

# Professional Growth in Turbulent Times

## An Impact of Political Violence on Social Work Practice in Israel

NEHAMI BAUM

*The Louis and Gabi Weisfeld School of Social Work, Bar Ilan University, Israel*

SHULAMIT RAMON

*Anglia Ruskin University, England*

### Abstract

- *Summary:* This article examines professional growth among Jewish and Arab social workers in Israel in the wake of the Second Intifada. The paper is based on a further in-depth analysis of data from semi-structured face to face and telephone interviews with 58 social workers.
- *Findings:* The findings show professional growth, in the form of increased skills and knowledge, improved professional identity, and greater team cohesion. The major facilitators of these developments were the recognition and resources the workers received from their society and the support provided by and within their place of employment for coping with their distress and with the tasks they had to perform. Such growth was found among two-thirds of the Jewish workers, and none among the Arab workers. The data analysis outlines likely reasons for these main findings, as well as what facilitates pride in one's work within the context of violent political conflict, and what does not.
- *Applications:* Implications for future practice and research are highlighted.

**Keywords** Jewish and Arab social workers professional growth shared reality shared trauma violent political conflict

## Introduction

Studies of helping professionals exposed to collective trauma generally focus on the many difficulties such situations create for them. Writing in the wake of 11 September 2001 attacks, Batten and Orsillo (2002) report on the difficulty that therapists outside the New York and Washington areas reported in treating

clients while negotiating their own reactions to these events. Saakvitne (2002) emphasizes the vulnerability of vicarious traumatization among therapists working with victims of a shared trauma. Seeley (2003) describes the personal and professional challenges faced by therapists treating patients who were emotionally injured in the attack while their own suffering went untreated. Eidelson et al. (2003) documents significant changes in the personal and professional lives of psychologists who treated casualties of the attack. Campbell and McCrystal (2005) who looked at the impact on mental health social workers of the Troubles in Northern Ireland highlighted the psychological stress due to working within a violent political conflict (VPC), being physically attacked/injured, and being prevented from carrying out one's professional role due to this context. All of these studies point to heightened emotional arousal, increased work stress, professional unpreparedness, blurring of boundaries between client and worker, and for some also the struggle to balance their concern for their clients with objectively justified worries about their own family's safety and well-being.

Studies carried out in the wake of similar events in Israel point to similar issues. Loewenberg (1992), writing after the Gulf War, reports the conflicts Israeli social workers experienced between their personal needs and professional responsibilities. Somer et al. (2004), who investigated the emotional reactions of hospital-based social workers to their involvement in repeated emergency deployments following terror attacks in their communities, report overwhelming emotional distress among some of them. They found that the attacks and subsequent circumstances undermined the social workers' sense of personal security and seemed to eliminate the boundaries between the workers' personal and professional lives, and that meeting and responding to the families' pain created intense stress for them.

Along with the many challenges, these and other authors also reported positive developments among practitioners working with clients in a collective trauma. Therapists interviewed by Batten and Orsillo (2002) stated that the emotional intensity they experienced in the wake of 9/11 enabled them to be in better contact with their clients' emotions and helped them to respond more empathically and effectively. Seeley (2003) notes an increased wish to help the victims and a renewed commitment to the mental health profession. Eidelson et al. (2003) report increased sense of meaning and satisfaction among psychologists, derived from feeling that they were making important contributions to the welfare of individuals and the healing of the nation at a time of great need. In a recent study Lev-Wiesel et al. (2008) found that Israeli social workers and nurses employed during the Second Lebanon War reported post-traumatic growth (PTG).

Positive developments were also reported among social workers in situations of protracted political violence. Lindsay and Baidoun (in Ramon et al., 2006) found that most Palestinian care workers wished to act as positive role models for the lay public and that some reported a renewed sense of purpose

in their professional work, which sometimes took the form of a greater connection with clients and their experiences. Shamai and Ron (2009) found that Israeli social workers who worked with terror victims believed the help they provided to the victims and their families contributed to their own personal and professional growth.

Two studies carried out among social work students also suggest some positive effects along with the difficulties and challenges. Describing the reflections of MSW students at New York University School of Social Work when the 9/11 tragedy occurred, Tosone et al. (2003) report that although some students felt that the emotions aroused by the event and their preoccupation with their own feelings precluded them from being able to help others deal with their emotions, most students felt more connected with their patients and more empathic. They quote one student reporting that the tragedy forced her to grow up professionally, while other students found that the crisis validated their choice of social work as a profession. Baum (2004), describing the responses of social work students to the renewed violence brought by the Second Intifada in October 2000, reports mainly on professional dilemmas and the impediments it created for the students in developing their professional identity. Her paper also notes, however, that the students' obligations to their fieldwork and clients served them as a key resource and means of coping with the situation, by forcing them to take control over their emotions and helping to reinforce their uncertain sense of mastery and competence.

While these studies have shown improvement of the professional performance of practitioners, they did not focus on the specific aspects of professionalization that have changed. The omission is understandable in view of the need to explore and report the extremely stressful and potentially traumatic nature of practising under conditions of collective trauma. With this in mind, the literature on trauma victims, after decades of similar focus on the detrimental impacts of exposure, has long since turned attention to possible positive developments following exposure to stress and trauma. Antonovsky's salutogenic approach maintains that exposure to stress and trauma may also produce positive changes (Antonovsky, 1979, 1987; Antonovsky and Bernstein, 1986). Tedeschi and Calhoun (1996) posit that the struggle with highly challenging life crises in the wake of trauma may produce post-traumatic growth. Both views have received substantial support in empirical studies of varied populations (e.g. Laufer and Solomon, 2006; Lev-Wiesel and Amir, 2003; Macksoud and Aber, 1996; Solomon and Dekel, 2007).

This article aims to examine professional growth among social workers when practicing under conditions of VPC, and the conditions that enable or impede such growth. To the knowledge of the authors, the concept of professional growth has not been defined, or examined, in the social work literature. However, the notion that persons grow in their profession is inherent in social work training, supervision, and practice (Johnson and Yanca, 2001; Murdin, 2000).

More specifically, the study examines professional growth among Israeli social workers in the wake of their experience in the Second Intifada. This Intifada, which erupted in October 2000 following the failure of the peace talks, was an armed Palestinian rebellion marked by suicide attacks against civilians. The attacks were concentrated in Israel's main cities and targeted places like buses and bus stops, restaurants, cafes, entertainment sites, and wherever else persons congregated. They took Jewish and Arab lives, injured many people, and created a prevailing sense of fear and insecurity, as it was impossible to predict where or when such attacks would occur. They also led to military operation by the Israeli army against Palestinian targets, as well as the construction of a separation wall along the border between Israel and the West Bank Palestinian Authority area.

During the entire course of the Intifada, social workers took part in emergency work. In times of VPC, Israeli social workers are mobilized to provide immediate aid to the victims and their families. They visit the injured in hospital, pay house calls to the families of the injured and dead, and attend the funerals of the victims. They are stationed in hospitals and in the Forensic Institute, where it is possible to check if a family member is indeed dead (Landau, 1997). Their responsibilities include providing psychosocial care for the victims and their families, crisis intervention, support, and case management (Drory et al., 1998; Gagin et al., 2005) in the wake of an attack; following up on the injured and their families after discharge from the hospital, as well as the bereaved families (Gagin et al., 2005).

Social workers also continued with their regular work during the Intifada. In general, Israeli Jewish and Arab social workers are employed together in settings that provide services to both populations (e.g. hospitals, rehabilitation centres, probation services, and family and welfare services in mixed Arab-Jewish cities), but not in settings that provide services to only one or the other population (e.g. services and agencies in exclusively Jewish or Arab areas of residence). In those places the services are run in parallel for Arab and Jewish neighbourhoods, as is the case in Northern Ireland. Thus each national group will normally not have contacts with either social care workers or clients from the other group. While reinforcing separation, this system also acts as a buffer against the potential discrimination by each group's social workers against clients from the other group. There is no research evidence to illustrate that the Arab minority is discriminated against within the settings in which Arabs and Jews work together. This could be due to lack of research in this area, or the understandable reluctance by Arab clients to voice their complaints. Israeli hospitals, including their social workers, treat Palestinians from the Occupied Territories, including those caught in acts of political violence. We have anecdotal evidence to show that at times Jewish patients refuse to be served by Arab social workers, and that this has raised an ethical dilemma for the hospital social work team. However, we do not have evidence of similar complaints by Arab patients.

Hence, the emerging picture is a mixed one in terms its significance for anti-discriminatory, anti-oppressive, practice. Formally Israeli Arabs are entitled to the same services as their Jewish counterpart, and the same applies to the two groups of social workers, yet fewer resources are invested in the Arab social sector than in the Jewish one. Understandably, the Arab population is ambivalent and apprehensive of the implications and outcomes of an event such as the Second Intifada, and its social workers feel more excluded in these circumstances than before. However, it is unlikely that Jewish social workers would feel responsible for this state of affairs, or practice oppressive practice intentionally.

While some social workers are critical of the Israeli government's behaviour towards the Palestinian population inside and outside of the state of Israel (see our reference to Ossim Shalom in the findings on Arab social workers), many of them are likely to agree with the majority of the Jewish population that the political situation has been created by the inflexibility of the Arab states and their wish to perpetuate the Palestinian problem. They do not perceive this belief as conflicting with their commitment to most social work values.

In services where social workers of both national groups are employed, they work together in teams that serve both Arab and Jewish clients. Studies carried out on their relations during politically turbulent times also show a mixed picture. On the one hand, there are reports that in the aftermath of terror attacks, Palestinian Israeli social workers felt rejected by their Jewish colleagues, Jewish social workers felt difficulty treating Palestinian clients, and members of both groups felt uncomfortable working with one another (Ramon, 2004). On the other hand, there is also evidence that, along with mutual wariness and distancing, there were social workers from both groups who showed sensitivity to their colleagues from the other group and went out of their way to maintain the working relationships and, in some cases, the friendships they had developed over time (Baum, 2009).

The article is based on a further in-depth analysis of data from a previously reported study on the impact of the Second Intifada on Jewish and Arab social workers in Israel (Ramon, 2004). That study asked both Arab and Jewish social workers how each felt they were treated by workers from the other national<sup>1</sup> group and their views about treating clients from the other national group. Like other studies on the impact of VPC on helping professionals in Israel (Gagin et al., 2005; Somer et al., 2004), it too focused on the negative impacts. However, the examples also reveal what seem to be signs of professional growth. The further analysis focused on that growth and the factors that enabled/disabled it.

The study is important because VPC has once more become part of the First World, as well as of the Second and Third Worlds, and social workers have a central role to play in helping affected families and their communities (Itzhaky and York, 2005; Ramon, 2008; Ramon et al., 2006). The global expansion of such conflicts means that they are likely to be with us for some time to come, and

that social workers will again find themselves intervening with persons injured by the violence.

A better understanding of possible professional growth under conditions of VPC would provide a more complete picture of social workers' experience and can serve to build up their capacities to work more effectively and with fewer detrimental consequences to themselves under these trying conditions. Equally important is to understand what impedes workers' professional growth in the context of VPC.

## Method

### Participants

The study participants were a self-selected sample of 58 social workers who agreed to be interviewed after filling out an anonymous questionnaire on the impact of the 2nd Intifada on the lives and work of Jewish and Arab Israeli social workers (Ramon, 2004). The questionnaire had been filled out by 355 practising social workers. In the present study, 44 participants were women, 14 men; 44 were Jewish; 14 Arab. The majority were between 20 and 40 years old. Interviewees came from a variety of work settings: family work (25), residential work with young people (five), hospital social work (five), probation (four), Israel's National Insurance Institute (four), rehabilitation (six), psycho-educational services (three), community work (two), and a transport co-operative (two).

### Data Collection and Analysis

In the initial questionnaire social workers were asked to provide demographic data, information about services provided to clients, changes in services, training specific to the Intifada, and the impact of the Intifada on their work and their clients. The interviews, carried out within three months after the response to the questionnaire, were aimed at investigating more sensitive issues than those that could be queried in a written questionnaire, as well as at verifying and amplifying some themes that appeared in the responses to the questionnaire.

Interviews were semi-structured and looked at issues such as:

- The connection between the social worker's personal life and professional activity within the ongoing context of the Intifada; the emotions experienced due to working in this context; and how these were handled;
- Managerial responses: the influence of the Second Intifada on the social worker (values, skills, knowledge, professional identity, feelings and views about other national groups co-involved in it; feelings and views about one's own national group);
- The effect of the Second Intifada on the social worker's clients;
- Changes in services since the outbreak of Second Intifada, and suggestions for improving services for clients;

- The impact of the Second Intifada on relationships within the social work team and/or multidisciplinary team.

The interviews were conducted in Hebrew, apart from those with eleven Israeli Arab social workers in the Haifa area. These were conducted in Arabic, and translated by an Arab social work lecturer to Hebrew. The responses were written up during the interview.

For the purpose of the in-depth data analysis, the first author and a trained research assistant read the transcripts without reference to the specific questions, but looking for indications of positive developments, whether at the personal or professional level, and for factors that may have facilitated them. We began by separately identifying all the statements that pointed to a positive development. After pooling our markings, we each divided them into categories and sub-categories, again separately. When we reached agreement on these, we distinguished between the positive developments themselves and factors that could explain or contribute to them. These factors were taken to be anything that the interviewees said helped or supported them, as well as all indications of positive features in their workplace. We also looked at the socio-demographic features of those who reported positive developments and those who did not, to see whether any of these might account for the difference.

## Findings

### Positive Development

All identified instances of positive development were in the professional realm. No positive personal changes were identified. The positive professional elements were increased skills and knowledge, an improved sense of professional identity, increased cohesiveness among colleagues, and pride in the contribution of the profession to society. One or another of these changes were reported by about two-thirds of the interviewees, all of them Jewish.

### Skills and Knowledge

Some respondents reported increased knowledge and skills in crisis intervention and national emergencies:

I acquired many therapeutic skills and knowledge of crisis intervention. (#12)

I feel better able to act in national emergency situations. (#14)

I have more in-depth) knowledge about emergency and crisis intervention. (#45)

Others reported increased knowledge and skills in helping patients to deal with the traumatic situation and its psychological aftermaths, namely PTSD (Post-Traumatic Stress Disorder)<sup>2</sup> and loss and bereavement:

I acquired new tools to help patients who are affected by the situation. (#7)

It gave me new skills, especially in PTSD. (#6)

My knowledge of terrorism, mourning, trauma, and PTSD increased . . . (#21)

Greater ability to deal with loss and bereavement. (#36)

### **Improved Professional Identity**

Improved professional identity was reported directly ('My professional identity was strengthened', #11) and also reflected in respondents' feelings that they had the ability to help.

I feel . . . that I have the ability to assist. (#9)

It sharpened our 'added value' as social workers, since it increased our ability to help. (#12)

In some respondents, growth was manifested in their talk of personal abilities or tendencies that were brought out by their working with the terror victims and their families:

I feel more efficient. (#13)

I feel a stronger sense of mission. (#14)

I work very well in times of pressure and stress, and learn to 'open' myself up to other fields – personal and interpersonal. (#23)

### **Increased Cohesiveness**

Respondents also reported improved teamwork during the Intifada:

More support, cohesion, listening. The workers developed relationships which extended beyond their working hours, since they went through difficult experiences together. (#14)

More cohesion and affiliation among team members. (#21)

More cooperation and solidarity. People express professional and human interest in the clients of others. (#53)

### **Factors Contributing to Professional Growth**

The respondents mentioned a number of factors that contributed to one or another aspect of their professional development. These include increase in knowledge as a result of 'my need to deal with the situation ad hoc' (#11); a heightened sense of professional worth attributed to the need for social workers during the crisis and the resulting social recognition of the profession; strengthened professional identity because 'People need us more and there is great dependence on social workers' (#11). Another stated: 'People now understand the importance of social workers and give us more resources in times of emergency' (#35). One worker, who noted that 'we're all in the same boat' (#21), implied that the shared predicament was a source of the increased collegial cohesiveness.



Most of the contributory factors were located in actions within their agencies. Four factors related to the agency were named: organized discussions held in their workplace, support from supervisors and managers, special training to deal with the crisis, and cohesive team relations.

**Organized Discussions** At most places of work, there seem to have been organized discussions of the situation. Most respondents reported that these were helpful to them. The principal way in which the discussions helped was to make the workers' personal distress a collective one and to create a feeling of sharing, being understood, and belonging:

It helps at work, since coping with the situation becomes a collective rather than a private matter. The feeling of sharing, belonging and togetherness helps a lot – the feeling that there's someone who understands what I'm going through, since everybody feels the same. (#11)

The talks help me feel that I'm not alone, that the other members of the team experience similar things and confront the same dilemmas. (#47)

When talking about things that have to do with the Intifada, I see that I'm not alone and it comforts and relaxes me. (#7)

Also cited as important were the opportunities for ventilation and processing and for returning matters to proportion, enabling catharsis, and alleviating stress that the discussions provided:

Ventilation and processing with someone who listens to you. This puts things in proportion and brings catharsis. (#12)

Enables easing stresses. (#15)

Talking to colleagues helps with support, ventilation and advice. (#35)

At work, in our team we make time for 'digesting the emotional congestion' caused by the terrorist acts. (#2)

**Supervisor and Managerial Support** Most respondents reported receiving considerable emotional support and understanding from their supervisors, both for themselves and their clients:

A lot of support from my supervisors. (#15)

I received full and very professional support. (#37)

A lot of positive feedback, willingness to help and to take part intellectually, emotionally and technically. I don't feel alone. (#53)

Respondents also reported interest and support by management:

They [the managers] surprised me positively – high sensitivity, especially to terror victims, who received special treatment. (#35)

Especially interest and curiosity to know how I dealt with the situation. (#47)

When I approached my bosses to ask for a larger budget and more therapy-hours to treat victims of terror, there was a positive response. (#10)

The respondent who reported that her team members expressed professional and human interest in one another's clients (#53) attributed this response to the managers of the service: 'This thing has to do with the managerial leadership of the head of the social services in my workplace, with formal and informal interest that enables openness and cohesion' (#53).

**Training** Several respondents reported that their managers sent them for special training: on PTSD (#6, #9), EMDR (Eye Movement Desensitization and Reprocessing,<sup>3</sup> #11), on how to inform families of a terror casualty (#12), and being sent to a psychological support workshop (#9). One specifically referred to the expected usefulness of the training in dealing emotionally with a possible emergency:

There were specific sessions on preparation for emergency situations that helped us a lot – it's good to know what we have to do so we won't 'go to pieces' if something happens . . . (#41)

**Team Cohesiveness** Finally, several respondents indicated that increased team cohesion was not only a positive change in itself, but also a factor that contributed to an overall sense of positive change:

Affected positively: supported one another, increased social cohesion and sharing professional information. (#2)

More support, cohesion, listening. The workers developed relationships that extended beyond their working hours, since they went through difficult experiences together. (#14)

### **Arab Social Workers**

All statements referring to professional growth came from interviews with Jewish social workers. None of the interviewed Arab social workers reported increased knowledge and skills, improved professional identity, or anything else that could be taken as a positive development.

One Arab social worker spoke of Arab–Jewish meetings at her place of work and reported their usefulness in enabling ventilation and fostering mutual understanding: 'We hold Arab–Jewish meetings, and the ventilation helps to bring alleviation of stress and understanding of the other side' (#22). More common, though, was a heightened sense of rejection and exclusion in the aftermath of attacks against Israeli civilians.

One Arab worker told of increased tensions in the mixed Arab–Jewish team in which she worked and of hostility from her Jewish colleagues, despite the efforts of the management to ameliorate matters:

The situation affected the cooperation in our team, since it is a mixed team of Jews and Arabs. I, as Christian Arab, felt a lot of resentment in my team, especially after

terrorist acts. Some of the workers (the Jews) stopped greeting me. The bosses took the thing seriously and tried to deal with the issue, but some of the tensions are still here. (#37)

Other Arab workers conveyed their sense of rejection indirectly. One did so by suggesting that Arab–Jewish meetings were needed to get the Jewish workers to better understand the pain they caused the Arab workers ('An Arab–Jewish meeting should be held; they (the Jews) do not understand that they hurt the other side too', #21)). Another indicated her desire for meetings with other Arabs ('I'd like to have a free and open meeting with Arabs – I'm an Arab myself', #7), where she would presumably feel that she belongs and get more sympathy and understanding.

Two Arab social workers reported being active in Ossim Shalom, an Arab–Jewish social workers organization focused on enhancing positive shared work with Arab and Jewish clients in a voluntary capacity, in existence for the last 20 years. This activity reflects their readiness to engage in shared work beyond the call of duty ([www.Ossim-Shalom.org.il](http://www.Ossim-Shalom.org.il)).

In this context it needs to be stated that there is no evidence of any involvement of Arab social workers in any political violence during the Second Intifada, and a surprisingly lower level of such involvement by the Israeli Arab population as a whole.

## Discussion

Although both the initial study and the interviewees' responses focused on the many difficulties in doing social work during the Intifada, the findings of this study point to perceived professional growth by the majority of the Jewish social workers: increased skills and knowledge, improved professional identity, and greater team cohesion. The new skills and knowledge encompassed practice in crisis situations and national emergencies and helping bereaved and post-traumatic clients. Improved professional identity was manifested in feelings of gratification and heightened sense of professional worth stemming from feeling needed as social workers and able to help. For some of them it was as though the demands of the crisis brought out more of their capacities and potential (e.g. greater efficiency, sense of mission, openness). Enhanced team cohesiveness was manifested in greater listening to and interest in each other's work, and in more support, cooperation, and solidarity among workers, which, in some cases, extended beyond the work day.

There is little indication of these positive developments in the post-9/11 studies of helping professionals in the United States. Eidelson et al. (2003) write that the psychotherapists they interviewed reported some increase in positive feelings about their work, which were tied to the personal meaning and satisfaction derived from feeling that as psychologists, they were making real and important contributions to the welfare of individuals and the healing

of the nation at a time of great need. Tosone et al. (2003) report that their social work students spoke of increasingly feeling that they can handle crises, increased sense of being needed, and increased solidarity with their classmates. With these partial exceptions, the post-9/11 studies looked for and documented only the personal and professional difficulties that were experienced by the professionals they studied. Moreover, these studies conducted after 11 September 2001 (e.g. Eidelson et al., 2003; Tosone et al., 2003) examined one type of political violence (e.g. the impact of a single event), while this study looks at a protracted conflicts.

Studies exploring the impact of the helping professionals working in protracted conflicts show positive developments. In a study on Palestinian care workers which replicated methodologically the one conducted by Ramon (2004) in Israel, Lindsay and Baidun (in Ramon et al., 2006) and Lindsay (2007) report pride in obtaining new knowledge and skills, and in being able to offer these to clients.

Thus our findings point to the Jewish workers' empowerment as they struggled to provide services during the Intifada. Frans (1993) identified five components of empowerment among social workers, four of which were found in this study: *Improved self-concept in the form of self-validation and self-esteem* is evident in the workers' sense of their ability to be of use and in their increased sense of value as social workers. *Critical awareness of one's place in larger systems such as the agency or society* is reflected in the social workers' augmented sense of collegiality and in their feelings that they were contributing to the society in its time of trouble. *Possession of knowledge and abilities to influence one's self or others* is implicit in their acquisition of skills and knowledge to better cope with the situation and help those in need. The workers *sense of collective professional identity* is reflected in their shared feelings and goals in the wake of the experienced violence.

Although restricted to the professional realm, the findings lend further support to the view posited by Antonovsky (Antonovsky, 1979, 1987; Antonovsky and Bernstein, 1986) and by Tedeschi (1999), that exposure to highly stressful or traumatic events can have positive as well as negative outcomes. These authors, however, emphasized the internal changes experienced by individuals in the wake of trauma and stress. Thus, Tedeschi and Calhoun (1996) identified more meaningful relationships with others, increased personal strength, changed priorities, increased appreciation of life in general, and richer existential and spiritual life as the five manifestations of post-traumatic growth.

The present study yields only hints of such changes (e.g. increased sense of and awareness of personal strengths), even though around half the study questions pertained to their personal lives. The question is why. Two possible explanations may be suggested. One is that the social workers were not themselves victims of the traumatic events, as were those who showed evidence of salutogenesis or post-traumatic growth. The other is that the

interviewers addressed them in their professional capacity and they responded likewise.

The interviewees were not asked about the factors or resources that facilitated professional empowerment. As stated in the method section, these were taken to be anything that the interviewees said helped or supported them, as well as any positive features they reported in their work environment. Putting their statements together, we suggest that the major facilitators of their empowerment were the wider social recognition and resources on the one hand, and the support provided by and within their workplace in enabling them to cope with their distress and with the tasks they had to perform on the other.

The social recognition and resources received by social workers in this instance were not taken for granted by the social workers and were experienced as a positive surprise. The social workers' statements suggest that the social recognition and resources received directly contributed to their improved professional identity and to the sense that they were acquiring knowledge and skills that enabled them to do their work in the trying situation. As such they hint of the social marginalization even Jewish social workers experience in less turbulent periods.

The support received from their agencies was both formal and informal. The formal support consisted of organized discussions, training courses, encouragement, understanding, and interest from supervisors and management. The informal support came from their colleagues, with whom they shared and ventilated their distress and who acted with greater than usual helpfulness, cohesion, and solidarity. What they seem to describe is a collective experience of coping and amelioration, made possible by the coming together of all elements in the system, which bolstered their sense of belonging and turned their individual distress into a shared distress that could be ameliorated through their participation in the collectivity – both in the agency and the society at large.

Factors that this study suggests facilitate professional growth and empowerment have long been recognized as buffers against traumatization. For example, the positive roles of social support and social recognition in enhancing resilience to traumatic experiences have been widely documented and argued (Hobfoll and Vaux, 1993; Lerias and Byrne, 2003). More recently, a study in Israel found that hospital social workers who received group supervision in dealing with Intifada victims had lower burnout levels and secondary traumatization than those who did not (Cohen et al., 2006). This finding perhaps explains why a third of the Jewish social workers interviewed in this study did not experience professional growth. Tosone et al.'s (2003) study of social work students in New York after 11 September 2001 is one of the few studies to hint at the role of social support in promoting professional growth in times of political trauma. The study reports that the students' sense of shared experiences and emotions fostered a sense of relief after the bombings and that the group cohesion that developed provided them with comfort and reduced their sense of isolation in the wake of the attack. It also reported that some students spoke

of the sense of hope and satisfaction they derived from feeling needed and acknowledged by the society, while others credited the knowledge they gained about trauma work in helping them speed up learning processes and be more confident as social work students and service providers.

The importance of societal recognition and sense of belonging to the social workers' professional empowerment is also reflected in their reported absence by the Arab workers. This highlights that in times of VPC social recognition and belonging can be divisive factors too. None of the Arab social workers who participated in this study reported any positive changes, and most reported feeling rejected, excluded, and not belonging, especially in the immediate aftermath of terror attacks. In the United States, Seeley (2003) noted similar feelings of exclusion among Middle Eastern and South Asian psychotherapists after the 9/11 events.

Their position seems to be connected to the mixed reactions of the Arab citizens after an Intifada attack. Mendel-Girin (2006) found a mixture of conflicting feelings: fear of Jewish hostility, revenge, anger and affront at the hostility they encountered on the one hand, and empathy for the Jewish public, forgiveness of their anger, and feelings of guilt by association, on the other. Some of these mixed responses are also demonstrated by social workers and clients in Northern Ireland when they reflect on the experience of the Troubles (Campbell and Duffy, 2008).

Another explanation refers more specifically to the meaning that social workers attached to the ways they coped with the traumatic events brought by VPC. Explaining the personal and professional growth of social workers who worked with victims, Shamai and Ron (2009) suggest that they experienced the help they provide as part of their commitment to the state of Israel. Following this line, it would seem that the personal growth experienced by the majority of the Jewish social workers is based on national group solidarity as against perceived adversity is one which excludes the Arab social workers. This context is therefore likely to render this minority group of social workers further disempowered and disillusioned with professional solidarity. We do not know if the Jewish social workers assumed that their Arab colleagues support the Second Intifada, but the palpable tension mentioned by some of the Arab social workers would indicate that some suspicion and resentment were felt and communicated either intentionally or unintentionally. It is therefore unsurprising that the Arab social workers did not experience positive growth in this context. What is empowering professionally for one group is disempowering for the other, and the experience of professional growth takes place side by side with the increased marginalization of Arab social workers and that of Arab clients.

The main limitations of this article derive from the fact that it is based on a secondary analysis of data obtained in interviews enquiring about social workers' difficulties in VPC. Deeper, more nuanced, and better focused knowledge would probably be obtained by means of direct, face to face interviews

regarding social workers' professional growth experiences during times of terror.

To the best of our knowledge, this study is one of the few to date to focus on positive outcomes among helping professionals in situations of ongoing VPC. It is also one of the few studies not to focus on clinical tools in doing so, but on the interviewees' direct comments and on taking into account the contribution of the context in which they operate, thus increasing our understanding of the conditions which enable professional growth during VPC.

The literature thus far has focused either on the personal growth of trauma victims or on the difficulties experienced by professionals in VPC. The study findings indicate that they can also foster professional growth. The findings indicate that this growth occurs only when the professionals are provided with peer, agency, and societal support to help them cope with the hardships and when they feel a common sense of belonging and purpose. It highlights, however, that professional growth can also take place without identified parallel personal growth.

The findings indicate several implications for practice and research. In terms of practice actions can be taken to provide good enough agency and societal support for professionals working in times of VPC. This would include the development and provision of mechanisms to encourage peer support, as well as the provision of supervision and training. In view of the lack of professional growth found among Arab workers in this study, sensitivity to the plight of minorities in such a conflict needs to be in place and clearly demonstrated.

Pertaining to research, more thorough, focused, and direct study of positive outcomes, both personal and professional, among helping professionals in times of VPC is needed to enhance our knowledge of this important and unexpected aspect. Such a study should investigate outcomes and personal agency, as well as the contributing societal factors. It would also be informative to examine the relationship between professional growth and the difficulties that professionals experience in such turbulent times.

## Notes

1. Officially Israel does not recognize its substantial Arab minority to be a national group, and depicts it as an ethnic minority; unlike the self-definition of this group.
2. Post-Traumatic Stress Disorder is typified by emotional flooding and disorganized behaviour usually set off by subtle clues, reminders, or even minor instances of something that has been suppressed (Comas-Diaz and Jacobsen, 2001).
3. 'Eye Movement Desensitization and Reprocessing (EMDR) is a psychotherapy approach comprising elements of many psychotherapies such as psychodynamic, cognitive behavioral, interpersonal, experiential and body-centered therapies in structured protocols designed to maximize treatment' (EMDR Institute Incorporated, A brief description of EMDR), <http://www.emdr.com/briefdes.htm> (accessed February 2009).

## References

- Antonovsky, A. (1979) *Health, Stress, and Coping: New Perspectives on Mental and Physical Wellbeing*. San Francisco, CA: Jossey-Bass.
- Antonovsky, A. (1987) *Unravelling the Mystery of Health: How People Manage Stress and Stay Well*. San Francisco, CA: Jossey-Bass.
- Antonovsky, A. and Bernstein, J. (1986) 'Pathogenesis and Salutogenesis in War and Other Crises: Who Studies the Successful Copier?', in N.A. Miligram (ed.) *Stress and Coping in Time of War*, pp. 2–65. New York: Brunner/Mazel.
- Batten, S.V. and Orsillo, S.M. (2002) 'Therapist Reactions in the Context of Collective Trauma', *The Behavior Therapist* 25: 36–40.
- Baum, N. (2004) 'Social Work Students Cope with Terror', *Clinical Social Work Journal* 32(4): 395–413.
- Baum, N. (2009) 'The Workplace as a Sheltered and Porous Space: The Experiences of Jews and Arabs Who Work Together', paper presented at the Walls: Antecedents and Consequences of Segregation and Integration International Conference, Ramat Gan, Israel, January.
- Campbell, J. and Duffy, J. (2008) 'Social Work, Political Violence and Citizenship in Northern Ireland', in S. Ramon (ed.) *Social Work in Political Conflict*, International Association of Schools of Social Work and BASW (British Association of Social Workers) Series. Birmingham: Venture Press.
- Campbell, J. and McCrystal, P. (2005) 'Mental Health Social Work and the Troubles in Northern Ireland a Study of Practitioner Experiences', *Journal of Social Work* 5(2): 173–90.
- Cohen, M., Gagin, R. and Peled-Avram, M. (2006) 'Multiple Terrorist Attacks: Compassion Fatigue in Israeli Social Workers', *Traumatology* 12(4): 293–301.
- Comas-Diaz, L. and Jacobsen, F.M. (2001) 'Ethnocultural Allodynia', *Journal Psychotherapy, Practice and Research* 10(4): 246–52.
- Drory, M., Posen, J., Vilner, D. and Ginzburg, K. (1998) 'Mass Casualties: An Organizational Model of a Hospital Information Center in Tel Aviv', *Social Work Health Care* 27(4): 83–96.
- Eidelson, R.J., D'Alessio, G.R. and Eidelson, J.I. (2003) 'The Impact of September 11 on Psychologists', *Professional Psychology: Research and Practice* 34(2): 144–50.
- Frans, D.J. (1993) 'A Scale for Measuring Social Work Empowerment', *Research on Social Work Practice* 3(3): 312–28.
- Gagin, R., Cohen, M. and Peled-Avram, M. (2005) 'Family Support and Victim Identification in Mass Casualty Terrorist Attacks: An Integrative Approach', *International Journal of Emergency Mental Health* 7(2): 125–31.
- Hobfoll, S.E. and Vaux, A. (1993) 'Social Support: Resources and Context', in L. Goldberg and S. Breznitz (eds) *Handbook of Stress*, 2nd edn, pp. 685–705. New York: Free Press.
- Itzhaky, H. and York, A.S. (2005) 'The Role of Social Work in the Face of Terrorism: Israeli Community Based Experience', *Social Work* 50(1): 142–9.
- Johnson, L. and Yanca, S. (2001) *Social Work Practice: A Generalist Approach*, 7th edn. Boston, MA: Allyn and Bacon.
- Landau, R. (1997) 'Terrorism and the Social Worker', *Practice* 9(14): 5–12.
- Laufer, A. and Solomon, Z. (2006) 'Posttraumatic Symptoms and Posttraumatic Growth among Israeli Youth Exposed to Terror Incidents', *Journal of Social and Clinical Psychology* 25: 429–47.



- Lerias, D. and Byrne, M.K. (2003) 'Vicarious Traumatization: Symptoms and Predictors', *Stress and Health* 19: 129–38.
- Lev-Wiesel, R. and Amir, M. (2003) 'Posttraumatic Growth Among Holocaust Child Survivors', *Journal of Loss and Trauma* 8(4): 229–37.
- Lev-Wiesel, R., Goldblatt, H., Eisikovits, Z. and Admi H. (2008) 'Growth in the Shadow of War: The Case of Social Workers and Nurses Working in a Shared War Reality', *The British Journal of Social Work*, advance access, published 5 March 2008; doi: 10.1093/bjsw/bcn021: 1–21.
- Lindsay, J. (2007) 'The Impact of the 2nd Intifada: An Exploration of the Experiences of Palestinian Psycho-social Counsellors and Social Workers', *Illness, Crisis and Loss* 15(2): 137–53.
- Loewenberg, F.M. (1992) 'Notes on Ethical Dilemmas in Wartime: Experiences of Israeli Social Workers During Operation Desert Shield', *International Social Work* 35(4): 429–39.
- Macksoud, M.S. and Aber, L.J. (1996) 'The War Experience and Psychosocial Development of Children in Lebanon', *Child Development* 67: 70–88.
- Mendel-Girin, A. (2006) 'The Triple Fear: Israeli Arabs in "Jewish" Areas during the Second "Intifada"', unpublished Master's thesis, Tel-Aviv University (in Hebrew).
- Murdin, C. (2000) *Handbook of Clinical Social Work Supervision*. New York: The Haworth Social Work Practice Press.
- Ramon, S. (2004) 'The Impact of the 2nd Intifada on Israeli Arab and Jewish Social Workers', *European Journal of Social Work* 7: 285–303.
- Ramon, S. (ed.) (2008) *Political Conflict and Social Work*. Birmingham: Venture Press.
- Ramon, S., Campbell, J., Lindsay, J., McCrystal, P. and Baidoun, N. (2006) 'The Impact of Political Conflict on Social Work: Experiences from Northern Ireland, Israel and Palestine', *British Journal of Social Work* 36(3): 435–50.
- Saakvitne, K.W. (2002) 'Shared Trauma: The Therapist's Increased Vulnerability', *Psychoanalysis Dialogues* 12: 443–49.
- Seeley, K. (2003) 'The Psychotherapy of Trauma and the Trauma of Psychotherapy: Talking to Therapists About 9–11', Working Paper Series, Center on Organizational Innovation, Columbia University, New York.
- Shamai, M. and Ron, P. (2009) 'Helping Direct and Indirect Victims of National Terror: Experiences of Israeli Social Workers', *Qualitative Health Research* 19(1): 42–54.
- Solomon, Z. and Dekel, R. (2007) 'Posttraumatic Stress Disorder and Posttraumatic Growth among Israeli Ex-POWS', *Journal of Traumatic Stress* 20(3): 303–12.
- Somer, E., Buchbinder, E., Peled-Avram, M. and Ben-Yizhac, Y. (2004) 'The Stress and Coping of Israeli Emergency Room Social Workers Following Terrorist Attacks', *Qualitative Health Research* 14(8): 1077–93.
- Tedeschi, R.G. (1999) 'Violence Transformed: Posttraumatic Growth in Survivors and their Societies', *Aggression and Violent Behavior* 4: 319–41.
- Tedeschi, R.G. and Calhoun, L.G. (1996) 'The Posttraumatic Growth Inventory: Measuring the Positive Legacy of Trauma', *Journal of Traumatic Stress* 9: 455–71.
- Tosone, C., Bialkin, L., Campbell, M., Charters, M., Gieri, K., Gross, S., Grounds, C., Johnson, K., Kitson, D., Lanzo, S., Martinez, A., Lee, M., Martinez, M., Milich, J., Riofrio, A., Rosenblatt, L., Sandler, J., Scali, M., Spiro, M. and Stefan, A. (2003) 'Shared Trauma: Group Reflections on the September 11th Disaster', *Psychoanalytic Social Work* 10: 57–77.

NEHAMI BAUM, is a senior lecturer of the School of Social Work at Bar Ilan University. She is a social worker with experience in both public and private practice. Her main areas of interest are: men's way of mourning and non-death related losses, and situations that mental health professionals confront in their practice. More specifically, in the last few years she has been studying professionals' private experiences (e.g. pregnancy) and environmental conditions (e.g. terror, war and political conflict) on their professional functioning. Address: The Louis and Gabi Weisfeld School of Social Work, Bar Ilan University, Ramat Gan, Israel 52900. [email: nehami@hotmail.com]

SHULA RAMON is Professor of Interprofessional Health and Social Studies at Anglia Ruskin University, Cambridge, and Visiting Professor at the Centre for Mental Health Recovery at the University of Hertfordshire. A social worker and clinical psychologist by training, she has researched and published extensively on de-institutionalization and recovery in mental health. Since 2002 Prof. Ramon has researched the impact of political conflict on both clients and social workers, and in 2008 has published the first ever edited book on social work in the context of political conflict. She is currently leading an international project on curriculum building of this hitherto neglected area of social work education.