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GENOCIDAL POLITICS OF SETTLER PSYCHOPATHOLOGY AND PALESTINIAN LIBERATION AS HEALTHY BECOMING

An Interview with Dr Samah Jabr

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Coloniality
liberation
Palestine
psychopathology
resistance
settler
colonialism
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In March 2023, Dr Anissa Haddadi organized a conference with the Centre for Postcolonial Studies at Goldsmiths University in London, titled “Decolonial Thinking and Revolutionary Events”, which Dr Jabr attended. This event led to the subsequent interview in June 2025. The conference papers are scheduled for publication in a special issue of Interventions titled (De)colonial Thinking and Revolutionary Events in 2026. However, due to the ongoing genocide in Palestine, Interventions agreed to publish this interview ahead of the special issue.

Anissa Haddadi: Hi, Dr Jabr. Thank you for being with us and taking the time to speak with us. I am beginning this interview by asking you about

another doctor, Dr Frantz Fanon. Many people see you as an heir to Frantz Fanon, considering the anti-colonial focus of your work and the struggles you've undertaken. So, what was your first encounter with Frantz Fanon and his ideas? What happened? How did you feel? What commonalities and differences did you notice?

Dr Samah Jabr: I will try to give you an honest answer; I don't remember the first time. And I'm now curious as to why I don't recall the first encounter. I recall being given *The Wretched of the Earth* as a gift by someone when I was a medical student. However, I might not have started reading it until after I decided to specialize in psychiatry. I'm not sure whether I read it during my fifth year of medical school or immediately after completing it. What I know is that when I read Fanon, his ideas – everything felt very familiar, as if I had already known them; I was not surprised. I have read various texts by Fanon at different stages of my life, and every time, his ideas have been very familiar. When I say “familiar”, I mean the silencing, the alienation of the colonized, the warning about the fratricide, and the role of the bourgeoisie – all of this instinctively spoke to me.

I felt that his work legitimizes my own thoughts as a medical doctor and then as a psychiatrist, especially since they are often not accepted or embraced by official mental health institutions. The direct link he established between politics and psychiatry is usually unfavourably regarded by official mental health institutions, which seem intent on keeping mental health depoliticized. I firmly believe that this is wrong and contributes to the pathologizing process. When I discovered Fanon, I found an anchor that supports my arguments and helps me understand that we need to challenge the over-pathologization that occurs when we depoliticize. I realized that our need to confront the system is a legitimate one. Working in a place where systemic oppression is so severe that you find yourself in the belly of the beast provides us with similar understandings. Fanon serves as a guiding figure for us. However, both of us inherited the experience rather than my inheriting his thinking. I unequivocally anchor myself in his thinking. I also anchor myself in the ideas of liberation psychologists and scholars from Latin America, such as Ignacio Martín Baró and Paulo Freire.

However, two questions trouble me about Fanon. Concerning the differences, one thing that weighs heavily on my mind is that we do not have any traces of him mentioning the Israeli occupation of Palestine. Did he not say anything about us? About our colonial system, its violence and pathologizing? In my book, I pose these questions and speculate on what he might have said, seeking an imaginary resolution to this unspoken matter (See Berger and Jabr 2021). However, by the end of the chapter, I recognize that we simply do not know. Another difference I note with Fanon is the role of faith in our liberation struggles, particularly now as I observe how

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Palestinians ground themselves in faith and how the Islamic faith provides the stamina, steadfastness, and fuel for many to confront injustice and remain resolute, despite the horrors that befall us. So, this leaves me with the question: why didn't Fanon say anything about the role of religion in Algeria when people called themselves mujahideen, and despite having written for *Al Mujahid* newspaper? The few times he mentions the role of religion are when he writes about his experience as a psychiatrist in Blida-Joinville, where he recognized that people require a different cultural activity that aligns with their religion.¹ So, he doesn't directly address the political aspect of religion; instead, he focuses more on its role in mental health care. Another point is how he understood the unveiling of women. He viewed the veil as a political statement, completely ignoring its religious significance.²

Furthermore, in *The Wretched of the Earth*, he notes that people in rural areas were more engaged in the liberation struggle. He interpreted their involvement as connected to the issue of social class (the peasantry is "on this outside of the class system") and the relationship between the peasantry and their territoriality.³ While I am not an expert on Algerian history, I understand that in rural areas, there was a considerable amount of proactive Islamic education that equipped people to endure the consequences of the confrontation. So, overall, I am struggling to conceptualize how he stayed in Algeria, lived there, worked with the people, and didn't address the role of faith in the mobilization and sustaining of the anti-colonial fight. It feels like something is missing in what we inherited from him.

AH: It's interesting that you mention this because there is a considerable amount of research conducted on the urban classes who worked for the FLN. However, we have minimal information beyond our shared memory about what motivated people in rural areas to join the armed liberation struggle. How did it happen? Did religion play a role? What prompted them to abandon caution? We don't know. This is all the more puzzling, given their role as the backbone of our armed struggle. Regarding Fanon's silence on the role of religion, I suppose that his silence on the role of religion in the liberation struggle was due to internal political divergences between rival factions within the FLN over the role of Islamic law in post-independence Algeria; I believe Fanon wanted a civil state which would affirm the separation of state and religious powers; however, this is just a personal guess.

To return to the juncture that arose between the nationalist elites of the FLN and the peasantry, as discussed by Fanon in *The Wretched of the Earth*, we lack a significant amount of information. Ultimately, I believe this knowledge gap is also part of the postcolonial strategy of erasure. It would be too dangerous for us to acknowledge the rebellious nature of our

1 See for example "Social Therapy in the Ward of Muslim Men, Methodological Difficulties" and "Letter to Ali Shariati", which hint at Fanon's vision of religion and politics as two separate realms and at his distaste for the mixing of religion and politics (Fanon 2021, 266–280, 486–488).

2 See for example "Algeria Unveiled" (Fanon 1965, 35–67).

3 See for example "Concerning Violence" and "Spontaneity: Its Strengths and Weaknesses" (Fanon 1967, 61–106, 111–147).

people, to realize that one doesn't need a formal education to fight colonialism, injustice, or racism, and to instigate a drastic change in the relationship between the dominant and the dominated. This goes back to what Fanon said: at some point, you take up the struggle because you can no longer breathe. Furthermore, the lack of published writings on Fanon's take on the illegal occupation of Palestine does not mean he did not support Palestinian liberation. I find it particularly insulting that some scholars are using this lack to try to convince us that Fanon would not support the right of Palestinians to armed struggle.

SJ: We know from his literature that he had an interest in Pan-Africa and other struggles. While other revolutionaries of his time, such as Che Guevara and Malcolm X, visited Palestine, expressed their solidarity, and spoke to the Palestinian people, he did not do so during his time in Algeria. Algeria was not oblivious to Palestine, and he lived in both Algeria and Tunisia, mingling among a community concerned about Palestine, so again, this gap we have inherited on the question is quite strange.

AH: I would like to move on to the second question and discuss a paradox I have observed in Western epistemology and praxis. The works of the anti-psychiatry movement, which advocate for a shift in our understanding of psychiatry and emphasize its potential role as an agent of political liberation, including those of R.D. Laing, Deleuze and Guattari, are central to the fields of psychoanalysis and critical thought. Yet, when we examine psychiatry as an institution, it has not adhered to that path at all. I observed a similar paradox in academia, which is why I left. On one side, neoliberal higher education institutions reproduce the power structures of racial capitalism. On the other side, they offer courses on decolonial and anti-racism thinking. In theory, these institutions support decolonial ideas, yet we've seen universities calling the police to arrest students protesting the Israeli genocide of Palestinians in Gaza. Students have been most affected in the US, but even in Europe, universities have called or threatened to call the police to silence them. I genuinely expected a global strike from professors to protest how universities have resorted to violence by silencing, criminalizing, and pathologizing students' resistance. I was indeed shocked by the lack of general strikes in many fields. My question to you, as a psychiatrist, is how do you explain this paradox?

SJ: True.

First and foremost, I would like to discuss two key aspects. Historically, contrary to what we would like to think, mental health professionals, psychiatrists, and doctors have, in many ways, supported colonialism and racism since the era of eugenics, deciding which nations should breed and which should not and determining which individuals are deemed superior based

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on their biology. Furthermore, the pseudoscience known as phrenology involved white scientists travelling to various parts of the world, collecting skulls, and concluding that certain nations could be suitable for slavery because specific features of their skulls suggested they could be domesticated. This was accepted as a scientific concept at the time. Additionally, standardized testing conducted by psychologists and statisticians aimed to demonstrate the superiority of white men over people of colour in Algeria. In Algeria, you had the experience of the “Algiers School of Psychiatry”, founded by Antoine Porot and his colleagues, who asserted the biological deficiency of Algerians and used this invented inferiority to legitimize the occupation of the country and the brutality of the colonial system. Historically, these scientists, researchers, and mental health professionals were tools for colonial power. For example, they questioned the motherhood of Algerian women and their ability to be mothers, to love, educate, and raise their children. Today, the motherhood of Palestinians and Lebanese from the South is questioned because they conceal their pain to protect national pride and dignity. These women hide their pain over the loss of their children, and as a consequence, their motherhood is considered inadequate.

Perhaps the more institutionalized individuals are within organizations, the more likely they are to conform to social norms of power. A few individuals might think outside the box and question these practices. Through my professional experience as a medical doctor and psychiatrist, I have observed the silence and repression by mental health institutions concerning Palestine. This hypocrisy was highlighted when the Ukraine war began, as those who had remained silent about Palestine started discussing the trauma of the Ukrainian people, employing strong language against Russia – language that has never been permitted concerning the Palestinians or the Israeli-induced political trauma inflicted upon them. When trauma is depoliticized, especially colonial trauma, it can be mistaken for personal dysfunction. Consequently, mental health professionals may be instructed to treat the perceived personal dysfunction of a colonized nation, implying that all individuals within that context are dysfunctional as humans.

This omertà poses a significant challenge to our approach to the profession. Why is that? It stems from the world order and power dynamics. Even if we were unaware before, over the past 20 months – 600 days – we can now see clearly that official regimes and governments in so-called liberal democracies organize themselves to protect Israel. They have a vested interest in safeguarding Israel and maintaining its existence despite Israel’s ongoing self-inflicted harm and the numerous situations that undermine the very principles and rules established by Western democracies, such as international law, covenants, and human rights. Yet, officially, Western governments continue to defend Israeli war crimes and crimes against humanity. Many of the institutions in these so-called democracies

merely follow government policies, including universities, medical institutions, and others. There is a lack of revolutionary thinking in these institutions, which I believe they fear is a threat to their stability. Revolutionary ideas, like those of Fanon, are often viewed as threatening. When referenced in certain academic settings, as you previously noted, they are frequently used to create a misleading impression of cosmopolitanism, making institutions seem more vibrant and open. However, this does not change the underlying practices of racism, power, and domination. Over the past 20 years, this paradox has become increasingly evident.

AH: From my perspective, it seems that neoliberalism's approach and superficial acceptance of decolonial thought, at least outwardly, are part of a mechanism that captures revolutionary desire: higher education institutions permit us to engage with revolutionary ideas, but only as an intellectual exercise that is completely disconnected from the reality of what it means and what it would mean for us, as intellectuals, to practise decoloniality. Consequently, it becomes part of the process of pathologizing resistance. Because ultimately, reversing the colonial order – something made clear by the ongoing Israeli Genocide in Palestine for millions of people – requires that the intellectual dimension of the anti-colonial struggle be grounded in anti-colonial actions and practices. Revolutionary thinking must be rooted in real, not just virtual, revolutionary becoming. I am unsure how we can escape this, but for many of us, the question remains: how do we shift from being collaborators to actively joining the fight for liberation?

SJ: I see an increasing number of grassroots individuals forming groups that challenge the mainstream. Recently, I visited Italy to speak in various cities. There, I met with some doctors, including forensic doctors, general practitioners, and specialists – not necessarily mental health professionals – who are coming together in a group focused on decolonial medicine. They are trying to integrate colonial thinking into their courses and explore how to practise decolonial mental health in their work. They draw on the conditions of Palestinians living under occupation to consider border detention centres that treat refugees as detainees simply because they lack proper documentation. Their goal is to develop their practice inspired by ideas emerging from Palestine. There are institutes, individuals, groups, and networks from different parts of the world, including Europe, certain Latin American countries, and occasionally, to a lesser extent, from the Arab world, who reach out to me and draw from our situation to question their discipline and mainstream thinking, as well as how it contributes to silencing and alienation. Another crucial issue is that man-made colonial trauma is rarely mentioned in our official texts or usual practices. I seldom hear a critical human rights-based

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approach to mental health from official mental health organizations or in our studies. It is often overlooked or entirely erased from mainstream approaches.

Thus, those with experience in the field who engage with their knowledge, learning, and practical work are best positioned to challenge our education system and share the valuable tools they have developed from their experiences working with affected communities, many of whom are also directly impacted themselves. We have the potential to create an alternative epistemology to the one taught in schools. I have been engaging with researchers from the UK and Nigeria, discussing rigour and justice in epistemology. Here, I would like to mention Michel Foucault's concept of subjugated knowledge.⁴ This is often easily dismissed due to its perceived lack of scientific validity. The reality of oppression should inspire us, as individuals, to network and ask critical questions. While we can pursue this individually, it becomes far more impactful when we collaborate with others to critically examine the relevance of dominant assumptions and themes in mental health in our lives. Much of the knowledge that predominates our practice has been generated in the West. It is referred to as evidence-based experiences; however, these are grounded in a demographic primarily composed of white male university students. Consequently, applying this knowledge to children, women, elderly refugees, displaced individuals, or those facing siege or genocide is highly questionable.

4 For Foucault, subjugated knowledges are knowledges that have been buried by the predominant scientific and rationalist discourse of knowledge; in his words, subjugated knowledges refer to the "historical contents that have been buried and disguised in a functionalist coherence or formal systemization." See for example Foucault (1980).

AH: Before we proceed to the next question, if you'll permit me, I would like to revisit the role of medicine in helping to produce, maintain, and reproduce colonial reality. Concerning the Algiers School of Psychiatry, they not only invented a biological distinction between the natives and Europeans but also established a biological divide between the Arab and Kabyle populations in Algeria. According to them, the Kabyle people were biologically closer to the French and did not possess the mental deficiencies they attributed to the Arab population. The racist colonial penetration and re-coding of our social relations have been internalized and continue to haunt our collective self-perception. In what ways is Israeli psychiatry rationalizing or employing its science to create divisions within Palestinians?

SJ: In many ways. Consider the statement made by Ayelet Shmuel, an Israeli trauma expert, who in a public talk claimed that the Gazaoui society is a society of sociopaths. I doubt she is familiar with the realities of Gaza.⁵ She mentioned this early on in her talk, expressing her discomfort living just a few kilometres from a society of sociopaths. What you described is the policy of divide and conquer. This divide has been perpetuated throughout Palestinian history by the occupiers, first the British and then the Israelis, on many levels. Let me offer another example related to gender. The Israeli army spokesperson, Avichay Adraee, used to post images of Palestinian

5 See for example Middle East Eye (2024). The International Resilience Centre in Sderot, Israel, is directed by Ayelet Shmuel. She is the

instructor for emotional first aid, resiliency, and stress management.

women demonstrators, stating that women who participated in the demonstrations lacked femininity. Through this language and discourse that some individuals can internalize, they attempt to neutralize 50 per cent of Palestinian society, fostering the notion that women should be absent from demonstrations and refrain from voicing their political opinions.

The questioning of divide and conquer is also evident in the Israeli discourse concerning the Druze community in Syria and the occupied Golan Heights. Israel claims to protect the Druze from the Syrian Sunni majority. It has also crafted a discursive strategy that portrays the Druze as being closer to Israeli interests than to Sunni Arabs. A similar approach is also used to divide the Palestinian community by depicting the Bedouins as willing collaborators with the colonial system. About 1 per cent of the Bedouin community have internalized Israeli authority and serve in the IDF as they gain personal benefits. However, Israel would have us believe that the entire Bedouin community supports them. This is false and part of the colonial exercise of power. Every colonizing regime regards the colonized people as subhuman. In Palestine, a range of language has been used to describe Palestinians as beasts on legs, cockroaches, and snakes, and to refer to women and children as little snakes or human animals, recently by Yoav Galland (former Israeli minister of defence, allegedly responsible for the war crimes of starvation as a method of warfare and of intentionally directing an attack against the civilian population in Gaza; and the crimes against humanity of murder, persecution, and other inhumane acts from at least 8 October 2023 until at least 20 May 2024, in Gaza). They view the whole of Palestinian society as subhuman. Yet, they aim to isolate a social segment that they portray as closer to them, whether by inventing genetic or social deficiencies or using territorial claims to enslave them and employ them as subcontractors of the colonial system.

Additionally, we are a very small population residing in the Palestinian Territories. However, we are highly fragmented and categorized by policies such as the divisions of the West Bank into Areas A, B, and C, and the enforced divisions between Gaza, the West Bank, and Jerusalem, as well as the Palestinians living in Israel. There is significant classification and fragmentation intended to foster diverse group psychologies, often leading these groups to conflict with one another as they compete for greater colonial privileges from the remnants left by Israel. This is why my upcoming book on fratricide is particularly relevant; it explores the details of fragmentation and the sowing of seeds of internal strife within the community.

AH: The question of colonial fratricide and its potential recurrence after independence is a reality we experienced in Algeria during what is known as the Black Decade. I see this period as a symptom of our colonial trauma. Collective trauma is reflected in the group's shared memory and

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involves not only the recurrence of the event but also a continuous reconstruction of the trauma. It seems that during the 1990s, we replayed a past collective trauma, and even today, this re-enacting still haunts us. How can we exist as a society when we are afraid of ourselves because of fratricide?

SJ: My mind is preoccupied with this question, and I gain valuable insights from liberation psychology. For instance, concepts such as political conscientization and the retrieval of history are essential practices that can help us better understand our reality. The worst consequence of not engaging in internal dialogue among the oppressed is that we risk misinterpreting our struggles and believing that we fight and harm one another because we are inferior.

You know, there are many statements like that in the Arabic language, particularly in the proverbs that govern it. For example, there is a very simple one: العرب جرب /“Arab Jarab”/“Arabs are scabies”. This can lead people to internalize a sense of inferiority. This is also evident in Palestine, where the Israeli Arab community, as they are often referred to and who are Palestinians who were occupied in 1948, experiences the highest rate of feminicide. Meanwhile, in Jerusalem, people kill each other over parking spots. Thus, we must engage in critical conscientization and retrieval of history; otherwise, we may come to perceive ourselves as innately inferior. This contributes to a negative characterization and essentialization of our identity, leading to self-loathing and disconnection from the community. Consequently, each of us may then seek personal survival. This strategy is again part of a larger colonial design. Furthermore, we have not inherited anything from Western or global mental health and psychiatry that adequately addresses the injuries and wounds of colonized nations.

I would like to add, if I may, an example that illustrates this. I teach many Arab colleagues about topics related to mental health as part of my role on the examining board. The vast majority of Arab doctors and mental health professionals believe that psychiatry began with Freud. They are unaware of the psychiatric hospitals established in Egypt and Damascus, and they do not know how these institutions operated internally. Furthermore, they are unfamiliar with a book written in the seventh or eighth century by Abu Zaid Al-Balkhi, titled *The Interest of Bodies and Souls*, which discusses the Body–Mind link. This lack of knowledge about the inner workings of our past societies and the forms of knowledge they produced means we possess an inferior sense of collective identity, which detaches us from our history and past. I believe this forms part of the postcolonial trauma in the Arab world. Yet, it is more complex and intensified in Palestine due to the ongoing situation that limits our ability to undertake the necessary healing process and recovery.

AH: The next question concerns the role of language. I don’t know if people truly realize that, beyond the use of direct physical force against the

colonized, the colonial system depends on language and the establishment of categories such as colonized and colonizer. From your perspective, I wanted to know what role language plays as an agent of coloniality and colonialism.

I'm mentioning this because something very peculiar, albeit rather violent, happened to me a few days ago. My sister came to visit me in Algiers, and we were walking with a friend in the city centre when we passed The Milk Bar. The Milk Bar was one of the cafés where the French settlers and soldiers used to go, and in 1956, Mujahida Zohra Driff, who had joined the FLN, planted a bomb there. We were reading the remembrance plaque when two French individuals approached us and asked for directions. We exchanged a few words, and the woman told us she was here on a "memory trip". To me, the fact that she can come here, look us straight in the eyes, and tell us that she is here to remember a crime against humanity her state and community perpetrated against us for 132 years is pathological. It prompted me to think about the Israelis – the complete denial of their role in creating, sustaining, and maintaining this colonial system, as well as their denial of the founding violence, the gushing of blood on which colonial reality is actualized. And all this denial is sustained in part by their epistemology. At some point, this woman also told me: "It is hard for all of us". No. There is no equivalence possible between the suffering of the colonized and the suffering of settlers. None. Establishing an equivalence between the suffering of the oppressed and the condition of the oppressor is, to me, also part of the pathologizing and pathogenic strategies of colonial epistemology.

So why is it that we are still in denial of the pathological quality of Western epistemology and its direct role in sustaining the domination of the colonial symbolic order and the actualization of colonial reality?

SJ: I have numerous mental associations in response to your question. First, let me discuss how language shapes people's minds and sustains colonialism. I will provide examples from Palestine to show how Israeli Arabs deny the identity of the Palestinian people and strip the Arabs – who are, after all, an ethnic group – of their national identity. They describe Palestinians as security threats, and there is a troubling discourse surrounding the reproductive capabilities of Palestinian women. The first time I encountered the term "demographic bomb" in relation to women's reproductive health, a long time ago, I thought it was genocidal; that this constitutes a genocidal discourse. I recall the fear I felt when I first heard it; I was a young adult, around 20 years old. The use of the term "terrorists" also raises the question: Who decides who is a terrorist? Any non-state agent fighting for freedom is labelled as such, while a state agent may commit horrific acts portrayed as lawful and face no consequences. Thus, language can shape people's minds and sustain support for the military machine on the ground. And yes, I have a strong reaction to the story you shared, especially regarding the hypocrisy

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of creating false symmetry between those who, from a place of comfort, chose to be colonizers and those who were forced to be colonized and resisted. Portraying both sides as equals – equal in pain, equal victims, and equal tragedies – seems deeply misleading.

AH: This false analogy erases their role as perpetrators.

SJ: Yes, it is a mechanism of denial.

AH: The invention of false analogies was part of the French colonial strategy here, in Algeria; they created a distinction between the settlers who owned the lands and the *pieds-noirs*, who were workers. They insisted *pieds-noirs* were “civilians” as if they had not settled here, as if they were not actively involved in producing and maintaining the apartheid and occupying system. To this day, many people in France believe that the *pieds-noirs* had nothing to do with the colonial system. And this is really what this woman told me. She told me her grandparents were merely factory workers, as if their belonging to the working class erased their status as settlers.

SJ: Factory workers in a place where they enjoyed colonial privileges.

AH: Yes, exactly. They were citizens of an apartheid state, and many supported the OAS. This fascist paramilitary organization used armed force to maintain the occupation of Algeria even as the Evian Accords were being negotiated. To this day, they find it unacceptable when we assert that *pieds-noirs* were not civilians. This reflects the current situation of Israeli citizens, as they are in a state of denial: they have been and continue to sustain apartheid, and they are perpetuating genocide. Yet by claiming to be civilians, they erase this reality.

SJ: The use of language plays a crucial role in denial. However, I want to respond to the story you shared, which suggests that resistance must not weaken; it is not limited to military confrontation. Intellectual resistance is essential. That is where I aim to contribute, as intellectual resistance must continue to thrive and grow. Its language can challenge the prevailing discourse and promote a different way of thinking and talking. In the case of Algeria and France, we know that the French enacted a law in 2005 recognizing the positive aspects of colonialism. They still display the skulls of freedom fighters, those who fought for their land’s independence, in museums.⁶ They do not express regret or offer a historical apology for these crimes. Therefore, the need for intellectual resistance is urgent. The confrontation on the ground has ended, but the intellectual struggle remains far from over. There is still much work to be done.

6 On 18 December 2023, the French parliament adopted a law on the restitution of human remains held in French public

collections that are less than 500 years old; however, doubts have already arisen about the identity of the few remains that have been returned.

7 Larbi Ben M'hidi was an Algerian Shahid, freedom fighter, and FLN leader who was arrested, tortured, and executed by France in 1957. The French authorities covered up his death as a suicide, only recently admitting to his murder.

I'd like to provide a recent example and relate it to our earlier discussion about pathologization. A few months ago, Macron admitted that the French police had killed Larbi Ben M'hidi, and the crime was staged to make it appear as though he had committed suicide.⁷ This is important because accusing a leader of suicide undermines his status as a leader and role model, and this tactic has been used. It echoes what happened to one of the leaders of the Palestinian hunger strikes, Khaḍr 'Adnān Muḥammad Mūsā. I mention him in my book, *Beyond the Frontlines*, and I interviewed him in the documentary based on the book, after his fourth or fifth hunger strike (Jabr and Youssef 2018; Dols 2017). He was detained for the final time on 5 February 2023 and started what would become his longest hunger strike. Then, on 23 May, there was a change in government. Ben Vir, a notorious right-wing politician, took charge of the prison administration and left him to die during the hunger strike. He left him in his cell and did not provide the necessary medical care. When he died, they claimed he had committed suicide; the Israeli media stated he had committed suicide. Again, we see that suicide in an Arab Muslim country is viewed as pathological and sinful. Accusing a leader of suicide is yet another vicious attempt to undermine that individual's credibility.

AH: This demonstrates how they use language to penetrate our symbolic order and social codes to subvert them against us. This is a never-ending cycle. Frantz Fanon discusses, particularly in *Black Skin, White Masks*, the inner struggle he faces against the representations imposed upon him by the colonial system as he searches within himself for images of himself that enable him to continue fighting back.

Language can act as an agent of colonialism and coloniality, yet it can also serve as a force for liberation. You mentioned earlier the role of faith in this context, and I would like you to elaborate on the role of language as an agent of liberation.

SJ: Language and symbols are vital in the Palestinian fight for freedom. Let me give some examples. My book, *Il tempo del genocidio*, is about bearing witness (Jabr 2024). It contextualizes the mass killings, displacements, starvation, torture, and humiliations within a broader context of Palestinian historical trauma. In doing so, it testifies to the various methods used to manipulate our perception of the systematic extermination of Palestinians, especially women and children – the possibility for future generations to survive – unprecedented in recent history.

In such conditions, bearing witness is fundamental to me; it is an act of resistance. I want to discuss the word “Shahid” because it can be misunderstood when translated as “martyr” in English. “Shahada” refers to giving testimony. For me, testimony sits at the intersection of Islamic ethics and

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professional ethics. Our roles as doctors and mental health professionals place us close to people's most personal experiences. When they entrust us with their stories, we become witnesses to their lives. Our primary ethical duty is to testify to the horrors, violence, and difficult conditions that cause suffering. Additionally, in Islamic ethics, there is a verse in the Qur'an that states very clearly: "Do not conceal testimony". I see all my writing, storytelling, and lecturing as an ethical and moral obligation to testify. The word Shahid differs from Shahada, meaning testimony, because a Shahid is someone who may become a Shahid either voluntarily or involuntarily. You act voluntarily when standing up for justice, fully aware of the risks, including the risk of losing your life. When you give testimony, there is a price; you don't do it from a place of comfort. This makes it an obligation, an ethical necessity. The Shahid, who perishes like a young child caught in a bombardment, is the last witness, the last to see the horrors that lead to their death. There is something in this language, the language of Shahid and Shahada, that is very strong and powerful.

Additionally, the concept of Sumud, which has been present since the British mandate, predates and encompasses a broader notion than psychological resilience. Sumud is both a collective and personal trait. It includes steadfastness and perseverance, as well as action-oriented elements. It is not merely a psychological state; it is about action, resistance, and standing firm. Every Palestinian understands these words because we instinctively feel them through our experiences of being subjected to conditions designed to uproot us and push us away. Therefore, your natural response of staying steady reflects the Sumud. So, you don't need an intellectual researcher to explain the meaning of Sumud because everyone understands it, but it's difficult to articulate. We don't require a conceptual definition when we use it among Palestinians.

The term Intifada is also another essential concept. When you wish to distinguish between a dead person and a living one – the dead and the non-dead – if you touch or provoke them, and they jolt or convulse, they will سينتفض /sayantsafidh, meaning they will show an intifada. For Palestinians, the two intifadas were a reaction to demonstrate that we are not a dead nation, and we are willing to fight, that we are very much alive. Additionally, some symbols cannot be verbalized because some experiences are unspeakable. The symbols that cannot be verbalized include the way the watermelon became a symbol when people who raise the flag are punished heavily and are subjected to brutal repression. The red triangle is also becoming a symbol of increasing importance among Palestinians. When the resistance shows their videos of counterattacks, they mark the target with a red triangle. This red triangle is cherished by Palestinians, who wear it as a necklace and keep it hidden. It is becoming a significant symbol for many. People find language and symbols to be valuable resources for continuing their struggle.

AH: This connection to language, where symbols can express the unspeakable more effectively than words and evoke bodily reactions, is also linked to survival situations. Over the past twenty months, my mind has been struggling to process and understand what is unfolding because, as you mention, we face a situation so violent and horrifying that we are encountering the unspeakable. How can we take measure of what is happening?

SJ: It is essential to assess how it affects people now and in the future. The only thing that comforts me in difficult times is recalling that we went through it in 1948; our grandparents experienced it, and we survived. This gives me hope and keeps my optimism alive as I witness all the killing and oppression. I was in tears yesterday when I saw a short video of a boy. We know there is a colonial strategy for organizing famine, and this video shows Palestinian children gathering with pots, trying to collect some soup. There is a boy more petite than the others, so when the others take the soup, the hot liquid spills on his head and shoulders, but he clings to his pot, striving to get the soup as they begin pouring some onto him. And with the heat of the soup bearing down on him, he loses his grip; the pot tumbles to the ground, marking a moment of unbearable oppression. Altogether, this starvation – this weaponized starvation – is designed to incite people to kill one another, to hate one another, and to compete viciously against each other. Everything seems to be constructed to make us feel as if we are dead. I am thinking about a colleague of mine, Dr Alaa al-Najjar, who lost nine of her children and her husband in a bombing while she was working in a hospital. And yet, you witness the desire for life, the willingness to live.

Yet, you find people who, despite the duress which has been exceptionally arduous and prolonged, use their bare hands in an attempt to rescue someone. You observe individuals unwilling to compromise on the remains of their family members, chasing after every finger, every fragment of flesh, striving to gather and bury it. This dialectic between our wish to live and their desire for our extermination is part and parcel of our everyday lives. Many Palestinians, including myself, plant our food, even though I live in East Jerusalem, where we are deprived of land. However, with great difficulty, we managed to secure a tiny piece of land, and I spent a considerable amount of time caring for it and growing my food. We understand the desire to exterminate us, and we attempt to respond to that with life, with creativity. We educate our children, replant our fruit trees, and rebuild our demolished homes. We embrace the vitality of our lives and, with humour – lots of humour, even in Gaza – people find ways to cope with the tragedy.

AH: The strength of this life force is so powerful.

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SJ: People also conceptualize it as resistance, resistance against extermination. I would like to revisit your question about the role of language as both an alienating and liberating force. I've also been pondering how Palestinians articulate the language of pain, as I rarely meet anyone who tells me they've experienced trauma. People often say they cannot tolerate ظلم /"Dholm". "Dholm" can be incorrectly translated as injustice, but injustice can arise from accidental events or neglect. In contrast, "Dholm" symbolizes the most severe form of oppression, which is both calculated and intentional. It closely relates to the experience of persecution, making it a man-made phenomenon. As a result, the consequences are much more severe than an injustice caused merely by forgetfulness or neglect. Additionally, when I watched the video of the young boy trying to get soup, the first word that came to mind was قهر /"qaher",⁸ which is quite multi-layered. I cannot find a single English word that fully captures the feelings or experiences of this boy.

8 This word expresses an oppression so strong it annihilates a person physically and/or subjectively.

AH: For this publication, I am supposed to write a paper, but I cannot complete it because I have too many disparate thoughts. I constantly reflect on what Edward Said said; I believe it's in *The Shadow of the West* that he explains that the act of representation itself is violence, as it tends to miniaturize and reduce the real experience (Said 2014, 40). Therefore, bringing a live event into representation always involves an act of violence. Today, we are confronted with the first live-streamed genocide, characterized by a surfeit of images whose horrors cannot be articulated. Nevertheless, the accumulation and dissemination of various forms of representation, such as videos, audio, photographs, drawings, and written words, have resulted in very few actions that have a direct consequence on the genocide. This brings me back to the limits of language.

SJ: Of course, some events are so horrific and disgusting that words fail us when we try to understand them. There are events beyond comprehension. Those who can organize their thoughts and feelings into words are fortunate. Currently, we witness unspeakable experiences. It is hard to express our feelings and thoughts effectively in words. We notice this inadequacy and feel blocked and paralysed. I feel this blockage of ideas and emotions in my mind and heart. Moreover, concerning symbols and representations in the world, along with demonstrations and global solidarity, they highlight another dysfunction within society. On the one hand, more individuals have good intentions and want to do good deeds than those capable of evil, yet those who commit evil tend to be better organized, making their actions very effective. International solidarity with Palestine, though politically ineffective, is valued psychologically, as it signals to Palestinians that they are seen, even when Israel tries to suppress awareness of their actions

against us. It acknowledges what is happening, validates our pain, and shows compassion. It is our last thread of connection to humanity. Without symbols and international solidarity for Palestine, we would not see massive demonstrations in Yemen, Johannesburg, or London. We would view the world as evil, risking our last connection to humanity, which would be extremely isolating. Therefore, on a psychological level, it is vital and offers a therapeutic benefit.

Nonetheless, we must find ways to make this connection more politically effective. It took us nearly two years, about twenty months, to figure this out. This situation highlights a significant imbalance between grassroots movements worldwide and the ruling powers in the West, especially in the United States. There is a clear gap between the actions of university students and those of their institutions, which align with the ruling power in the US. The same is true in Europe. This might not be surprising in the Arab world, where we are aware of the lack of democracy. We recognize that autocratic, totalitarian regimes exist there, so people do not feel free to demonstrate. However, we Palestinians believe, know, and understand that the hearts of ordinary people in the Arab world are on the right side of history and are with us. Nevertheless, we do not expect this support to be expressed through the ruling regimes. It is a great disappointment that this is the case in so-called democracies.

AH: It has been a maddening experience for me and millions in the Arab world to feel pain, humiliation, and guilt so acutely, yet be unable to express it as we would like due to our national and international contexts. It must also be a maddening experience in the West and in some Arab countries to take to the streets and face police brutality, arrests, and, for some, wrongful accusations of supporting terrorism simply for condemning a genocide. The same is true for students in the US who have courageously defied the commands of their higher education institutions and the police, yet faced detention like Mahmood Khalil and deportation. Some lives have been uprooted just for standing against an ongoing crime against humanity, as the murders, maiming, and torturing are still continuing.

International students in the US and Europe are terrorized into silence, afraid to speak out or participate in protests. It feels as if the national, regional, and global myths that held the Neoliberal fiction together have been torn apart. Many of us are breaking down under the weight of recent events, collapsing daily. For many, this genocide is reactivating past traumas, including those of colonial wars and genocides. Among us, descendants of the colonized, it has awakened transgenerational colonial trauma, bringing bodily reactions such as pain, nausea, shaking, migraines, panic attacks, and more. The weight of what is happening is palpable, and it seems to me that it will not simply disappear. It is currently repressed, but the ripple effects, when they occur, will be complicated to manage.

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SJ: Yes. I believe the crisis is causing a global trauma. The most immediate location of the event is in Gaza, but it affects all Palestinians; we are also witnessing an acceleration of genocidal policies in the West Bank. The closer you are to this situation, the more you will suffer from its traumatic repercussions. The fact that it impacts people far beyond Palestine also demonstrates how the people of the world – their inspiration and will – are being crushed by systems and regimes, which can be highly traumatizing. Many myths exist: the myth of international law, the myth of human rights, the myth of the Arab Brotherhood, and the myth of Islamic interconnectedness – all of these are being debunked. People’s belief systems have been shattered, breaking the core beliefs of many. Our conversation reminds me of an archetypal story from literature – the story of al-Hussayn and Karbala. When people in Iraq asked al-Hussayn to overthrow the Umayyad Caliph Yazid, because they did not find him a suitable ruler, he asked, “How are the people in Al-Iraq?” and was told, “Their hearts are with Hussayn, and their swords are with the Umayyad”.⁹ That’s the archetypal story: I think it’s about social conformity.

9 The Battle of Karbala was fought between the army of the second Umayyad caliph Yazid I (r. 680–683) and a small force led by Hussayn ibn Ali, the grandson of the Islamic prophet Muhammad, at Karbala, Sawad (modern-day southern Iraq).

Social conformity can even lead good-hearted people to become ineffective. In my new book, *Radiance in Pain and Resilience: The Global Reverberation of Palestinian Historical Trauma*, published in Australia, I examine how the reverberations of Palestinian trauma resonate globally (Jabr, Maté, and Berger 2025). The book explores the lasting psychological, emotional, and political impacts of the Palestinian experience of trauma, not only within Palestine but also as it resonates globally. It is a collection of essays that combine clinical reflections, political critique, and cultural insight, drawing on decades of my practice as a psychiatrist and my personal experience as a Palestinian under occupation. By *Radiance*, I do not mean light in the usual sense but rather a metaphor for how pain, resistance, and dignity originating in Palestine can travel, manifest, and resonate elsewhere. Radiating pain refers to the pain that extends far beyond the affected area, as well as to the resilience that inspires others. It demonstrates how Palestinian suffering and resilience become part of a broader human story – one that speaks to people fighting against colonialism, injustice, and erasure in many parts of the world.

So, although the book begins in Palestine, it’s ultimately about all of us. About how historical trauma and liberation are not local issues, but global currents. The global trauma we discussed embodies the disaster of helplessness. What’s happening in Palestine angers many around the world, yet they feel helpless. Helplessness often gives rise to feelings of guilt. It’s a trauma centred in Gaza, this tiny piece of land, but its reverberations are global and very profound. I am convinced there will be repercussions. I am certain there will be repercussions for this.

AH: There is a Palestinian film called *Divine Intervention*.¹⁰ In the final scene,

10 *Divine Intervention*, directed by Elia Suleiman (Paris: Pyramide International, 2002).

the son, one of the main protagonists, and his mother sit and stare at a pressure cooker on the stove. After a while, the mother looks at her son and tells him it is time to turn off the stove. They both do not move, and the last close-up is on the pressure cooker. I feel the world is now facing this exact situation. This brings me to another question: how does the colonial system impact the Palestinian mental health system?

SJ: Essentially, I would argue that we lack reliable epidemiological studies. The studies currently used adopt Western methodologies, which fail to consider fratricide, femicide, internalized oppression, and the fascination with the oppressor, instead concentrating solely on individuals' personal dysfunction. This is why I question the validity of the data being presented. Nevertheless, there are studies indicating a higher prevalence of the burden of disease, as well as increased rates of depression, anxiety, and PTSD. I have significant reservations regarding the diagnosis of PTSD, as what we experience is colonial trauma, which does not present the classic symptoms of hyper-vigilance, re-experiencing, and avoidance. Therefore, I remain cautious about the diagnosis.

AH: You explained in your works that because it is ongoing and has been ongoing, there is no "post" in Palestinian PTSD. What does this mean?

SJ: Well, I expressed that in a drawing. I created an infographic explaining that Palestinian trauma is a prolonged colonial trauma spanning over a century, beginning at least with the British mandate in 1917 to the present. It includes many significant events that have caused numerous affected individuals and impacted the social fabric of Palestinian society. So, we are talking about a colonial trauma that is cumulative, cross-generational, and ongoing, best understood through the concept of historical colonial trauma. With the current situation in Gaza, there is an atmosphere of trauma, and one cannot genuinely discuss the event without feeling its impact. You cannot clearly distinguish whether it relates to what happened to your father, neighbour, or classmate or the amputated limb in your body. It's an environment that is profoundly traumatic. I believe we do ourselves a disservice if we try to categorize our situation solely using PTSD, which was conceptualized in response to the experiences of US Vietnam veterans. It describes the experience of a soldier returning to safety while still haunted by images from the battlefield, but that is never truly the case for Palestinians.

Moreover, in the Palestinian experience, we lack the luxury of recalling the past; we do not possess it. The "post" is a luxury that remains beyond our reach.

AH: What does it mean to be a practitioner of mental health in such circumstances?

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SJ: I'm Palestinian first, then a mental health professional. My profession provides me with an effective tool to contribute to the Liberation project because freeing Palestinian minds and fostering healing are crucial. It aligns with the National Liberation Project. I'm also thankful for my profession because it offers me work, keeping me from feeling helpless. I've always believed that through my work, I can make a meaningful difference in helping others. As I mentioned earlier, trauma is the disaster of helplessness. My role as a medical doctor and psychiatrist enables me to support those in need. Healing is an essential part of the Liberation Project because, as you noted, the battle may end, but people could still be mentally preoccupied.

I aim to contribute now and, hopefully, in the future, once the occupation ends, towards the liberation of Palestinian minds, which I see as a meaningful contribution. At the same time, there are very difficult moments. Constant exposure to human suffering is not easy. I know when to stop, when to take a break, and when to look after myself; I understand my resources and how to care for myself when needed. However, I also helped build the health system in Gaza, and I saw how the system collapsed within the first weeks of this attack. I felt very sad and angry about this. Yet, I thought this was a moment of humility where we need to sit and see how people help themselves in the absence of official mental health services. So, I started to notice how people consistently demonstrate their willingness to support each other, embodying the virtues of society. Despite the horrific and unimaginable circumstances, individuals come together to help one another. When someone dies, people gather to carry out a special funeral ritual. They search for the bodies, facing extremely difficult moments when they cannot find them and must run for their survival because of the bombardments. As shown in the video of the child who fought so hard and suffered so much to try and obtain a ration of soup, some moments challenge human virtues, moments when the community's virtues cannot be expressed.

Nevertheless, some individuals continue to strive to give and support others during difficult times, which gives me hope. We also observe how people anchor themselves in faith and national notions, such as Sumud, during challenging moments. This also serves as a lesson for mental health professionals to learn. There are many instances when the community unites, such as when older girls or boys help younger children learn to read and write in the absence of schools – the destruction of schools in Gaza has been especially challenging for children. Or times when some activists attempt to recreate specific childhood experiences for displaced children. Society and the community possess their own organic resources, and healing can occur without our intervention. Therefore, we should support this organic process rather than replace it and avoid imposing Western psychotherapeutic methods that focus on individual dysfunctions, as these

dysfunctions originate within society and the environment, not within the individual. I want to share something that might seem naive, but I genuinely believe in it: first, everyone suffers and experiences pain, but pain is not a disease. In Palestine, the suffering stems from human evil, and I believe that human kindness could be the most fitting response. Before discussing therapy and psychological aid for the Palestinian people, I think we need an abundance of human kindness, which the Palestinians demonstrate towards each other, as well as by the global community through international solidarity and resistance against the Israeli occupation and its supporters in the US and Europe. This idea might seem naive, but I see it as fundamental to my understanding; it reflects my overall view on mental health and war.

AH: I agree entirely; it's not naive at all. Kindness is especially vital because collective tragedies lack a clear end; they endure, perdure transgenerationally, and they continue to cause health issues. This presents part of the difficulty when I consider how to approach collective tragedies as a topic of knowledge and discussion. We are dealing with events that unfold on multiple levels and have numerous consequences, making it challenging to capture their reality with language without oversimplifying what is occurring. Returning to transgenerational trauma, I don't believe most people fully understand what it is and how it continues to influence individuals' mental and physical health.

SJ: Yes. There is increasing evidence. I don't believe people can deny post-traumatic transgenerational trauma. It doesn't affect every individual, family, or generation, but it can have a lasting impact on up to four generations after a traumatic event. It shapes the narrativization of both past and present through the absence of a narrative and the secrecy that accompanies it. It affects attachment and passes into epigenetics.

Furthermore, a growing body of research shows that even fertility can be impacted by traumatic events. Both male and female fertility may be affected. I also want to emphasize that many of our proverbs, which are passed down from one generation to the next and reflect our collective belief system, illustrate how trauma manifests. There is an endless number of Palestinian and Arab proverbs that show how trauma has penetrated our language and symbolic order. For example, some proverbs call for avoidance of confrontation, exemplified by phrases like *وقول يارب الستر*, which is akin to saying "keep your head down", or proverbs such as *الجدران لها آذان*/"the walls have ears", which reveal a pervasive paranoia in a colonized society.

I believe our proverbs reveal much about our collective traumas, including those that span generations. However, I want to emphasize that we do not only inherit a legacy of trauma; alongside it comes wisdom and resilience in the face of adversity. Palestinians are industrious; they know how to

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manage their finances and educate their children. We do not export oil; we once exported oranges, but now our oranges are stolen. Instead, we export educated people to the world. I believe this reflects post-traumatic growth and resilience. I see it in myself, especially in how much I value time and resources. I do not waste food; for me, it is a grave sin. I make full use of everything – recycling and composting in my garden, utilizing food scraps. I feel this connection to my experiences as a Palestinian.

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