

Leveraging Past Research and Experience in Extreme Circumstances: Beneficial Interventions for Internally Displaced Families in Israel Following October 7, 2023¹

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Abstract

This field study suggests therapeutic interventions for internally displaced families in Israel following the October 7, 2023 massacre. By integrating field experience with research-based knowledge, we explore best practices for addressing trauma related to displacement. The study employs a context-informed approach, highlighting the psychosocial challenges facing children, parents, and communities. Key themes include the disruption of traditional family roles, the adaptation of therapeutic models, and the importance of community resilience. Findings emphasize the importance of family-centered interventions, the continuity of care, and historical adaptation in response to crises. This guide study suggests practical strategies for mental health professionals supporting displaced populations in extreme circumstances.

Keywords: Displacement Trauma; Community Resilience; Context-Informed Interventions; Family-Centered Therapy; Psychosocial Adaptation.

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Introduction

This field study was written by two practitioners who, following the events of October 7, 2023, in Israel, sought to assist the affected communities by applying best practices derived from integrating their field experience with theoretical, research-based, and practical knowledge from similar situations documented in the professional literature. Their goal was to adapt and apply this comprehensive body of knowledge to the extreme and unprecedented circumstances they faced. In doing so, they also collaborated with a wide range of colleagues, whose insights and support contributed significantly to shaping the practical interventions described in the article.

One of the authors, Yan Serdtse, resided in the Gaza border region for six years with his wife and three children, working in the educational psychology service of a local council in the area. Yan and his family were evacuated from the region following the war. During the academic year that he was outside the region, he remained actively involved in supporting educational teams, parents, and their children. He has worked in evacuation centers and supported those returning to the Gaza border area. Since the beginning of the war, Miriam Shapira has leveraged her extensive experience working with displaced families and communities to mentor and supervise teams of educational psychologists, offering professional guidance and support. It is essential to underscore that throughout the year, both authors have been deeply engaged in the field, not only as professionals but also as individuals closely connected to the region's challenges.

Initial Challenges

There was a sense of chaos in the first few weeks in the evacuation centers as numerous organizations and individuals arrived to offer help and support. A large volume of donations poured in, including equipment and all types of goods. There were performances and food stands, creating an overload of sensory, visual, auditory, and even metabolic stimuli. It was common to see lobbies crowded with evacuated families using them as their temporary living rooms. Children ran from one performance to another, navigating between food stands laden with sugary treats. Nevertheless, the evacuees' desire for privacy was evident, but it was challenging to find a refuge from the overwhelming bustle. The disruptions also significantly impacted the continuity of community functions, including the educational system, welfare services, therapeutic support, and the role of parents. The usual routines and structures that families relied on were fractured, further complicating efforts to maintain a sense of stability and normalcy for both children and adults in the evacuation centers.

The central challenge facing mental health professionals in supervision groups was coping with the overwhelming sense that the new situation was fundamentally different from anything they had previously encountered. Many felt they lacked the knowledge to analyze, comprehend, and advise in this unprecedented scenario. Moreover, basic assumptions regarding the therapeutic setting were

unsettled, raising questions such as: With whom do we work? Where do we work? For how long? How is success measured? An essential aspect of supervision became organizing relevant knowledge and deriving insights and practices for these new extreme circumstances.

This study focuses on context-informed therapeutic interventions for internally displaced people. Our goal is to equip practitioners with the necessary tools to understand the implications of the current context and recommend ways to adapt therapeutic models accordingly. The ongoing conflict, the “Iron Swords” war, presents unique challenges that impact both the therapeutic setting and the adaptation of therapeutic models for children, adolescents, parents, families, and broader support networks.

The context-informed theory posits that individuals, families, and communities exist within diverse frameworks—including cultural, religious, socioeconomic, racial, gender, and national backgrounds — as well as broader socio-political environments (Ehlers et al., 2012; Tummala–Narra, 2013). This perspective is crucial for developing therapeutic interventions tailored to each client's unique circumstances. Similarly, Boira et al. (2013) highlight that the therapeutic context—specifically, the setting in which interventions occur—plays a critical role in the outcomes of court-mandated batterer intervention programs. They argue that a comprehensive understanding of both proximate and ultimate factors influencing therapy can lead to more effective interventions. Moreover, these contexts shape how individuals perceive reality and interpret various events (Nadan & Roer-Strier, 2020). In the current scenario, they also influence how people construct the meaning of life-altering experiences (Sigad & Tener, 2022). Therefore, understanding the context of displacement is imperative when developing therapeutic interventions, as it constitutes a significant factor that must be carefully considered.

Internally displaced people are essentially refugees within their own country. According to the UN's guiding principles, internally displaced people are "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence as a result of or to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border" (Kalin, 2023). [Editor's note: You need a page reference here.] This definition does not confer a special legal status on internally displaced people, as they remain within their country's borders; however, they are still entitled to all the rights afforded to them as citizens or residents of that country.

It is essential to recognize that war and displacement impact not only individuals but also the entire family unit. The psychological stress associated with displacement can impair a family's ability to care for and nurture young children (Betancourt et al., 2015; Sim et al., 2018). Furthermore, the adverse effects on the family's mental health and functionality can persist long after the displacement crisis has ended (Bogic et al., 2015; Mollica et al., 1998). In the context of collective trauma, displacement from home—particularly from a community-oriented settlement—impacts the daily functioning of individuals and families, as well as the processes through which they attribute meaning

to life-altering events (Walsh, 2007). Beyond the personal crisis caused by exposure to violent events, experiences of extreme danger, and lack of security, there are also profound questions about individual, familial, community, and social identity that impact the construction of personal and collective memory (Shmuel, 2020).

The following sections will describe Israel's previous experience with displacement and its response, suggest best practices for effective displacement-focused therapeutic interventions, and underscore the importance of considering the gender-specific characteristics of mothers and fathers in the context of displacement. The current displacement scenario following the events of October 7, 2023, highlights both continuities and deviations from past experiences of displacement in Israel, requiring a nuanced understanding of the historical and contemporary factors influencing internally displaced people. Thus, we need an approach that draws on established therapeutic practices and integrates innovative strategies tailored to the unique circumstances of the "Iron Swords" conflict, ensuring that interventions remain relevant and effective in addressing the multifaceted needs of the displaced population.

Israel's Prior Experience with Displacement

Israel has prior experience with displacement and its aftermath in the context of the dismantling of settlements in Sinai (1982) and Gush Katif and northern Samaria (2005). Sagy and Antonovsky's (1986) study examined adolescents from Sinai settlements who coped with the stress of the threat of evacuation and the post-evacuation situation. Their longitudinal research revealed that situational factors were significant in explaining the coping mechanisms when stress was acute, highlighting the importance of viewing displacement as a contextual issue. However, when stress became chronic, personal factors gained more explanatory power. A retrospective study conducted two decades after the Sinai evacuation assessed adults who had experienced the displacement as adolescents, comparing them to a similar demographic that had not experienced geographical displacement during adolescence (Galili & Lev-Wiesel, 2007). The study identified the factors that participants believed aided their adaptation, with family being the primary contributor. Among those living in communities explicitly established for the displaced, the significance of residing in such communities was equivalent to the family's contribution to adaptation (Galili & Sagy, 2010).

Studies examining the experiences of families evacuated from Gush Katif, including children and adolescents, found that they faced various challenges stemming from the disengagement event itself, the uprooting from their homes and communities, and the loss of trust in the state due to the compulsory nature of the disengagement and the subsequent living conditions in which they found themselves (Ben Yosef, 2009; Hefetz, 2011; Shapira & Hen-Gal, 2009). These challenges included economic hardships, inadequate living conditions, the dissolution of community frameworks, and prolonged states of stress and uncertainty. These issues manifested in feelings of alienation and

instability. Symptomatically, there were outbursts of violence, impaired academic performance, and a diminished sense of personal security. A longitudinal study found that, over time, a significant number of children and adolescents managed to recover from the crisis and return to normative functioning in most areas of life, mainly due to the resilience of their families and communities, as well as support from various entities. However, other children and adolescents struggled to cope. Some even experienced worsening issues over time. They engaged in risky behaviors, exhibited poorer academic achievements, frequently changed schools, and had partial attendance records. Among their families, symptoms included the breakdown of parental authority and family crises (Ben Simon, Weiss & Shapira, 2017). Nevertheless, the research highlights the critical role of community belonging as a leading protective and rehabilitative factor. This sense of belonging can be achieved through various practices such as involving and assigning community responsibilities to young people, providing emotional and compassionate support, and offering opportunities for expressing difficult emotions in a creative community setting.

As of the end of 2024, no longitudinal studies had examined the effects of the displacement resulting from the "Iron Swords" war. However, by drawing on past findings—while accounting for both similarities and differences in the situations—and leveraging the accumulated experience of current practitioners, we can outline several best practices for addressing these effects. These best practices emphasize strengthening community resilience, implementing family-centered interventions, and providing targeted support to address the diverse needs of displaced populations.

Best Practices for Therapeutic Interventions with Displaced Families

A foundational assumption underlying displacement-focused intervention practices is that displacement impacts the entire family. Furthermore, the family serves as a crucial agent in maintaining continuity amid disruption (Ehlers et al., 2012; Mendes et al., 2018; Tummala–Narra, 2013). Consequently, therapeutic interventions addressing displacement-related trauma consistently emphasize the family component. The following best practices are essential for effective displacement-focused therapeutic interventions:

1. Developing a Broad Therapeutic Alliance

It is essential to establish a relationship of trust with all family members, founded on mutual respect, empathy, and understanding. Even if the chosen setting is an individual intervention with the child, fostering a connection with other family members and creating a shared agreement on therapeutic goals and methods, such as the frequency of specific sessions or joint play activities, is essential. Demonstrating concern for the entire family, rather than just one family member, is crucial (Conoley & Conoley, 2009). It is necessary to validate the experiences of parents and other family members, and to listen to their concerns (Pighini et al., 2014; Shapira & Hen-Gal, 2009).

2. Assessing Individual and Family Needs

A comprehensive assessment is recommended to understand the unique needs and challenges of different family members within the family context. Even when only one family member is identified as experiencing significant distress, it is essential to pay attention to symptoms of trauma such as anxiety or depression in other family members. It is also crucial to evaluate the primary family dynamics in dealing with various traumas, including displacement trauma, and map the support systems available to the family. For this purpose, a family intake interview based on the Multigenerational Trauma and Resilience Genogram is recommended (Goodman, 2013; Grove et al., 2020; Mak et al., 2021).

3. Promoting Family Resilience

Alongside the growing recognition of the importance of community belonging as a resilience factor (Ben Yosef, 2009), there is also an acknowledgment that the family unit is more significant during a collective disaster accompanied by displacement (Frederico et al., 2023). Therefore, in addition to therapeutic intervention with the child, it is essential to strengthen family functioning by encouraging effective communication skills, promoting cooperation, and supporting problem-solving abilities. Encouraging families to engage in activities that promote shared experiences, positive interactions, and a sense of unity is also essential. For more details, see the practical guide for parents developed by the Ma'ayan Israel Association, "Creating a Home Without Walls," which addresses the possibility of functioning as a family in the evacuation center, even without a home (Bornstein & Shapira, 2023).

4. Process-Oriented Family Support

In displacement situations, the families' living conditions and issues constantly change. For example, the family must consider whether to leave the evacuation center and relocate with the community or move closer to extended family in another location. Therefore, during the interim phase of a collective trauma, one-time interventions are less appropriate. It is essential to create an intervention setting that enables ongoing communication with families (Shapira & Hen-Gal, 2009). Doing so is necessary to assess their progress, continuously adjust treatment plans as needed, and provide support and guidance in dealing with ongoing challenges (Frederico et al., 2023).

5. Continuity and Change

A displacement crisis significantly disrupts many existing variables, including housing, the social and community fabric, family routines, support frameworks, and leisure and enrichment activities. It is essential to help families navigate the process of grief and mourning for what has ended, whether it is partial or permanent. However, alongside the experience of rupture, it is crucial to help the family identify what remains similar to the past, what has been broken but can be restored, albeit in a different way, and what opportunities have arisen in the new situation (Ben Yosef, 2009).

6. *Empowering the Family*

In displacement situations, families often feel helpless and dependent on external assistance, which can undermine their resilience (Ben Yosef, 2009). Therefore, it is crucial to implement interventions that foster a sense of self-efficacy (agency) and independence among families, thereby increasing their sense of ownership over their recovery and health (Frederico et al., 2023). Below are practices that promote family empowerment:

- 6.1. *Involving Family Members in Decision-Making.* Encourage family members to participate in decisions with the authorities regarding their needs and the methods they use to seek assistance. For example, it is essential to clarify the family's preferences regarding the types of services they require, including the specific type of mental health assistance needed and the frequency of intervention meetings.
- 6.2. *Providing Displaced Families with Psychoeducation.* Equip families with knowledge about mental health in general, and the importance of stress management and coping techniques in displacement situations specifically. Family members may not always recognize the difficulties they are experiencing as being related to the displacement experience itself. It is essential to help them understand the unique impact of this factor. It is necessary to normalize the displacement situation as a form of refuge and dislocation, characterized by specific psychological traits that do not necessarily indicate post-traumatic stress (Hefetz, 2011).
- 6.3. *Promoting Peer Support.* Encourage families to connect and share their experiences and coping strategies for dealing with the displacement crisis. Examples include discussing how other families maintain or create new family routines in a temporary and limited living space (Seguin & Roberts, 2015).
- 6.4. *Encouraging Community Involvement.* Encourage families to participate in community activities and decision-making processes. Highlighting family members' unique contributions to the community fosters a sense of family pride, belonging, and self-efficacy.
- 6.5. *Gender-Specific Characteristics.* In addition to familial and individual characteristics, it is recommended to consider unique gender-specific characteristics. Over the years, the traditional gender roles of father and mother have been shifting towards greater gender equality within the family. More fathers participate in childcare and household chores, while women participate more in the labor market and contribute significantly to the family's income. The changing gender roles within the family enable each family member to fulfill their potential more fully and be less dependent on traditional gender

stereotypes and expectations (Guppy et al., 2019). However, in displacement situations, there is a partial return to traditional gender perceptions. The reason is that in situations of stress and uncertainty, when stability and security are needed, traditional gender perceptions provide a sense of order and clarity (Boring & Moroni, 2023; Ryjova et al., 2022). Thus, during periods of uncertainty and disruption, clear expectations regarding gender roles can provide a sense of direction and meaning.

The traditional gender role of the mother is to be the central figure responsible for meeting the physical and emotional needs of the family: child care (nursing; feeding, sleeping, dressing, bathing, medical care, etc.), household maintenance (responsibility for household chores such as cooking and cleaning, etc.), fostering family bonds (rituals, family events), and nurturing social connections. This is the mother's traditional gender role, even if she is not necessarily the one performing it. The traditional gender role of the father is to be the primary and dominant source of the family's income and the security needed for its existence, as well as to provide children with a sense of security and protection. Fathers often see themselves as role models and instill values in their sons based on their male gender identity (Charlesworth & Banaji, 2022; Grossmann & Grossmann, 2020). In the communities surrounding the Gaza Strip, the vast majority of those who defended the community with weapons against terrorists were men.

In summary, during assessment and intervention processes, it is crucial to consider how the experience of displacement and the accompanying changes in identity and lifestyle affect the roles of both the mother and father as they existed prior to the displacement. It is also essential to examine how these changes affect different family members. For example, mothers and fathers who feel threatened about their ability to care for their children's needs may experience more anxiety and concern. Additionally, displaced parents whose spouses are serving in the reserves or have returned to areas where there is a greater risk may experience more intense distress related to the displacement. Conversely, parents who are the primary breadwinners may experience significant anxiety or distress due to the potential threat to their central role within the family in this regard. They may also feel considerable concern, and sometimes loneliness, regarding their commitment to the family's livelihood.

Conclusion

In light of the accumulated knowledge and the complex reality that hundreds of families face, it is imperative to support displaced children and adolescents within their environmental, cultural, and community contexts. These factors significantly impact the processes of stabilization, healing, and long-term rehabilitation. It is essential to focus on empowering each parent by acknowledging their gender-specific characteristics and to restore control, as much as possible, to both parents and families in practical decisions and various therapeutic interventions. It is necessary to support the social and community framework that provides a sense of belonging and stability, which is critical during periods of displacement and refuge. Additionally, during the anticipated long-term rehabilitative support period,

it is essential to cultivate and promote the exploration and stabilization of identity and meaning, which are often challenged and reshaped in response to the new reality.

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Personal Reflections

As practitioners deeply engaged in the field, the unprecedented crisis following October 7 posed a challenge to us both professionally and personally. The urgency of responding to displaced families, many of whom had lost not just their homes but also their sense of security and stability, reinforced the critical role of context-informed interventions. Working alongside educators, psychologists, and community leaders, we saw firsthand how resilience is not an abstract concept but a dynamic process shaped by relationships, cultural narratives, and collective efforts. Our past experiences—from war-affected regions in Ukraine to long-standing work in trauma care in Israel—provided valuable frameworks, but this crisis demanded innovation, flexibility, and humility.

Beyond academic theories and best practices, this work has been a testament to human strength and adaptability. As psychologists raised in Crimea and those who have spent decades mentoring displaced communities, we are reminded that healing is a journey, not a destination. The families we worked with are not just recipients of care but also active agents in their recovery. Their stories continue to shape our understanding of trauma, resilience, and the profound impact of community and professional solidarity. We hope that the insights shared in this paper will serve as a resource for others navigating similar crises, ensuring that no displaced family faces their journey alone.

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