average accuracy. A 75% of data were used to train the model, and the rest of 25% was used to test it ($accuracy_{average}$ = .89; $accuracy_{best}$ = 1.0). Confusion matrix, shown at Table 5, also shows very good classification performance.

Table 5
NCC Confusion Matrix7

		Predicted	
		+	-
Actual	+	TP = 17	FN = 1
	-	FP = 1	TN = 11

Modalities, socially preserved (sp) and socially weakened (sw) have their centroids for items 22, 31, 34, 35, 36, and 37 calculated for each PTSD modality is as follows:

μ→sp=(2.46,2.12,1.9,1.28,1.44,2.12)μ→sw=(3.27,3.11, 2.84,2.35,2.7,3.11)

When a person assessed with the HTQ, the score at those items is used to calculate its Euclidean distance to each centroid.

y^=argminm∈Mμ→m−x→

The two modalities are the two possible values of y^∈{sp,sw} So, the final decision maid corresponds to the shortest distance.

Beyond classification, other psychological variables showed statistically significant differences and medium or large effect sizes.

Table 6 list them.

Item	F value	*p*	η^2
17 - Poor memory	30.67	< .01/44*	.210[2]
18 - Feeling exhausted	15.31	< .01/44*	.117[2]
19 - Troubled by bodily pain or physical problems	20.69	< .01/44*	.152[2]
24 - Feeling that child is the only one who suffered these events	19.26	< .01/44*	.143[2]
25 - Feeling that others don't understand what happened to him/her	26.04	< .01/44*	.185[2]
26 - Feeling guilty for having survived	34.23	< .01/44*	.229[2]
27 - Blaming himself/herself for things that have happened	28.93	< .01/44*	.201[2]
30 - Feeling others are hostile to child	24.05	< .01/44*	.173[2]
33 – Hopelessness	23.38	< .01/44*	.169[2]
38 - Finding out or being told by other people that child has done something that child can't remember	21.21	< .01/44*	.156[2]
39 - Feeling as though child is split into two people and one of him is watching what the other is doing	28.80	< .01/44*	.200[2]
43 - Feeling of tightness in the chest and a choking sensation	20.23	< .01/44*	.150[1]

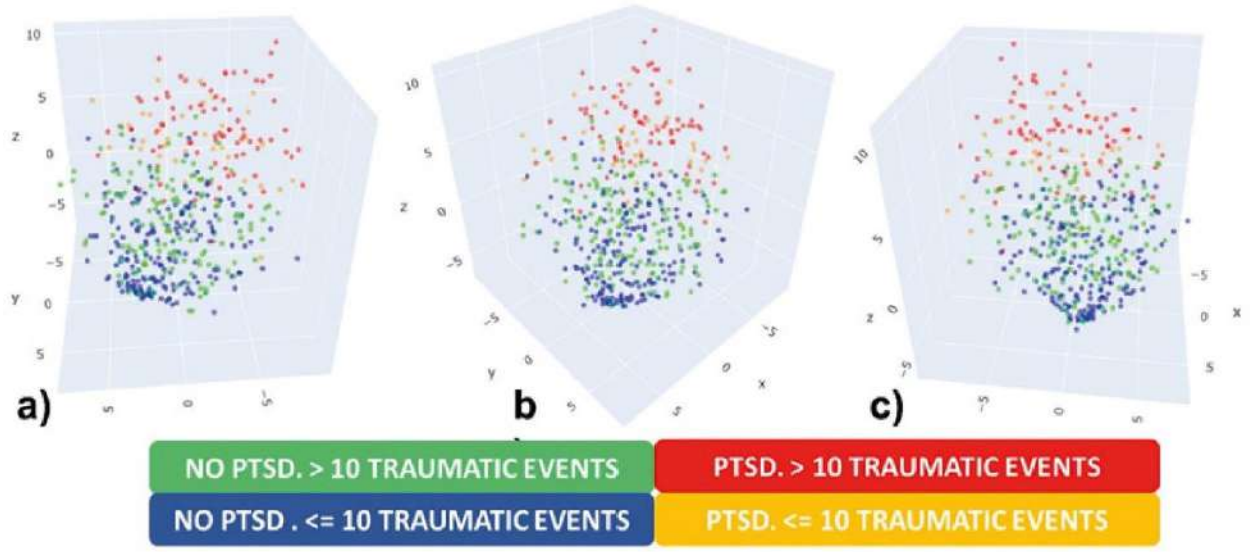
Table 6
ANOVA Results and η^2 Effect Size of Additional Variables with Medium to Large Effect Sizes per PTSD Modality

Note. Fcrit(0.999, 1, 115) = 14.49.; $^1\eta^2$ >.06, medium effect size; $^1\eta^2$ >.14, large effect size.
*p < .01/44 (Bonferroni adjusted).

All Table 6 variables show higher scores for socially weakened modality.

The diagnosis of PTSD was strongly related to the number of traumatic experiences suffered, $F(1, 519) = 82.364$, $p < .001$, $\eta^2 = .137$. The mean number of traumatic experiences for preadolescents with PTSD was 14.28 (SD = 4.91), while for those who were not diagnosed with PTSD the mean was 9.52 (SD = 5.39) traumatic experiences.

Figure 5
Data Distribution per PTSD Diagnosis and Number of Traumatic Events Suffered8.



Thabet and Vostanis (1999) stated a relation between number of traumatic events and PTSD severity. In order to get some insights about this, Figure 5 was done adding information about the number of experienced traumatic events to Figure 1.

Average experienced traumatic events were 10.77, as mentioned before. That is why 10 or less traumatic events are shown with one color, and 11 or more traumatic events are shown in a different color, separating data points below or above average value.

A distribution pattern can be seen in which data points tend to distribute in the following order, from bottom to top: 1) non-PTSD children having experienced 10 traumatic events or lesser (blue points), 2) non-PTSD children having experienced more than 10 traumatic events (green points), 3) PTSD children having experienced 10 traumatic events or lesser (orange points), and 4) PTSD children having experienced more than 10 traumatic events (red points). This trend in distribution is compatible with the idea of repeated traumatic events progressively impacting on children mental health state.

Analyzing the diagnosis of PTSD based on the type of traumatic experience suffered, we found that 12 types of traumatic events seem to play an important role in the development of this pathology. Table 7 shows the data of the factors that were significant, after applying the Bonferroni correction, ordered from highest to lowest frequency for the cases in which it was found that they had suffered the traumatic experience.

Table 7
Percentages of preadolescents diagnosed with PTSD who had not suffered the traumatic event and who had, and values of $\chi 2$ for the events that were significant.

Traumatic event	NO %	YES %	$\chi^2(1)$	*p*
Disappearance of friend	23.39	45.07	14.856	.000
Diseases without medical care	16.98	41.84	38.899	.000
Forced to leave his/her home	19.09	36.97	20.640	.000
Lacked shelter	22.07	36.60	11.749	.001
Physical injury of family	18.92	36.00	19.244	.000
Lack of food and water	19.79	34.33	14.056	.000
Witnessed someone being harmed	20.90	34.29	11.589	.001
Forced to flee home	18.75	32.97	13.437	.000
Witnessed chemical attacks	19.84	32.82	11.251	.001
Exposed to combat situation	16.32	32.02	15.368	.000
Witnessed corpses	17.71	31.31	11.568	.001
Witnessed mosques desecration	14.79	30.69	13.446	.000

Note. Bonferroni adjustment significant $p < .0013$.

Discussion

The study found that all evaluated preadolescents experienced traumatic events during the 51-day war, with no significant differences based on gender or place of residence. Most witnessed the destruction of residential areas and religious sites, were exposed to fighting, lost their homes, and witnessed chemical attacks. Many sought shelter indoors or were internally displaced to underserved areas in the Gaza Strip. Numerous teenagers witnessed injuries, deaths, and violent events involving friends and family. Approximately 15% of preadolescents aged 11 to 13 suffered physical injuries during the war, affecting individuals of all ages and genders across the Gaza Strip. The impact of the war was widespread, with half of the adolescents experiencing a lack of food and clean water and around 7% facing starvation, highlighting the extensive destruction reported by UNRWA (2014). The effects of malnutrition in adolescents could have serious long-term effects (Khoroshinina, 2005).

Data reveals that a significant number of preadolescents suffered attacks that according to the Geneva Convention could be considered torture against children and must be persecuted (O'Donnell & Liwski, 2010). When directly asked, 28.21% of the evaluated preadolescents reported witnessing torture, with 18.81% indicating that the torture, arrests, or executions affected family members. Moreover, 7.68% of the preadolescents reported personal experiences of torture during detention. Additionally, 6.74% were compelled to physically harm someone, 6.73% experienced imprisonment, and 5.76% were used as human shields. Disturbingly, 3.07% of preadolescents, comprising 10 girls and 6 boys, reported being sexually assaulted, while 5.57% witnessed sexual abuse and rape. The reported data, aligning with findings from other studies (Kadir et al., 2019), is likely underestimated due to the cultural taboo surrounding sexuality in this population. The stigma attached to such incidents, impacting the family's honor and the victim, often leads to the concealment of such experiences (Abu-Odeh, 2010; Weishut, 2015).

The study revealed that 26.29% of preadolescents experienced PTSD, aligning with findings in previous research indicating high resilience levels among this age group, facilitating recovery over time (Planellas et al., 2020). Despite concerns about potential malingering for protection, the data in this study fall within the lower band of the PTSD variation observed in various global studies, suggesting a nuanced interaction between resilience and motivation (Steel et al., 2009).

Characteristics such as gender, age, and place of residence did not influence the presence of PTSD in the evaluated population. Instead, the determining factor was the number of traumatic experiences, with a higher number correlating with an increased likelihood of suffering from PTSD. Specific traumatic experiences, such as the disappearance of a friend, lack of medical care, forced displacement, and exposure to combat situations, appeared to play a more significant role in PTSD development than others.

Distinct patterns of distribution and classification were identified for both psychological variables and PTSD diagnoses. Preadolescents with and without PTSD were clearly distinguishable through various techniques, revealing a discernible trend from fewer to more traumatic events and from no PTSD diagnosis to PTSD diagnosis when graphing data from psychological variables.

Two PTSD modalities emerged: socially preserved and socially weakened. The primary variables distinguishing them were linked to social relationships, influencing the effectiveness of social support and indicating a more severe form of PTSD. The socially weakened modality was characterized by feelings of being unable to make daily plans, eroded executive function, lack of trust in others, powerlessness to help others, shame and humiliation from traumatic events, and a sense of being a jinx to oneself and one's family—indicating eroded social relations, emotions, and trust. All six variables exhibited more severe scores in cases associated with the socially weakened modality.

The socially weakened modality demonstrated more severe psychological conditions across various variables: a) affected memory processes, including poor memory and being informed of actions the child could not remember (for a better understanding, see the Continuous accessibility model of memory by Manzanero & Morales-Valiente, 2024), b) poor physical condition, involving exhaustion, bodily pain, and a feeling of tightness in the chest, c) negative thoughts related to social cognition, such as feeling isolated in suffering, perceiving a lack of understanding from others, and sensing hostility from others, d) negative emotions linked to social survival, self-blame, and depression-related hopelessness, and e) an affected self-concept, manifesting as a sense of being split into two people with one observing the actions of the other.

Conclusions

The study reveals significant psychological impacts on preadolescents in the Gaza Strip following the attacks, emphasizing the prevalence of post-traumatic symptoms affecting emotional well-being and daily functioning. The findings underscore the urgent need for psychological support in communities affected by such traumatic events. Similar to other research, 26.29% of preadolescents were found to suffer from PTSD, aligning with the notion of their generally high resilience. The study acknowledges the potential for over reporting due to malingering but notes that the prevalence falls within the lower range observed in various studies.

Data analysis techniques provided insights into the relationship between psychological variables, PTSD, and the number of traumatic events experienced. Clear patterns emerged in the distribution and classification of these variables, allowing for the differentiation of preadolescents with and without PTSD. The analysis also identified two PTSD modalities: socially preserved and socially weakened. The socially weakened modality exhibited more severe psychological conditions across various dimensions, including memory processes, physical well-being, thoughts, emotions, and self-concept. The study proposes a classifier system (NCC) for further research and potential applications in understanding and treating PTSD. Whether those two modalities correspond to PTSD and CPTSD is not clear from data and needs additional research.

Understanding the effects of past wars on preadolescents in Gaza and distinguishing between different types of PTSD could facilitate comprehension of the current Israeli attacks on Palestine (Gaza and the West Bank). It can also aid in determining the type of intervention needed to minimize the impact on the mental health of Palestinian youth, enhancing their resilience through social support.

The authors of this article declare no conflict of interest.

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Notes

1
After data collection a new version of the HTQ adaptaed to DSM-5 has been developed (Berthold et al., 2019).

2
For each preadolescent, a large set of values is available (greater that 100), but it cannot be graphed being so many variables. Similar set of values, corresponding to two preadolescents, should be near, due to its similarity. Diverging set of values, also corresponding to two preadolescents, should be distant, due to its dissimilarity. MDS performs a dimensionality reduction preserving as much as possible the relative distances between all samples, providing a 3D point to represent each set of values of each preadolescent. This 3D points can now be graphed and explored to see its distributions and groupings.
SVC takes two groupings and build the best distinction criteria (a hyperplane) separating both groups. SVC is trained with classified samples (from the training set) and uses its classification labels to reduce classification error (supervised learning). The level of accuracy classifying samples from both groups in the testing dataset is assessed. If accuracy is high, the initially detected grouping get evidence support. Both groups are different enough.
MLR does the same as SVC in a different way. Coincidental results will add addition evidential support of the differences between detected groups.
KM-NCC does the same as SVC and MLR but with a different algorithm that uses unsupervised learning. KM-NCC uses the training dataset to group by geometrical proximity. Then, distance to the centroid of each group is used for classification. Testing dataset is used to assess classification accuracy. Again, coincidental quality of classification ends up supporting the visually detected groupings.

3
DS analyses were done using Python v3.8.8, ipython v7.22.0, conda v4.10.1, numpy v1.19.5, scipy v1.6.2, statsmodels v0.13.5, pandas v1.2.4, scikit-learn v0.24.1, matplotlib v3.3.4 and plotly v5.4.0.
ML code accessible at: https://github.com/javier/PTSD_Modalities.

4
All variables (traumatic events experienced, physical condition, and psychological variables) reduced to 3D points through MDS and colored by PTSD presence or absence.

5
Traumatic events experienced, physical condition, and psychological variables, reduced to 1 value per variable group through MDS. Values obtained combined as 3D points and colored by PTSD presence or absence. a) Initial view. b) Initial view rotated 45 degrees right. c) Initial view rotated 90 degrees right. Points colored by PTSD diagnosis.

6
Traumatic events experienced, physical condition, and psychological variables, reduced to 1 value per variable group through MDS as in Figure 2. a) Initial view. b) Initial view rotated 45 degrees right. c) Initial view rotated 130 degrees right. PTSD points are distinguished by PTSD modality. Red and blue points correspond to both PTSD modalities.

7
Many true positive (TP) and negative (TN) cases were correctly classified. Very few positive (FP) and negative (FN) cases were incorrectly classified. It was a very well-balanced classifier, with TP and TN rates giving a b_acc = (TPR + TNR) / 2 = 1.0.

8
Same as Figure 1 highlighting the number of traumatic events suffered for both PTSD and non-PTSD cases.

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Call for Contributions and Peer Reviewers

Voices Against Torture - VAT journal is a semi-annual journal launched in 2020 as an organic extension of the education, advocacy, and community-building mandate of the Vancouver Association for the Survivors of Torture (VAST). VAT aligns with the values and vision of the VAST community and hopes to lift the voices of torture survivors further to support resilience and dignity.

VAT aims to provide a platform for discussing torture prevention, improving awareness of and support for refugee and immigrant mental health, and highlighting global human rights concerns.

As an interdisciplinary and transdisciplinary journal, VAT invites submissions from a wide range of academic disciplines and actively seeks collaboration and conversation across disciplines. This approach intends to link theory and lived experience to social change, bringing together academics, activists, educators, therapists, healers, and those directly and indirectly affected by torture.

The Journal will consist of the following sections:

- Research Articles (6,000 – 8,000 words)-our first publication will not have this section; the later publication will
- Review Essays (<6,000 words)
- Notes from the Field (<4,000 words)
- Policy Review (<3,000 words)
- Creative Interventions and embodiment practices (1,000-3,000 words)
- Book Reviews (1,000-2,000 words)
- Letters to the editor(s)

Submission Requirements

- Typed in the English language and double-spaced
- Font style: Times New Roman and Font Size:12
- Text submissions should be 500-700 words
- Manuscript only in MS-Word (*.doc or *.docx) format
- Image files (if any) in .jpg format, 300 dpi.
- References/bibliography need to be numbered if provided with the article
- Authors are encourage to follow APA 7th referencing and citation style

- Tables and figures should be inserted within the body of the text

Expression of Interest for Peer-Review

Voices Against Torture journal invites experienced peer reviewers in the area of human rights and torture to join the journal peer review panel. Since promoting the cause of human rights is a public good, we encourage volunteers to join the panel. Their contribution in this regard shall be formally acknowledged.

To register your interest, kindly send your detailed CV along with your expression of interest to vrdc@vast-vancouver.ca

The editor, however, retains the right to suggest any change in style if required.

Date of Publishing: Biannual: April and October

Submission: Open

Submission Deadlines: 31st December and 30th June

Please send your submissions and feedback to the Editor-in-Chief at farooq@vast-vancouver.ca

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EOI: Peer-Review

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Help Eliminate Torture: S.O.S. Appeal

Dear Patrons and Friends,

We, the Members of the Editorial Board of the Journal on VAT (Voices Against Torture- a newly incepted policy research communication organ of Vancouver Association of Torture Survivors (VAST), are gravely concerned over the worsening and deepening state of Torture in many parts of the world- Prohibition of Torture Index 2019-20 (Statista- https://www.statista.com/statistics/1131048/prohibition-of-torture-index-in-cis-by-country/)

As rightly maintained by World Organization against Torture, "Nothing can justify torture under any circumstances (OMCT- https://www.omct.org/), for it is tantamount to imprisoning both mind and souls. And not only that Torture leaves a lasting scar on the bodies and the minds of its victim(s), but as its psycho-social sequel, it also becomes a weeping wound for generations. In the recent past, an exodus of refugees (UNHCR -https://www.unhcr.org/figures-at-a-glance.html), from many countries; and violence perpetrated against women (BBC- https://www.bbc.com/news/av/world-53014211) and neglect and abuse of the elderly during the Contagion COVID pandemic (AGE Platform Europe- https://www.age-platform.eu/press-releases/elder-abuse-has-been-rise-during-covid-19-pandemic-it-high-time-take-it-seriously) signifies the emergent need to help arrest torture becoming endemic, as stipulated in humanitarian and human rights law, which has unfortunately taken a contagious proportion. In this backdrop, the emergent need for evidence-based/ informed policymaking & advocacy around human rights; and rehabilitation & mainstreaming of torture victims needs hardly any emphasis. VAST, being mindful of this emergent need to cultivate respect for human rights as an underpinning factor for human security and containment of Torture worldwide, has chosen to reach out to the global stakeholders through VAT Journal.

Alongside VAT Journal, we plan to hold international & regional workshop(s) via both in-person and online platforms. With this initiative, we aim to help spread awareness in trauma recovery and further educate in civil society, academia, and the public sector to help develop Human Rights advocates and empower practitioners to help lead from the front lines of eradicating Torture from our world.

We at VAT Journal Editorial Board, through these lines, seek the support of the international community to join their heads and hands in this noble and emergent cause for the public good.

Sincerely yours,

VAT Editorial Board Members:

Dr. Farooq Mehdi, Dr. Fizza Sabir, Dr. Wajid Pirzada, Leila Johnson, Dr. Patrick Swanzy, Dr. Rubina Hanif, Dr. Hammad Ahmed Hashmi, Shazia Munir, Dr. Malik Hammad Ahmad

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