Growing up in a suburb of New York during the Vietnam war in the 1960s, I didn’t know anyone in the military and had limited personal experience with trauma. How, then, did I find myself working with military and civilian trauma in Israel, where I am now as I write this article?

Being in Israel is very personal. It reconnects back to my roots from my first visit in 1962. In 1986, 25 years later, I came to teach dance therapy in the Netanya campus of Lesley University. As soon as I arrived, I realized how affected everyone was by trauma, in a way that was difficult to understand from a distance. For example, during a normal group process, one of the students ran out of the room crying—she had tragically smothered her own daughter during a terrorist attack while her husband and child were killed in front of them. In 2008, in a different class, that same terrorist was released by Hezbollah, as the class did a ritual for mourning. We stood in a circle, meditating and swaying to music. One of the religious women led us in a prayer; in this circle, as grieving mothers and family members, religious and secular, we bridged our differences. The confrontation with death from an existential approach to group therapy helped members take risks and live fully (Yalom, 1980). Using the arts to develop a spontaneous ritual around death, we lit a candle, stood in a circle crying, sharing stories and memories.

After the break, the group theme turned to death and rebirth—of hope: How to find and celebrate hope. Choosing music with high energy, strong rhythms and comfortingly familiar to the cultural context of the group, we danced in a circle, beginning to laugh and play together with scarves—tying them together as jump ropes, expressing freedom, connecting in pairs and subgroups. We ended on notes of exhilaration and freedom.

The student who led the meditation wrote:

Our group went through stages of existential responsibilities facing the issues of freedom and faith, death and rebirth. Members of the group confronted death on different levels. On the second day, we learned about the death of the two soldiers whose coffins were sent back after two years of nerve breaking anticipation. When we realized all hope was gone, we felt a great emptiness. There are mothers to young soldiers in our group who live in fear of what can happen to their own children. The group prayed and sang repeatedly, moving slowly as if rocking a baby. This form provided us with comfort as well as a deep sense of devotion to our people.

Israel is an extremely dynamic, expressive country where the expressive arts and holistic models are well-understood and integrated into treatment approaches to trauma. Its deep and long experience dealing with multigenerational trauma has a great deal to teach us in the United States.

Many of these approaches to trauma work were presented at an extraordinary conference in Israel in April 2006 on the use of the arts for healing. It was called Imagine: Expression in the Service of Humanity and brought together Israeli and over 270 Palestinian and American healthcare professionals who were working in grassroots collaborative situations to share their work. Three hundred and fifty attendees included 60 Palestinian participants who had to come
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Defense Forces (IDF). We regularly give workshops there to help the young caregivers cope with stresses of being officers and also on call 24/7. These young people visit soldiers in hospitals and break news to families about injuries and deaths. For Americans, the film The Messenger (Serlin, 2010) gives a powerful portrait of the stresses associated with this kind of service.

In addition, I do workshops for trauma centers. One is NATAL, whose founder and chairperson is a graduate of the Lesley program in expressive therapies. Judith Yovel Recanati believed in 1998 that Israel was founded on the myth of “never more” from the holocaust, and the need for Jews to be strong and warriors. Because of this, trauma has not been admitted or addressed. Committed to addressing this need now, her center has groups that range from mobile units to support groups to arts and somatic approaches. The center is designed as a warm and welcoming place focusing on the personal relationship as the healing agent. It is a “multidisciplinary treatment center for victims of terror and war related trauma”... a “training center for professionals and at-risk populations”... and “an educational resource center.”

Recanati believes that everyone in Israel lives with underlying existential trauma and should have a supportive environment to deal with this trauma. It now has a Community Outreach Team with 15 professionals providing art therapy, biofeedback, and groups in three languages. NATAL has been working daily in Sderot for the last five years and has a mobile unit that visits people who are afraid to leave their homes. After 10 years, Recanati sees a change – more people are seeing the possibility of getting help, perhaps preventing chronic trauma. NATAL is now affiliated with Tel Aviv University’s Medical School, and staff members get supervision and a diploma at the end of the year. The curriculum includes other short specific courses, such as how to work on a Hotline. NATAL is characterized by the diversity of their models and a conviction that no “one size fits all.” It is committed to a holistic model – using verbal and nonverbal therapies – growing from a strong therapeutic relationship.

Another trauma center is the Israel Center for the Study of Psychotrauma (ICTP), founded in 1989 by psychologist Dr. Danny Brom and affiliated with Herzog Hospital in Jerusalem to “address the growing prevalence of PTSD in Israel, which has been estimated to affect 9 percent of the population” (Serlin, 2008). This center works with the Ministry of Education and school systems, establishing the Resiliency Center in Sderot. The National Schools Resilience Project has provided training for 4,000 teachers, psychologists and school psychologists. It builds peer-to-peer counseling, supporting natural youth leaders, and training teachers to coach students in resiliency skills. In addition, ICTP provides dissociation training that is phase-oriented and combines relational and problem-solving components.

Finally, SELAH is a trauma center that specializes in the needs of immigrants and underserved populations in Israel. It was founded by Ruth Bar-On, who was head of the Council of Soviet Jewry. Ruth Bar-On’s daughter, Eleanor Pardess, is a clinical psychologist who works with the first aid emergency response teams on how to reach difficult populations who are isolated and cut off from support sys-
tems. As part of the comprehensive Multidisciplinary Support Program, nature-based workshops are held in the context of two or three-day retreats. Purdiss has conceptualized the model of a support program named M.O.V.I.N.G Encounters. This model, which has been developed over the last 15 years, combines nature excursions, outdoor physical activities and exploration of metaphors from nature, such as survival in the desert, rooting and grounding or the regeneration of burnt trees, with a variety of expressive arts.

The concept of M.O.V.I.N.G Encounters highlights the idea of re-establishing the flow of life and of creating the conditions that may facilitate moving in relationship to oneself, others, and the world. The choice of the term captures multiple meanings, including:

- The actual physical movement which is an important part of the seminar program incorporating the nature excursions, stretching and breathing exercises as well as relaxation techniques and possibilities of dance therapy or martial art therapies.

- Moving in the emotional sense of the “Shared Emotional Voyage” Creating space for sharing e-motion.

- The concept of moving is also relevant as a natural antidote to the post-traumatic experience of being immobilized, blocked, frozen and stuck in time.

- Moving along together includes moving backwards (remembering) and forward, thus bridging continuity between past, present and future.

As an acronym the term MOVING designates the following components, or dimensions, which facilitate posttraumatic growth: M – Meaning reconstruction; O – Opportunities for sharing; V – Validating grief; I – Involvement in creative activity; N – Nature immersion; G – Group experiences fostering a sense of belonging and connectedness.

Conclusion
This visit to Israel I look forward to spending more time at Selah, and will come away profoundly enriched by our exchanges and my learning there. After an emotional and intense visit to Israel, I know that this exchange completes a cycle started forty-eight years ago, and it feels like being able to bring something useful to a place I love.

References


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