



Living in the Shadow of Trauma

Focusing on victims of terror and IDF soldiers, Dr. Rachel Dekel of BIU's *Louis and Gabi Weisfeld School of Social Work* explores the short- and long-term effects of traumatic events.

Translated and adapted from the Hebrew article by Dr. Haggai Harif, published in *Hidushim*, Vol. 1

Israel's recent Operation Cast Lead has underscored the urgency for comprehensive research on the effects of trauma. During the three-week long Israeli offensive in Gaza, close to 500 Hamas rockets rained in on Israel's south, sending hundreds of thousands of terrified residents scurrying to bomb shelters and protected spaces. For the people of Sderot and neighboring communities, this was just the latest episode in a highly stressful eight-year long ordeal. Enduring more than 10,000 missiles which have severely disrupted their lives, many suffer from shock, acute anxiety and fear. In order to effectively assist these distressed residents as well as victims of terror and combat stress soldiers we must be able to deepen our understanding of trauma and the heavy psychological and emotional toll it takes.

"Unfortunately, there is hardly anyone in Israel who doesn't know someone directly affected by a terror attack," says Dr. Rachel Dekel of Bar-Ilan University's *Louis and Gabi Weisfeld School of Social Work*. Lately, it appears that Israeli academia has also been "affected", with Israeli researchers now leading the world in the study and treatment of Post-Traumatic Stress Disorder, or PTSD. According to Dr. Rachel Dekel of Bar-Ilan University, Israel is all too familiar with stories like this one:

"D," age 42 and the father of four, is the owner of a successful business. Three years ago he was near the Kfar Saba shopping mall, when he heard a sudden explosion, followed by shouts and horrific screams. Like the many people around him, he ran away from the scene of the explosion, then got into his car, and went home to sleep.

When he woke up, D felt an extreme pressure in his chest and suffered severe ear pains. Ever since the bombing, he complains of anxiety, is haunted by images of children running, and is reluctant to leave the house. He exhibits

excessive agitation, has developed a sleeping disorder and is extremely sensitive to noise. In addition, D is having difficulty returning to his work because of ongoing problems with concentration and memory.

Israel – A Human Laboratory for Stress

"Unfortunately", says Dr. Dekel, "there are many, many Israelis who have experienced terrorism and suffer from Post-Traumatic Stress Disorder. In my work I examine the victims' symptoms, but also look for risk factors, such as earlier traumatic events or an absence of social support, which have major bearing on this condition. By examining the whole picture, I can get a better idea about what contributes to PTSD, as well as how it might be prevented."



Israelis of all ages hurry to bomb shelters when the missiles rain in on their communities

Dr. Dekel's research goes hand-in-hand with the treatment of PTSD victims. She does clinical work at the Meir Hospital Trauma Unit in Kfar Saba, where she is responsible for the mental evaluation of terror victims. Working with people who suffer from extreme anxiety and severe emotional distress has made it painfully clear how difficult it can be to restore the mental balance that the victims had before they experienced trauma. However, she says, her work

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has also clarified the importance of reaching out and suggesting intervention, as soon as possible – something that she says can prevent the onset of trauma's debilitating long-term effects.

"In many cases", she says, "the casualties showing acute signs of distress close to the event are those who will suffer from various mental problems in the future. This is the reason why it is important to immediately offer them both group and individual therapy. During therapy, we go back with them to the event in a supervised way, and help them to reconstruct their story in a relaxed, secure and supportive environment. The professional indicators that we developed have allowed us to construct a time-line of distress levels and thereafter suggest therapeutic support every step of the way."

"The State of Israel is a human laboratory for stressful situations," Dr. Dekel asserts. "Many Israelis must cope with an acute sense of mental distress caused by real-life images of fire and blood that they experienced closely." She notes that mandatory military service in the Israel Defense Forces – service that can be associated with traumatic scenes of danger and death – is an integral part of the lives of most Israeli citizens and their collective identity.

"Israeli combat soldiers are exposed to a variety of pressures – most obviously, the concrete danger of death or injury. In response to these experiences some soldiers sustain mental trauma that translates into a long-term injury." According to Dr. Dekel, such people may be destined to suffer for many years, feeling trapped in an emotional vortex of fear and distress, accompanied by disturbing memories as well as difficult images that hover continually before their eyes. This phenomenon – usually diagnosed as Post-Traumatic Stress Disorder – creates substantial difficulties in the victims' daily function.

Dr. Dekel stresses that PTSD does not present itself identically in every patient. "Sometimes, a severe reaction to a traumatic experience during military service appears only many years later," she says. The exact symptoms vary widely, and include, among other things, disturbing thoughts about the traumatic event and invasive memories of it, recurrent dreams and nightmares, emotional reduction (for example, inability to feel love), sleeping disorders, stress, alertness, hyper-vigilance and anxiety, tantrums, feelings of guilt, concentration and memory difficulties. In addition, sufferers from PTSD may adopt evasive behaviors that keep them far removed from any activities and relationships that might trigger traumatic memories.

The Yom Kippur Watershed

Dr. Dekel became involved with these issues during her doctoral work, when she studied the reactions of IDF soldiers during the Yom Kippur War. The main purpose of her extensive research was to identify the connection between the immediate responses of combat soldiers in the battlefield and their emotional distress and functional difficulties in the long run. An additional research goal was to identify factors that either balance or aggravate the struggle with distressing situations both immediately – during the period of battle – and also many years after the war.

According to Dr. Dekel, the Yom Kippur War represented an important turning point in the way Israeli society responded to battle-related mental trauma. She says that, while no one would deny that during the War of Independence, there were many soldiers who experienced mental, as well as physical injuries, it took the national shock of October 1973 to legitimize the serious discussion of this phenomenon. "It is reasonable to assume that Israeli society, guided by 'macho' social codes, was not ready back then to grant legitimacy to military soldiers who suffered from hidden post-traumatic symptoms," Dr. Dekel says.



Bamahane

Israelis during a missile attack in the Sderot area

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Israeli soldiers in battle during the Yom Kippur War

“Nowadays society is more open to the subject than in the past.” Still, she adds, the academic study of PTSD tends to rise and fall with the country’s military fortunes; during quieter times the subject is relatively neglected, but during wars – when trauma casualties accumulate rapidly – the subject is taken up more frequently in academic circles.

PTSD – Part of Israeli Military History

According to the Israeli Ministry of Defense rehabilitation unit, there are more than 4000 casualties recognized as IDF invalids who suffer from mental problems related

to post-traumatic stress. However the actual number is believed to be considerably higher. According to several assessments, many others suffer from different degrees of combat fatigue, yet are not even aware of its existence as a medical diagnosis. In addition, many trauma sufferers are too embarrassed to ask for assistance and therefore are not recognized as casualties.

In 2003 on the 30th anniversary of the Yom Kippur War, Dr. Dekel together with her PhD mentor, Professor Zehava Solomon, published an extensive research paper on the mental health of Israeli soldiers who had

been imprisoned in Egypt or Syria in addition to their combat trauma. They examined 209 soldiers who participated in the Yom Kippur War, 103 released war prisoners, and a control group of 106 other soldiers. The findings showed that 23% of the soldiers who had been held in captivity suffered from Post-Traumatic Stress Disorder. Moreover, the number of those reporting deterioration in their mental health was ten times higher in this group than the control group. In this study, an association was also found between certain variables, including the age of the prisoners-of-war when they were taken captive, the severity of conditions in captivity, their emotional and behavioral responses to captivity, and the appearance of post-traumatic characteristics many years later.

“The conclusion of our study was that, in cases like this, the personal resources the soldier has at his disposal – such as the strength of the basic family unit, the ability to form intimacy, etc., is crucial to determining the ultimate level of Post-Traumatic Stress Disorder that will occur,” Dr. Dekel states. “This underscores the importance of following up on the mental condition of released war prisoners, and overseeing their rehabilitation. This is particularly true for those soldiers who suffered torture and abuse during captivity or lost their mental health due to severe imprisonment conditions.”

Secondary Trauma – PTSD in Family Members

In another area of her research Dr. Dekel is studying the situation in which a traumatic event can reach beyond those who were directly injured to affect those close to them. In this “secondary trauma” the family of the injured becomes, indirectly, victims of the event by virtue of being emotionally bonded to the person suffering distress.

“This is similar to another well-known phenomenon in Israeli society,” says Dr. Dekel. “Just as many



Enduring more than 10,000 missiles, many residents of Israel's south suffer from shock, acute anxiety and fear

second-generation holocaust survivors suffer from increased levels of anxiety, shame and self doubt, and experience difficulty managing stressful situations and emotional regulation, those close to an ex-soldier with PTSD can also exhibit post-traumatic behavioral patterns. The soldier's difficulty in experiencing positive emotions and creating intimacy with his wife and children damages his ability to provide warmth, love and acceptance. As a result, an emotional vacuum is formed in the life of the family, and the father is perceived by his children as emotionally inaccessible.”

As the wife of one PTSD-sufferer put it: “Some of my husband's symptoms have passed to our children, and I have been experiencing symptoms as well. When I hear a noise it bothers me. I have even woken up hearing explosions. ... we have been infected, one could say, we are infected by his reactions”.

Dr. Dekel notes that many women married to combat stress casualties put their personal needs aside in order to maintain family balance, and as a result they are coping with severe emotions of depression and anger. Despite these difficulties, however, a mother

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Israeli soldiers during the 2006 Lebanon War

in this situation can still play a key role in reducing the severity of symptoms of emotional distress in her children. “Our study of the children of PTSD casualties demonstrated that a warm and loving mother, one that allows personal space and autonomy, is more likely to balance and reduce her children’s expressions of suspicion, distrust and emotional numbness, and reduce difficulties related to creating intimate relationships in adulthood,” she says.

Is it possible to identify patients who are most likely to develop post-traumatic symptoms later in life, and reduce their symptoms’ severity? Dr. Dekel is optimistic.

Mental Health Workers and PTSD

In another project, Dr. Dekel and her colleagues examined the mental distress levels of hospital social workers that work directly with terror attack victims. During the massive wave of attacks that took place

in the beginning of the decade in Israel, these employees were on heightened state of alert almost continually. They were constantly called upon to assist the wounded, and were required to do so quickly while disengaging other activities, and putting aside any apprehensions concerning their own families and acquaintances.

The research results show that less than 10% of the employees report distress that stems directly from their work with terror attack casualties. Furthermore, most of them reported that they feel confident in their professional interferences, and succeed in assisting the patients.

The study showed that, in terms of emotional distress, seniority mattered: those found to be suffering from emotional trauma were generally new employees, in hospitals that were exposed to a relatively large

number of terror related events. Dr. Dekel says that even though these findings are encouraging, the hospitals' department heads are still responsible for identifying those employees who are in distress and offering them support and professional guidance.

Israel's Unfortunate "Expertise"

The great experience Israel has accumulated in treating trauma casualties, and in dealing with post-traumatic symptoms both on the theoretical and clinical levels, has made Israeli professionals sought-after consultants in this area throughout the world. Israeli experts have been sent to different countries that have been struck with natural disasters in order to provide emotional support to local communities. Dr. Dekel also notes that after the massive terrorist attack on the World Trade Center on September 11th, 2001 "the New York City authorities requested counseling from Israeli sources who specialize in mass traumas."

Currently, Dr. Dekel is examining the impact of Qassam rockets falling on the North-West Negev inhabitants and the contribution of personal and communal resources to balance the distress. In a recent study soon to be published in the journal, *Health and Social Work*, she and Dr. Orit Nuttman-Shwartz from the Social Work Department at Sapir Academic College in Sderot compare the psychological effect in two types of communities: the development town and the kibbutz. Their results reveal that development town residents report more post-traumatic stress (PTS) symptoms and more post-traumatic growth (PTG) – positive change as a result of coping with trauma – than did the Kibbutz residents. Dr. Dekel similarly has collected data on Sapir College students, which shows the same trend – that the situation in Sderot and neighboring development towns is more challenging than it is for Israelis from other communities exposed to rocket attacks.

In the near future, she additionally intends to broadly examine the psychological responses of the evacuated Gush Katif civilians and discover the connection between the extent of the preparation for the evacuation and the mental distress that followed it.

Meanwhile Dr. Dekel allows herself to state the obvious: that being an Israeli means living in a society familiar with grief and suffering. "There are not many countries in the Western world that have dealt, over the last decades, with so many traumatic situations," she says. "We are constantly improving the methods of treatment for combat stress casualties and those injured in terror attacks as a way to reduce personal and collective suffering. Our stamina both as nation and society suggest that our strength lies in our constant commitment to remain normal, stable and true to our beliefs." ❖



Dr. Rachel Dekel is a senior lecturer in the Louis and Gabi Weisfeld School of Social Work at Bar-Ilan University. She obtained her BA and MA degrees from the Hebrew University of Jerusalem and her doctorate from Tel-Aviv University. In her courses she focuses on the effects of traumatic events on those who were exposed to them directly or indirectly. Dr. Dekel, a mother of three, has published dozens of scientific articles both in Israel and abroad. Her research on Israeli released prisoners of war was funded by a grant from the Israeli Academy of Sciences and Humanities.