



PALESTINIAN CHRONICLES



Trapped by War

Since the beginning of the second Intifada, in September 2000, MSF's physician-psychologist teams have been providing assistance to Palestinian civilians in Hebron and the Gaza Strip.

This collection of articles tells the story of their work and offers testimony to the day-to-day reality of a people trapped by war and suffering in ways that are generally unacknowledged.

The "Palestinian Chronicles" are a way of bearing witness. They were written by psychologists, psychiatrists, doctors, administrators and logisticians who have participated in MSF's missions in the Gaza Strip and Hebron since September 2000 and who recorded their experiences and observations to continue thinking, working and meeting. They did not write about theories, techniques or, even, about emotions. Instead, they provided facts and fragments of things seen, experienced and felt. They wrote plainly and simply, without commentary, analysis or judgment. They wrote these chronicles for all readers, not just for experts or those who saw what they saw. They wrote to show with words.

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OUR THANKS TO ALL THE AUTHORS OF THE PALESTINIAN CHRONICLES: ZINET AHMED – LILIANA ANDRADE – PIERRE BEURRIER – LORENA BILBAO – HÉLÈNE BOUCHEBOUBA – SARA CARMONA – LAURA CARTAÑA – JIMENA CAVANNA – JORDI COSTA – CATHERINE DAUBRÈGE – DIDIER DE GREGORIO – ITSASO ETCHEVERRY – PAULA FARIAS – CHRISTINE FIRNHABER – ROBERT GENEST – ARNAUD GHIZZ – ANGELIKA GROTERATH – SITA HALLIER – LUDMILA HESOVA – FIMIA INTON – FOUAD ISMAEL HASSAN – MARIE-HÉLÈNE JOUVE – CHRISTA KRIEG – YVES LALLINEC – HERVÉ LANDA – OLIVIER MAIZOUE – CHRISTINE MARCILLY – CESAR MARTÍNEZ – JOSE MARTINEZ – VIRGINIE MATHIEU – MURIEL MONTAGUT – SALLIE MOTCH – YOUSSEUPHA NIANG – MARILYN NOGARO – ELISABETH OLDCORN – KARINE PILLETTE – CLAIRE REYNAUD – DALILA REZZOUG – SABINE ROQUEFORT – FARIBA SAADVANDI – AITOR ZABALGOGEASKOA – DELPHINE ZINS.

AND TO ALL THOSE PROFESSIONALS – LOCAL AND EXPATRIATE – WHO SINCE 1993 HAVE MADE OUR WORK IN THE PALESTINIAN TERRITORIES POSSIBLE.

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JERUSALEM, APRIL 4, 2002

"The obstruction of medical assistance intended
for Palestinian civilians in the Occupied Territories
has reached alarming proportions..."

The "Chronicles" recount the situation up to October
2001, but the situation in the Palestinian Territories
continues to deteriorate. MSF remains present.

Humanitarian agencies are being asked to choose sides.
They must preserve their independence.

Put to the test

BY JEAN-HERVÉ BRADOL,
PRESIDENT OF MÉDECINS SANS FRONTIÈRES

In the old city of Jerusalem, a Palestinian colleague showed me around beneath the pale winter sunshine. Our first problem was to decide which shrine to visit. Israeli police do not allow non-Muslims inside the mosque. Kids in uniform were instructing visitors to state their faith. They would then decide whether or not the visitors could go in. Souvenir stores advertised posters for sale next to the rebuilt temple that stands on the site of the Al-Aqsa mosque. In the name of history and religion, extremists on both sides justify the use of violence, foreseeing a world made free of their adversaries. The symbolic presence of the prophets in the midst of those ancient stones invites all of us, including foreigners visiting for a few days, to take sides – even if this means erasing from our minds the face of the adversary: his humanity, his rights, and his suffering. This may represent a dangerous prelude to an even more radical form of elimination: expulsion by violence.

The second stop on my visit was the Gaza Strip. My colleagues tried to explain to me the extraordinary geography of this small strip of land. Their words seemed to conceal a concern that I might not understand; that I might not be able to comprehend the injustice and the suffering caused by that geographical reality, to understand who was strong and who was weak; or see clearly which was the right side to take. Then, by way of

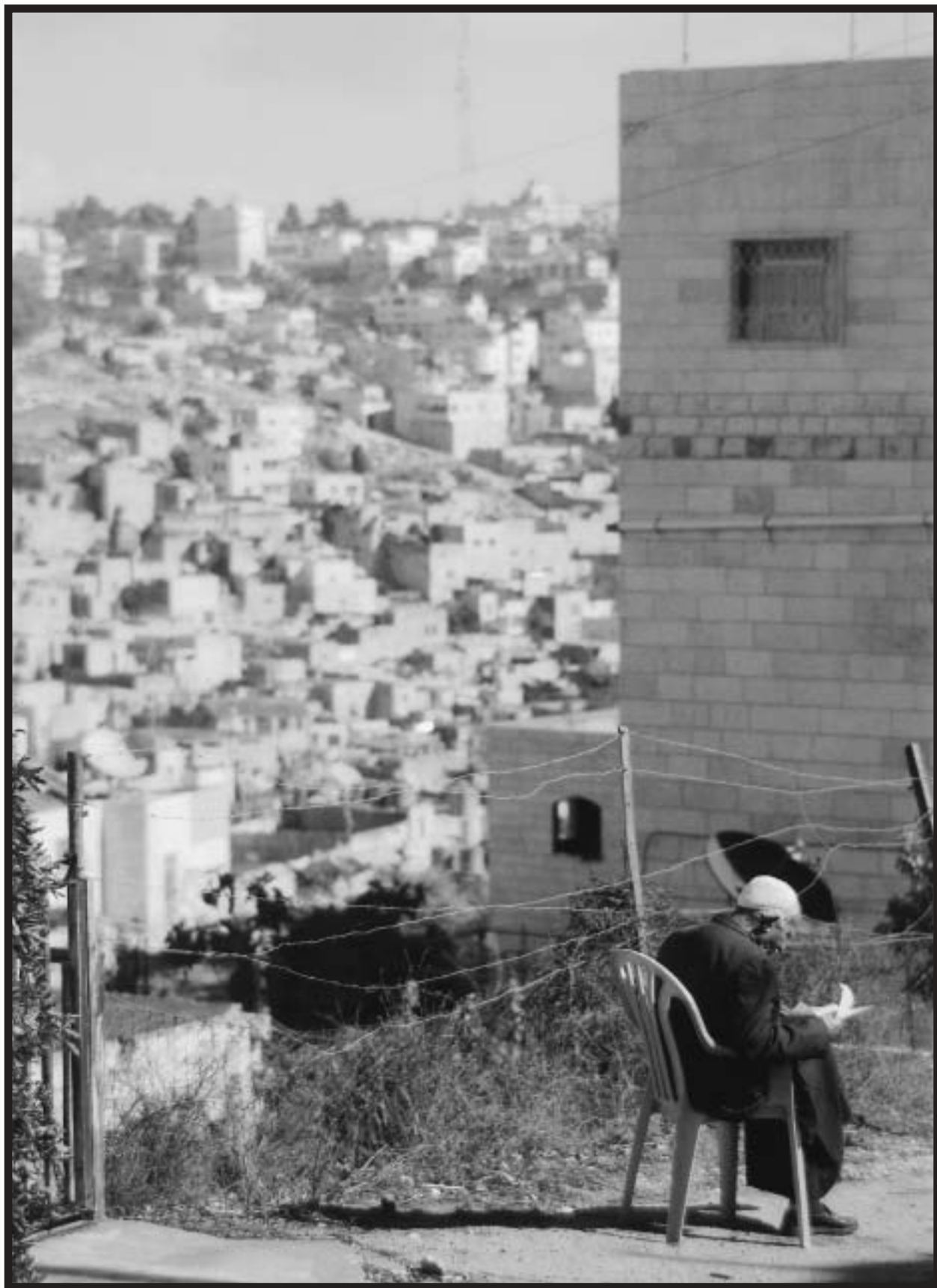
demonstration, I was taken on a tour that included houses razed to the ground, ravaged strawberry fields, olive trees torn from the ground, blocked roads with figures moving like shadows, watchtowers, assault tanks, small military fortresses made of concrete. Gaza is like a vast open-air detention center, watched, from land, sea and air, by war machines (planes, helicopters, armored cars, and boats) and their faceless pilots. My Palestinian hosts talked of the individual in the tank guarding the end of the road, of the missile seen wavering between two trajectories... The Israeli soldiers remained at a distance, protected by their armor plating. They do not speak, they just fire.

Sinister Dialogue of the Deaf

In the West Bank, too, the Palestinians are hemmed in. They cannot travel to Israel and it is extremely difficult to move from one town to another. For these Palestinians, too, the face of the enemy is a pitiless machine, which threatens their lives at every moment. The hundreds of civilians killed since the beginning of this phase of the conflict offer confirmation that, as the desire to separate grows stronger, each side sees less of the other, and the death toll climbs higher. Palestinians talked to me of their desperate weariness of being unable to decide their own destinies, and of having to suffer the decrees of the Israeli state. Work, transportation,

shopping, security, medical care... everything depends on the will of the Israelis. An entire life composed of harassment imposed by a foreign army. How can they fail to rebel? What is the point of living such a life? Is it worth the trouble? Many ask themselves that question. Some answer no. Strapping explosives to their bodies, they blow themselves up in public places, killing as many Israelis as possible, and thereby affirming their refusal to live a life that has become unlivable. The calculations made by those who supply them with the explosives are decidedly more cynical.

In Israel, every daily act is accompanied by the fear of being the victim of an attack or of losing a close relative. At any moment, terror can wreak havoc upon day-to-day life. Whenever I talked to my Israeli hosts about the reprehensible tactics of the Israeli army in the Territories, their first reaction was often to cite the suicide attacks. The Palestinians justify such attacks on civilians by saying that there are no civilians in Israel, since every citizen, whether man or woman, had either already performed, would perform, or was performing his or her military or reserve service. It is like some sinister dialogue of the deaf, where a good reason is always found to justify the death of people who share no responsibility for the clashes (provided, of course, that they belong to the opposite camp). In this conflict, the victim mentality – victims of Palestinian terrorism



or Israeli settlement policies, depending on which side is talking – occupies a central place in each side's war propaganda, so that two symbolic figures ultimately emerge: the eternal victim and the victim of the eternal victim. For the relief worker, the victim is more than an individual encountered while providing medical care or relief. Above all, and with an intensity rarely equaled within the context of other conflicts, the victim has become a symbolic figure, which allows people to forget, or even justify the kinds of violence that are contrary to the principle of humanity, to international law, and to policies that seek to restore peace.

The invitation to join one side or the other is accompanied by an obligation to collude with criminal forms of violence. Two examples of this are the deadly attacks against Israeli civilians and – less spectacular but ultimately more lethal – the Israeli army's shooting of Palestinian civilians. If humanitarian action is to be effective, it must detach itself from political positions that seek to manipulate people's

various origins, their spiritual beliefs, and their suffering; that invite people to deny the humanity of the adversary; and that reduce an entire people to a single figure: whether terrorist or settler.

An Order Created by the Violence

Usually it is the relief that MSF provides to the wounded, to the starving, and to exiles living in conditions of desperate poverty that occupies our teams in countries at war. Here, displaced people and refugees make up the majority of a people that has lived in exile for decades. The Palestinian people ask for the creation of a state on the remains of the land on which they used to live and where they now are struggling to survive. They have had time to learn how to care for their wounded and their sick and to establish a public health policy. They receive considerable support from abroad. On the Israeli side, the resources are there to care for wounded soldiers and bring assistance to civilians who are victims of attacks. A permanent order has been created by

the violence. It is the product of a war that is cruel, but of low intensity and spread out over decades. There are those at the top and there are those at the bottom. For example, occupants of the upper floors of homes in the narrow alleyways of the old cities of Jerusalem and Hebron throw their garbage out of their windows onto the heads of neighbors living on the floor below and shout at them to clean up the mess. Occupants of some of these homes have installed horizontal grills that separate their ground floor apartments from those above. As you look up through the grills, your view of the sky is obstructed by the garbage. It is an astonishing sight at least, to the eyes of a foreigner. In other places whether Palestinians and Israelis come into contact with each other – housing districts bordering settlements or Israeli military positions – the exchanges are not limited to garbage.

Palestinian fighters suddenly appear and fire at soldiers or settlers, and Palestinian civilians are fired on like rabbits in a telescopic sight at the



slightest movement deemed suspicious by Israeli soldiers. Their homes are occupied or destroyed as a form of collective punishment for armed actions conducted by others or, more simply, as a part of Israel's security plan. Palestinians in these districts must face constant grief, physical and psychological injury, and arrests, and live in a state of growing destitution caused by the economic blockade. These are the people with whom we work in the Gaza Strip and Hebron. We bring medical, psychological, and social assistance to their homes, which have been transformed by the fighting into a frontline. The "Palestinian Chronicles" offer a collection of descriptions of this work.

Humanitarian Resistance

MSF has been working in the Palestinian Territories for nearly ten years. Every day, our doctors and psychologists witness the profound trauma suffered by the Palestinian people. Even if Médecins Sans Frontières' presence in this crisis is not as great as it is in Angola, Chechnya,

or Afghanistan, that does not mean that the suffering of the Palestinian people is any less intense. Assistance to those affected by armed conflict is never a matter of simply providing food and shelter or healing bodies: only the key players involved can determine what can be tolerated, in terms of offense to human dignity. The Palestinians' response is clear: they do not accept the fate assigned to them, and many are ready to die as a result. Our actions are also limited by the Palestinians' own capacities for mobilization, public expression, and organization.

That could change. Over recent months, very considerable damage has been inflicted on their capacity to resist. The military occupation is becoming more firmly entrenched, as illustrated by Israelis firing at civilians, ambulances, and hospitals, and by the refusal of the Israeli authorities to allow a commission of inquiry on the violence at Jenin. This clear deterioration in the situation, seen in the high toll of civilian dead and injured over a period of a few weeks, does not bode at all

well for the future. Amid mounting violence – Palestinian suicide bombings and bloody acts of collective punishment by the Israelis – caused by the occupation, hopes for a compromise diminish by the day, providing more and more fuel for radicals in both camps. As it attempts to seal off the population of the West Bank into the towns, behind fences, the Israeli government is also trying to pressure humanitarian organizations to become the social workers of an oppressive system designed to imprison an entire people within open-air detention camps. International humanitarian aid, which until now has played only a peripheral role in this conflict, now risks being cast in the role of prison warden at the heart of a pitiless system of domination and segregation. The Palestinian people's capacity to resist has been sorely tried. Now it is the independence of foreign aid workers that will be put to the test.

Dr. Jean-Hervé Bradol,
President of MSF,
June 2002



The theory behind, and limits to, MSF's psychiatric approach
in the midst of the Palestinian conflict.
A critical examination of a long-term project.

Healing the mind

BY PIERRE SALIGNON,
FOUAD ISMAEL AND ELENA SGORBATI

To address the consequences of the Al-Aqsa Intifada, in November 2000 Médecins Sans Frontières (MSF) initiated medical and psychological care efforts in the Palestinian territories of Hebron, in the West Bank, and the Gaza Strip.

The goal of this medical intervention in a war setting is to provide care to Palestinian families regularly and frequently exposed to potentially traumatic events related to the conflict. Most of these families live in the areas most affected by violence; near confrontation sites, Israeli Army installations and Jewish settlements (1).

Since the beginning of the Al-Aqsa Intifada in September 2000, the settlement policy of the Israeli Army and Jewish settlers has continued (2) and repressive measures taken against the Palestinian population has assumed the form of collective punishment.

The isolation of Israeli and Palestinian populations is heightened daily with the harsh application of a military occupation régime in the Palestinian territories.

Fearing new attacks in Israel, and given the escalation in violence since the end of 2001, the Israeli Army's strategy consists of limiting the movements of Palestinians outside the Palestinian territories. The strategy seeks to guarantee the security of the Jewish settlements and their access

routes because of firing and mortar attacks of which they are the targets from different armed Palestinian groups, thus dispersing the residents of the already-segmented West Bank and Gaza Strip (3).

Living conditions continue to worsen

In Gaza and Hebron, and as well in Ramallah and Nablus, Israeli military operations have thus created enclaves in which Palestinian families are effectively confined and living in a state of permanent stress, suffering to the point of feeling completely abandoned. The sense of despair is amplified by the Israeli Army's systematic destruction of their houses and property (factories, greenhouses, orchards, olive trees) in areas adjoining Jewish settlements and near major traffic routes used by the settlers. This repeated destruction, often carried out at night, under protection of Israeli Army tanks, increases the Palestinians' feeling of humiliation and revolt.

The economic blockade imposed by Israel against the Palestinian territories strengthens Palestinian families' extreme dependency. Men who usually work in Israel are deprived of jobs and thus of an income, which means that the poorest families are unable to buy enough food on a daily basis (4). Some families are even unable to reach Palestinian medical centers or to have access to a doctor. For fear of

seeing their house requisitioned or destroyed in their absence, some patients avoid seeking treatment. Access to health care is now uncertain, while violence against Palestinian families and climate of terror in which they live generate intense stress, fear and panic, which call for immediate medical attention.

If the Palestinian Red Cross, with help from the International Committee of the Red Cross, the U.N. and various non-governmental organizations, are active in health care and provide support for caring for the wounded and for primary care facilities, there are few specialists trained in trauma care. Following an October 2000 evaluation, which confirmed the scope of the need, it seemed to us a priority to intervene immediately, even while the conflict was still underway.

When events lead to suffering or traumatic consequences of living in an occupied territory.

Nearly the entire Palestinian population suffers from the confinement, occupation, fear and an absence of hope for the future on a daily basis. However, the intensity and the number of traumas differ, as do the psychological after-effects. In this war in which civilians are on the front lines, reactions are extremely variable. Stress is a normal reaction for those subject to daily violence and humiliation, in an

environment in which remaining confinement offers the only possible hope of safety and security.

In the most exposed areas, leaving one's house could risk death, as could going out at night. But staying at home is sometimes hardly more secure. Often riddled by bullet holes, these houses are regular targets for Israeli soldiers. Israeli Army tanks traveling nearby all day long make terrifying noises. Children can no longer play outside or go out alone. Nowhere is safe anymore. In such an environment children, like adults, develop fears and experience repeated nightmare. Children no longer want to leave their mothers or go out of the house without them.

This stress may also trigger severe and deeper psychological suffering. Along with what is known as "adaptation" stress, found widely, some individuals develop more serious, severe and chronic reactive psychological syndromes, including various forms of depressive states and PTSD.

Some people remain prostrate and can no longer speak or feed themselves. Others experience delirious episodes following an intense fright, like the mother who ran to find her children when firing began. She thought "We die together or we survive together." One week later, she developed a persecution mania, with auditory hallucinations, profound anxiety and sleep loss. Paralyzed by extreme fatigue, she was unable to care for her children.

Appropriate action?

On a daily basis, the MSF team meets Palestinian families suffering from these kinds of psychological disorganization, revived when shooting is heard and planes bomb.

Another frequent situation is that of those people who were imprisoned and tortured during the first Intifada and who are now experience psychological decompensation (traumas and injuries from the first Intifada take on meaning after the event). Their disorders reappear as the result of new traumatic events. This is also the case of young adolescents who as children had terrifying experiences and who have forgotten some of what they experienced. Psychological disorders

emerge during the Al-Aqsa Intifada, sometimes several years after the first traumatic event.

According to the methods established by Western militaries to treat troops confronted by traumatic events on the battle field, such patients required immediate care, even in the field, and at the outset, for a limited time.

Relying on this experience of psychiatric intervention in war, Médecins Sans Frontières adopted a practice in the heart of the most exposed areas where many Palestinian families still live. MSF doctors, psychologists and psychiatrists, assisted by Palestinian interpreters and drivers, come together in a joint clinical and curative practice (5).

This approach is based on home visits because the obstacles to free travel as well as the fear felt by patients prevents them from leaving home for treatment. Palestinian health workers do not have access to them so MSF teams' home visits are often the only way of breaking through the isolation in which some families live.

MSF doctors and psychologists work together, complementing the typical home visit with several weeks of individual or family therapy.

The doctor-psychologist team identifies and takes on the most vulnerable patients. If listening is important, the doctor's home visit, often conducted outside by the entrance or under olive trees, allows the targeting of untreated medical problems and psychological disorders. The doctor offers standard advice, and drugs for illnesses that the local network cannot provide. But in general, most of the chronic illnesses are aggravated or reactivated (cardiovascular illness; digestive disorders, primarily ulcers; skin problems). Family members leave home little or not at all. There is no money. Local doctors are overwhelmed, have lost motivation, are exhausted. And finally, there are very few Palestinian psychologists or psychiatrists.

The MSF doctor carries out the role of home visit doctor. His or her intervention lays the groundwork and rounds out the intervention of psychiatrists and psychologists. The M.D. cares for the body before the mind are treated. The doctor refers patients suffering from psychological problems to the psychologist or psychiatrist. This can begin a therapeutic work allowing individuals and families to express their fears, to treat their traumas and reduce their stress. The reference model is that of therapeutic consults and brief therapy (individual, family or group, depending on the case); treatment lasts on a few weeks on the basis of two visits/week (close monitoring).

Intervening while the conflict situation – the cause of the trauma – is still underway allows to give meaning to the event or to the reaction, to identify the trauma with the patient and thus to avoid later a more severe reaction to some new aggression (which in this context of violence is certain). The psychologist seeks to anticipate

occluded emotional states, emotional pain transformed into dispairs that are difficult to reverse.

Médecins Sans Frontières has already experimented with this approach in other conflicts, including in Bosnia. To ease the pain of trauma, the MSF team sought to "build connections severed by trauma" and "the working out of an account where trauma led to shut-down" (6).

The MSF psychologists are assisted in their clinical work by their Palestinian interpreters. The cornerstone of the patient/therapist relationship, they are the "voice" of the doctors and psychologists and play an essential intermediary role in a complex political and cultural environment.

On a regular basis, discussions of cases

from the field are also organized between MSF expatriates and an Israeli psychologist based in Israel (she cannot travel to the Palestinian territories). These meetings promote clinical exchanges among trauma "professionals" outside the Palestinian territories. Finally, MSF's consulting psychiatrists and the organization's operational staff meet regularly to guarantee the supervision of MSF teams (nationals and expatriates) and, if necessary, to redirect the mission's medical goals.

The limits of our actions

The first limitation is that this kind of care cannot substitute for regular psychotherapeutic treatment. Certain

extreme stress, multiple depressive states and PTSD. Each month, every MSF psychologist and psychiatrist conducts some forty individual or family consultations (with approximately one hundred people). The response to MSF's treatment is very positive. Palestinian families themselves often identify those individuals in greatest need and refer them to the MSF team.

This medical intervention is underway today in the Gaza Strip and the Hebron district of the West Bank.

The daily pain, the adjustments required to deal with material constraints and human limits still remain for the MSF teams. The fear of bomb-

The considerable media attention to this conflict makes no place for individuals to tell their stories.

kinds of problems cannot be addressed in the former context because of the conditions and techniques for maintaining the relationships. However, the presence of the MSF doctor provides, if necessary, the access to psychotropic drug prescriptions for the most serious cases until the patient can be referred elsewhere.

Another limit, if it is truly such, is the number of Palestinian patients and families who seek the intervention of the MSF team. The numbers are quite high; even limitless. That is why priority is given to treating the most fragile patients who are suffering from

ing and firing remains, too. Because one of the key limits to the work of the MSF doctors and psychologists resides in the physical risks they take daily to reach the most isolated Palestinian families. Negotiations with the Israeli authorities underway since the outset of this program do not always guarantee adequate and frequent safe access to civilian populations in the most-exposed areas. This limit imposes frequent interruptions of treatment, delaying expected visits by several hours or several days. Such interruptions are particularly difficult for the families sustained by our care.

Conclusion

In conclusion, we simply want to underline the intricate relationship between two sets of activities undertaken by MSF in the Palestinian territories: on the one hand, bearing witness and speaking out and, on the other, providing medical care. This involves gathering factual evidence, supported and enriched by daily contacts between MSF doctors and psychologists and Palestinian families on the Gaza Strip and in Hebron. In the face of their suffering, we are responsible for describing the war's consequences on them. It involves relating that which we witness in the Palestinian territories.

This has particular therapeutic importance for the families. The considerable media attention to this conflict makes no place for individuals to tell their stories. We are trying to compensate for that lack by publishing regular descriptive reports on the consequences of violence against the civilian population.

Pierre Salignon is an attorney and program director at MSF's Paris, France operational center.

Fouad Ismael is the head of MSF's Jerusalem.

Elena Sgorbati is program director at MSF's Barcelona, Spain operational center.

(1) See the Internet site www.paris.msf.org and the web pages on MSF's activities in the Palestinian territories (in French).

(2) According to the "Palestine-Israel" Journal, (Volume VII, 2000), the number of Jewish settlements in the Palestinian territories increased from 3,176 in 1976 to 200,000 in 2001.

(3) Palestine is a "scattered" territory. Its area totals 5,200 sq. km. The population of the West Bank, with more than 4,000 sq. km, is 1.8 million Palestinians (333 people/sq. km) and the area is divided into three separate zones. Zone A, made up of 13 percent of the West Bank, constitutes the territories placed under the Palestinian

Authority's exclusive control. Since September 2000, the Israeli Army has conducted regular incursions into Jenin, Hebron, Nablus and Ramallah. Zone B includes the territories under shared authority, but the Israeli Army is responsible for the area's security. Zone C is under the direct authority of the Israeli Army. In Gaza, 1 million Palestinians live on a 400 sq. km. strip of land (2,758 people/sq. km) under the control of the Palestinian Authority. Six thousand settlers occupy 30 percent of the territory. Finally, 250,000 Palestinians live under Israeli administration in Jerusalem.

(4) In August 2001, more than 1,400,000 Palestinian refugees in the West Bank and

Gaza Strip were totally dependent on U.N. and Palestinian Red Cross medical and food aid. The unemployment rate was close to 70 percent.

(5) MSF teams in the Gaza Strip and Hebron take the same form: a doctor, psychologist, psychiatrist and a non-medical field coordinator. They are supported by Palestinian interpreters and drivers as well as by administrative personnel, for a total of 23 staff.

(6) In *Humanitarian psychiatry in the former Yugoslavia and Armenia*, PUF, 1995, "Psychological support to former Bosnian Muslim detainees and their families," MSF's mission, by Yves Gozlan and Pierre Salignon.

Psychiatry plays an increasing role in humanitarian aid.
And mental health intervention occurs while traumatic events
are still underway.

Treatment for sorrow

BY CHRISTIAN LACHAL AND MARIE-ROSE MORO

Médecins Sans Frontières has been active in Palestine since 1993. We have worked with child victims of the first Intifada, Palestinian prisoners, malnourished infants and their mothers and, since September 2000, with children and families in the midst of the current Israeli-Palestinian conflict in Gaza and Hebron. Our program initially provided medical care but given the situation, soon expanded to include psychological services because “humanitarian aid does not address only physical needs. It must respond to humans in their complexity and, even, their very essence. Restoring people to a state in which they can exercise choice, freedom and the ability to act on the world is as essential as feeding them, keeping them warm and nursing them” (Martin, 1995, p. 18). This suggests that by connecting and coordinating with other aid efforts, psychiatric intervention assumes its rightful role in humanitarian response; its goal being: to care for human beings in their complexity. The four elements of a comprehensive mental health program are comforting, treating, witnessing and training.

**Mental health care providers
must adopt new cultural perspectives**

Psychiatry today plays an increasingly important role in the field of humanitarian medicine, with growing numbers of psychologists and psychiatrists joining health care teams responding to humanitarian disasters. The major NGOs are instituting mental health programs and developing techniques for psychological care. Psychological trauma is not a new subject, but it takes on new dimensions in programs that assign health care providers – often young volunteers who want to work outside their own cultural settings – to conflict and catastrophe sites. These psychiatric humanitarian aid workers often say they are inadequately trained and prepared for such work. They want to be able to rely on well-defined concepts of humanitarian psychiatry, use specific techniques and evaluate results. They would also like to tailor their actions to the contexts in which they intervene. To be able to modify their approaches they must understand the individual and collective experience of the people for whom they will be caring. This suggests why humanitarian psychiatry falls under the rubric of trans-cultural psychiatry. Individuals target-

ed for mental health services are members of groups and cultures. They have their own knowledge base as well as their own social and cultural representations of health, illness, trauma and family. When we work outside our own culture we must be conscious of differences and familiar with others’ collective responses. To provide humanitarian aid, participants must undergo a process of personal development and change. This extends well beyond the preparatory (and uneven) briefings that expatriates receive. They must develop their own approach to adapting to their new work setting and to cultural and current developments in the world that will be their temporary home. This involves, simultaneously, struggle and enrichment. Such a shift in perspective allows humanitarian mental health care providers to use their own emotions and internal conflicts as professional resources. Even as they struggle to hold onto their identity and knowledge base, humanitarian aid expatriates often face powerful forces pressing them to change their habits, ideas and beliefs. In that sense, voluntary expatriation can be seen as a form of human migration.

Children of Hebron

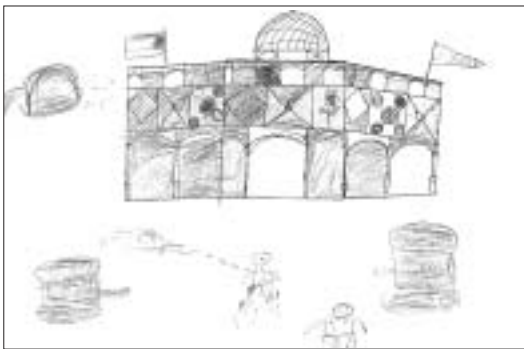
These drawings have been collected by Catherine Daubrége, psychologist with Médecins Sans Frontières.

Ali, an 11 year-old boy

5/16/01

"Jerusalem in danger."

» Ali lives in a neighborhood that was bombed by tanks. "An old man was hit in the head by a rocket." (March 2001, incursion into the Territories.)



Marwan, a 5 year-old boy

4/30/01

"A bullet in the head."

» The house where Marwan lives was hit by bombing. His 13 year-old brother was wounded in the head. Marwan draws a gun with bullets shooting out of the barrel. As soon as he hears firing, his mother says, he lifts his hand to his head.



Aya, a 13 year-old girl

5/02/01

"A girl is wounded and tells her mother."

» Aya lives in the old city. Her family has been harassed by soldiers and settlers for a long time.



Safouan, a 3 year-old boy

4/30/01

« Vrrr, vrrr, vrrr! »

» This is the noise that 2 to 3 year-olds make to imitate the sound of gunfire. Safouan lived through three weeks of Israeli incursions in his neighborhood, including bombings.

Acknowledging emotional trauma and the role of the witness

Since its founding, Médecins sans Frontières has sought legitimacy from international public opinion, not from national governments. This is where MSF breaks ranks with other international organizations like the Red Cross. Volunteers provide care and speak out about what they have seen. They are going towards medias to make the public aware of the suffering of the people they are caring for. But it quickly became clear that the act of speaking out had to be distinguished from some humanitarian media circus stripped of ethical foundation. Bearing witness means giving voice to the direct experience of the collective trauma of specific populations, like refugees or particular ethnic groups. It also means meeting people face-to-face. In such encounters, affected persons express their anguish; an anguish felt collectively as well as individually and within the family group. This testimony has a profound effect on those who listen to and absorb it. They are moved to respond on a medical and material level, as well as on an emotional level. One of the emotional responses is, clearly, the impulse to ease pain and restore the full humanity of people who have suffered violence's dehumanizing effects and other painful experiences. This calls for consolation in the most active sense of the word. But although it may be a necessary action, it is not a sufficient response. Profound trauma and despair prevent many people from expressing themselves. Others – including children and babies – do not or can no longer speak. The process of speaking out and bearing witness requires that people be heard. It allows them to voice their despair and to imagine a kind of treatment that would meet not only their physical needs but restore their emotional capacity as well. That capacity is clearly affected by the crises they have experienced and continue to experience. Humanitarian aid settings are, first and foremost, emergency settings. Experience in managing emergencies (including natural catastrophes and war) has led humanitarian aid organizations to develop specific expertise (including ready-to-use kits, protocols

and organizational structures) and has put certain professionals, including logisticians, resuscitation specialists, surgeons and emergency care nurses, on the front lines. But this is the first time we have practiced real emergency psychiatry; that is, intervening in the midst of traumatic events. Previously we intervened to ease events' after-effects. Now we are there with people as the trauma occurs and even growing in intensity. We provide psychological care to strengthen their defenses and allow them to hold on in spite of everything. We address the effects of trauma on infants, children, adolescents and their families. Many fields recognize the significance of this concept, which now extends well beyond the medical setting. As reflected in the term PTSD (Post-Traumatic Stress Disorders), the broader concept has contributed to a recognition of suffering that is not limited to the spontaneous empathy

We can point to five levels for specific intervention: accounts of traumatic events by those who have experienced them, individual traumatic experiences, collective and individual adaptive reactions and, lastly, the psychopathological level at which structural, lasting and often major disorders appear.

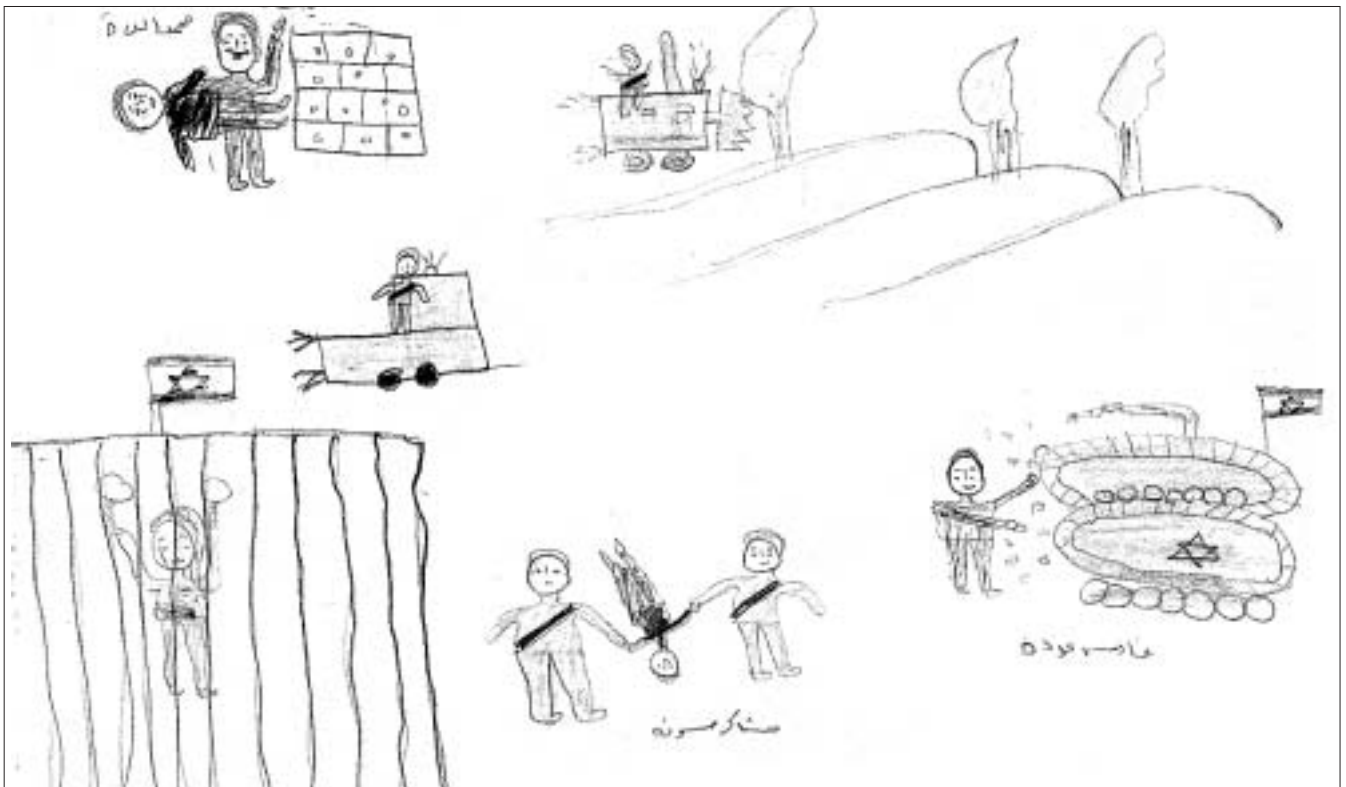
Accounts of traumatic events

This is the level of description provided by all who experienced traumatic events like those Gaza Strip residents have faced since the second Intifada began in September 2000. Descriptions of the events reveal people's fears and address the aggressive and dehumanizing nature of Israeli Army actions. These situations are obviously traumatic. Army actions include destroying property using bulldozers, occupying houses, threatening residents with tanks, rounding people up,

Humanitarian aid workers intervening overseas must change their practices and beliefs even as they maintain their identity. In that sense, voluntary expatriation can be seen as a form of human migration.

expressed in cases of war, conflict, persecution or catastrophe. Empathy, our capacity to put ourselves in another's place, is an instantaneous mental state. It is emotionally-based and situationally-dependent. Opinion is mobilized on the basis of empathy and of information presented visually or in writing. When attention wanes, that shift is not caused by moral weakness or laziness. Rather, empathy simply evaporates. Compassion is ephemeral. Humanitarian workers in the field may themselves sense empathy wax and wane. They may also feel its effects, which can both energize and paralyze. Naming and bearing witness is quite different. This process allows everyone – those who experience suffering and those who witness it – to identify and represent it in the psychological life of the individual and the group.

patrolling at night and setting up checkpoints. Describing and documenting traumatic events, as well as distinguishing factual accounts from those distorted or exaggerated by fear, is a useful part of the evidence-gathering process. It also allows the psychologist to accurately represent the experiences of people she or he is treating. "I often treat people who want to show me where an event occurred," one psychologist said. "I think going there permits expression and abreaction, an uncovering of the trauma. It often allows a person to return to a place where he or she has not dared to go for a long time." The media's approach to telling stories of traumatic events often overlaps with ours. There are, however, multiple versions of the same events. Our approach is a grassroots one. It allows



Mohammed, a 6 year-old boy

10/15/01

"A tank is destroying trees. Soldiers are beating a boy and carrying him off. A boy is throwing stones at the tanks. My sister, who is in prison because she tried to stab a soldier."

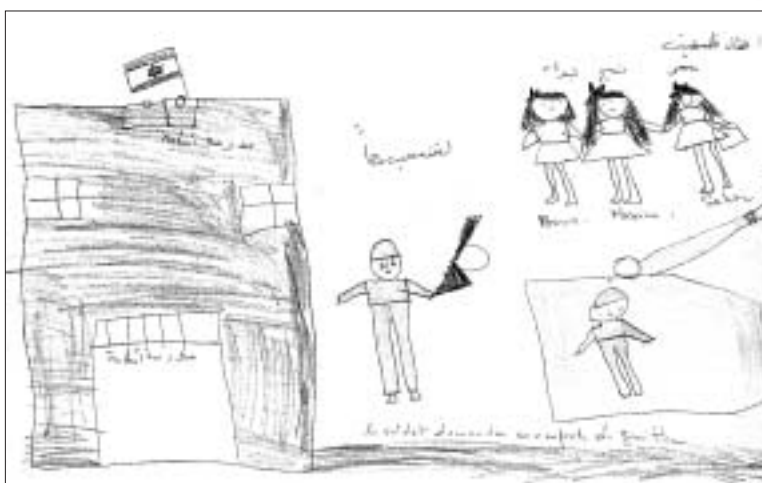
» Mohammed's sister, 14, presents with psycho-logical trauma linked to three violent incidents: an attack by a settler's dog in June, a beating by soldiers (for which she was hospitalized) in July, and the death of a schoolmate who was killed in August. Her attempted killing of the Israeli soldier took place in September.

Sahar, a 10 year-old girl

10/16/01

"The soldiers are occupying my school. They're telling us to leave."

» Sahar had to leave her school, which was occupied by the Israeli army. On the way to her new school, she has been subjected to more attacks: teargas, firing by soldiers, stone-throwing by settlers.



Moataz, a 5 year-old boy

11/05/01

"A girl who looked like scrambled eggs."

» Moataz saw two people mangled by a helicopter-launched bomb fired near his house. He found an ear near the refrigerator in his kitchen. This occurred in October 2001, during the Israeli incursion and bombing.

us to see events through the eyes of those who experienced and suffered from them, as opposed to seeking a factual, "objective" account. Sharing tragic moments by listening to people recount them may be the only way to provide care, but it is significant. "We try to support the residents but really all we can do is be there," a psychologist in Gaza said in December 2000. "Our words seem pathetic. They always say they were waiting for us. They talk about us with their neighbors and ask each other when we will be there."

Individual traumatic experiences

This is the level of personal description provided by an individual who has experienced one or more traumatic events. Gaining a complete grasp of the experience requires going beyond clichés. Little by little, the person will open up and in the telling, begin to construct a specific and personal meaning of events. The experience is not solely negative but encompasses a broader, holistic awareness. Recounting the event in a therapeutic setting may help to prevent the onset of future psychological disorders. People have a tremendous need to tell their stories of trauma and few have political goals for doing so. Rather by putting words to disturbing and disorganizing experiences, they seek reassurance and to restore their humanity. They want to communicate with someone who is close enough to understand what they have been through, yet removed enough so that they are not just repeating their story ad nauseum. People will often talk repeatedly among themselves about events, though the consequences may be negative as much as positive. Talking to a "health worker," in the broadest sense of the term, initiates a therapeutic interaction that can transform the traumatic experience, allowing the individual to move beyond it rather than remain imprisoned by it.

Collective adaptive reactions

A common example is the behavior of people who remain in their homes even when, for example, the building is the target of bullet or rocket fire or regularly attacked by groups of sol-

diers and even, in extreme cases, when soldiers have occupied the roof. Residents know their houses will be requisitioned or destroyed if they leave so they stay on, living in fear. Even if resistance is an individual action, in which an individual assumes all personal and familial risk, the act is a collective adaptive reaction. Not all adaptive reactions involve that level of heroism. Others include regular, ongoing conversations about the current or prior days' events. When a single family member is designated as the one who is suffering and whose responses are judged abnormal, such behavior protects other family members from their own tendency to react in inadaptive ways. On a collective level, we observe reactions of fear, despair and revolt as well as rumors

duals internalise their emotions in the form of future disorders that may manifest physiologically, psychologically or behaviorally. Prevalent war-time emotions also include rage and impotent anger. But whatever the "quality" of emotions revealed at the time, the challenge is reining in the "quantity" of emotions. If emotions can be mastered and controlled early on, they may not emerge later as a disruptive, disorganizing flood.

Pathology with known disorders

Acute states can be distinguished from anxious states, which are more common particularly among children. They may develop an excessive attachment to the mother or an older sibling, refuse to leave the house or even a particular room or develop

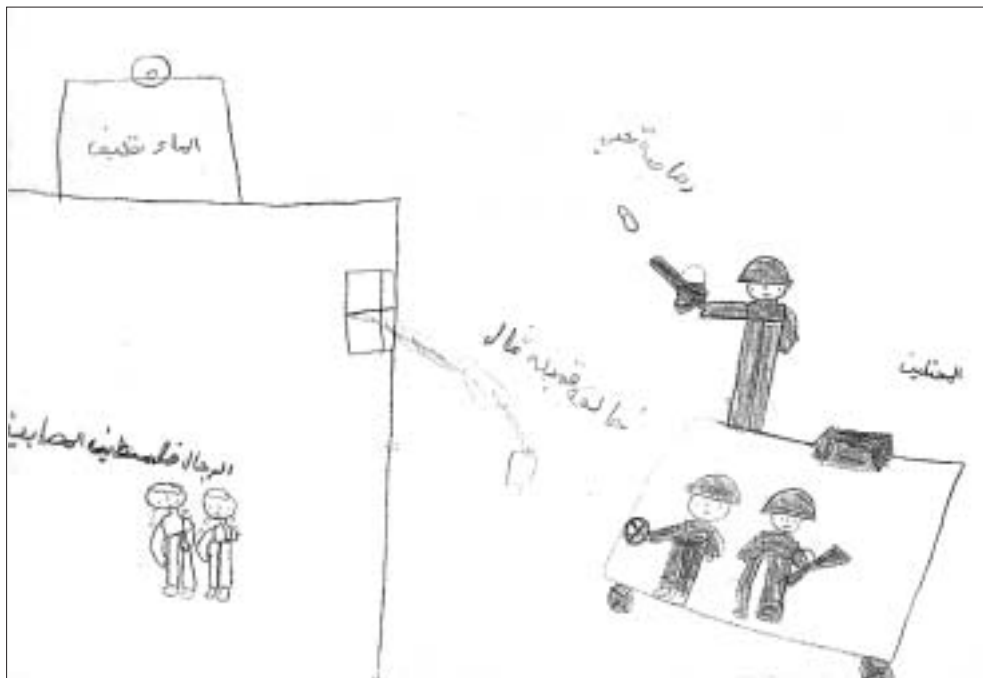
Rather than seeking factual, "objective" accounts, our approach allows us to see events through the eyes of those who experienced and suffered from them.

and acts of solidarity. It is important to monitor all these emotional shifts and symbols (for example, martyrs and olive trees in Gaza) because they change quickly and serve as indicators of the population's overall condition.

Individual adaptive reactions

The reactions observed are the emotions visible in the face of danger and violence, including the experience of intense fear and its physical signs, including trembling, unsteadiness, involuntary urination, nervousness and, sometimes, fainting. We next observe reactions that represent an effort to master fear: denial, losing oneself in daily tasks, participating in the confrontations. In many cases people are virtually trapped and cannot remove themselves from the situation. Take the example of houses caught under nighttime attack, with the incessant, frightening noise of tanks rumbling by and children crying and clinging. What are people to do? What is the appropriate adaptive behavior? In such situations, indi-

viduals internalise their emotions in the form of future disorders that may manifest physiologically, psychologically or behaviorally. Prevalent war-time emotions also include rage and impotent anger. But whatever the "quality" of emotions revealed at the time, the challenge is reining in the "quantity" of emotions. If emotions can be mastered and controlled early on, they may not emerge later as a disruptive, disorganizing flood. sleep disorders and awaken screaming from nightmares. They can sleep only when close to the mother. Sometimes these children develop a state of permanent, invasive fear with startle and hypervigilance responses. Among adults, painful conditions like joint and limb pain and headaches are common. Some may develop genuine psychosomatic pathologies like gastric ulcers. True psychotic decompensation may be observed, in which the person shows transitory signs of insanity, thereby escaping an intolerable reality. Post-traumatic stress disorders appear later, affecting sleep and all major activities, including eating, learning and daily living tasks. The war context may revive prior states of psychological decompensation. The most vulnerable individuals are at greatest risk in such situations. Earlier emotional problems may, themselves, have resulted from prior trauma. In extreme situations or immediately following them, physiological complaints are often more common than psychological ones. This is particularly



**Sahar,
a 10 year-old girl**

10/16/01

"These are the soldiers who have taken over my school. Here, they ask us to leave it."

» This young girl had to leave her school, occupied by the Israeli army. On her way to her new school, she has been repeatedly assaulted: teargas, shots fought by soldiers, stones thrown at her by settlers.

common in cultures that do not distinguish between physical and emotional illnesses or, in the simplest terms, suffering. Sleep disorders are often observed and are among the range of affected physical functions including eating, sleeping, breathing, elimination and sexuality. Overwhelming fatigue is common. Physical

experiences post-traumatic problems, children may be particularly affected. Traumatic losses and bereavements may also generate medium-term psychological consequences. Depression may have long-term consequences for child development and the parent-child bond. As events recede in time, a variety of symptoms may

alive and hold onto the dreams necessary to work in these extreme circumstances. We must do this to break the cycle and prevent trauma from recurring in successive generations. We must heal human suffering, even when it is unspoken and its wounds invisible. We must, therefore, begin by speaking of it.

Physiological complaints are more common than psychological ones. This is particularly true in cultures that do not distinguish between physical and emotional illnesses.

functions are disorganized and children, in particular, manifest partial transitory regression. For example, children who live with fear on a daily basis can experience enuresis. Often people consume large amounts of food or conversely, may be unable to eat, complaining of problems swallowing. They may present with weight loss problems. (A common joke among MSF's female team members in Hebron, both expatriates and Palestinians, was that "fear and danger have a silver lining – they keep you slim!") If the mother-child relationship is disrupted, especially if the mother

appear: fears and phobias; behavioral problems and disorders; aggressivity and violence; learning disorders, language disorders; mother-infant relationship disorders; avoidance behaviors; blunted affect, inhibition, passivity and depressive states. The relationship of events to the initial trauma is obvious. The list can be expanded to include the bitterness that feeds hatred and is passed on from one generation to the next. Deeper understanding improves treatment and care. We must be willing to name the horror and speak the unspeakable if we are to keep hope

Christian Lachal and Marie-Rose Moro are child and adolescent psychiatrists.

Marie-Rose Moro is an ethnopsychiatrist, psychiatrist, and psychoanalyst, and director of the Child and Adolescent Psychopathology Department of the Avicenne de Bobigny Hospital, where she established a cross-cultural practice. She is director of the review *L'Autre* and organizes MSF's mental health missions.

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Palestinian Interior

GAZA – HEBRON

NOVEMBER 2000 – OCTOBER 2001

Médecins Sans Frontières' medical and psychological teams tell the story of a year spent working among the most vulnerable sectors of the Palestinian population.








Fragmented Territories

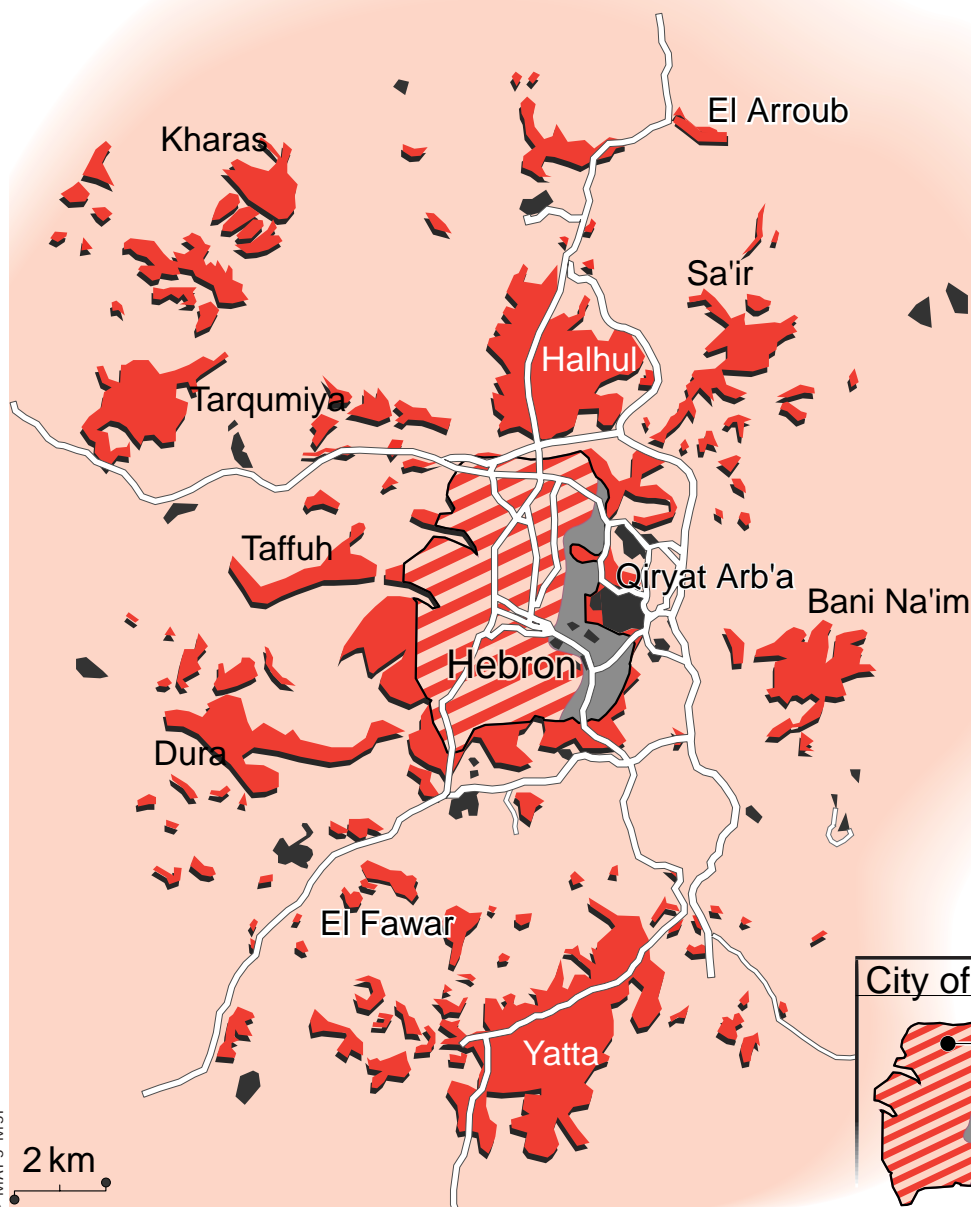


Access roads leading to the settlements divide the **GAZA STRIP** into three sections. These divisions have become internal frontiers, which the Israeli army opens and closes at will and depending on events.



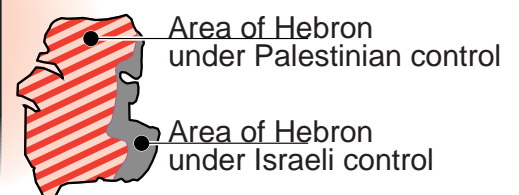
The Palestinian Territories' "patchwork quilt" design is visible on maps. Imposed by the Israeli government in 2001, the fragmentation makes it increasingly difficult for aid workers to gain access to patients and deprives Palestinians of freedom of movement.

-  Israeli settlement
-  Palestinian area
-  Zone under Palestinian Authority control
-  Zone under Israeli control
-  Zone under Israeli forces' fire (destroyed or annexed since the beginning of the Intifada)



The old city of **HEBRON** has the distinctive feature of being the only West Bank Palestinian community to be occupied internally by 250 settlers who are protected by 2,000 Israeli soldiers. The result is extreme, ongoing tension between the two communities.

City of Hebron



SUNDAY, NOVEMBER 12, 2000

RAFAH

Life under gunfire

Visit to the Salah'edine district. We've come back to see an 8 year-old boy who's had problems since the floor of the house where he was sleeping with his brothers was destroyed. He's a little better since our last visit but is still fragile. He keeps saying he is afraid and anxious. His family finds him changed. They say he is worried now, not cheerful like he was before.

We hear gunfire overhead. We talk with the boy and his older brother (The child did not want to be alone with us.). We help him to express his feelings and to tell us what he experienced when the house was attacked.

The street is very exposed and we see a house riddled with bullet holes. We ask people on the street if it is occupied. An older, childless couple live there. The husband is a former English teacher. They invite us in and seem very willing to talk. Since the Intifada, they have been living under constant stress. Their house is within firing range of an Israeli military post just opposite. Bullets have been fired several times through their living room, right where we are sitting and talking. The couple has moved their living quarters to the back room of the house. They leave by the back door to visit their neighbors but don't go far for fear that a fire may break out when they are gone.

They can't sleep any more and eat little or nothing because it is difficult to take in food. The man, 58, complains of joint and muscle pains while his wife, 37, complains of constant fear. Still, they speak with a certain sense of humor, thanking God they have no children. Given what's happening to young people right now, their lives would be much worse. Despite their casual comments, we sense a muted anguish below the surface in their bitter comments about the Palestinian Authority. "They've lined their pockets and we don't trust them." They feel isolated, abandoned, and gripped by deep pessimism.

A man stands in front of the house across the street from theirs, right next to the Israeli military station. We see women and children at the windows. The man lives here with his family and invites us in. To enter, we have to go around the corner where the confrontations occur. People have been wounded and killed right here. As we climb the stairs, we have to duck as we pass openings – bullet holes and gaps in the walls the size of a hand. Two stories, two families; one of which has left to take refuge somewhere else. While we talk in a closed-off room, we can hear firing close by and our eyes begin to sting from the tear-gas. The children are calm and quiet. Their expressions are serious as they listen to their father. Every night they leave with their mother to sleep somewhere else. The father returns alone to keep watch over the house. He, too fears that a fire could break out. The 15 year-old boy has not joined the confrontations. Or so he says in front of his father. The father has tried to talk the young people out of participating because he cannot bear to see them injured anymore. He can't stand that this is happening so close to his house but he realizes he's powerless to stop them.

KHAN YUNIS

She wants to knock over the television

A refugee camp borders the outskirts of a settlement area on the western edge of town. It is an enclave within a zone completely controlled by the Israeli army. The furthest houses are exposed to daily confrontations. The multi-story apartment buildings towering over the houses, now empty, are riddled with bullet marks.

We visit two families living in the two houses at the end of the alleyway, barely 20 meters across from the military installations. Confrontations have taken place here since the beginning of the Intifada. In the last two days, the clashes have moved 100 meters away. They still occur close by, but the extra distance is enough to restore a bit of calm for these families.

Nearly all the families have left the district, at least at night. The father speaks. He is very nervous and his words rush out. He has seven children, ages 2 to 14. He fears for their lives and their health. He no longer works and is

2000

September 28

Ariel Sharon visits the Al-Aqsa mosque in Jerusalem, sparking Palestinian uprisings. The second Intifada, known as the Al-Aqsa Intifada, begins.

September 30

Fourteen Palestinians are killed by Israeli fire, including a 12 year-old boy, Mohammed al-Durra. Filmed by the French 2 television news team, footage of his death is broadcast around the world.

very worried. He describes the family's earlier tragedies before the war. His oldest daughter, 8, was killed in 1993. On the day of her death, she was wearing T-shirt with a picture of Saddam Hussein. Two of his brothers were also killed, one in 1976 and the other in 1991 during the confrontations. A few days ago, as she watched images of the Intifada, his 7 year-old daughter wanted to knock over the television. He is under permanent stress, doesn't sleep and has seen youths wounded. He speaks of his impotence in the face of events. "We Palestinians are educated and intelligent, but we don't have a chance. Your visit brings us a little comfort."

MONDAY, NOVEMBER 13

EREZ

The fear of teargas

This Bedouin village is located across from a spot where clashes occur daily. We meet people who are worn out by the situation. They live near the road, with military installations facing them and the Beit Hanoun district behind. Gunfire passes overhead and alongside them. The camp is fairly poor and nearly all the men work in Israel. We sat first in the courtyard of one of the houses to talk with the people there – men, women and very young children. Most of the houses are built of sheetmetal. Some have real walls but are still not very solid and offer no protection against gunfire or teargas. Countless bullet holes pock the "walls" of these homes. Israeli Defense Force installations loom over the village. The soldiers are invisible behind camouflage nets, but you can sense their presence and their weapons, permanently aimed and at the ready. The threat is invisible but omnipresent.

Today, and for the first time since the Intifada began, there have been no confrontations. It is 1 p.m. Yesterday at this time we couldn't have gotten in here. And what about tomorrow? We'd be better off returning earlier in the day. People suffer from the effects of teargas. They can no longer protect themselves and their children from the new teargas grenades, which contain more concentrated gas. They hold onions under their noses, but this remedy doesn't work anymore.

A man reported that young people were wounded in the confrontations. They hid in

the village to get away from the shooting and find help. He saw wounded and one dead. They had to drag them across the sand to reach the ambulance. They had been hit in the leg and there was a lot of blood. He cannot stop thinking about the young people he saw suffering in front of him. He knows that two had to have limbs amputated. These images of death will not leave him. Later, he tells us about other problems, which suggest severe anxiety. He asks us to come back so that he can speak to us privately, which we do.

The others point out another, younger man whom they said was in very bad shape. "Yesterday, he was like a crazy man." The man explained that about a month ago, around the time the Intifada began, his father, an elderly man, suffocated during a teargas attack. Seeing his father in difficulty, the young man rushed to help him and both were exposed. The man confided that he'd had difficulty restraining his fear. He carried his father, who had lost consciousness, outside the range of fire. Yesterday he panicked during another teargas attack. He burst into his neighbor's house through a window, seeking safety there for himself, his pregnant wife and their two young children. He lost control of himself and today his wife is in bed, ill. We visited her. Her problems are the result of stress. We were able to speak with her and she responded positively. We will see her again tomorrow with the doctor for a physical examination which can be very useful in such cases, given her physical symptoms. We will continue to provide follow-up psychological care.

Everyone expresses recurring worries about exposure to teargas. They are all afraid that men could become sterile and that illnesses that may appear 20 years later. After the doctor visits one woman, a man wonders, "She's better today, but what will happen to her baby?"

The feeling of suffocation following teargas inhalation provokes a sense of imminent death, aggravated by the belief that the substance is a chemical toxin. We were not familiar with the new teargas canisters. They contain concentrated gas released in greater quantities than the grenades used before, which were made of black rubber and could be gripped and thrown into the distance. The new ones are metal. They spin and become very hot, making it impossible to grip them.

*As we talk,
we can hear
shooting close
by. The gas
begins to sting
our eyes.*

NETZARIM

The tanks keep passing, back and forth

Four houses occupy the same patch of land near this settlement. The houses are just behind two buildings the IDF dynamited to clear the area at the junction leading to the Netzarim settlement (This is the spot where the young boy, Mohammed al-Durra, was killed and his father wounded.).

Four brothers and their families live there, along with their many children. They are former refugees and built here in 1990. We

sit in the largest room. They understood why we had come. Only one of the fathers is present, along with two mothers who are worried about their daughters. One of them keeps asking to leave this place. Although the walls are sturdy, they don't seem to offer much protection any more. Several people speak at once, telling the story of that endless night when the buildings were blown

up. "We didn't think we'd get out alive." A girl who was frightened speaks up, encouraged by her more talkative cousin. The grandmother joins us and described her fear as she hid under the staircase. She wonders if she ought to take drugs to sleep. Outside, we heard the tanks rolling back and forth, a reminder of the constant military presence that no one here can forget. Accompanied by their parents, the children leave only to attend school.

People are in a hypomaniac state. They laugh and cry; the children are over-excited; small rocks are thrown.

TUESDAY, NOVEMBER 14

EREZ

Regression

We came back to the village to see the young pregnant women. We are asked to visit a woman and child in another house. Soon, more women and young children arrive and the house quickly resembles a little improvised family health clinic. Two children present with stress-related symptoms. A two year-old girl who was toilet-trained has begun to wet herself again (enuresis). A slightly older child shows with the same symptoms.

We talked with the mothers and children to explain the link between fear and regressions that may follow. This is a normal reaction to an abnormal situation. Reassure, comfort, protect and cuddle – how can you do this for three or four children who are all asking for the same attention?

We will return to the village to care for these families and help them care for the little ones, who flee the house to take shelter in the garden during every confrontation and threat.

WEDNESDAY, NOVEMBER 15

KHAN YUNIS

Laughter, cries and stones

This time we visited the other part of the refugee camp. It is very close to the military post and is exposed to gunfire. Many youth come here daily. Several have been killed since the confrontations began.

It's clear that these people live with permanent stress. The atmosphere is highly-charged. Everyone wants to speak at the same time. Everyone calls for the doctor.

People are in a state I would describe as hypomaniac. They laugh and cry; the children are over-excited children; small rocks are thrown. But they are happy to welcome us and to explain what they are going through. Those who have somewhere else to go do not sleep here. Every house has a sealed room to protect against teargas.

During this first visit, we also saw mothers concerned about their children, a baby who was failing to thrive and a child who presented with enuresis.

THURSDAY, NOVEMBER 16

KHAN YUNIS

Eleven years old and at war

We had a long interview with a woman with a 7 month-old baby, which allowed us to discuss a problem that was both troubling and shameful to her. Three months ago her baby stopped gaining weight. Despite that, the baby presented with normal psychomotor develop-



An Israeli army armored bulldozer again piles cement blocks at the entrance to the Hebron market in December 2001.

ment, interacts with others and appears lively. Above all, it's the mother's anxiety that needs to be relieved.

Another mother, whom we had met yesterday, came to talk to us about her 5 year-old son's enuresis. We were able to give her some advice and speak to the boy, who yesterday was behaving like a "tough guy."

The baby's older brother is 11, his eyes sparkling with intelligence. He told us that he knew the boy who was killed yesterday not long after our visit. They were in the same class. He'd just come back from the funeral, which we had passed. He was proud to speak and his tone of voice was almost arrogant as he told us that he goes to the confrontations, too. He says he's not afraid and that anyone who doesn't go after school is a coward.



Everyone goes, it's impossible not to. Then he adds that the dead boy, the "chahid" (martyr), was "majnoun" (crazy) and that he provoked the Israeli soldiers by yelling insults and exposing his genitals. According to this boy, the soldiers had aimed at the child. The boy hid behind a cement block, stuck out his head and was shot in the forehead. Trying to impress us, he spoke without showing sorrow as if to say, "no one can say I was afraid." His expression troubled the Palestinian psychologist who was with me.

The young people were gathering at the regular place where clashes take place and teargas bombs were fired. We could not stay. We left the camp without being able to notify the people waiting to see the doctor or to tell them when we would visit next. A bit further along we were stopped and surrounded by dozens of young people, mostly girls who had come close to the IDF stations and had been teargassed. A sense of collective hysteria was in the air, reminding us again of the tense atmosphere here. One of the girls yelled out, "Why do you want to kill us?" The French-speaking Palestinian psychologist who was with us told her that we were French and had come to help. The girl did not listen. It's all the same, she said. We left, confused and pensive.

October 12

Three Israeli soldiers are lynched in Ramallah. The Israeli army retaliates.

November 9

The head of Fatah's armed wing for the southern West Bank is killed in his car by a missile. He is the first victim of Israel's strategy of targeting and eliminating Palestinian activists.

SATURDAY, NOVEMBER 18
NETZARIM

The bulldozers attack

While the Netzarim junction was being cleared (buildings destroyed and trees uprooted), confrontations broke out at the next intersection in the Al Muragah neighborhood, alongside a little mosque where an IDF Jeep is stationed permanently. One or more tanks patrolled the road taken by the settlers. This Saturday is unusually quiet. People haven't experienced calm here for days, especially since Thursday night when bulldozers resumed their clean-up operations. Now there's enough room to build a four-lane road.

We go from house to house. There's no military presence until 3 p.m. We'll leave the district at around 4 p.m., after seeing demoralized people who are still experiencing shock and are visibly exhausted by sleepless nights. Their anxiety is relentless; it is seen, heard and spoken.

A young woman with first aid training offers to take us to the houses where the residents are most affected. She is very concerned about the population's suffering. We identified at least two people who need individual care: a 27 year-old man whose mother came to talk to us and a housewife who lives in one of the houses along the road. During the night, the family saw the bulldozer roll up to their house and stop a few meters away after having smashed the fence and the well at the entrance to the house. The woman asked for help, unable to cope any longer.

Two weeks ago, another family watched its home turned into a firing base. Israeli soldiers cordoned off the empty house to set up operations and shoot. One of the little girls is visibly very frightened (we would return later to see her) because the family had just moved back into the house today.

In another house, owned by the sheikh and across from the mosque, a young woman had a miscarriage a few days earlier. A month ago, her 18 month-old baby daughter died from a tear-gas attack. (She was hospitalized but could not be saved.)

Large bullet holes are visible at another house where the family is on constant alert, watching and waiting. The father and son, a pharmacist, are solid and steady. Four days ago, another woman in another house had a miscarriage. She says she is fine, strong and unafraid of the soldiers. She and her husband would be run over by the bulldozers before they would leave.

As we leave, we pass the youths headed toward the junction where the confrontations take place. "We haven't even started!" they say.

SUNDAY, NOVEMBER 19
EREZ

Vulnerable, lonely and helpless

We visit this IDF-controlled coastal zone to the far north of the Gaza Strip, where the Alai Sina and Nevetz Sala settlements are located. People in this agricultural region live surrounded by two Israeli settlements. There have been no clashes but fear grips the farmers. The majority no longer sleep here, returning instead to the seaside camp where they are from. They come here to work during the day. Only a few families live here full-time but they do not sleep soundly.

Several Bedouin families live here, too. They moved in when the Palestinian Authority arrived and are scattered throughout the zone. Their way of life is very traditional and clannish, unlike those we saw at Erez, who are more settled.

We visited one of these families, particularly exposed to gunfire from tanks and the advanced IDF station positioned at the settlement's entrance, some 100 meters away. The family feels extremely vulnerable, isolated and helpless. When night falls, they are unable to sleep from anxiety. They moved to this region six years ago because they liked the area. (They came from the south.) Since then it has become a nightmare and they dream of safety that does not now exist. One of the men who greeted us is asthmatic. His asthma attacks have become more frequent since the events began. We offer to return as soon as possible with a doctor who can provide appropriate care for the entire family. We did not see the women or all the children.

MONDAY, NOVEMBER 20
EREZ

The past resurfaces

Third visit to the Bedouin village of Erez. We are scheduled to conduct a personal interview with a 39 year-old man about problems he's had for three years but which

November 20

Israeli naval and aerial forces bomb official Palestinian buildings in Gaza following a bomb attack on a bus carrying settler children.

November 24

Houses are destroyed and trees uprooted along the perimeter of the Gaza settlements.

December 9

Ehud Barak resigns as prime minister and elections are scheduled for February 6, 2001.

December 20

According to press reports, more deaths occurred during two weeks of the Intifada – 344, including 292 Palestinians – than during all of 1987.

have been revived by the current situation. The long, in-depth interview revealed that he suffers from post-traumatic stress resulting from past experiences, some of which certainly date to his childhood and which may or may not be related to the political situation. His condition is not acute but he experiences persistent anxiety that presents in both his physical and emotional status.

TUESDAY, NOVEMBER 21

DEIR EL-BALAH

The day after the bombings

Last night, Gaza was bombed from 6 p.m. until 8:45 p.m. We had planned to go the south of the Gaza Strip to meet the families previously seen on November 12. Among them was a little boy we'd seen twice before. But we were stopped at the Kissufim roadblock, which is closed to Palestinians. Our car was not adequately identified so we gave up for today. In light of the night's bombings, we had also planned to visit families living near a bombed base at Deir el-Balah, located before the turn-off for Kissufim. We headed towards the three houses closest to the bombed site and were welcomed by the family living there. The father, mother and children are there. Not many children are going to school this morning as no one got much sleep the night before. After a few moments, the other family members arrived.

A 9 year-old boy spent the night in a state of acute stress. The family spent two full hours in the garden for protection in case of renewed firing on the base. The boy could not calm down. His mother says he wouldn't leave her for a second and went to the bathroom constantly. He couldn't sleep in his room with his brothers and stayed with his parents, praying for daybreak. Only then did he begin to calm down. He was here during our visit and said he felt better. He thinks things will be all right now. This is the first time that anything has happened in this seaside district. There have been no clashes here since the current events began and there were no serious situations even during the first Intifada.

We are asked our advice about two members of the family for problems unrelated to the night's events. Both are present: a 7 year-old boy, the youngest son of the man of the house, and a 32 year-old man, married and a father.

He is one of the four brothers living here. When I asked the youngest his name and how he felt, his father answered for him, explaining that the child stutters as a result of a traumatic experience when he was 5. He was alone in a car waiting for his father. Suddenly, a huge, vicious, barking dog appeared, circling the car and terrorizing the child, who screamed until his father returned. This took place in Saudi Arabia, where the family was living at the time. Since then, the boy has stuttered. He has received no treatment. I turned to speak to him and asked him to explain the experience. He related what happened and his eyes filled with tears. He was very touching and we were moved. He is very intelligent, does well at school and is very open to how we might help him. He would like to be treated. I mentioned the Palestinian organizations and suggested that we contact them to arrange psychological care. The father agreed.

The second patient is a man with visible problems. His face is contorted and he twists his fingers compulsively. His older brother explains his situation. The man has severe attacks, including catatonic states in which his body stiffens, he pulls his hair and hits his head against the wall. His throat closes up and he can eat only yogurt. He does not sleep. This began 10 years ago. The problems occur intermittently and the brothers agree that they increase when he is faced with difficulties as he is now, given the events.

The young man was seriously mistreated during the Intifada, when he was 22. He was arrested and beaten by the IDF. His problems apparently began following this abuse. The description suggests PTSD (Post-Traumatic Stress Disorders) with psychotic features. The brothers cannot recall similar episodes before his arrest. He is the third of four brothers and receives tremendous support from them. He was treated in Jordan and another Gulf country where he had wanted to study. He has been seen everywhere possible, including the Gaza psychiatric hospital and the Gaza Community Mental Health Program (GCMHP) where he saw a physician. The prescribed treatment was helpful but the results did not last. Apparently, this man has not been able to undertake psychotherapy. If there is still time, it could be useful to suggest. We must still confirm that there are no underlying psychotic problems.

The child couldn't sleep with his brothers. He stayed with his parents, praying for daybreak. Only then did he calm down.

NETZARIM

Sore throat

In the Al Muragah district, a young man of 27 invited us to his home. His mother was present during the interview. He explained what had happened to him two weeks ago as he was returning from his daily job at a restaurant in Gaza. (He comes home late at night.) At the crossing in front of the IDF Jeep, he was arrested and roughed up by the military. They struck him in the side with their rifle butts, took his documents, told him to wait and then left. He was very frightened because of the wait and also because he had been detained previously (for 6 months in 1991 after participating in a demonstration in Gaza). He feared the soldiers were checking his identity by computer and that he was in danger. The wait lasted two hours, during which time he spoke with other youths nearby. When the Jeep came back, he retrieved his documents and was told – firmly but without physical violence – to return home.

Ever since, he has been unable to return to work, feels extremely fatigued, asthenic, anxious and ill (a sore throat). He is in a state of persistent anxiety, cannot think, speaks little and is unable to relax. He must go back to work because he is the only one of the brothers working right now. (The others are unemployed because they work in Israel.) Their father was killed in an accident in 1998. He is also very worried because with his mother's help, it took him four years to recover after his release from prison. His recent experience has triggered a revival of his earlier fragile state and he is afraid that he will relapse. He is a newlywed, married just two months ago. We sense this is contribut-

The man is a newly-wed, married just two months ago. The stress he faces makes it difficult for him to take on these new responsibilities, which increases his suffering.



ing to his anxiety as at this point in his life he must take on new responsibilities vis à vis his young wife. His current stress could compromise his ability to meet those responsibilities. He can't answer her questions. She is aware that he is not well but he does not tell her what is wrong.

WEDNESDAY, NOVEMBER 22

NETZARIM

"What about the children if I die?"

It is still impossible to visit Rafah or Khan Yunis. Since the last attacks in the Rafah region the Israeli Army has, in effect, divided the Gaza Strip in two and imposed strict controls on travel between north and south. It is currently impossible for us to reach the southern region.

We returned to Al Muragah and met a woman in her forties who was visibly exhausted and troubled by persistent anxiety since the first day of the events. The family's house, riddled in places by bullet holes, is on the road leading to the Netzarim settlement in the 70-meter strip where buildings taller than one story are prohibited. Their houses are of light but durable construction, with several rooms. Our patient is in a state of extreme asthenia and stress. She no longer sleeps and eats very little. Her expression is sorrowful and her exhaustion shows. She only sleeps when the family visits relatives but despite frequent pleas from one of her daughters, 10, they go only rarely because they fear the house will be destroyed if they leave.

"What will happen to the children if I die?"

We listen to the woman, spend a long time comforting her, and plan to visit again.

We visit a neighboring home. The young mother came looking for us at the previous family's home. We find her alone with three young children in a sheet metal hut. She says her husband has been gone since the first days of the confrontation. He had said that he couldn't stay any longer, that it was too dangerous and that he was afraid. He has not returned since.

The 18 month-old boy has a huge burn on his buttocks. Two days ago, he fell into the fire when teargas bombs were fired into the house and everyone was blinded. The mother took him to the health clinic for treatment and is supposed to return daily to have



At the Kalandia checkpoint between Ramallah and East Jerusalem, only people with Jerusalem residence permits may pass.

the bandage changed. The fee is two Israeli shekels but she has no more money. This is both a social service and family matter. What can be done?

In speaking with the neighbors present, one thinks the husband left and abandoned his family because he was traumatized. As he has been seen in the neighborhood, we suggest sending him a message that we will return here on Sunday. We should try to speak with him.

Another mother asks us to help her 9 year-old son who has become enuretic since the events. We offer to see him on our next visit.

GAZA CITY

Collateral damage

Visit to the district where the bomb fell "by mistake." It is in the Beach Camp, not far from us. People were watching the rockets launched from the sea fly overhead when suddenly one fell in the middle of a group of houses in a small alley. One house was badly damaged. Several others had part of their metal roofs blown off and a young girl received fragment wounds in the abdomen.

A father asks us to see his 9 year-old son who, two days later, has not recovered from the incident. We speak with the child on the patio of the neighboring house. He talks about his fear and his feelings. He's feeling a bit better than yesterday but still can't think of anything else. He's a somewhat shy and reserved. His father comforts him as best he can, although he is worried about where he will find the money to repair his house. The Palestinian police arrived just after the bombing to reassure the people.

THURSDAY, NOVEMBER 23

NUSEIRAT

A drawing to show the whole world

Visit to the women's center. There are no clashes in the Nuseirat camp. Instead, the youth go to Netzarim and Kfar Darom to participate in the confrontations there. We met some of them as they were

December 28

Two Israeli soldiers are killed during a bomb attack carried out against army patrols in the southern Gaza Strip. That day, the Sharm al-Sheikh peace summit is canceled.

drawing and setting up a puppet show. Very interesting discussion in which these fifteen year-olds – who look younger – shared their determination to “defend their people,” in spite of everything. They hide their activities from their parents and scorn the coordinator’s advice not to go. (He is a young man of 22 who was hit twice in the leg during the confrontations.) They aren’t afraid because they can “hear the bullets coming and dodge them.” They carry the wounded and don’t think of the danger. The speakers leave no doubt as to their determination. They are proud of what they do. They are sweet, endearing kids. One has gathered all the elements of the situation in a single drawing: trees uprooted, bombings, a martyr, tanks, settlements, houses destroyed, people fleeing. He wishes the whole world could see it.

SATURDAY, NOVEMBER 25

RAFAH

For the photographers

We can finally head out for Rafah. We hoped this Shabbat Saturday would make it easier to get through at the Kissufim checkpoint (no settler traffic today) and we planned for every contingency: a white car, driven by an expatriate, with MSF identification and flag and a second car, yellow, with a Palestinian driver.

The checkpoint finally opens at 10 a.m. Things move slowly because the passage is narrow and crowded with pedestrians, cars and trucks.

After a week of intensified confrontations, visiting Rafah was a priority but we had been unable to go because of strict travel restrictions. In the Salah’edine district, we find people exhausted, intimidated and demoralized by the worsening situation. Incessant gunfire plagues the area.

The English teacher we met does not hold back himself as he expresses his anger and despair. He is extremely upset. His wife is not as agitated and describes his exhaustion during a long interview I have with her. The conversation calms and reassures her. She insists that our visits are necessary and comforting. A cousin of her husband’s, a man in his fifties, was killed three days ago returning from prayer. He was shot in the head around 300 meters from the scene of the clashes. No more good humor in their words, only anger and fear.

Unlike during our prior visits, there is no more good humor in their words, only anger and fear.

The father of the family in the house across the street is equally distraught. His face is drawn, he speaks angrily and as he expressed his exhaustion, we sensed that he might burst into tears at the end of every sentence. He has moved his

family into a garage on the ground floor of the house. We have a conversation with his wife, who is holding up but is very worried about the children. We are in the house when violent gunfire breaks out. (The photographers have just arrived and the youth want to show what they’re capable of!) The IDF responds immediately, with resounding gunfire. This is

intended to sound like the real thing and to frighten and warn people before the real shooting begins. We’re not used to it and it’s quite upsetting.

Next we visit the little boy again. Paradoxically, he seems better. We meet with him in the MSF car so we can have a quiet place to talk. Besides, teargas has just been fired and his house is filled with fumes. No one can breathe there. He’s happy with this arrangement and the other kids are jealous. He feels safe now because he and his family will sleep somewhere else.

In this district there are around 25 families at risk and another eight at very great risk.

We return to Rafah and find a place to see our patients in the calm and shelter of the MSF bus. We can’t provide treatment or support in houses where there’s a risk of being attacked and where we, too, become stressed.

SUNDAY, NOVEMBER 26

NETZARIM

Massage with oil and relaxation techniques

We have an appointment with a patient in Al Muragah. He is waiting for us because he’s been told that we will visit. We find a worried man who has difficulty explaining his situation. He’s the one who abandoned his home out of fear. He shows us two gunshot holes in the fence around his house. He hid to protect himself and then, panicked, fled to his parents’ home 1.5 km away. He had decided not to spend a minute longer

in that hell. His wife and children were not in the house that day so he left without them. Ever since, his wife has been alone there with the children. He has been living next door to his brother's house. The situation has become unbearable for him since the incident. To make matters worse, he lost his job and has no more money. Our visit comforts him. He wants our help, feels guilty and needs support. This morning his wife left with the children for the funeral of her father, an elderly man who died yesterday of old age. This could be a chance for her to rest as she had told us that her parents live near Karni in a quiet area.

We will return to see him when his wife comes back to try to help them find a solution acceptable to all. He says he has nightmares and can't sleep anymore. He seems quite distraught.

Next we visit a patient we've been caring for to tell her that we will return with the doctor the day after tomorrow. She is weak enough that it is cause for concern. She says she can no longer take care of her children and seems to have no more strength. In spite of the situation, she says she can only rest at her own home. At her sister's house, 2 km away, where she goes occasionally, the children fight (there are many of them) because they are over-excited. The space is small and it's almost worse than being at home. I suggested that we also see her husband (he comes home from work at 3 p.m.) who, she says, is "even more frightened at night than I am."

During the conversation, we get news about the families living in the houses near the mosque. We meet with several people; in particular, a group of women who have come together to support each other. The conversation is animated and wide-ranging. Each woman shares her feelings and her personal recipe for fighting off fear (including massages with oil to ease painful joints and relaxation techniques). One of them laughs. She finds this treatment approach a bit outdated!

An IDF tank is parked along the road. From time to time we hear gunfire in the distance, but this is relatively calm and peaceful, compared to what happens every afternoon from 3 or 4 p.m. and during the night. Is this harassment, "psychological warfare?" Yes, no question about it.

On our last visit of the day, we stop at another

family's home. This is the tallest house and shows evidence of repeated gunfire (many visible large bullet holes). The children are at school. We will come back after 1:30 p.m. and see them on another day. I realize that I haven't written down the sentence that people, especially the elderly, repeat often: "They are going to kill us, we are all going to die."

Our patients also voice the hope that we will bear witness to what we see and hear. Clearly, the Palestinians feel abandoned and forgotten. "Do people where you live really know what we're going through?"

THURSDAY, NOVEMBER 30

NEAR THE SETTLEMENTS

Fortress towns

Every day we see the situation in the districts near the settlements deteriorate. Increasing numbers of families are affected; houses are destroyed, occupied and riddled with gunfire. Families are living in tents or with relatives without any hope of reclaiming their requisitioned property; farm animals are butchered savagely. Fear has become part of daily life in these isolated districts and villages. Some remain out of reach of any humanitarian aid because no one can guarantee acceptable levels of security (Mawassi, Swidi).

Our regular visits with these families allow us to observe how the conflict has escalated. The Palestinians live in fear of Israeli Army reprisals. Israeli restrictions hamper freedom of movement within the Gaza Strip. The only authorized crossing point between north and south is the country road which passes by the Kissufim junction. The regular four-lane road, linking the southern and northern towns, has been cut off above Deir el-Balah because it runs for some distance alongside the Kfar Darom settlement.

The settlements have become fortified towns where the Israeli Army sanctions every man's right to carry a weapon. The IDF soldiers protecting the settlements can take advantage of the settlers' logistical and moral support. There is no possible comparison with the Palestinian civilian population, which for the most part avoids having anything to do with Palestinian military operations for fear of reprisals.

Patients hope that we talk about them: "Do the people where you live really know what we're going through?"

MONDAY, DECEMBER 4

KHAN YUNIS

I thought my heart would stop

The bulldozers have continued their work at the Kissufim junction, destroying whatever vegetation remains. Two tanks block the road, stopping traffic. Warning shots convinced those trying to move forward to turn back.

At Khan Yunis, the situation seems to be stabilized. Despite the lull, residents are still very much in a state of shock. After fasting is over and they have eaten (at home so as not to be an extra burden on their host family), everyone leaves to take refuge in the center of town. Bullet marks and holes scar the houses. Parents describe disturbing scenes of panic. When the firing begins, they must flee their houses. The children cry and scream. Everyone rushes into the small alleyways to find shelter elsewhere. Some parents appear very demoralized and resigned. They no longer have hope. Others announce they cannot fight because of the children. All suffer from feelings of insecurity.

We understand that the Israeli army apparently wants to move some of these families out of their homes so that the army can occupy their houses. A woman followed by her children called out to me. She showed us one of the children, saying he had problems and needed help. I went with her and spoke with the child. He is 10 years old and explained that after being at home when his house was bombed and shot, he has had panic attacks every day at the same time, re-experiencing the terror he'd felt at that moment. He cries, trembles and screams to be taken to his grandfather's house.

His father, who joins us later, confirms that his son is unable to get over this fear. Not knowing what to do, he gives the boy tranquilizers, keeps him at home and forces him to eat. I advise him to be patient and to respect his son's fear. The boy must decide for himself if he wants to stay in the house. I promised the child that I would come back to see him.

We also met the director and teachers from the Netzarim elementary school. They need someone to listen to and advise them. While we were talking, a burst of gunfire broke out. I thought my heart would stop on the spot. The children, as well as the school personnel, live with this every day. I don't know how they manage. But judging from the teachers' reactions, I don't believe they have gotten used to it!

WEDNESDAY, DECEMBER 6

RAFAH

Fear in the family

The street is reminiscent of Beirut or Kabul. Families cling to the ruins, living in terror. Where are they to go? So they stay. With fear in the pit of their stomachs. Praying that a bulldozer won't come to tear down their house. We cross into the Israeli-controlled zone to visit a shantytown of Bedouin refugees who haven't seen a doctor for months. We are still in Palestine Autonomous Territory, but given the camp's proximity to Israeli settlements, it is cut off from the rest of the world. The settlements resemble islands of prosperity, entrenched behind electric gates or huge concrete walls, with observation towers and surveillance cameras. They are protected by tanks and fixed airships providing ground surveillance and, at sea, by military patrol boats. The concrete walls are made of movable blocks.

In the Gaza Strip, some 5,000 Israeli settlers, protected by thousands of soldiers, control 40 percent of a territory with a total population of one million. We are shown the Kfar Darom settlement, home to a couple with two children, around twenty soldiers and some dogs. Occasionally the dogs get out and bite Palestinian children. A population living in terror and misery surrounds this armed camp. The Palestinians serve as cheap manual labor on Israeli farms. They are prohibited from traveling on the roads used by the Israelis. The zone's main roadway is made up of two parallel roads, so each community has its own buses, taxis and schools. The two communities are totally separated.

We went into the Rafah district called al-Brasil. There we observed that two Palestinian families were at risk of being fired on by the IDF. Situated next to the border, this district is caught in the crossfire between two positions: one, along the border with tank support; the other, level with Salah'edine, where an Israeli army watchtower is located. The apartment of the family we visited has been pierced through with gunfire coming from both directions simultaneously. Only the kitchen is unscathed.

When I meet this family, none of them is able to admit feeling fear. They introduce the youngest child, explaining that he has become fearful and that no one understands him any longer. Only after we talk further does each person acknowledge fear, even the older brother who says that he no longer had feeling in his legs during

2001

January 4

Negotiations resume in Washington. Clinton, soon to leave office, fails in his efforts.

January 8

More than 100,000 Israelis demonstrate against the division of Jerusalem.

January 21-27

The Taba peace talks in Egypt end without an accord.

February 6

Likud wins 62.5 percent of the votes and Ariel Sharon becomes prime minister.

the shooting. The little one narrowly escaped death when a bullet passed between him and his brother. Ever since, he has been unable to tolerate the noise of tanks and wants to take shelter at his uncle's to sleep. He says he doesn't feel safe there either but at least he can sleep. Three of the four brothers speak of their fear. The fourth claims not to be afraid. I explain to the family that everyone has his own threshold of resistance and each person's fear must be respected. I believe that for the first time, the members of this family have been able to articulate, in front of others, feelings that until now they could not admit to having.

It seems to me that each member of them is trying to conquer his or her fear and fight the urge to flee, which would be seen as proof of cowardice as the family's duty is to protect the house. One suppresses all emotion, another wants to become a soldier, a third wants to leave for the U.S. All are obliged to remain in this house, transferring their anxiety, in a way, to the youngest, whose own fear – which none of the others can admit to – then becomes incomprehensible. This is the first time that I have observed this family phenomenon so clearly.

Another phenomenon seems to be present here. Despite the lull, it appears that many people find it difficult to relax and resume a normal life. Perhaps this is the precursor to full-fledged trauma. If that is the case, we can expect to observe the symptoms soon. I will wait to gather more data on this subject before venturing an opinion. But for now, we can say that in spite of the rapidly-changing situation, the mood here remains gloomy. Fear remains uppermost in people's minds and still affects their physical state.

**MSF psycho-medical
team in Hebron**

THURSDAY, FEBRUARY 15, 2001

Two inches from death

In the district between Haret Al-Sheikh, home to Palestinians, and Daboia, home to settlers, we visited a little boy who's almost 3. Since I arrived in January, I have seen him on a regular

Each member of the family is trying to conquer his or her fear and fight the urge to flee. Their duty is to protect the house.

basis for post-traumatic stress problems. They triggered a trauma that occurred a year ago when he had a serious fall from a balcony at the time his brother was born. Last week I waited to meet him but he never came. When I arrive this time, I find his mother lying down. Her arm is in a cast, she has a wound on her leg and she is clearly very shaken. She explained that she had gone to the roof to check the water supplies. Frightened by the shooting, she fell two stories into the interior courtyard. A tree branch broke her fall and saved her life.

Four months pregnant, she is especially frightened for the baby she's carrying. She went to the hospital and received an ultrasound and medical treatment which reassured her, but she is still in a state of shock. Her skin is yellow and her eyes have deep circles. She cries every night. She was so frightened and the fall seemed so long. The whole family talks about their fear. They believe she was deliberately targeted because at the moment she fell, everything was calm. No one thought there was any risk. The mother-in-law takes me to the roof to show me the bullet marks. She, too, is very upset. Two years ago, she was shot in the leg. The scar continues to give her pain.

When we return to the mother's bedside, her husband speaks to us sadly of his condition. He has been in the room all along but remained silent and withdrawn. He spent five years in prison and has never recovered. Solitary confinement was the worst. He is overcome for a moment as he recalls this memory. The youngest child wakes up and joins his brother on a rocking horse. Both smile for the picture they insist we take. The father smiles, too, and says he would like to talk about this past "that destroyed me."

A few houses away, I meet Leila, a 14 year-old girl, at her grandmother's house. I have been following the older woman to support her through the mourning for her husband, who died six months ago. During my last visit, only after the woman described her sorrow and loneliness and spoke of the couple's last wonderful moments together did she show me the recent bullet holes in a room facing a building where settlers live, as well as in the doorframe of the bedroom, the door through which she was walking at that moment. She had been two inches from death, but she would have passed over the experience if I hadn't been there to focus the conversation on it for a moment. She says she feels better today.

She'd like me to talk with her granddaughter, who was wounded on December 31. Leila explains that there were many clashes that day. Her brothers had told her to go to her grandmother's for safety. When things calmed down



In a valley near Hebron, this house, which Elias built in anticipation of his marriage, was bombed during the night.

The grandmother had a close brush with death, but she would have passed over the experience if I hadn't been there to focus the conversation on it for a moment.

in the district, she wanted to get her chickens from the roof because she was afraid they would be killed. As she came downstairs, carrying the chickens in a cardboard box, a bullet struck her in the abdomen. She can still hear the sound. "I didn't lose consciousness," she says. "I came downstairs quickly, screaming."

Today the event is engraved in her memory. "Now, before I go to sleep I remember everything that happened that day. My brother's friend, Gassan, died. He was 12. He was hit when missiles exploded as he was coming home from prayer. At night, I cry for him and I always think, 'What if I were dead?'

What frightens me is that a piece of the bullet is still in my stomach. They can't get it out. What if I can't have children?" She would've been pleased to be a "martyr," but perhaps she'll manage to become a doctor. Her teachers are helping her to catch up with her studies.

SUNDAY, FEBRUARY 25

"When a martyr dies, I cry"

On this home visit in the Jabel Jawhar district, near the Qiryat Arb'a settlement, we meet a 10 year-old child who complains that she can't breathe and has chest pains. The mother quickly tells us of the preceding days' problems. There has been a lot of gunfire close by and children have been throwing stones. Her daughter was unable to get home from school and had to take shelter with her cousins at a neighbor's house. The little sister, 6, who was playing a game of building houses in the courtyard, inhaled teargas when a bomb fell close by. She tried to get back to the house but fainted and fell. The 10 year-old girl made a drawing showing a house, a "martyr" prone on the threshold, the barrel of a gun pointed at his chest and a soldier holding the weapon in his outstretched arm. "When a martyr dies, I cry and my chest hurts." The mother listens to her daughter and then tells us about her cousin's death a few weeks ago.

THURSDAY, MARCH 1

Demanding, aggressive, violent

At our doctor's request, I make my first visit to a 15 year-old boy. In May 2000, he had been shot twice while climbing up to the roof to see what was happening that day. A strike was underway and there had been some kind of activity a few streets away. He was climbing the ladder and was shot in the arm. He didn't feel the injury and as he continued climbing, was shot in the stomach. Severely wounded, he spent six months in the hospital close to death. Having received considerable attention and support early on from his family, journalists and local organizations, he now finds himself alone and facing major physical disabilities which seriously limit his daily life. (He suffered kidney, stomach and intestinal injuries.) People describe him as demanding, aggressive and violent. His mother and brothers no longer recognize the boy, who was calm and gentle before the accident. They find it difficult to cope with him and don't understand his psychological distress even though they had given him so much support. He says he feels nothing – just like when he was hit first in the arm – and that his family mistreats him, especially his older brother who, when he was first hospitalized, had spent every day and night at his bedside.

The same day, I make another first visit, this one to the home of a 9 year-old child who is unable to sleep, cries out for his mother at night and has become agitated. His mother doesn't know how to calm him. She welcomes us with a thin smile on her drawn, sad face. She immediately describes the nightmare she has been living for the last five months. Her house is occupied and Israeli soldiers are stationed on her roof. When we arrived, we noticed weapons standing between sandbags.

When there is shooting, everything shakes and lizards scurry along the walls. The roof is considered a military zone and access is prohibited. The family is only permitted to go there every 10 days to perform essential tasks. Two shifts of soldiers take turns day and night, coming and going by the only door to the house. When it rains, the soldiers set up in the hallway and the inhabitants must leave their bedroom doors open at night.

"In the beginning, we were terrorized and we couldn't sleep," the mother says. "Then we arranged things so that one of us stayed awake

while the others slept. The soldiers leave their mess behind, they urinate in front of our windows; some are more disgusting than others and even expose themselves in front of our daughter, harassing and upsetting her."

Her son, who was living there with his wife, chose to leave because the wife couldn't take it any longer. She no longer goes out. The son was once locked out for four hours because the soldiers had bolted the door. Her husband, now retired, does all the shopping even during curfew. The woman describes her fatigue, headaches and exhaustion. Why not leave? That would mean losing the house and besides, where would they go? Her relatives no longer come to visit. The soldiers keep watch on all visitors.

Only her neighbor dares to visit occasionally. She has come today and tells us that her water tanks and solar panels have been broken several times. At the beginning, she fixed them but why bother? It just keeps happening. Hopeless and demoralized, she says, "It was never like this before, even during the other Intifada. They fire heavily now, whenever they want, just like that, to play games, for nothing. We don't know what's going to happen." And of course her complaints go unanswered.

The mother can't take the presence of soldiers on the roof any longer. "They leave their filth and urinate in front of the windows."

MONDAY, MARCH 12

"I want to leave everything, school, Hebron"

I had a hard time finding this family, which had left the house where they used to live near the checkpoint next to the Abraham mosque. Their son's severe stress reaction after experiencing shooting convinced them to move.

I came to see him today and met the whole family. They had had to huddle in a corner to protect themselves. The last time, this child remained fixed at the same spot, "all yellow, and he trembled, trembled, he couldn't stop." He hasn't wanted to go out since then. His older brother, 16, has quit school. "It's pointless to go when we miss so many days." He prefers to help his father and works as a mechanic. The older daughter arrives home from school. This is her first day back after 10 days under curfew. She immedi-



February 14

Eight Israelis are killed by a Palestinian who drives his bus into a group of civilians and soldiers near Tel Aviv.

Israel imposes a total blockade of the territories.

March 4

A suicide bomb attack kills four and wounds 45 in Netanya, a beach resort frequented by Jewish tourists.

March 11

Ramallah is completely sealed off.

March 13

Israeli bulldozers destroy houses near Hebron.

tely tells her mother that she arrived at school late because of a half-hour delay at the checkpoint. Yes, she's stopped most of the time, often by different soldiers. They want to see what she's carrying and they drag things out. They're often insulting and crude. She doesn't want to do her schoolwork anymore. She had wanted to become a doctor but she's discouraged now. "I just want to leave everything – school, Hebron..." She feels oppressed and her hair is falling out. The youngest boy has not recovered from the shock he experienced when seven of his friends were burned by a sound bomb, launched by soldiers into the schoolyard. He hardly talks about it, his eyes distant, staring off towards the Abousnina hill. Through the window of the new house, he saw the bombs falling there, red traces in the night sky, as if he were watching a television screen.

TUESDAY, MARCH 13

A dove and a sun that weeps

A mother has come for a consultation with her 9 year-old daughter. They are from Jabal Jawhar, a more distant district where I visited the family at home several times. The mother is out of breath, moves heavily and has difficulty breathing. In the taxi, she suddenly smelled teargas but the driver told her nothing was wrong. A few weeks ago, a teargas bomb fell in her courtyard. She rushed to find her children, who are sent home from school when there are clashes. But she fainted and fell, had to be hospitalized and remained in intensive care. Her current fragile state has triggered long-ago traumas, including the death of a baby eight years ago – for which her in-laws blamed her – and her father's death, when she was 6. Her mother was accused and then imprisoned. Meanwhile, the child is drawing and describing her fear when she saw her mother faint. She thought the woman was dead. She is afraid of

teargas, too, of children who throw stones and soldiers who shoot. She fell when she was running to take shelter in a neighbor's house. She was so frightened she couldn't manage to reach the house. She was with a little friend, her neighbor. She is most frightened of being shot, stoned, being ill, dying. Luckily, she can go into any of the neighbors' houses. She has difficulty sleeping, fears getting up at night to go to the bathroom and is afraid on the road on the way to school. "But I like going to school," she says. She made some drawings at school. Her mother wrote a play about the Intifada that the children performed but she can't show me anything today because the school is closed and soldiers have occupied it. She drew a house being hit by rockets, a "martyr" and the soldier who has just killed him holding a gun, a dove and a sun that weeps. In Arabic, she writes that Palestine has lost its rights for all eternity.

WEDNESDAY, MARCH 21

Attacked by the settlers

This is my first visit following the request of a father who called out to me in the street to come see his children. I discover a little family in great distress; fragile and on the verge of collapse. The mother has just recovered from giving birth a month ago. I can sense the father's acute tension. He shows me the shattered glass in the front door, the kitchen window that he's just sealed up, the solar panels he's already repaired and the low wall he's rebuilt several times.

Every week over the last few months this house, located along the route that takes the settlers from their district (Daboia, just across the way) to synagogue, has been the object of stone-throwing attacks. Only the son remains in the family home. His parents, as well as most of the neighbors, preferred to leave. Only one neighbor is still here; an elderly woman, tired but still firm. She's lived there all her life. The father wasn't ready to leave the house where he was born either, but he has stomach problems, can't sleep and is extremely tired and overwhelmed. He shows us the legal complaint he's filed but the procedures take a long time and he can't spend his days there. He manages to work a bit in his shoe store and leaves now to return there. After he's gone, his wife explains that the children are always afraid. They don't dare go outside anymore. She can't play with them on the patio, as her husband recommends. She's afraid to talk to him about it.

The prisoners of the Al Mawassi community

The 3,000 Palestinians living in this Gaza Strip enclave cannot travel freely. Israeli soldiers even prevent them from seeking medical care.

Al Mawassi, also known as Gush Katif, is a community in the southwestern Gaza Strip. Surrounded by settlers, some 3,000 Palestinians live on this piece of annexed land, completely under Israeli control. They could benefit from social and health care services but such programs are few, so they have to leave the enclave to travel to Palestinian-controlled zones. To get out, they are required to show pieces of identification that are distributed – at random – by the Israeli army. Few people have the official documents that allow them to move about. The others are stopped at roadblocks, sometimes for days. Access to health care is complicated if not impossible. For example, a pregnant woman who needed prenatal care was unable to wait for long periods at the checkpoint and finally turned back. The day we went to the Mawassi roadblock, nearly 50 angry people had been waiting for three days for permission to enter. Most had shown their identification cards to the soldiers, posted some 200 meters (220 yards) away, but had been ignored. One family that we treated told us that the soldiers had announced, without warning,

that people would have to produce different identification cards.

The same family told us of another incident that had

phered bit him in the leg. The child's family was in a rush to leave Al Mawassi to get him to the hospital. The soldiers at the roadblock would not let them pass.

A little boy had been seriously injured when a settler's German shepherd bit him in the leg.

The family spent the whole night

taken place in the enclave several days ago. A little boy had been seriously injured when a settler's German she-

pherd bit him in the leg. The child's family was in a rush to leave Al Mawassi to get him to the hospital. The soldiers at the roadblock would not let them pass. The family spent the whole night waiting, in vain, for the soldiers to show some flexibility. The little boy died the next morning.



Like her, the children jump at the least noise. Mostly she feels very alone. No one comes to the house anymore. She has only her sisters for support but can communicate with them only by telephone. How long can they go on like this?

THURSDAY, MARCH 22

"Tar, tar, tar"

We conduct a visit in the Abu Sneina district, located on a hillside facing the Qiryat Arb'a settlement, which was rocked several days ago by violent bombing and strafing. Bullets and missiles woke the family in the middle of the night, breaking windows, tearing through walls, leaving holes in furniture and in clothes in the closets. The mother described the horrible night during which they were all pinned to the bedroom floor, terrorized and waiting to die. A 12 year-old was wounded in the head and lost a lot of blood. The child himself removed the metal fragment from the wound. They couldn't call an ambulance. Crying, her legs shaking, the mother had to give first aid. The other children sobbed next to her, the 2 and 5 year-old clinging tightly to her. They're both here today. They've never drawn but respond to my offer when I give them crayons and show them the house I've sketched on a piece of paper. The 2 year-old girl fills in with heavy marks, saying over and over, "tar, tar, tar," (the sound of gunfire) and the little boy keeps coloring a red spot, while his mother talks about the wound that terrified them.

The same day, we made our first visit to a family who learned of our work from a neighbor. The mother is waiting for me with her 12 year-old son. He doesn't want to go to school anymore. Wadia is very welcoming and explains that the soldiers stop him constantly. He describes his upsetting experience. Three soldiers stopped him, took a pencil from his bag and pointing it at his face, pretended they were going to put out his eye. He was very frightened and broke free. The soldiers called him back and ordered him to get his pencil. Ever since, he dreams that soldiers are following him and he can't get away. His mother worries that he's not the same anymore. He has become aggressive and disobedient. Until then everyone always said he was a pleasant, kind child. When he grows up he wants to be a war pilot to fight the soldiers. His house, along with several others, is located in an area of greenery with gardens and olive trees, surrounded by two settlements, a military camp and Israeli police station. The ruins of a leveled house mark the entrance to the area.

SATURDAY, MARCH 24

A family with problems

Gassan, a 10 year-old boy, has come alone to find us in the street to ask us to "come see his family, which has problems." Their many problems are indeed evident as soon as we enter. The older brother is disabled, the father is ill and the mother is depressed. She wants her son to return to school so that he will continue to learn but also to distance him from the dangers on the street. But Gassan doesn't want to learn. "He's afraid of the soldiers," his older brothers say.

A poor student from the time he started school, Gassan is proud to show us the large platter he puts on his head, filled with sweets he sells after the muezzin's first call. That's how he earns money to give to his mother. But he smokes "like the big guys" and throws stones at soldiers' cars. When he came for a consultation, Gassan spoke only about his cousin who was arrested by soldiers at the house. He was struck and wounded. Gassan saw the blood and describes the scene several times. His cousin is now in a prison camp. It's true he's afraid of the soldiers but he doesn't want to go back to school.

The same day, in the street, two little girls, 8 and 10, stop us. They go to school and want to tell us what is happening now: the school is closed, soldiers have come, there's teargas. We talk about school and what they will do when they grow up. "I'll be killed," one of them says.

WEDNESDAY, MARCH 28

Sweeps

The old town is inaccessible. We call the families most at risk to learn their news. Considerable distress. During the night, the settlers conducted "sweeps." Shops and cars were burned and there was shooting, bullets and rockets. The families stayed awake, frightened by what might happen to them.

THURSDAY, MARCH 29

"God's Wisdom"

This is our second home visit to two girls, 9 and 14, as well as a youth of 18 who is under psychiatric care. The younger of the two children has large patches of alopecia on her

March 17

For the first time since 1967, three mortar shells are fired from the Gaza Strip onto Israeli territory at the Nahal Oz kibbutz.

March 26

Shalevet Pass, the infant daughter of an Israeli settler family, is killed by a Palestinian sniper in Hebron.

March 29

Clashes in Gaza kill two Palestinian teenagers.

March 30

Six of the Palestinian demonstrators commemorating "Palestine Land Day" are killed.

scalp and the older has recently become enuretic. The third has not yet agreed to meet us. The adjoining building is occupied by settlers and guarded by an impressive military force. The apartment where we meet is entirely closed off. The soldiers have ordered that all windows be blocked. Only one room gets daylight through grated openings in the ceiling. The mother summarizes the situation in a single word, the first she speaks: torture. They don't dare leave anymore, turn the pages of the newspaper or even breathe for fear of calling attention to their presence. Their only escape is the television – when the electricity isn't cut, which it often is.

The daughters describe the recent bombing at school. They lay pinned to the floor for 1 hours, holding hands. They thought the soldiers were going to invade the school. They were afraid that they would never see their mother again and were going to die. The older one tells us of being harassed as she passes through the Jewish neighborhood on her way to school (when not under curfew). She mentions the day when a bag of sand “fell” from a rooftop as she passed below and the soldier who told her, “Go home or tomorrow you’ll be on the front page of the newspaper” – meaning she would be killed. She talks about the settlers who throw stones.

The little sister wants to study and stay at the top of her class. She would like to become a doctor. She's thinking of leaving school because it's hard to do her work, “although it's my duty to stay and protect the school.” She reads us a poem she wrote in which she asks why there are martyrs, why houses burn and why women cry over wounded children. It ends with the words, “It is written, it is God's wisdom, but one day we will win.”

Same day in the old town. We have been coming to see this family regularly since the end of January. Their problems are multiple: economic, family and educational. The neighborhood is often the scene of gunfire. The wife describes the recent night of horror and terror. One of the children began to scream when, out the window, he saw a friend's house burn. Flames, smoke, screams. She wanted to leave the house to strangle and kill the settlers.

“It's not fair. It's because I hold back my anger that I feel I'm suffocating.” She has no one to talk to, so she cries for comfort. The father arrives. He wasn't there when it happened, but he saw the fire. He screamed; screamed out of fear, powerlessness and rage. Then he tells his own story. He was a baby during the “first invasion” (the Six-

The old city is inaccessible. We call the families who are exposed to danger. There were fires, shooting and rockets during the night... The next morning, we resume our visits and consultations.

Day War). Seven family members disappeared then. He doesn't know whether they were killed or imprisoned. Since he was little, he's understood that you've got to “watch out for the Jews. They talk peace but you can't trust them.” He is tense, and he hits and argues with family members. Patience and religion are his only consolation. He wouldn't have liked to build airplanes but works as an auto mechanic. He's had lots of jobs. “If we had a Palestinian state, we would do what you're doing, helping people,” he says. “When I was young, my father made me leave school to earn money for my brothers.”

“Just like me,” says his son, Aïd, 11. Three months ago the boy left school to sell snacks and earn a little money. A few days later, Aïd comes alone to meet us. He's very chatty and carries a lovely coffeepot. He would like to go back to school. He hopes that I will convince his father to let him return and has come to offer us coffee. This was to be the source of his day's earnings but we are not even allowed to think of paying. This is a gift.

MSF psycho-medical team in Gaza

WEDNESDAY, JANUARY 3, 2001

DUGIT

Bulldozer, donkey and potatoes

Today we went to the northern Gaza Strip, near the Dugit settlement. Along the way, we encountered a Palestinian military roadblock and were not allowed to pass because a man was killed yesterday. We left the car and continued on foot. A road leads to a house, but we hesitate about approaching it. It is about 20 km from the fencing surrounding the settlement. A small, reinforced outpost installed to protect the Israeli buildings stands about 50 meters away. The resident warns us that it is very dangerous to be there because the Israeli soldiers recognize everyone and quickly identify strangers. We set up outside, across from the station. It's close enough that we can hear the radios. While we are talking, I see a Jeep go by. A soldier



Zina had the misfortune to live near the Netzarim settlement. Her house, along with those of her neighbors, was torn down.

March 31

Some 100 soldiers from Israeli army special units capture six Palestinian militants during the night, north of Ramallah. Five of them belong to Yasser Arafat's personal bodyguards.

gets out and stares at us through binoculars. He watches for a good minute, then turns away, obviously having concluded that we pose no threat. The residents of the house know they are not at risk as long as they don't go near the settlement or protest when the bulldozer tears up their land. Since a new fence was built, their acreage has shrunk to almost nothing.

They point to a spot where we can go to watch the bulldozer at work. We can hear it moving behind the trees. As we walk, we meet several farmers, including one who, enraged, tells us they are tearing down his greenhouses. Everyone knows they are going to lose years of work. We continue walking and meet a woman who says the bulldozer is just passing by her house. Her father is in the hospital and she is trying to keep him from learning what is happening. She holds a baby in her arms and her tears fall on him. She grew up here, worked this land and knows every one of the trees that she "nursed like a baby." We continue to walk along the tree-lined road. We meet a group of farmers waiting for the bulldozers to finish their job. They usually work here but have been chased away. They explain that they were threatened and had to abandon their greenhouses. As they watch the bulldozer in the distance, the machine goes back and forth, back and forth.

Next we meet a man and woman, each leading a donkey hitched to a wagon filled with crates of potatoes. The woman has tears in her eyes. Crying out, she tells us that everything is going to disappear. The Israelis have given them permission only to gather the vegetables lying on the ground. At first, the man says nothing but then begins to explain that they received no warning. Their wells and pumps have been destroyed. His anger rises and gives way to despair and tears. He lashes the animal and walks on.

We walk further on to the last house. The bulldozer is there, about 100 meters away. It is huge and armor-plated. It moves forward and back, uprooting trees in its path. It sees us, stops for a few moments and then resumes its ruinous



work. There are no soldiers around so I take a picture, but I'm frightened. Everyone is frightened. With a terrifying boom, an airplane breaks the sound barrier. A little further away, we see cars driving by. The IDF is building a road in the area around the settlement. New electric fences appear as the development expands.

All those who've worked this land for decades are watching their years of work wiped out. They stand by powerless as their source of sustenance is destroyed. A father explains that his children will cry when he returns home tonight and tells his them there is nothing left. He brings us some strawberries and tells us to enjoy them because tomorrow there may be none. We leave with heavy hearts. When we come back, the landscape will be changed.

The bulldozer is there, about 100 meters (110 yards) away. It is huge and fully armored. It moves forward and back as it tears out the trees.

SATURDAY, JANUARY 6

DUGIT

"I feel like tar"

This morning we tried to get through the roadblock at the Netzarim junction. The Israeli soldiers open it precisely from 9:30 to 11 a.m. The first MSF car was able to pass and is now in Khan Yunis. When our turn came we were stopped so we turned around and went to work in the northern Gaza Strip. I returned to the place we visited on Wednesday where I took the picture of the bulldozer. The house is gone and we met the family that lived there. They describe their distress at what has happened to them. They understand what the loss of land and home can mean for their emotional health. It's as if they've lost a part of themselves. They grew up here and their father cared for each tree. Now nothing remains but torn-up land, strewn with dead rabbits run over by the machines.

I ask the owner of the house, a 75 year-old man who has just left the hospital, how he feels. "Like tar," he says. His son is giving him Valium to ease the shock. We walk across a sand dune where their house stood only days ago. Several people are digging in the sand, looking for financial records and, in particular, the 5,000 Jordanian dinars (7,500 euros) the father had hidden there. He seems to be moving in a fog, walking slowly and carefully. I advise the son to reduce the dose

of Valium and to stay with his father. He is very worried about the old man who worked here for 40 years and now has nothing but the clothes on his back. Having worked his whole life so that he could be independent, it's even harder for a man of his age to have to rely on his children.

All they have left is to come back to the site of their former home. They are in mourning, trying to accept "the way things are now." The objects uncovered here, connected to some moment of their lives, are like memories rising to the surface. A smashed wood-burning oven reminds them of the barbecues they used to have during the summer.

I am very worried about the people living near the Netzarim settlement. Most of them haven't left their houses in four days. I don't know what kind of shape they'll be in when we find them. Their life is hell right now. The tanks prevent people from moving around. Their living conditions are extremely precarious but they are completely cut-off and inaccessible. A visiting medical team would pose no security problem but there's only the tank here, no military post and so no one to talk to.

I'm very concerned about a patient whose house is located at the junction but I'm afraid to go there. There's no movement. I don't even know if the family is still there or if they've left, abandoning this young man with serious behavior disorders. He must be in a terrible state by now.

FRIDAY, JANUARY 12

DEIR EL-BALAH

Two Intifadas, two traumas

In the area near the road leading to Gush Katif, a young man asks to see me. He has had a problem ever since the Israeli soldiers took him away. We sit down. He is very nervous. His speech is rapid and he can't sit still. I suspect his problem may predate that incident. He explains that he is Bedouin and has lived in the area for a long time. His family owns land here. Although he wanted to see me about a recent experience, I begin by asking him about his past. He describes how during the first Intifada, he had gone to throw stones at the soldiers. He'd been considered the leader of his little group of friends. When he came home one day, he found what looked like a little bomb. Curious, the other children sent him to pick it up. He pulled the pin and it exploded. Luckily, it

was just a noise bomb but his hand was bloody and he thought he'd lost his thumb. He could see the bone, which upset him deeply. He fainted in the ambulance on the way to the hospital. The finger was sutured, he didn't lose his thumb, and his hand is normal today. Even so, he had been deeply frightened and thought he was going to die. He says he had no after-effects and resumed a normal life. I asked if he had nightmares, but he said no.

Next we talked about the recent event. His family owns a small house on their field near the bypass road. He used to go there in the morning and meet his brother. One day, he found the house locked. He called out to his brother who did not answer, so he decided to climb over the wall. When he got into the house, a man stronger than he pinned him to the floor and tied his hands behind his back. He was surprised – he'd thought they were Palestinian soldiers but they turned out to be Israeli military. He saw his brother sitting there, tied up. He was afraid they were going to kill him. After a few moments, he was taken in a Jeep with a teenager and was struck several times. When they got to the Israeli Army station, he was interrogated and an intelligence officer checked his background. Knowing there was no file on him, he was reassured and could breathe a bit easier. Then the soldiers took him back to the house and released both him and the teenager. He hasn't been the same since that day. His friends tell him he's changed and that he talks too fast. He offers to take us to the spot. We agree because I think it is helpful to go back the place where no one has dared go for a long time. He says he wouldn't be able to make this visit without us but it turns out that we can't even get close to the house. Everything nearby has been torn down and we hear firing. There is a watchtower in the distance. We make a U-turn. The young man seems calmer.

I advise him to reduce his dose of chlorpromazine. He says it helps him calm down. Still, he is unable to concentrate and it's difficult to study for his high school graduation examinations. I explain what's happening to him and that

symptoms that develop after a trauma. He seems to understand that talking can provide a release after a psychological shock.

This 20 year-old young man has experienced severe shock. In my opinion, he's suffered two traumas although he is unaware of the impact the first one had on him.

FRIDAY, JANUARY 19

EL MOUNTAR

Silent angel

I am surprised to see a little blond girl. The men in the family explain that their grandfather, whose family was blond, married a dark-skinned Palestinian woman. The family name is Malaka, which means angel. The district, near El Mountar, has the same name. Unfortunately, this sweet story doesn't describe what is happening to the people who live here in several houses crowded together near the bypass road linking Netzarim and Karni. The bulldozer did its demolition work and nothing remains between the road and the houses. The Israeli army is occupying a house on the other side of the bypass. Everyone in the family must ask the soldiers for permission to go out. They live in extreme isolation.

One girl tells me that she lost her voice for two days after a tank attack. That night, a power failure had plunged the house into darkness. Everyone was in bed when the tank fired on them. The girl was afraid of losing her father. His bedroom had been hit by gunfire. Panicked, she managed to find her way to his room and help him get out. The whole family went downstairs to wait for daybreak. At that moment she realized she could no longer speak. She says she felt like she didn't know how to use her vocal cords any longer. Only when she and her father went to see his room, riddled with gunshot holes, and he told her she had saved his life that her voice began to come back, little by little, first sounds and then words. I asked her what her first words were. "Ahmdo lelah," she says, "Thanks be to God."

The grandmother, an elderly woman, fainted when the night before, the tank rolled up to the houses. She tells me she lived through the two Intifadas and had seen all the fields flattened and Israeli soldiers move in. She'd never been afraid. She would always say, "It's not important, we can replant." But that night, at the window of the other house, she saw the tanks came close to the house where her children and grandchildren were sleeping. She

April 3

The Jewish settlement of Atsmona (Gaza) is hit by mortar fire. A mother and child are struck. Israel sends in helicopters and armored tanks. More than 60 Palestinians are wounded.

April 14

Hezbollah attacks an Israeli position in the southern Lebanon hamlets of Shebaa. An Israeli soldier is killed.





Tufah, April 2002. Israeli army builds a wall and cuts off Al Mawassi and Khan Yunis.

screamed, felt something leave her body and fainted. She speaks calmly, fatigue and tension visible on her face and body. She hasn't slept, has eaten nothing and appears very weak. After our conversation, I advise her to lie down for a bit and eat something, without forcing herself.

We meet the family's children, some of whom are building tanks out of clay. Their models are surprisingly well-made and they've developed a technique that allows the tank's turret to pivot. The models are very like the real thing and show that the children have mastered construction techniques. The children are proud to show them to us. Christine, our doctor, explained to the skeptical parents that such games allow children to gain control over overwhelming situations.

This family has been deeply affected by the events. Their isolation further increases their anxiety and sense of insecurity. The soldiers have already come into the house. They are all afraid of the occupation and the destruction of houses. It is unusual to see so many traumas within a single family.

The children make tanks out of clay. They look like the real thing and are built to allow the tanks' turrets to pivot.

THURSDAY, FEBRUARY 8

TUFAH

An eye for the cause

We had met Ibrahim for the first time at the Khan Yunis hospital, where we learned that he'd been struck by Israeli soldiers. He was confined to his hospital bed, suffering from multiple contusions. He had a hard time sitting up in bed to greet us. Ibrahim has only one eye. He lost the other during the first Intifada. He told us about his capture near the Tufah checkpoint. Six soldiers attacked him when he was brought into the settlement. Later, he was released and taken to the hospital. Ibrahim had told us that he wasn't afraid and that as soon as he felt better he would return to the checkpoint.

He's not talking like that today. He is experiencing post-traumatic stress and does nothing all day long. He remains in bed, smoking and thinking about how he will get revenge. He still suffers from the blows he received but also has symptoms linked to the psychological trauma. He feels weak and has headaches. He says

April 17

For the first time since its 1994 retreat, the Israeli army reoccupies territories in the northern Gaza Strip. Armored tanks that had taken up positions in Beit Hanoun withdraw under US pressure.

April 18

In spite of everything, Israeli incursions into Gaza continue.

April 21

An Israeli-Palestinian meeting on security takes place at the Erez checkpoint. From the Israeli side, cooperation on security matters appears to be ongoing.

he will never forget the people who struck him. He explains that because of his one eye, he was rejected when he applied to become a police officer. As a result, he had to work in the settlements and, thus, for the Israelis. He believes his friends consider him a traitor. His sense of injustice is also fanned by a relationship that ended badly.

Ibrahim can no longer bear to listen to television reports about people who've been wounded or beaten. Those images are constantly in his mind. He is nervous and becomes irritated easily. At night, he argues with his friends and feels excluded from their group. He's hurt when people stare at him but today he points to his lost eye as proof of his commitment to "the cause." At the end of our conversation, he seems a little calmer and asks if we are coming back. That reassures him a bit. A few days ago, he went back to the checkpoint with some journalists. He became agitated and wanted to fight the soldiers. He hasn't gone back, but I'm afraid he will. He has no hopes for the future and his friends only remind him of his problems.

That same day we met Mahmoud, 11, who lives in Tufah. He was struck in the head by a rubber bullet. Since the incident, his mother tells us he has become aggressive. She's afraid something will happen to him. He lost a bit of his skull and a pulsing blood vessel is visible underneath. Mahmoud says he often thinks about what happened to him. He tells me about a dream in which he is trapped beneath an Israeli jeep. A soldier climbs down from the vehicle and shoots him. One of Mahmoud's friends is shot, too. A third youngster, Ahmed, intervenes and saves his two friends but he is shot twice, once in the arm and again in the leg. They are all taken to the hospital. Ahmed remains while Mahmoud is released.

Mahmoud is mixing dream and reality as he was, indeed, taken to the Shifa hospital. Ahmed has become a hero who haunts his dreams. Severely wounded, Ahmed remains in the hospital and will be disabled when he leaves. Mahmoud continues to explain how the "chebabs" (young fighters) threw Molotov cocktails during an encounter with armed settlers. He relates all this in a monotone, barely stopping between sentences. Now he lives in a world filled with violent memories. Images and dreams remind him constantly of what he has been through.

A little while ago, I met another adolescent who was hit by two bullets. One remains in his body near his hip. I saw him again today and after listening to his mother, I'm still very worried about him. Apparently he trapped a child, locked him in a room and beat him. When asked why, he said he doesn't know and that the child hadn't done anything. He can no longer control him-

self. He still has severe pain in his leg. In his presence, his mother tells us that it will be difficult to find a wife for him. He was fine before but now he is weak and thin. I intend to see him for a longer visit and to work with him on those moments when he lost control and let himself be overwhelmed by violence.

These accounts capture the violence spilling over in Tufah. Firing has continued incessantly for more than four months. Every family has someone who's been wounded or traumatized.

SATURDAY, MARCH 3

TUFAH

Thinking about bullets

Today in Tufah I met three people wounded by gunshots and another hit by a rubber bullet. Hania's mother calls out to me in the street and asks me to visit her 14 year-old daughter who "hasn't been the same" since the events. At that point, I didn't know that the girl had been shot in the spine. Hania is confined to bed. She smiles frequently but twists her hands nervously. At the beginning of each interview, I introduce myself and ask the interpreter to do the same. I have a world map so I can show Hania where France is in relation to Palestine. She doesn't know how to read or write but she seems to understand my explanation. I show her Palestine, Algeria and other countries, explaining that each has its own language. Then I try to explain what a psychologist is. I ask her if she understands why her mother has asked me to come see her.

She says that the bullet remaining in her body bothers her a lot. The doctors have not been able to remove it. She had been in front of her house when she was suddenly racked by pain. Her sister asked what had happened and saw Hania bleeding. The two girls ran to an ambulance nearby. Hania was treated at hospitals in Khan Yunis, Gaza, Amman and Saudi Arabia. Every doctor refused to operate, saying she would not survive. Finally, one physician explained that the bullet was serving as a bandage and must not be moved out of place. Hania, who wanted to become a housewife, can no longer perform household tasks.

She is very anxious today. Gunfire never frightened her before but she now can't cope with the noise. This feeling upsets her and she is ashamed. She often recalls images from the day she was shot and they make her tense. Her friends come to see her every day to cheer her up but



Funeral services at the martyrs' cemetery of Hebron in April 2002. Eight people, including three fighters, were killed a day earlier.

nothing is the same. I ask her if it's because she feels different. She answers that she can't play any more for fear of dislodging the bullet. And now she's afraid to leave her house. She goes out as little as possible. She thinks the Israeli soldiers might find her, wherever she is.

I try to return to her feelings and thoughts from the time when the doctors told her she was going to die. She had been struck by the idea that she had not yet had a chance to do anything good in life. This is very painful for her and I prefer not to dwell on it. Hania lives constantly with the idea that if the bullet moves and no longer serves its role as a bandage, she will die. As a result, she cannot overcome the experience that almost killed her.

Next I meet Farid, 16. I have to explain to him what France is. He's never heard of the United States or Bill Clinton. He understands, feels he can trust us and tells us that he was shot in the knee and the pelvis. The second bullet remains lodged there. Farid was coming from Al Mawassi when he was shot. He had been picking tomatoes for the settlers. He fainted immediately and woke up an hour later in the hospital, where he learned that he had been shot twice. He panicked. His knee was very painful and he couldn't sleep or walk. Like Hania, he feels that his body is not as strong as it used to

be. He has no appetite, no longer sleeps and doesn't play sports or work anymore. He doesn't want to go back to Al Mawassi. He thinks the Israeli soldiers have his picture and will try to kill him. He even dreams that they capture him and shoot him in the throat. This idea torments him. I point out to him that he can't remember anything because he had fainted. He agrees, but after he learned he'd been hurt, he thought that the soldiers had wanted to kill him. Like Hania, he is no longer as active as before. He doesn't recognize his own body anymore. He can't handle frustration and breaks objects that annoy him.

The third adolescent is named Nidal. She was hit in the skull by a rubber bullet. At the hospital, the doctor removed the bullet and closed the injury with wound clips. Her friends tell her she isn't as smart as she was. She does have a lot of difficulty concentrating and no longer does as well at school as before. She feels as if a bit of metal remains in her head and she doesn't want to have the clips removed because she is afraid her skull might split open. In psychological terms, Nidal is less affected than her

Hania still has a bullet in her back. She thinks Israeli soldiers might be able to find her, wherever she is.

"Desolate surroundings, pounded by a cold January rain"

In early 2001, an MSF team discovers the extent of destruction after an Israeli army operation in the Rafah district.

After the last Israeli army incursion in Rafah, we went to the Yebna district where we were able to assess the extent of the destruction. Some 40 houses had been destroyed, leaving more than 200 people homeless. Men, women, children, and elderly people were preparing to set up tents, which had been distributed by the ICRC, next to those of their former neighbors whose homes had been torn down two months earlier. Drained of energy and resources, the Palestinian Authority has not found housing for these families who lost everything in the space of a few hours. The situation is even more worrisome because winter has begun, and with it, cold and rain. Nothing remains of the destroyed houses. We are walking through rubble.

Amid the debris we notice traces of daily life, interrupted and broken off suddenly: a shoe here, a sweater there, a cassette, and a toy. As we learn the circumstances of the tragedy, the scenario, although terrifying, sounds typical of many others. Several tanks appeared suddenly and fired. Panicked, residents fled without being able to grab anything. Then army bulldozers began to destroy the buildings. There's no point in trying to recover mementos, papers, or clothing from what remains of the house. Over the loudspeaker,

a threat is issued from the nearby watchtower. "If you're not gone by the count of three, I'm firing."

Two months earlier, we noticed that not all soldiers bother to issue similar warnings. Without notice, two rounds of M16 machine-gun fire aimed at the ground burst from

that same watchtower, splitting a crowd of "undesirables" into two distinct groups; one to the right of the shots, the other to the left. No one is likely to come back there!

We are very careful not to move out of the watchtower's blind spot. As we continue through the desolate surroundings, a cold January rain beats down. No one speaks. Faces are serious. Some people stare with



slowly towards the sky and, in a whisper, says, "Wait for God to take pity on us."

In silence, we return to our car, which is parked a few streets away. As we make our way through the narrow alleys we think about the emotional wounds that have just been inflicted. How many people will find a way out without suffering severe psychological damage? Will it be this cold tomorrow?

It is impossible to pull mementos, papers or objects from the debris. Soldiers stationed at a watchtower threaten to fire if anyone approaches.

empty expressions. A man explains why the Palestinian police, who were present at the time, did not shoot. "If they had, it would've been worse," he says.

Another man shows us what remains of his house. He has nothing. When we ask him what he and his family are going to do, he raises his eyes

Will it still be raining? And will the tents be distributed today? We finally reach the car.

Coughing, the engine starts up as rain pelts the windshield. After a few seconds of silence, we turn to our translator.

"Are you all right?" His dignity requires that he smile, sadly. "Chouaia, chouaia," he answers. "It's O.K., it's O.K."

friends, even if her obsession prevents her from feeling at ease. I suggest that she go to the doctor and let him remove the clips.

In each of these stories, the body has been violated and penetrated. That penetration produces genuine psychological after-effects that change the person's relationship to his or her physical self. The body has become weak and now carries within it the death that these adolescents have seen close-up.

WEDNESDAY, MARCH 23

GAZA

Spots on his legs

Ahmed is an 11 year-old boy whose family home is occupied by Israeli soldiers. His mother and grandmother bring him to us because spots appeared on his skin after he had a severe fright. Our doctor, Hélène, examines him and observes depigmentation on both tibia, his feet and a round area on his buttocks. He tells us what happened. Unaware that Israeli soldiers had occupied the roof of his grandmother's house, he had decided to visit his relatives to tell them his mother had come home after a trip abroad with his sister, who had an operation.

He took the usual route, passing in front of the Palestinian station on his way to the bypass road that he had to cross to reach the house. As he crossed, he was suddenly caught in Israeli soldiers' gunfire. Ahmed explains in great detail that he was next to an electricity pole but did not see camouflage on the roof. I asked him to tell me exactly what he had heard. I imitate the sound of shooting that he makes repeatedly – it's bursts of gunfire. He heard a bullet whistle past his ear and thought he had been hit. He felt as if someone was pulling his hair. His legs hurt and shook. His head felt hot. He staggered and fell in a faint. The last thing he saw was the color orange, which seemed to fill his visual field.

Ahmed describes a sharp pain in his back during the brief moment between the onset of firing and when he fainted. "It's as if someone were throwing stones at me." He knew that he was wounded. His brother was hit in the hand. He understands you can die from being shot in the heart or the head. I ask him if he knows what death is. Yes, he says. "It's like when someone is asleep except that he doesn't move when you try to wake him up."

The soldiers were firing over his head to frighten him. Ahmed doesn't know for certain that they really wanted to kill him. When he regain-

ed consciousness, his head and legs hurt. His grandmother massaged him. The next morning, his mother noticed that he had spots on his legs.

– What do you think these spots mean?

– They're from being scared.

– Does that worry you?

– Yes, I'm afraid of dying.

– Dying? Why?

– Because of the operation.

– What operation?

– The operation for the spots.

Ahmed often dreams about what happened. He sees himself approaching his grandmother's house and coming under fire. He can't sleep.

SUNDAY, APRIL 8

AL MURAGAH

"Like an animal circling a post"

The Al Muragah mosque stands out in the distance. As we move up the road, we see Ouad's house next to it. He joins us in his neighbor's garden in the middle of orange groves. We hold the consultation out of view in the courtyard. We are not authorized to go to his house, which is located near the bypass road leading to Netzarim. The tank moves forward to signal us to stay away. Only Ouad and his two wives are authorized to cross a small road that cuts through the fields of orange trees that have been uprooted and destroyed. The destruction was so violent that it is hard to imagine the former 20 hectares of orange trees. (It took 40 workers more than a week to harvest the 600 tons.) No one comes to pick the oranges any more so they rot silently in the fields. Ouad's fields are a little further away towards the Netzarim settlement but there is no more access to them. And what would he do there? The 3,400 feet of vines that made him the region's largest grower have been uprooted.

Even after more than 15 years in Israeli prisons, Ouad feels differently about this latest deprivation of liberty. He circles his house "like an animal circling a post." He has nothing left and is supported by his brothers. He feels like he is in prison. The worst is that his earlier success allowed him to help his family, while now he needs help to survive.

Mohand's family has lived along the road leading to the Netzarim settlement for years. Mother and four sons live there in four houses they built for their families. The houses are still standing,

April 22

A bomb attack near a bus stop in the center of Kfar Saba (Tel Aviv) kills two and injures 39. Hamas claims responsibility.

April 23

A Palestinian child is killed in the southern Gaza Strip.

May 2

With Ariel Sharon presiding, the Israeli Security Cabinet meets in the Jewish settlement of Ofra.

Simultaneously, armored tanks and bulldozers carry out a nighttime incursion into the Rafah refugee camp.



The beach at Gaza on a Friday in July 2001. It is the only open space available to most of the territory's residents.

May 5

"The Independent" newspaper publishes extracts of the preliminary report of the international commission on violence in Israel. The report calls on Israel to end its "settlement activity" and "use of rubber bullets".

although the building next door has been destroyed, like many others in the district.

For more than three months, Israeli army soldiers have been using the roof of the tallest house as a strategic lookout. Life has become difficult. The tanks' comings and goings along the road raise a permanent dust that covers everything. To protect themselves and avoid respiratory problems, the family has no choice but to stay closed inside the house. The movements of the heavy vehicles create vibrations and make noises which frighten the children. As they go between the houses, family members move slowly and deliberately so as not to create suspicion in the soldiers' minds. The soldiers have authorized the family to work and leave the house, but they must still notify the soldiers when they go and are required to be back inside before the middle of the afternoon.

The oldest of the four brothers feels like he's a human shield protecting the others from the soldiers upstairs. His wife struggles to maintain a minimum of intimacy within the family. The door leading to the staircase remains closed as much as possible and the soldiers are billeted upstairs. Early on, the soldiers slept in the same apartment as the family.

This is a difficult situation. The adults have become weak and the main question is, How long will this go on?

TUESDAY, APRIL 10

JOHOR EL DIQ

"Dialogue of deaf-mutes"

To reach a group of houses sheltering this large family, we must cross the road leading to the Netzarim settlement. We had already come in March. Gaining access to this house is an ongoing battle, although the Israeli army never puts its refusal in writing, which would make the denial official. Although we planned today's visit a week in advance, our efforts are fruitless. Two Jeeps stop along the road. We manage to establish contact with the soldiers but they tell us to leave. After phone negotiations with various parties, the soldiers break off our conversation and threaten to shoot if we stay in the no man's land on both sides of the road. We turn around and wait for news from the Israeli army, which never comes.

But more troubling than this unfortunate episode is the life that this family of 30 people has been living since December. The house, which is in a strategic position, provides the military an ideal checkpoint. A dozen soldiers occupy it.

Only clearly-identified family members may enter the no man's land. Their life has been turned upside down. They haven't had water for a long time and their wells have been destroyed. Rain is the only source of water but their reserves are dwindling and the water quality is declining. The situation is tragic for everyone in the family, but especially for the children and the oldest of the three brothers. The Israeli soldiers are holding him hostage in his own house and using him as a human shield against possible attacks.

WEDNESDAY, APRIL 11

TUFAH

Like an enormous earthquake

While en route, we learn from our doctor, Hélène, that property has been destroyed in Tufah. We arrive in Khan Yunis and find lots of people there. We had expected to find that a few houses had been torn down but we were wrong. We've been coming to this district for more than four months but it's unrecognizable now. Rubble is piled on both sides of the road for a distance of some 50 meters. The area looks as if a huge earthquake had hit. Only one house remains standing in the midst of the ruins. But the state of the ground floor suggests that a bulldozer has attacked it. We don't recognize anything. The holes in the façades of the houses still standing speak to the violence of the firing.

I am very worried as I search for Abu's house. We have been treating him for several months. Maybe it wasn't touched. The interpreter and I climb over rubble that was once the walls of houses. We have to take another street as piles of debris block our way. Abu's house is almost entirely destroyed. The whole family is there in shock, looking at the damage. The grandmother welcomes us with tears in her eyes. She leans against the only remaining piece of furniture and seems not to believe what she is looking at. Abu's sister recognizes us and comes over, smiling. She acts as if nothing has happened and apologizes that she can't offer us a chair. Maybe she's happy about leaving this house that's become a hell since the Intifada began. I don't know what to say to this family that has just lost everything. Luckily, they all left the house yesterday, when the firing began. Next we look for Ahmed's house, which we know is among those closest to the settlement. Climbing over the rubble, we walk in what we think is the right direction. The

road and the landmarks are gone. Ahmed is there, sitting on the ground under a makeshift shelter made of a piece of fabric held up by four bits of wood. His house is next to him. "Luckily," it's only half-destroyed. He welcomes us with his usual smile. He livens up and finds – I have no idea where – two chairs.

He, too, had to flee last night although he had resisted since the Intifada began. He tells us that two tanks and a helicopter fired more violently than ever before. Then the bulldozers started working. They kept up all night.

Ahmed used to hold forth about peace. Now this man whose house is riddled with bullets and whose son is an Israeli prisoner no longer believes in peace. A month ago, the Israeli army prohibited him from visiting his son. For the first time I saw him and his wife demoralized. No one offered any explanation for the prohibition and the Red Cross couldn't help. That was the first time I sensed their resolve weaken and their hopes for peace give way. But Ahmed is holding up and has begun building a tent in the place where fifty years ago, as a refugee, he'd hoped to start a more tranquil life. In those days, the Neve Dekalim settlement didn't yet extend to his house.

A man is erecting a tent on a pile of rubble. We approach to speak to him. After I introduce myself, his rage against the Western nations bursts forth.

"They let the Israelis do what they want while no one takes our side." Like many Palestinians, the sense of having been abandoned is very strong.

After calming down, he explains how the bulldozers came to his house. The tanks were firing constantly. Hidden in a bedroom with his children, he saw the engine attack the front rooms. He tells us that the children were crying as the machine headed toward the neighbor's house.

I ask him why he is raising his tent on the ruins, exposed to gunfire. Now that part of Tufah has been leveled, everyone is exposed to firing, especially those who face the settlement. "Where will I go?" he answers. It's difficult enough to live in a house in Tufah. Living in a tent on this spot is suicidal. We hear gunfire as we're talking and the crowd starts to run. He doesn't move. He's seen and heard too much.

Next we go to Um Yousouf's house. Her daughter is disabled. We know Um Yousouf can't flee quickly because of her baby and this little girl who can't walk. Indeed, the entire family stayed through the night, terrorized by the gunfire. The

I am very worried as I look for Abu's house. We have been treating him for several months. Perhaps the house wasn't damaged.

resin roof tiles have cracked from the blast. Um Yousouf will leave the house tonight, hoping the bulldozers won't destroy it. Everyone who lives here is sure of one thing: the army will return. I know Tufah well and can say that large families lived in all these houses. If Gaza is known as the region with the world's highest population density, Tufah is certainly the most densely-populated area in the Gaza Strip.

MONDAY, APRIL 16

RAFAH

No right to be weak

May 13

Israel defends its harsh policy of "liquidating" Palestinian activists and the "natural growth of settlements."

May 15

Fifty-third anniversary of the founding of the State of Israel. Four protesting Palestinians are killed and more than 200 are wounded. In the West Bank, an Israeli woman is killed in her car, targeted by Palestinians.

May 18

At Netanya, a Hamas suicide bomber blows himself up at the entrance to a shopping mall. Five people die and more than 70 are wounded.

The bulldozers came as far as Tarek's house. His situation has not improved. For six months, he, his wife and their seven children have been living in the storeroom on the ground floor of their house. The house faces the Israeli army watchtower located along the Egyptian frontier. Riddled with gunshot, the house has become so dangerous that we can no longer enter.

Tarek has collapsed. Last week, he was so agitated he fainted and had to be hospitalized. He tells us that he's barely alive any more. He can't stand the continual gunfire that tortures his days and haunts his nights. How can you sleep under these conditions when, at any moment, your children could be shot?

One day he tried to spend some time with friends outside the district. But the sound of gunfire brought them back. That's what happens to most people in this situation. If they manage to get away, the shooting drives them back. Their fear for their families and their houses is stronger than the fear of dying.

Tarek would like to sleep, even if only for one night. He complains of the changes he senses in himself. Before, he thought of himself as a calm person who maintained good relationships with his neighbors. Now he becomes agitated easily, can't tolerate the children's noise and feels very distant from his neighbors who he thinks do not understand his situation. He says it's the same with the Palestinian Authority, which has never come to help or support him. His feelings of abandonment and danger suck all his strength.

He is still in shock today. Not a single house remains standing to the right of his. A wide swath of debris is all that's left. Tarek invites us to sit down. He needs to talk and express what is torturing him. His hands tremble as he recounts how bulldozers came in the middle of the night. He

had only a few minutes to flee, taking his wife and children.

While we are talking, several gawkers come to see what happened last night. Tarek and his neighbor try to make them leave. They remain calm. Firmly, they say there is nothing to see and that it's dangerous to be here. Tarek knows the Israeli army would destroy his house at the least provocation. He's never made any problems, he says, no one has ever come to shoot or throw a stone from his house. Suddenly, a group of determined young people approach. They've come to fight the army. Tarek rises, followed by his neighbors, one of whom has picked up a stick. They won't let these young people pass. They respect their fight but don't want to pay the consequences. Tarek has to protect his family and his house. Voices are raised, but the young people end up turning around. They return to apologize.

Tarek is unaware of his role in the family. He makes it possible for them to stay together. Unemployed since the Intifada began, he feels he can't guarantee his children's safety. He sees himself as a bad father. Today this house, which he spent his life building, is worthless and could be destroyed tomorrow.

A noose is tightening around him. He can't make up his mind to leave, so he is putting himself in danger. He wants to defend the house but he stops the young people who want to take on the Israeli army. He can't work but he must still provide for his family. It's easy to see how hard it must be for him to remain calm. In spite of that noose, he doesn't have the right to be weak.

TUESDAY, APRIL 17

BEIT HANOUN

"Cut in half"

Beit Hanoun is a region in the northern Gaza Strip at the Israeli frontier. The Red Cross had notified us about a family there and we went to see them a while ago.





"On Monday they came at 1:00 in the morning... At 4:00, we came back. Some of our neighbors didn't have houses anymore."

Last night, bombings followed mortar fire from the direction of Sderot (Israel), a town near Beit Hanoun. The family we know lived next to the frontier and had to leave after an Israeli military operation. Today they live with a relative a little further away.

The "hajj," the leader of the family, comes to meet us. He is very upset and seems to be in shock. His hands tremble and his voice catches. He tells us about the night he's just experienced. With each explosion, the house seemed to leap from its foundations and then fall back down. He hasn't slept. This morning, he learned that a youth from the district was literally cut in half by a missile. He keeps repeating, "cut in half."

He says that since the Israelis stole his land and his house, he's lost his dignity. As a refugee, he remembers being one of the first to arrive here. Little by little, the Israelis have moved closer to his house and now he's been chased out. Tears come to his eyes.

Next I speak with his grandchildren in a group. We talk about their fears and dreams. Ibrahim

Tarek has never made any trouble. No one has ever thrown a stone from his house. He supports the Intifada but he's got to think of his family.

wasn't there during our first visit. I ask him what he feels when he's afraid. He says that he trembles, his legs hurt and that the pain comes back whenever he hears gunfire. Rami tells us that he is cold and tries to get warm by going under the covers. Since the army leveled everything around his house, he has had the same nightmare in which soldiers arrive with dogs that trap him and tear his clothes. Radir dreams that he is inside with his brothers and sisters. The little girl, Kifah, sees soldiers arrive and take the men of the family (her father and uncles). I ask her where she got this idea. She says it already happened. During the first Intifada, soldiers entered the house and shut the children up in a bedroom. Then they separated the men and women.

Moaz asks me why his brother urinates when he hears gunfire. Assem, 12, is very upset. I explain that each person expresses fear in his own way. Some tremble, others feel cold or have pains in their legs or stomach and others urinate. It's not the least bit abnormal.

Then I ask the youngest children if they think grown-ups could be scared, too. "Yes," they answer. Everyone is afraid. Especially yesterday. We thought the Israeli tanks and bulldozers would have been the most terrifying experience



Mohammed is a retired English teacher. He proudly shows these pictures of Arafat, standing a few yards from Israeli positions.

for the children. "No," they say. "The bombings last night were awful." Moaz describes how the missiles were fired toward Gaza from the other side of the border. Unfortunately, the house where they are staying is very isolated and could be an easy target. The children know that. They expect the Israeli army to appear.

I ask the children what they think about the future. Hoacim says it would be better to die than see all this. He thinks the soldiers will continue to advance, pull up trees and destroy houses. Moaz would rather that the Israelis occupy Gaza. He thinks that way they would stop tearing everything down and shooting everyone.

We think the bombing will resume tonight. I tell them and ask what it's like on a day when you know the coming night will be violent. "I'm afraid this could be my last night," they say.

After last night's bombing, we learn that the Gaza Strip has again been cut in three. Israeli forces have imposed travel restrictions, just as they did two months ago. We take the coast road near the Netzarim settlement, which does not intersect any Israeli roads.

Today, few people are taking the coast road to get to the central zone. We're surprised to learn that a child has gone ahead of us on the road. The Palestinian soldiers confirm that we can get through. Only fear holds people back. Step by step, we move ahead. The road is noticeably calm. A slow-moving ambulance passes us and stops four hundred meters ahead. When we catch up, we realize why it's physically impossible to move on. At around 3 a.m., bulldozers came and dug out four sections of the road to a depth of more than a meter.

Blocking the coast road is equivalent to blocking Palestinians' lives. It is a collective punishment. Whether this road is open or closed will not affect security at the Netzarim settlement.



I ask the little ones if they think grown-ups could be scared too. "Yes," they answer.

MSF psycho-medical team in Hebron

SATURDAY, JULY 21, 2001

Pregnant and stopped at the roadblock

On our way to visit to a family, we noticed that two soldiers had stopped a woman at the checkpoint and would not let her continue. We waited to see what would happen and spoke with the woman. She explained that the soldiers would not allow her to cross to go to a doctor's appointment.

We spoke to the soldiers. They told us that there was a curfew and that Palestinians were not allowed on the streets. We explained that she was going to see a doctor and she showed the soldiers her swollen hand. After some discussion, they finally allowed her to cross and see her doctor. We then visited a woman who had been 8 months pregnant. At 10 p.m., she began having contractions. She called the Red Cross ambulance but the soldiers at the Karantina checkpoint refused to let it pass. They didn't want to authorize the ambulance to cross and pick up the woman. The ambulance spent about an hour trying to get in. Finally the woman managed to find a car and get to the Al Ahli hospital. She came alone and her husband remained at home with their children. She gave birth and the baby is healthy.

TUESDAY, AUGUST 14

Anger at leaving

I greet the father and mother of a family of eight children who live across from the Harcina settlement. They are moving to Jerusalem and have come to say goodbye. Their home has been hit frequently by gunfire and attacked by tank incursions. The environment has had serious consequences for several family members. Two of the young men were wounded within one year. The 14 year-old daughter suffers from acute stress and the 2 year-old's language development has stopped progressing. I treated them for two months and we were to have continued our work. But economic difficulties have pushed them to leave. Those are even more difficult to

"If you want to leave, you can leave..."

We meet with a family whose roof has become a permanent base for Israeli soldiers. Despite the humiliations of the situation, the father refuses to abandon the house.

July 2001 – We are in the heart of the Gaza Strip in a Palestinian house close to the Jewish settlement of Netzarim. A family of nine lives here, including a newborn, the head of the family, his wife, and the grandmother. The roof of their home has been occupied for several months by Israeli soldiers who've turned it into a military post. The house overlooks the bypass road that the settlers use to travel among the Jewish settlements in Gaza. Camouflage nets are stretched across the roof and between the sandbags; you can sometimes make out a soldier's shadow. The house stands alone, isolated. Since the Intifada began in September 2000, the orchards have been destroyed, the fruit trees – the pride of the

Palestinians – torn up, green-houses demolished, and neighbors' houses flattened like hundreds of others in the Gaza Strip. It has become almost impossible to reach the family's house. You have to climb over piles of dirt and straddle branches of felled trees. Israeli army bulldozers have devastated the landscape. Despite several attempts over the last four months, the MSF medical team has been unable to visit this family. The last attempt ended when Israeli soldiers posted on the roof of the house fired warning shots. The team realized it had to leave. Now it is 9:00 a.m. and the MSF team once again makes its way across the battered, pock-marked road. We see the grandmother coming toward us and we decide to move ahead,

openly. We call the head of the family in the house on our cell-phone to make sure that the soldiers won't fire on us. Several minutes later, an army Jeep stops on the road in front of the house. A soldier signals us to approach. He checks our documents and searches our bags, which contain medicines, as well as food and cooking oil. We will have to wait several minutes to receive authorization to continue. When we finally reach the house, the soldiers are watching. But the children quickly surround us. The grandmother hugs us and welcomes us into the second-floor apartment. There is a strange commotion. Soldiers are talking outside the front door. Inside, children are crying, laughing, or watching



us silently. Conversation begins easily, without any delay.

Overnight, this Palestinian family found itself hostage to the Israeli soldiers occupying its house.

"When the soldiers arrived, there was nothing we could do. A captain told us they were here for security reasons. Ever since, we've been human shields."

The grandmother explains their living conditions. "The soldiers only let the children play outside one at a time," she says. "They frighten them and sometimes hit them. We have to ask permission to enter the house. We have to ask permission to leave. Four family members must be inside the house at all times.

When my son got permission to go to Gaza to look for food, he could only bring back two plastic bags' worth and no more. We are prisoners with our children. This is no way to live."

While we are talking, we hear the soldiers walking and speaking above us.

The mother, who seems subdued, speaks up. "The soldiers humiliate us," she says. "They throw their filth and their dirty water off the roof. A week ago, while the children were playing outside, a sandbag fell from the roof. The children screamed and I thought they were hurt. But the soldiers wouldn't let me go out to see what happened."

Continuing, she sighs. "It's even worse at night. The soldiers bang on the walls. They make noise and sometimes they shoot. Then the house shakes. The children cry. It's impossible for us to sleep."

In spite of the circumstances, this family refuses to leave their ancestors' land, even if it means living with Israeli soldiers upstairs and in the hallways. "The soldiers have done everything to make us leave but I'm still here,"

the father says, proudly. "They told me, 'If you want to leave, you can leave.' You know, I'm no superman. I'm afraid, but my fear of losing my house is stronger. Leaving means death, but if I'm killed, that's unimportant."

The father had several brushes with death when shots were fired into the room where was standing. He shows us where a bullet hit the window and maintains that it came from Israeli army gunfire. Another small military fort, a few hundred meters away, is visible through the window. The grandmother explains that they have lived through shooting several times since the Intifada began.

The father turns to the MSF psychologist whom he knows, and says, "You know, it's not our material problems that worry me, but our emotional situation. The children fight, yell, and are aggressive toward each

need to show the Israeli soldiers that we haven't been forgotten, that people from abroad are paying attention to us. Everyone needs to know what is happening here." Continuing, he says, "This is my home. But they've stolen my life and my dignity. The soldiers say they're here to protect the settlers. But what about me? Who is protecting me?"

In spite of himself, the head of the family has become a standard bearer. "If we leave, they'll destroy the house and the land will belong to them forever," he says. "Where do I get my strength? From my childhood memories, my memories of this place. I won't have my children ask me one day why I left." While he is talking to us, the MSF psychologist takes the children and the mother elsewhere. Watching them leave, the father says, "This was a

"The soldiers only let the children play outside one at a time. They frighten them and sometimes hit them.

We have to ask permission if we want to enter or leave the house."

other. The littlest one cries when he has to leave the house. He's afraid of soldiers. We don't sleep very much. The confinement is driving us mad." His eyes are red and he is on the verge of tears. "Sometimes I'm violent, too. Sometimes I want to throw myself at the soldiers... I can't take any more." The grandmother serves us orange juice. The father says that no one has been able to reach the house. The MSF medical team's visit is the first in four months. "It's important that you're here," he says. "We know you try to come and that brings us some comfort. The children need you. And you

paradise here. We've got to give our children a chance. We've lost too much time. Israel must leave the Palestinian territories." September 2001 – The Israeli army has ended its occupation of this Palestinian family's house. The soldiers have left and set up camp in a small, concrete, rapidly built fort, about 50 meters (55 yards) away. The residents of the house are still exposed, subject to reprisals and humiliation. Their movements outside the house are still limited and the Israeli soldiers can withdraw permission to move about at will. The MSF team continues to visit the family.



This mother has just learned of the death of her 23 year-old son, a Hamas activist killed deliberately in Hebron by the Israeli army.

deal with than violence at their door – and they haven't been spared the latter, either.

The man describes his anger while his wife weeps silently. They have no choice. He hasn't worked for seven months, which translates into seven months of boredom at home as he becomes impatient and depressed. It's hard for him, too, but he doesn't cry. His voice is strained. He is overwhelmed by mounting debts and humiliations which eat away at him. He can't go on like this so has chosen to live in Jerusalem where he will be five minutes from work. His boss is holding his job because he likes him. But to leave a house where he's lived for 25 years; to leave a life and his mother here. When he was a child, he and his family had had to leave everything. He developed psychiatric problems then and has been taking medication ever since.

WEDNESDAY, AUGUST 22

Family implosion

In early February, I treated a 9 year-old girl who was enuretic and suffered from nightmares and anxiety. She has had to rush home from school several times. She was terrified of the sol-

diers, the bullets that could injure or kill her and teargas bombs that could suffocate her and her mother.

On my second home visit, I met her father. He looked sad and demoralized. He told me that he had lost his job at the beginning of the Intifada. He used to go to Qiryat Arb'a every day where he worked as a cook in a restaurant. Before that, he went to Jerusalem to earn a living to support his family of six children. But one day there was a curfew and he couldn't get back. The baby, their first son, died. He and his wife have never recovered from the loss and he doesn't want to be away from home any more.

That's why he was working in the settlement near his home. He has friends there but they've told him it is too dangerous for him to go there now. They call to stay in touch but he cannot see them anymore, which has affected him deeply. I tell him how sorry I am. My own emotion releases his and he starts to cry. He has set up a falafel stand downstairs in his house. It's not much of a business and doesn't provide enough income. Their savings are dwindling and they've had to give up on the idea of building a house. That dream had made it bearable to stay in this tiny, makeshift place which serves as their shelter, except when it rains. In the months that follo-

wed, I rarely saw this father. He was going to Hebron in search of a job that would pay better than his miserable falafel business.

Today, August 22, he tells me that he has collapsed. In spite of the risks, he had wanted to return to Qiryat Arb'a but was arrested by Israeli soldiers. He and several other Palestinian workers were all guilty of having wanted to work during the curfew. He spent two days in jail and had to pay to get out. Their employer, a settler, was also jailed, but just for one day. He was not mistreated but was not able to speak to his family. That was the hardest. He feels tense and anxious and loses patience with his children. That's why he says he is depressed. His expression and behavior reveal what his words can't articulate. He asks us to come to the house to see his family and insists that we have cookies and juice before leaving. His wife and children describe the anguish of that night and the two horrible days that followed. The little girl tells us she is always afraid that the soldiers will arrest her father again.

I saw the 11 year-old boy who had brought me coffee again. He had gone to work selling coffee to help his family. He had told that he wanted to return to school. Although the last few weeks have been difficult and conditions have not improved at home, he has returned.

I had spoken with his father for the first time in April. The man had told me that he was his son's age when he started working. He'd had to resign himself to a career as an auto mechanic even though he'd dreamed of working on airplanes. At that time, he told me that he could no longer go to Jerusalem to buy auto parts and that it was becoming difficult to feed his family of two wives and nine children. Nonetheless, this family did not want to rely on charity and as the father said, he was holding on to his patience and faith. He still wanted to believe that peace would come one day even if the Israelis didn't seem to really want it. He would continue to bow and scrape and, preferring to borrow money from his mother, hoped to earn some small amounts from a small itinerant drink business. I was there in mid-April when they launched the business. The entire family was helping out and this mini-enterprise had animated them. I'd seen them here and there, at the corner of the market, on the street and at the drawing studio at the house.

Two days ago, I stopped at the house and found the father having coffee outside with his neighbor. His expression was downcast and he seemed at loose ends. He grabbed me and took me inside the house to see the damage. Windows, walls (exterior as well as interior), closets and clothes all pock-marked with holes. A

fire had started and each hole was charred.

With the children and adults, I followed the bullets' path through the rooms. Crawling on hands and knees, they'd fled the parents' room. My fingers catch on sharp bits of metal stuck in the walls. These are exploding bullets that release dreadful mini-projectiles which kill and wound. They escaped this time, even though a piece of the weapon had landed in the room where they'd all crowded together to take shelter. The children show me the little bits of metal they gathered inside the house. Still very shaken after this hellish night, they are agitated and excited. They fight among themselves. The littlest ones whine and cling to one of the mother's skirts. Tired and in shock, she is unable to control them. The second wife can't cope any more and has gone to her family to rest. The father is very angry, completely heartsick. He had supported peace and the two-state proposal but no more. He says he's ready for anything. Last summer, he abandoned his business. With competition, he couldn't make any money and so decided to accept Red Cross help. The agency was supposed to bring food last week but no one has come yet. He hasn't yet gone to the Social Services Ministry to apply for health insurance for families in which the father has been unemployed since the Intifada began. He feels discouraged, powerless, aggressive and at the end of his rope. These are the words he uses to describe his depression. The family is imploding. This is hard to take. How can I help them? The children ask me to say a little longer. They want to draw with me. They want me to come back soon if I can't stay today. The father will be there with them to talk a bit. Yes, he would like to bear witness.

EARLY SEPTEMBER

It's more than just four walls, it's a battle

To leave your house and land – the essence of your identity – after years of resistance is the equivalent of committing suicide. The first time I visited this family at home in mid-April, the father showed me the results of the harassment from settlers who pass his house on their way to synagogue every Saturday: solar panels broken, walls collapsed, kitchen windows shattered. Tirelessly and relentlessly, he repairs the damage although the situation has triggered long-standing stomach pains that seem to resist all treatment. Worn down, he tells me "the doctors say it's psychological." His wife, who had just

July 13

A new escalation of violence in the territories. Since the ceasefire was declared one month earlier, an average of one person a day has died.

August 9

Seventeen are dead and 90 wounded in East Jerusalem. Islamic Jihad claims responsibility for this suicide attack.



Hebron, June 2001. The cordonning-off and curfews remain the most serious problems, worse even than the danger from shootings and bombings.

For the first time, Ranine's father describes his childhood home, the get-togethers and the plants that were his grandmother's pride and joy.

given birth to their third child, spoke of their fears and weariness. "He doesn't sleep anymore. I'm afraid to play with the children on the patio. The 4 year-old is afraid to go to school. She

always says her legs hurt. She's afraid to go to sleep because of nightmares."

In July, this father, who'd come to the house for our consultation, told us that he was finding it harder and harder to stand by his decision to stay in the house whatever the cost. "It's worse and worse." He told us about the night in September 2000, a month before the Intifada, when the soldiers swept inside to take a position on the roof from where they had fired. The unforgettable night of terror

had deeply marked the entire family. After that, he began thinking about leaving. But it is his father's house and he was born there. His indecision tormented him. He knew he was having a difficult time, but it was even worse for his wife and children. He added safety measures around the house. He accompanied his daughter every day as she went to school. He would

leave work to check on the house. He smiles, but can't mask his fatigue. His eyes are red from lack of sleep and his nervousness shows in the anxiety that gnaws at his stomach.

In early September, he came back to the office to ask for an appointment. The school year had begun. To drive his daughter to school, he told us, he had to take a road around the checkpoint manned by soldiers who monitor the area surrounding the nearby settlement. He was wounded in the foot as he jumped over a wall. With a cynical smile, he said the situation was unlikely to continue because the director expected that the school would close. That same day, settlers threw rocks, striking his wife. The couple had begun to fight. She couldn't stand the nightly bombings and the harassment, which were sure to increase. She wanted to live with her parents.

Finally, last night he took a mattress and blankets and decided to sleep in a corner of his brother's store in the non-occupied zone. But he couldn't sleep out of worry about what might happen at their house. He developed an allergic reaction to a mosquito bite. He doesn't want to return. That day, Ranine's father describes his childhood home to me as the child begins to play for the first time today while listening to the conversation. He tells me about his grandparents who

gave parties there and about the garden that was his grandmother's pride and joy. He also speaks of the time when, seated at the doorway, he physically resisted the soldiers' entrance. His resistance is passive and determined. This house isn't just four walls. It represents a battle. But if things get worse, he'll leave. The frank smile has disappeared from his face.

SATURDAY, SEPTEMBER 8

Stopped at the checkpoint

We meet with the leader of a non-violent movement established in 1986. As we discuss daily events from our different perspectives – his of 15 years and mine of 8 months – I get a phone call. A mother is in distress because she's afraid she won't be able to get back to her children. She lives alone with her children at the border of the occupied zone near the checkpoint. Even if life hasn't always been easy, the soldiers have always allowed her to circulate. But today, contrary to past practice they will not permit her to return home. She works in the Palestinian zone, where her children also go to school. To avoid the soldiers and their sarcastic comments, the children typically climb over rooftops to get home. She is afraid they will return before she does and that she will not be able to get back. She is panicked and asks for help. The response? It's IDF orders. Luckily, the children haven't yet gotten back home and they find each other. What a relief. But they cannot reach their house. They had to go to her sister's home in a village neighboring Hebron. She's still worried about the house. Last night, the stores next to their home burned. Their house was spared. The family returned but the mother is afraid to leave and wonders if she should quit her job. Two days later, when we go to see her, soldiers stop us for the first time during our consultation.

MID-SEPTEMBER

Under pressure from soldiers

For the first time since we began treating her daughter, this mother comes to see me at the office. I usually meet her at the house, whose front door adjoins the soldiers' checkpoint guarding the entrance to the Jewish district

of Babzoaouia. She's come to tell me that she left because it was no longer possible to live there. The last time we went to her house, we sensed the tension oppressing her family. The neighbors had all fled and they were the only ones living in the building. They remained at the mercy of soldiers installed downstairs who still take up positions on the roof after occupying it for several months. Every time she opens the door she has to reassure the family. During our visit, the children go back and forth to the window, where they watch what's going on downstairs. Today, a loud burst of gunfire and a fleeting red glimmer of light outside the window made us jump. A child rushed to close the shutters. We had to leave the occupied zone immediately, as we've had to do often in the last five weeks.

This mother, alone with her children, just came back from several days with her parents in Jerusalem. They haven't yet put their belongings away. Far away from this hell, they rested and appear to be much calmer than during our previous visit at the end of the school year. The children are better, she said, but she already feels discouraged. It's nerve-wracking to come back, but all the other families have left the building. If she leaves, the settlers will move into her home. And then there's the children's school. It was August 27.

On September 10, she had to flee. For two weeks, the soldiers had practically prevented her from leaving at all. She hasn't had any appetite during that time. She feels like vomiting and fears for her children. She is staying with her sister but feels she is a burden. She is looking for another house.

MID-SEPTEMBER

New house, new hope

For three weeks I've been visiting another family near the Harcina settlement whose 5 year-old daughter who wakes up screaming and is agitated and cranky all day. Her mother, holding her youngest child, a month-old infant, tells me the behavior began when the girl saw a bulldozer tear down their house. The three older children quarrel over the baby and try to kiss and hold her. Their new house is on a hillside across from a settlement. They've had offers to buy it but they've turned them down. Now shots are being fired at the house.

The land belongs to both families. The parents and grandparents live nearby. This couple was born and grew up here and built their first house

August 10

Incursion of Israeli special forces into the offices of the Palestinian Authority.

August 14

The Israeli Army enters Jenin, a city under Palestinian control.

August 27

In Ramallah, Abu Ali Moustafa, leader of the PFLP (Popular Front for the Liberation of Palestine) is killed by two missiles.

August 29

Israel seizes several sectors of Beit Jala, which have been under Palestinian control since 1995. The international community condemns the incursion.

September 4

After 11 months of the Al-Aqsa Intifada, at least 554 Palestinians and 157 Israelis have been killed. Twenty-four days later, on September 28, the Intifada's anniversary, the statistics are 629 Palestinian and 169 Israeli deaths.

with their own children. The house is now only a pile of rubble. I walk across it to reach them. The access road is blocked by a pile of dirt.

On the day the house was destroyed, the garden – trees and crops – had just been torn out and the mother was beaten by soldiers and taken to the hospital. She escaped and ran back to the house, which she found demolished. Her husband had been jailed and family members had taken in the children. The 2 year-old wanted to die and burn her clothes. She remained upset for a long time and was treated by a doctor for nutritional problems.

"When I was 7, my older daughter's age, I also saw my parents' house destroyed," the mother says. "That was in 1967. I've been fighting ever since. I rebuilt the house with my brothers. I've also done everything like the men. I smoke, too. A year ago, when our first house was demolished, we lived in a tent with my husband, there, on our land. And we built this one with the children."

In Palestine, the whole family, from the youngest to the oldest, builds a house together. The family organizes and structures itself around the house. "This new house is built on hope," the father says.

But they talk about the conflicts every day. Given the soldiers' regular incursions, they are unlikely to forget them. The latest threat is that the house's strategic location may result in the roof being turned into a military base. Many foreign organizations are helping and a lawyer from the Israeli group, Peace Now, is defending them.

The children see the ruins of their first house every day. The older one remembers the good times there. They continue to water the plants they planted, now near the rubble. Gathered around the newest child, their "ray of sunshine," the family continues to resist.

OCTOBER

Gunshots in a medical office

When I came back from my vacation in early August, I found my visiting room riddled with bullet holes. There were fifteen holes in the window on the western side from which I used enjoy the sunsets and the soothing light. It's difficult to leave this place. I had thought this burst of gunfire, coming from a house newly-occupied by the Israeli army, was only an accident. It occurred at night and not during working hours. I had hoped to stay here for a while longer. But two weeks ago, the office

was hit again. I had to close it. Patients used to tell me they could breathe calmly here. Now this peaceful haven is no more.

MSF psycho-medical team in Gaza

MONDAY, AUGUST 13, 2001

BEIT LAYIA

An open-air prison

Today we visited the zone called Seafa, north of the Gaza Strip, between the Dugit and Elie settlements. Since June, the residents of this sector have been completely cut off from the rest of the area.

Before the Intifada, 125 families, including more than 600 people, lived there. The land and houses have been destroyed and many of the residents have left. Life has become impossible since the zone was surrounded. The Israeli army has created an enclave. We already tried to visit the area but the army refused to let us enter for "security reasons." The two square meter area is now surrounded by sand dunes built by bulldozers and it bristles with barbed wire. A tower, metal detector and gate have been installed at the entrance to the zone.

The Israeli army opens the checkpoint for an hour every day, but sometimes they don't. It's become impossible for people working in the city to leave home in the morning and get to work on time. Most people in that situation have had to leave so that they can meet their commitments.

Most of the zone's residents are farmers. The soil is good but it's difficult to find fuel for the irrigation pumps and almost impossible for water tankers to get in. Even if the fruits and vegetables are harvested properly, they may sit at the checkpoint for several days. Many people have abandoned bringing in the crops. How can they pay workers if they can't get their products out of the zone?

What's true for fruits and vegetables is also true for students. School will start again in a few days. Most families have decided to send their children to relatives living outside the area.

Yesterday the Palestinians finally rebuilt the road destroyed by the Israeli army. They used a bulldozer authorized to enter the zone.

Access to health care is a serious problem. From time to time, a group of doctors from the Health Ministry makes the rounds in the zone, as we do. In case of emergency, patients face huge obstacles to leave the zone for treatment.



Salah'edine Street
in Jerusalem:
war destroys more
than bodies. It also kills
hope, career plans, and
dreams of marriage.

WEDNESDAY, AUGUST 15, 2001

GAZA

The soldiers have left!

We were on our way to a house we know well in the Murlaga region. Israeli soldiers have occupied it for months. As we headed out, we discovered that a rumor we'd heard the night before was true: the soldiers have left the roof!

The family is finally free of the soldiers' presence and their daily, irritating restraints.

When we arrive, the family is waiting for us in front of the house. The atmosphere has changed. Everyone is there! For the first time in many long months, they can enjoy the open space in front of the house. They rejoice in this change and welcome us.

A few days later, the grandmother of the family visits us in the Gaza office. She explains that things are different now for the family. Yes, the soldiers are no longer on the roof but the situation may be more dangerous. The Israeli station represents a certain threat. Questions

mount within the family. "Will they shoot us when we cross the road?" "Now that they've built that tower, will they demolish the house?"

Having lost their possessions, the families fled a bit farther away, but even there they are likely to be within the next area targeted for destruction.

TUESDAY, SEPTEMBER 11

RAFAH

Rafah means resistance

Our visit to Rafah (in the Salah'edine district) is part of our commitment to bear witness to these events. With two journalists, we visit Ibrahim and his family. The reporters are interested in the psychological aspects of the Palestinian people's suffering.

The house is across the street from the Israeli station monitoring the frontier between Egypt and Palestine. Like everyone who ventures to the end of Salah'edine street, my companions today are worried as they come face to face with the immensity of the chaos and sea of ruins. As we sit drinking coffee, they ask, "Why do you stay

here?" His answer is clear. "I don't know where else to go. I don't have another house." Firing begins while we are visiting the house.

We also visit Mohammed, whom we call "the English professor" out of respect for his teaching career. The discussion always turns to the events that began almost a year ago. They can't change the situation. The only thing left to them is their determination to stay here and face the threat head-on. This is a supreme act of resistance, which consists of living one's life with as much dignity as possible.

As we return to the car, several youths are walking up the street. They are visibly determined to take action against the Israeli station. From his window, a neighbor calls out to them, forbidding them to go further. The people on the street know that these isolated actions prompt the soldiers to shoot toward their houses and their families.

SATURDAY, OCTOBER 6

RAFAH

Destruction on the frontier

This is the first time I've gone back to visit Ibrahim and his family in the Salah'edine district since the demolition of the night of September 27. From the beginning, Ibrahim had been prepared for confrontations and suspected that in the end, something would happen.

The tanks opened fire in the middle of the night and everyone fled. They sought refuge and waited a few dozen meters away. "The explosion was awful," Ibrahim says. The house next to his has collapsed. The skeleton of his own house is still standing. The downstairs walls are gone and only supporting beams seem to be left. The upstairs walls are cracked and entire sections have fallen in. The doors of the house flew off and landed a few meters away.

Unable to flee in time, one man was sent flying into his neighbor's house by the force of the explosion. The neighbor was the first to find his body and the sight was traumatizing. The body was unrecognizable and only the man's clothing made it possible to identify him with certainty.

The families have fled this place to take shelter further away on the same street. They may be further from the Israeli position, but they are closer to the frontier and are sure to be within the zone where the next round of destruction occurs.

Families want to leave this desolate place and move away from the noise of shooting and movement of tanks.

MSF PRESS RELEASES

PARIS, December 15, 2001 – MSF doctors and psychologists in the field are seeing an increasing number of Palestinian families who have been exposed to violence and are lacking access to regular medical care. Isolation and daily violence provoke depressive syndromes and post-traumatic shock among both adults and children.

The daily reality of civilians confronted by violence is very troubling. Obstacles to medical care are increasing. Because of travel limitations imposed by the Israeli army for security reasons, some families are unable to reach Palestinian medical facilities or gain access to doctors. Palestinian health care providers also face serious obstacles in reaching medical facilities, and ambulances are not allowed to circulate freely. Recent Israeli army military operations in the "A" Zones (areas that are supposed to be under the exclusive control of the Palestinian Authority) in Ramallah, Jenin, Nablus, Tulkarem, Qalquilya, Hebron, and Bethlehem have been

**With
palestinian
civilians
trapped, MSF
continues its
missions**

extremely violent. Physical and psychological problems already manifested in patients over the last 14 months have increased. These problems include chronic or pre-existing conditions intensified by stress, acute depression, anger, anxiety, and sleep and eating difficulties. Continued violence and the climate of terror provoke intense stress and panic. This leads to a build-up of trauma and endless cycles of therapy.

Terror comes at night to the houses bordering Jewish settlements or along roads used exclusively by settlers. Under security pretexts, entire neighborhoods are riddled with gunfire and then systematically bulldozed. Families who refuse to leave find themselves hemmed in. Their movements are limited and they are cut off from social networks. Every day they worry their turn will come.

MSF is troubled by the continued decline in living conditions of Palestinian families in the West Bank and Gaza Strip areas most exposed to violence. As the conflict continues, recurs, and intensifies, this worsening of conditions contributes to families' insecurity and despair.

JERUSALEM, January 10, 2002 – Following the Israeli army's latest incursion in Rafah, in the southern Gaza Strip, MSF's emergency mental health intervention team went to Yebna's "Block O" area. The breadth of the day's destruction was glaring. Some 40 houses were destroyed and more than 200 people are now homeless. Men, women, children, and elderly people are preparing to set up tents, distributed by the ICRC, next to those of their former neighbors whose homes were torn down two months earlier. Drained of energy and resources, the Palestinian Authority has not been able to find housing for these families, who have lost everything in the space of a few hours. With the onset of winter's cold and rain, the situation is even more troubling.

Nothing remains of the destroyed houses. Only a few traces of daily life, interrupted and broken off suddenly, are visible: a shoe here, a sweater there, a casserole, and a toy. As we learn about the tragedy, the scenario – although terrifying – begins

**MSF comes
to victims'
aid when
40 houses
are destroyed
in Yebna**

to sound familiar. Several tanks appeared suddenly and began firing. Panicked residents fled without being able to grab anything. Then army bulldozers began to knock down the buildings. There is no question of trying to recover mementos, papers, or clothing from the debris. "If you're not gone by the count of three, I'm firing," says a voice over a loudspeaker from the nearby watchtower.

MSF condemns the mass destruction of civilian homes during winter. We have been working in Gaza since the beginning of the Al-Aqsa Intifada and are concerned about both the medical and psychological consequences for the affected families, who are at risk for post-traumatic stress, depression, and phobic disorders. MSF's joint mental medical team has intervened to help these 200 newly homeless people overcome the catastrophe.

JERUSALEM, March 11, 2002 – Beginning in November 2000, MSF launched two medical and mental health programs in the Autonomous Palestinian Territories of the West Bank. These programs are intended to benefit residents of regions most exposed to violence, including people living near confrontation sites, army installations, and Israeli settlements. Since early March 2002, we have witnessed an unprecedented escalation of violence. The last few days have been the deadliest in 14 years. Israeli Defense Force attacks against the Autonomous Palestinian Territories are continuing and widening.

During the first week of March, close to 100 Palestinians civilians and children were killed during air strikes and tank invasions in refugee camps near Jenin, Nablus, Bethlehem, and Gaza. The city of Hebron, where MSF's medical team lives and works, was also subjected to heavy firing from machine guns and tanks. Emergency response services and health care providers have been attacked, preventing them from providing emergency care to the wounded. The most recent vic-



MSF condemns israeli attacks on medical services

tims were the head of emergency services for Jenin, a UN nurse in Tulkarem, an ambulance driver, a first aid provider, and a medical worker in Gaza. Several ambulances were crushed, flattened, and shot at during the attacks. During the past 17 months, the Israeli army killed 15 members of the medical corps and wounded many others. The Al-Mezzan hospital in Hebron has been shelled repeatedly, damaging the pathology department and the patient

cafeteria. These attacks are very alarming and are in obvious violation of international law.

The Geneva Convention and international humanitarian law expressly protect medical services and the wounded during conflict. Belligerents are required to provide care for the wounded and ensure safe access to medical staff. MSF condemns these attacks and calls on Israeli authorities to take immediate measures to protect medical staff, guaranteeing them access to the wounded as well as to the most needy.

JERUSALEM, April 4, 2002 – Blocking of medical care to Palestinian civilians in the Occupied Territories has reached alarming levels. At a time when ordinary Palestinians are subjected to intense military pressure, MSF's ability reach the most isolated families is being severely restricted. Even in Hebron and the Gaza Strip, where MSF has been working and where the army is not concentrating its attacks, access to medical care is under serious threat.

A particularly disturbing incident occurred on the morning of April 2. An MSF team composed of a doctor, translator, and driver went to Um Amer, a village in the Hebron district, to conduct medical consultations with Palestinian families living in remote areas. MSF's car was clearly identified with bumper stickers bearing the MSF logo and a flag. Each member of the team wore an MSF jacket. Along the way, the team reached two military checkpoints and, after showing MSF identity cards, was authorized to continue. At the third checkpoint, three Israeli soldiers jumped out from behind trees and, pointing their weapons at the car, forced it to stop. The team was authorized to pass only after clearly explaining the medical nature of its mission. As the car neared the village, it



MSF protests about controls by armed militias

was stopped again by two men in plain clothes carrying automatic weapons. The men, who wore no distinguishing signs, were clearly security guards from the neighboring settlement. While verifying the team's identification, they confiscated the keys to the car. The team was thus delayed for more than half an hour without any explanation.

This last incident illustrates the continuing obstacles faced by MSF teams in carrying out their work and seeking to exercise their right of free access to civilians. These obstacles also contradict the Israeli army's guarantees that MSF teams working in the Occupied Territories are free to move around. In the past, we have requested and received the right to move freely to conduct our medical work. As the situation deteriorates, we can no longer rely on these commitments. Even when we receive authorization, we are increasingly denied the right of passage.

MSF considers these restrictions a violation of our right to access victims of this conflict, as well as a violation of civilians' right to access medical facilities. MSF is very concerned about the Israeli army's apparent indifference to this situation. This indifference encompasses both Israeli soldiers' attitudes at checkpoints and the fact that the Israeli army authorizes independent militias and armies to interfere, at will, with our work.



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Telec.: + 852 23 04 60 81
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Italy

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Médecins Sans Frontières
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