





Breathing war, dreaming connection: Dialogue as an ethical foundation for collaborative work of Palestinian and Jewish music therapists in Israel

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ABSTRACT

A collective of six Palestinian-Arab and Jewish music therapists, researchers and educators, and citizens of Israel convened to explore and foster the specific needs of Arab music therapists in Israel. As a primary ethical step, we embarked on a participatory study, delving into our personal and professional experiences as music therapists in a country deeply affected by long-term trauma and conflict. All group members participated in a 90-minute focus group designed as a semi-structured interview, with one member acting as an interviewer and another as a translator. The interview was recorded and transcribed. It was analysed by three group members, Jewish and Arab, to afford triangulation. Following three successive rounds of thematic analysis, a 90-minute Zoom consultation solidified the emergence of five key themes: (1) blurred boundaries challenge ethical thinking; (2) shaped by war; (3) fragmented identities; (4) cultural loneliness; and (5) music in therapy - between polarisation and shared identity. The findings were shared with all group members, who provided additional input. The discussion highlights the profound implications of cultural division and hierarchy on all group members, the lack of authentic and culture-based professional growth, and a gap in culturally-sensitive professional ethics for Palestinian-Arab participants. We grappled with the ethical challenge of holding multiple truths as Israeli music therapists, while embracing the hopeful notion that music can serve as a unifying medium, bridge cultural divides, and foster a pluralistic approach to music therapy.

KEYWORDS

music therapy, war-zone, ethics, culture-sensitive dialogue

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social dialogue, and the role of creative arts therapies in promoting social inclusion and systemic change. [roginskyefrat@gmail.com] Tamar Hadar, PhD, The School of Creative Arts Therapies, University of Haifa, co-head of the music therapy program. A music therapist, supervisor and lecturer, working with children and families in an early intervention unit and in a private practice. Hadar specialises in child-parent interventions, specifically in the context of trauma and displacement. Hadar's research centres on clinical improvisation theory and assessment; music therapy for infants and preterm babies; and culturally sensitive music therapy. [thadar1@univ.haifa.ac.il] Nihal Midhat-Najami, PhD, is a music therapist, supervisor, independent researcher, and head of the expressive arts therapy team at the Ministry of Education. She is a member of Mistory, an international consortium focused on trauma recovery across cultures. Najami works with children and families in trauma-affected communities, specialising in intimate partner violence recovery within traditional and collectivist societies, with a focus on embodied trauma and the impact of political violence. Her work emphasises healing, resilience, and culturally rooted recovery trajectories through expressive and arts-based approaches. [nihalmidhat1@qmail.com] Buran Saada M.A.A.T, is a music therapist, supervisor, lecturer, and trainer in music and art therapy. She resides in Shaab village, near Akko in the Galilee. With an academic background in education and music sciences, her professional path has spanned schools, cultural institutions, and heritage concerts. She holds a master's degree in music therapy and is deeply engaged in therapeutic work and training across the Arab Palestinian community in Jerusalem, 1948-occupied Palestine, and the West Bank. Her work includes training professionals in psychology, sociology, and social work, alongside direct therapeutic practice with diverse populations. [burans.saada@gmail.com] Rozan Khoury is a music therapist, singer and music education trainer specialising in early childhood. Her musical journey began at an early age with classical training in both cello and singing. In 2006, she secured second place in a classical Arabic singing competition at the Casablanca Festival in Morocco. A year earlier, in 2005, she won first place at the Arabic Singing Festival in Israel. In 2005, Rozan joined the Sabreen Association in Jerusalem, where she contributed to the development of music education curriculums for schools in the West Bank and UNRWA elementary schools. Currently, she is part of a team at Beit al-Musica in Shafa'amr, developing innovative musical materials for young Arabic-speaking children [rozankhoury@gmail.com] Maimounah Hebi, PhD, is an art therapist, researcher, and lecturer whose work focuses on emotional processing, wellbeing among minorities, and resilience in times of adversity. She teaches in the School of Creative Arts Therapies at the University of Haifa, and currently a post-doctoral fellow in the neuropsychology research group at Eötvös Loránd University. [maimouna.hebi@gmail.com]

INTRODUCTION

We are a group of five female music therapists and one female art therapist anchored in Israel, with 18–31 years of experience. Our national identities are diverse, but we are all deeply rooted in this land. Tamar is an Israeli music therapist who lives in Kiryat Tivon. Her family strongly believes in Arab-Jewish coexistence, and Tamar strives to continue this path in her personal and professional life. Nihal, a Palestinian music therapist, born and raised in East Jerusalem,¹ was educated in schools dedicated to the Palestinian heritage of the Nakba and in the University of Bir-Zeit in the Palestinian Authority. Having married an Arab-Israeli citizen, she was compelled to accept citizenship. She moved to the north of Israel, where she now lives. Efrat is a sixth-generation Israeli Jewish music therapist, born in 1967 and raised with tremendous love and respect for this country and its diverse geographical, human, and cultural landscape. Efrat lives and practices in Zichron Yaakov on Mount Carmel. Buran, a Palestinian music therapist and human rights activist from Shaa'b, a small Arab village in Galilee, is amongst the first music therapists in the West Bank and Palestinian refugee camps. Buran also accompanies groups of public healthcare and education professionals in these areas. Maimouna, a Palestinian Arab citizen of Israel, was born and raised in Shaa'b village. Like Buran, she is the third generation after her grandparents were displaced from their original village during the Nakba in 1948. She is deeply rooted in nature, the land, and her heritage. Rozan is an Arab music therapist and vocalist living in the Upper Galilee. She also develops music education curricula for elementary schools in the Palestinian Territories and Jordan. Rozan believes music and singing are natural tools, before language, for bringing people together, and accessing emotions otherwise inexpressible. "When I receive Hebrew and English recordings of children singing the songs I performed," says Rozan, "it confirms for me the power of music in crossing linguistic and cultural boundaries."

¹ Nihal: Palestinian-Arab people born in Esat Jerusalem do not own a Palestinian citizenship.

Together, we comprised a collective of Palestinian-Arab and Jewish music therapists, researchers and educators, and citizens of Israel who convened to explore and foster the specific needs of Arab music therapists in Israel. As a primary ethical step, we embarked on a participatory study, delving into our personal and professional experiences as music therapists in a country deeply affected by long-term trauma and conflict. This paper presents our journey of discovery.

Different nations living on shared land

The socio-political complexity of the State of Israel derives from one of the most protracted and contentious geopolitical disputes of the modern era, rooted in a complex interplay of historical narratives and contemporary geopolitical realities. At its core, the conflict between Jews and Arabs revolves around competing claims to territory, statehood, and national identity. The establishment of the State of Israel in 1948 triggered the conflict, with both sides asserting rightful claims to historical and cultural heritage (Smith, 2021).

From a Jewish perspective, securing a homeland in the Middle East is a historical birthright and a national response to centuries of worldwide oppression and expulsion, culminating in the persecution and death of six million Jews during World War II (Morris, 2022). The establishment of Israel as a state represented a peak of these aspirations but precipitated ongoing challenges in relations with neighbouring Arab states and the Palestinian population. The Palestinian perspective is painful as well. Approximately 750,000 Palestinians were displaced, and more than 500 villages were destroyed during the 1948 war (Al-Haj, 1991). After the war, the former Mandatory Palestine was divided between the State of Israel, Jordan, and Egypt. Over 80% of the Arab population fled or was expelled, leaving about 156,000 in Israel. Today, Palestinian-Arab citizens of Israel comprise approximately 20% of the Israeli population. Many more Palestinians live in neighbouring countries and across the globe. This history underscores the deep-seated grievances and aspirations for selfdetermination, articulated in various political and nationalist Palestinian movements (Makdisi, 2020).

The quest for a lasting peace settlement has been fraught with challenges, marked by intermittent periods of violence, diplomatic efforts, and international interventions aimed at negotiation and reconciliation (Bickerton & Klausner, 2023). In the 1990s, the Oslo Accords represented a landmark attempt to establish a framework for Palestinian self-governance and Israeli-Palestinian coexistence, yet its implementation failed due to recurrent breakdowns in trust and renewed outbreaks of violence (Finkelstein, 2021). Recent developments, including the latest war underscore the enduring complexities and humanitarian toll of the conflict.

In contemporary Israeli society, a number of distinct streams contribute to the complexity of the socio-political landscape. Despite sharing the Arabic language, the Palestinian-Arab population is diverse in religious and cultural affiliations: Muslim, Christian, Druze, Circassian, Bedouin, and more. This population also varies in legal status, including those with and without Israeli citizenship (Haj-Yahya et al., 2022). The Jewish Israeli population is no less diverse: Haredi or Ultra-Orthodox Jews are characterised by their adherence to strict religious observance and communal insularity (Cahaner & Malch, 2022). Nationalist religious Jews intertwine religious fervour with a deep-rooted commitment to Israeli nationalism (Herman et al., 2014). Secular Jews, comprising a substantial

portion of the population, advocate for a modern, pluralistic society, emphasizing civil liberties and secular governance (Finkelstein & Goldberg, 2022). This intricate mix of identities and ideologies reflects the ongoing turbulence in Israeli society, shaped by historical legacies, geopolitical realities, and evolving socio-cultural dynamics.

Literature review

Our literature review represents our mutual reality – a good-enough compromise between several narratives, definitions, and languages.

Arabic music therapy in Israel

Music therapy began in Israel during the 1970s (Amir, 2001; Gottfried, 2015). Now, four different academic programmes train music therapy students from all over the country. The academic and clinical work is vibrant: therapy is provided within the education and health systems, in welfare, with older adults, in rehabilitation and private practice, and more (Amir & Elefant, 2012; Gilboa et al., 2022). Music therapists serve a diverse society: a varied mix of service owners from many cultures and religions and with different civil statuses (Gilboa, 2016).²

Arab music therapists in Israel can complete their professional education in Israeli academic programmes. Many of these graduates practice within an Arab environment and population (Khouriyeh, 2021). Some also work at the Palestinian Authority (Saada & Coombes, 2020). An online survey (Roginsky, 2022) on language and power in music therapy was recently posted in Hebrew and Arabic on social media, inviting Israeli music therapists to describe their experiences within an English-dominated professional sphere. Out of 69 respondents, only 10 said their mother tongue was Arabic. There are over 600 practicing professionals in the country, but the actual number of Arab music therapists is unknown (Wiess et al., 2017).³ In addition, academic research on music therapy and the Arab population in Israeli is scarce.

Khouriyeh's study (2021), one of a handful of studies on Arab music therapy in Israel, reflected on the complexity of this profession within the Palestinian-Arab society in Israel, noting that psychotherapy of any sort is less accepted, notably in rural areas. Certain religions, especially Islam, object to the secular use of music, and there is a lack of Arab music written specifically for children, making it hard to provide culturally sensitive therapy⁴ to youth.⁵ However, Khouriye suggested that despite the lack of culturally-sensitive literature on Palestinian-Arabic music therapy, the Arab population has become more familiar with and accepting of music therapy during the last decade.

An experienced Palestinian-Arab music therapist working mainly in Arab society in Israel was interviewed in Roginsky's study (2022). Her memories of the use of language were painful:

² We define therapy clients as active participants and key stakeholders, referring to them as music therapy owners.

³ The authors are involved in a research project aimed at updating the demographic data on Israeli-Arab music therapists.

⁴ APA defines cultural sensitivity as the "awareness and appreciation of the values, norms, and beliefs characteristic of a cultural, ethnic, racial, or other group that is not one's own, accompanied by a willingness to adapt one's behavior accordingly" (APA, 2024). Edwards, a music therapy scholar, suggests this term highlights "the importance of awareness and recognition of the existence of cultural differences and dynamics" in therapy (Edwards, 2022, p. 29).

I can never talk about music therapy in Arabic. I cannot think in Arabic about music therapy. I have never read anything about music therapy in Arabic, and in general, I have a feeling [...] as if I were in another country. Foreign. Immigrant. In Arabic, it is called Ghurba. (Roginsky, 2022)

Her memories included studying music therapy in a completely new cultural environment. She described the musical gap, the need to comprehend, think, and express the most private thoughts in a second language, Hebrew, and the scarcity of Arabic-speaking clinical supervisors to continue her ongoing professional development.

Music therapy in a war-zone

A deeper dive into our subject requires revisiting this country's background: ongoing war and the potential of music therapy in this context. As a whole, Israeli society has suffered from a traumatic century-long war and ongoing terror. Music therapy has emerged as a valuable therapeutic approach in war-zone areas, offering profound benefits amidst the chaos and trauma of conflict. In a setting where individuals and communities face pervasive psychological distress, this profession provides a non-verbal and culturally resonant avenue for emotional expression and healing (Heidenreich, 2005; Nnanyelugo et al., 2023).

Research indicates music interventions can relieve symptoms of post-traumatic stress disorder (PTSD), reduce anxiety, and enhance resilience amongst survivors of war-related violence (Bensimon et al., 2008). Music's ability to transcend linguistic and cultural barriers makes it uniquely suited to address the diverse needs of populations affected by conflict, fostering a sense of solidarity and restoring a semblance of normalcy amidst adversity (Ahonen & Mongillo-Desideri, 2014; Bensimon, 2019; Bensimon et al., 2012). The efficacy of music therapy in a war-zone is underscored by its capacity to empower individuals, rebuild community connections, and mitigate the long-term psychological impacts of violence and displacement (Pavlicevic, 2010; Stige, 2022). By facilitating creative expression and emotional release, it offers a holistic approach to trauma recovery that complements conventional mental health interventions in resource-constrained and unpredictable environments (Hacking, 2017). As evidenced in case studies and fieldwork, such interventions support individual well-being and contribute to broader peacebuilding efforts by promoting empathy, understanding, and reconciliation in diverse populations affected by conflict (Pavlicevic, 2010).

Diverse consequences of accumulated stress and trauma

Trauma is prevalent throughout Israeli-Jewish and Palestinian-Israeli society (Bleich et al., 2003; Mayer et al., 2024). Over the course of a century, alongside those directly affected (Nagamey et al., 2018; Pines, 2006), many are deeply engaged with trauma through their loved ones, and many more are exposed through the news and internet or social networks (Hamblen & Schnurr, 2024). All exposures require ongoing effort in stress-response systems, wearing out neurological functions (Singhal, 2019) and possibly damaging cognitive, behavioural, or mental functions (Singhal, 2019) of adults, children, and even the preborn (Danese & McEwen, 2012).

Interestingly, Pines (2006) found high resilience in the Israeli public despite the ongoing conflict.⁶ Post-traumatic growth (PTG), a natural recovery process, may explain this finding. As Calhoun and Tedeschi noted, "At least for some people, an encounter with trauma, which may contain elements of great suffering and loss, can lead to positive changes in the individual" (Calhoun & Tedeschi, 2006, p. 3). Henson et al. (2021) defined five main growth categories and several PTG-promoting factors, including the ability to share negative emotions, the ability to process the trauma cognitively, positive coping strategies, and positive personality traits. Wu et al. (2019) found over half, 52.8%, of a population with PTSD showed signs of PTG. Similarly, following 9/11, Hamblen and Schnurr (2024) discovered a large percentage of traumatised American citizens demonstrated natural long-term recovery processes. Hoffman and Kruczek (2011) suggested the factors involved in successful recovery are biological, social, economic, and psychological, and they noted their intricate interplay during the healing process. Beyond the individual, groups of people can heal: Eshel and Kimhi (2015) pointed to the recovery of whole communities following war and terror and argued recovery was facilitated by group members' sense of belonging and support.

The present study

Different consequences of chronic stress may characterise some of the Israeli public, and PTG and high resilience may define others, but we all carry the marks of trauma. What is the cost of individual and public resilience in an ongoing war? How does this long-term experience manifest in our identities, practice, and ethics as therapists and as music therapists? In what ways does the reality affect our professional identity and development? How does it influence our clinical choices, our ethical stances, and our use of music in therapy? These questions motivated our group to embark on an open discussion of the influences of the Israeli situation on our practice.

METHOD

Research rationale and approach

The experiences of Arab and Jewish music therapists practicing music therapy in Israel have received little attention in the music therapy literature (Gilboa & Salman, 2019; Khouriyeh, 2021; Roginsky, 2022). This study aimed to facilitate mutual understanding and explore potential avenues for developing an Israeli-Arab and Israeli-Jewish music therapy group. We considered group inquiry an essential ethical step, as it allowed an open and broad dialogue to share different perspectives, even if painful or contrasting. We chose a qualitative method as a means of achieving ethical research and practice, because of its ability to reflect human diversity and subjectivity. It was a participatory study, defined as: "A collaborative effort in which people whose lives are affected by the issues being researched are partners in designing, undertaking, and disseminating research to influence socially just change. The process aims to be democratic, participatory, empowering, and educational" (Banks & Brydon-Miller, 2018, p. 3). More specifically, we engaged in a

⁶ Jabr (2019), a Palestinian psychiatrist, contended the concepts of 'resilience' and 'post-traumatic growth' rooted in Western psychology do not fully encapsulate the Palestinian experience and proposed *Sumoud* (صبود) to articulate the distinct collective approach to creating meaning and providing care amidst traumatic experiences.

collaborative process of continuous dialogue, reflection, analysis, rethinking, reframing, rewriting, and revising our shared narrative. The process was intended to foster meaningful, collective learning about the professional needs of Arab music therapy students and practitioners.

We used an action research design (McFerran et al., 2022), aiming to generate focused and contextually relevant knowledge for music therapists in Israel, given the current circumstances. This methodological framework combines a collaborative process, a strong emphasis on subjective and personal experience, and real-world examples of professional dialogue between conflicting groups. As such, it was appropriate for our goal of advancing more ethical music therapy in our shared land. The research team comprised six members, including Nihal, Tamar and Efrat, the group founders and researchers. Two Arab music therapists, Rozan and Buran, joined the group later and were invited to participate in the present study. Brown (2021) argued participants in action research should "(1) have a role in setting the agenda of inquiry, (2) take part in the data collection and analysis and (3) have control over the use of outcome and the whole process" (p. 202). Our study aligned with Brown's definition.

The preparations involved several stages. First, a message was posted in our WhatsApp group to provide a general overview of the idea. Second, we individually contacted each of the two therapists, Buran and Rozan, to explain the research rationale and plan in detail in Arabic, their native language, and address any initial inquiries they had. Third, to ensure accessibility for all participants, Maimouna, an Arab art therapist, joined the group as a translator. Given her valuable insights and opinions on our topic, she was invited and agreed to participate. Fourth, following further discussions, we established our roles and some guidelines. The time to hold an online focus group was confirmed, and all six participants signed informed consent forms.

Name	National identity	Professional information	Role
Nihal	Palestinian-Arab citizen of Israel.	Music therapist, clinical supervisor, PhD candidate, works with Palestinian-Arabs.	Participant-researcher
Tamar	Jewish citizen of Israel	Music therapist, clinical supervisor, works in Israel.	Participant-interviewing researcher.
Efrat	Jewish- citizen of Israel.	Music therapist, clinical supervisor, works in Israel.	Participant-researcher
Buran	Palestinian-Arab citizen of Israel.	Music therapist working in Jerusalem and the West Bank.	Group participant.
Rozan	Palestinian-Arab citizen of Israel.	Music therapist and vocalist working in Israel. Musical Education supervisor and lecturer.	Group participant.
Maimouna	Palestinian Arab citizen of Israel.	An art therapist and lecturer.	Participant, translator.

 Table 1: Demographic table

Data collection

We gathered data in a single 90-minute semi-structured interview on Zoom. Tamar, defined as the interviewer, prepared the interview guide, sent the Zoom invitations, mediated the semi-structured interview, and was responsible for the session's video and written documentation. An interview guide was created and administered. During the interview, the participants were asked to present themselves personally and professionally, including their training, professional development, and ongoing career. The interview probed the influences of national identity and personal ideology on challenges, resources, moments of difficulty and success at work, professional wishes, and dreams.

Participation during the interview was open: participants could reply in their own time and their own language, including Hebrew, Arabic, and English. Translation was available when required. The session was videotaped and saved on the Zoom Cloud. The Zoom video link was shared with all group members and the translator the following day.

Analysis

The data were analysed using thematic analysis (Braun & Clarke, 2006) in four successive steps. First, the video recording was transcribed word-by-word and shared on Google Docs with the three participating researchers (Tamar, Nihal and Efrat). Second, each participating researcher read the text in-depth. Third, the interviewing researcher, Tamar, coded the text and passed on the analysis to Nihal and Efrat in turn. Three consecutive rounds of coding were performed this way. In the initial round, each researcher read and reread the text several times, and emerging themes were identified. The next two rounds were dedicated to narrowing and focusing on the themes and subthemes. With every round, the themes became more distinct and agreed upon. Fourth, in a 90-minute video session, the researchers discussed the coding and differences in interpretation until they reached common ground.

Ethical considerations

The research was approved by the Tel-Chay Academic College Ethics Committee (no. 10-12/2022). All group members approved and signed the informed consent form. All were informed and consulted at every major intersection of the research, writing, and publishing. During the initiation and performance of this research, being fully aware of possible power relations deriving from our differences in age, professional status, and socio-cultural belonging, we took special care to ensure there were no professional power relations between us. Moreover, we tried to discuss every step of the analysis and authorship to ensure the group's diverse cultures, opinions, and narratives were all given voice. The final decision to disclose our names and include everyone as authors was made just before submission. At that time, everyone carefully reviewed the work to ensure they felt relatively comfortable and secure with the mutual contributions.

Ongoing dialogue

Over the course of our two-year collaboration, the political and personal circumstances in our country underwent significant changes, and this affected all of us. During this time, we

faced emotional turbulence and had to bridge substantial differences in opinions, cultures, and worldviews – all of which impacted our relationship. However, our methodological framework, which emphasised collaboration, dialogue, and ample room for personal perspectives, along with our structured research and writing mission, helped us overcome the challenges and continue moving forward.

FINDINGS

The analysis gave rise to five main themes: blurred boundaries challenging ethical thinking; shaped by war; fragmented identities; cultural loneliness; music in therapy – between polarisation and shared identity. Several themes had subthemes.

Theme	Subtheme	Example quotation
1. Blurred boundaries challenge ethical thinking	Keeping confidentiality during conflict and distress	"It becomes complicated ethically when the group raises political, social, and personal issues all together." (Buran)
	Western ethics in an Eastern culture	"This society does not so much appreciate any type of psychotherapy, mental treatment, emotional treatment." (Maimouna)
	Our ethical education and the law versus careful awareness	"If I need to be a little sensitive, understand a little bit more, be careful even - it would be something from within that would guide me." (Nihal)
2. Shaped by war		"I could not live here without promoting equality and dialogue in Israel, something related to the Arab society in Israel." (Tamar)
3. Fragmented identities	Connecting to heritage	"We need programs that enrich [the Arab] sector musically it is extremely lacking, both in therapy and in education." (Maimouna)
	Marginalised cultures	"It's about treating Ashkenazi-Jewish Israelis as self- evident, as post-modern European people and all the rest are marginalised." (Buran)
4. Cultural loneliness	The linguistic challenge	"Finally, when I am given an opportunity to think and talk in Arabic, knowing I will be understood." (Nihal)
	Musical barriers	"We listen but we don't really understand the music: when is it happy? When is it sad? It's in a complete foreign musical language for us." (Efrat)
5. Music in therapy: Between polarisation and shared identity	Musical boundaries	"I can imagine a Jewish client asking for a song I'm not connected to it makes me tremble inside I am paralyzed as a therapist." (Nihal)
Table 2: There and each	Music: A possible meta- identity	"Arabic music is so rich and diverseand can be used in treatment of so many parts of society - not just with Arabs." (Rozan)

Table 2: Themes and subthemes

Theme 1: Blurred boundaries challenge ethical thinking

Keeping confidentiality during conflict and distress

Buran, a Palestinian music therapist who works mainly in the West Bank, talked about the complexity of following therapeutic ethical guidelines when working with groups experiencing extreme life circumstances:

It becomes complicated ethically when the group raises political, social, and personal issues all together [and] that's when I feel it becomes difficult to maintain confidentiality for everything that happens in this group. For example, I have a group of mothers who lost children [and] they have different needs. [...] I can't keep confidentiality in the same way.

Tamar reflected on Buran's sharing and added:

Ethical codes are not the same, and it's not always clear. [...] All kinds of internal issues come up, and this is a community setting; it's not the same. It sounds like there are so many challenges in so many areas, and the political side resonates in everything. That creates a lot of messiness, and ethically it is so unclear.

Western ethics in an eastern culture

Rozan, an Arabic music therapist, vocalist, and educator living in Israel, said community-based treatment affected the conventional ethical boundaries in therapy:

I agree that in terms of ethics and confidentiality, it is a bit unclear in our *sector*. Sometimes out of highly moral intentions, [...] yet it is still unclear. For example, I really like working in preschool groups. We tried to implement some therapeutic group model, collaborating with the kindergarten teacher and the teacher assistant, however, the assistant had a relative in the group and didn't understand the importance of keeping confidentiality, [...] so it's complicated in our society.

Maimouna, our translator, a Palestinian-Arab lecturer, and an art therapist, emphasised the collectivistic and more traditional nature of Arab society, saying it could lead to illusive ethical boundaries:

It's quite salient that [the Arab culture in Israel] is collectivist and conservative [...] and in its essence, it does not so much appreciate any kind of psychotherapy, mental treatment, or emotional treatment. Confidentiality, [...] confidentiality. [...] Our duty to report is something that can very much affect my treatment.

Ethical education and the law versus careful awareness

All participants emphasised the centrality of careful awareness in practice. Awareness was described as balancing their acquired education with their tendency to follow the law and regulations. Nihal demarcated the two pillars comprising ethical thinking – externally acquired education and an ongoing effort to conserve her inner conscience:

For me, ethics is an internal and external thing. You need knowledge, and you also need something internal that always guides you, especially in unknown territories. But if I need to be a little sensitive, understand a little bit more, be careful even - then [I would use] something from within that would guide me.

Tamar agreed and added her perspective:

When I meet a person in therapy, no matter who they might be or where they came from, my basic assumption is that I don't know anything about them. Sometimes I think I know, I have tools, and I learned of course, [...] but it is really important for me, at all times, to maintain this feeling that I know nothing about this person. At most, I have good guesses. But I don't know anything. [...] This is an ethical [treatment] for me.

Efrat further elaborated on this idea, emphasising the fine line between imposing one's ideas about something and accepting the other person's perspective:

I am constantly questioning. [...] I'm always in doubt. I constantly do not know, [...] even with people who share the same cultural background I am always in question, not knowing. [...] I am worried about the extent to which I force my set of values on the relationship. I constantly ask myself: 'How, as a therapist, a lecturer, or a supervisor can I support individuals in becoming the best versions of themselves, not of me?'

Theme 2: Shaped by war

The participants shared how living in a conflict zone influenced their developmental course. Tamar said it directed her to be more of an activist socially. Both Efrat and Buran, coming from both nations, said war experiences increased their levels of anxiety and antagonism. In addition, Buran reflected on a social boycott she had encountered. Tamar said the following about coming back to Israel after a long stay abroad:

For many years I lived outside of the country, and when I returned, I knew that I could not live here without [...] being involved in something related to promoting equality and dialogue in Israel, something related to the Arab society in Israel.

Efrat said living in a conflict zone, with terror attacks on the one hand and the awareness of occupation on the other, resulted in increased levels of anxiety and racism:

I remember questioning this situation as a girl. I was born in 1967. When I was five or six years old [...], there were a few years with frequent events of bombs blasting in the streets, at bus stops, in markets. [...] I was terribly afraid that something would explode by me. [...] On the other hand, my grandfather used to take my sisters and me to the marketplace in Tul Karm, the closest Arab town - it was possible then. We would visit his worker who lived there. [...] We sat at his house, and he would host us very nicely with his family, but my grandfather, when we returned home, would say: 'You can't trust these Arabs', and in my head, as a little girl I thought, 'How can it be that we sit at their home and eat their food and feel safe and then you can't trust them? How is it possible that this man works with my grandfather, and you can't trust them?' So, I've lived with this ethical breech all my life [...] and now [...] even though I've gone through a lot of development as an adult, and I think very differently about this issue, our country, as I dedicate my life to public health and wellbeing - to our society as whole, this racist voice is still there, [...] peeking. [...] It scares me terribly.

Tamar added the following to the discussion on racism:

You dare bring up a topic that no one wants to talk about. Yes, if you grew up here [in Israel] in a privileged white family, then you probably heard here and there more or less racist statements about Arabs and if you live in the territories, I assume that 'AI Yahud' [the Jews] is not exactly a compliment. [...] I guess we must all do our inner work all the time. We are so used to thinking in terms of 'good guys versus bad guys!'

Buran described moments of distress, experiencing social exclusion as war erupted during her music therapy studies:

In 2007–2008 a war erupted in Gaza, and I was the only Palestinian in our study group. It was so difficult! [...] There was always this unbearable discrepancy. On one hand, we learned about ethics and therapy and empathy and the like, and then suddenly the other students shunned me, just for being a Palestinian [...] with a pro-Palestine identity. [...] I quit studying for two or three weeks [...] all that hatred and an inability to accept that others might have different opinions. [...]. For me, this was a red flag; it's not related only to therapy in Arab society, it is related to the ethics in [everyday life] and to multicultural sensitivity.

Buran thought the polarisation of identities attacked the basics of ethical thinking:

I am very Palestinian. It is not something I want to hide. I want to be open about it. It can create the conflict that I feel all the time is that [...] you start treating people with this bias: 'You are a Zionist' or 'You represent occupation!' [...] but there is no reason for me to behave in this unethical way. [...] This is one of my main ethical conflicts, personally.

Theme 3: Fragmented identities

The participants touched on several issues related to their national and political identities. One elaborated on the importance of preserving and developing the Arabic musical heritage. Two others emphasised feelings of inferiority when treated as a 'sector' rather than a part of Israeli society.

Connecting to heritage

Rozan elaborated on the significance of expanding the research and scholarship on Arabic music and disseminating it worldwide, 'not just for Arabs':

We need programmes that enrich our sector musically [the existing ones] are extremely lacking, both for therapists and educators [...]. In my other expertise, I created an educational programme on vocal music for Palestinian schools. We need Arab songs for children, and there is not enough work on this topic in the Arabic world! [...] I also rearranged instrumental pieces representing this important legacy [...] into shorter ones so that school children anywhere can engage with!

Rozan emphasised the urgency of acting in this area:

[I] feel it deep inside, and I know it comes at the expense of my family and kids, but I must do it! [music in Arab education] is so underdeveloped and under researched; it's my calling to make this effort [and develop my programmes]. If I don't do it, no one will! We need to believe that it's viable!

Marginalised cultures

Nihal mentioned her primary need to recognise herself as part of the Indigenous group of this area, rather than as a sub-section of Israeli society:

Buran mentioned the word *Migzar* [social sector] twice; she can choose her definitions, of course, but I need to stress that we [Arab People in Israel] are not separate! [...] I mean, *Migzar*? It's like you stress the fact that you are a minority here, which I never felt.

Buran referred to the common Israeli rivalry between Eastern and Western cultures, saying:

It is not only the *Migzar* issue, like treating parts of society, for example, Palestinians, as minorities. In Israel they also treat Ashkenazi Jews (of Western origin) as self-evident, post-modern European people, [...] and all the rest are [...] marginalised.⁷

Theme 4: Cultural loneliness

Several participants highlighted the impact of growing and developing as persons and professionals, while not sharing the language and culture of the majority society. Nihal said it was rare to speak in her mother tongue, and Tamar remembered lonely moments culturally, living in a foreign country. From a different perspective, Efrat identified moments when she wanted to reflect on music shared by her Arab students, but could not overcome the inherent cultural barrier. Ultimately, the group identified the hardship of Arab music therapy students who lack a culturally sensitive environment to develop.

The linguistic challenge

Nihal shared the relief she felt when she spoke in Arabic, her mother tongue, during the interview. Our translator allowed smooth movement between languages: "Finally, I can think and talk in Arabic, knowing I will be understood. [...] Things come to my mind first in Arabic. Thanks to Maimouna (the translator) [...] I can talk freely, without the ordinary linguistic barriers." Tamar shared her experience living in a non-English speaking country. It had a profound effect on her; she said she realised linguistic walls divide people in Israel:

Now, when I teach Arabic College students who graduated from Arabic high schools and passed their final exams in Arabic and then, they need to shift instantly to learning at an academic level in Hebrew and English. [...] As their teacher, I feel so ashamed about this requirement. [...] I still try to figure out a way around it.

Musical barriers

Efrat talked about the gap she has experienced in her music therapy student group, between their desire to engage with Arabic music on the one hand, and their inability due to their unfamiliarity with this complex and different musical culture on the other:

In the music therapy programme, the students often share their music with the rest of the group. They usually choose Israeli songs or some other piece of

⁷ We chose not to delve more deeply into the internal social complexities in Israeli-Jewish society, which is shaped by both long-established residents and more recent immigrants, those from Eastern countries (Mizrahi) and those from Western countries (Ashkenazi), sometimes perceived as holding a higher social status.

Western music - usually short and fairly well-known. But when someone tries to play Arabic music in class, on many occasions, it is much longer. It develops slowly, a bit like classical music. As a teacher, it always hits me: these students want to share their authentic music, but [...] it consumes considerably more time, and the group – we listen patiently. We care but can rarely appreciate this unfamiliar music: when is it happy? When is it sad? What is it about?

Tamar emphasised the impact of such experiences:

Already in the first year of becoming a therapist, when these delicate processes of connecting to one's inner music take place, and you try communicating it with others, Arab students bump into a wall! Speaking of walls and borders, [...] I mean, metaphorically and physically – you are saying that the Arab students' music is hardly mirrored by their classmates, by the group.

At this point, Nihal had a revelation about her experience as a Palestinian-Arab music therapy student and practitioner throughout the years:

Nihal: An image comes to mind of a depressed mother who cannot engage with her baby's sounds and needs to connect.

Tamar: It makes me think of Daniel Stern. This *mirroring* function [he described] is about engaging with [the baby's expressions], changing them a little. This is how relationships are initiated [...] and actually, development is impossible without this primary kind of dialogue. How can you develop as an accomplished music therapist when these delicate, primary processes of being accepted, heard and understood do not occur?

Nihal: I feel like crying now. I just realised how lonely I was as a music therapist, growing on my own all these years. I just needed someone to play my music back to me. You know, [...] I almost left the profession, [...] I was so lonely!

Theme 5: Music in therapy – between polarisation and shared identity

As the Zoom interview progressed, the participants dared to share more experiences of racism and polarisation, mentioning their difficulties tolerating the music "on the other side of the wall" or practicing music therapy in such a context. They reflected on strategies to oppose such moments and tendencies, and an option for a meta-identity emerged.

Musical boundaries

Nihal and Buran mentioned the difficulty relating to music that reminds one of the Occupation, even in a therapeutic setting:

If a client shares music that does not relate to me at all, even an Arabic client. [...] For example, I can imagine a Jewish client asking for a song I'm not connected with, never heard of, doesn't move anything inside of me [...], or even more – hearing music that makes me tremble inside. [...] I find myself limited as a therapist.

Buran also found it hard to connect to her clients' experiences when shared through Hebrew music:

Buran: I don't work with [...] I haven't broken that wall yet. I don't work with [...] Tamar: With Jews?

Buran: Right. I still have this problem that I can't be 100 percent devoted to treatment when certain music raises such levels of anxiety inside [...] maybe not anxiety, but, I am not fully a therapist at these moments [...] ethically speaking. [...] So, when I have patients, for example, children or adolescents, who listen to Israeli music in Hebrew, I try to relate to emotional content, [...] but I am not fully present.

Later, Rozan, a vocalist as well, admitted that even going to the Opera House in Tel Aviv was 'too Israeli,' and it took her years to take this step:

Recently, I went to the opera. It was Don Giovanni in Tel Aviv. It was the first time in my life I had been to a live show at the opera house, so – I've loved this opera since school – I've heard and seen many recorded versions, but I never thought of watching it at the Israeli opera [...] because for me it's a place I don't belong to. A place that doesn't reflect my musical or personal identity. [...] So yes, I am limiting my musical activities [...] because I am not that comfortable in such an Israeli atmosphere that does not reflect who I am.

Nihal shared her vision of the cure for polarisation - open dialogue:

Nihal: If I can express these difficult experiences and get them out of my system, I am cleaning these parts from my insides, [...] that's when something good can happen, [...] that's what happens here now.

Tamar: 'Clean your insides' so we can all integrate our 'dirt' and contain the rough, toxic parts together. Accept them.

Music: a possible meta-identity

Efrat shared how some of her Arab students preferred to depoliticise their music therapy studies:

Some of my students do not declare themselves in class as part of the 'Arab Society.' They want to learn music therapy like everyone else! They don't want their national or political identity to get all the attention – they think it's no one's business.

Rozan added her vision about the hidden potential of connecting the different musical cultures in Israel rather than using them as a means of polarisation and division:

Arabic music is so rich and diverse [...] and can be used to treat so many parts of society - not just limited to being used with Arabs. [...] I don't think we need to make this separation between Arabic and Western music, [...] it seems that it is not healthy. [...] I studied classical music at the conservatory of Carmiel, and at times, I felt more connected to classical music than Arabic music. I like classical music - why should I separate [my favourite] genres?

Tamar responded, wondering if Rozan would suggest developing an Israeli type of meta-culture.

DISCUSSION

This study was performed as essential ethical groundwork during the establishment of a group of music therapists, including Palestinian-Arab and Jewish therapists with Israeli citizenship. A Palestinian art therapist served as a participant translator, enhancing language accessibility during the interviews. Together, we examined the impact of ongoing trauma and war in Israel on our identities, practices, and ethical considerations as music therapists. The thematic analysis yielded five main themes: blurred boundaries challenging ethical thinking; shaped by war; fragmented identities; cultural loneliness; music in therapy – between polarisation and shared identity. We will focus the discussion on two fundamental issues we identified: implications of cultural division and hierarchy and breathing war – dreaming connection.

Implications of cultural division and hierarchy

Coming from marginalised cultures

During our Zoom interview, we discussed the cultural division in Israel, particularly the distinction between dominant and non-dominant cultures. This topic was evident in our conversation about music therapy training, professional development, and ethical considerations. Nihal and Buran, Palestinian Arab participants, shared their troubling experiences of feeling distinct from the prevailing Western clinical and musical approaches due to their Arab background. Buran remembered feeling socially excluded in class during wartime, while Nihal recalled the lack of professional culturally-sensitive supervision when she began working with the Arab population. Nihal expressed her resistance to how the Arab population in Israel is treated as a sub-culture (*Migzar*), implying a prior inferiority and a restricted cultural position, asserting: 'I feel we are the Indigenous people, not a small part that was cut-off and attached to something larger'.

Edwards' (2022) concept of "cultural humility" signifies a potential shift in clinical practice that transcends the term 'cultural sensitivity.' The concept recognises that achieving complete understanding of a foreign culture is impossible and urges music therapists to strive for critical and reflective awareness alongside the pursuit of familiarity with their clients' cultures. If fully embraced, the concept could alleviate some of the isolation experienced by Arab music therapists, as Israeli music therapy educators would collectively share the ethical responsibility of teaching within a multicultural framework. The cultural humility concept calls for a deep understanding of experiences

when cultural gaps are too wide to bridge. The therapeutic value of maintaining an 'unknowing' stance is emphasised; in this approach, the therapist (or in our case, the educator) acknowledges they can never fully comprehend their client or student. The two Jewish-Israeli participants were familiar with some of these challenges, because of their affinity with non-dominant cultures and languages globally. Hadar (2022) reflected on the challenges of working as an immigrant music therapist in the United States with non-English speaking families. Hadar emphasised the bidirectional cultural gaps she had to deal with. Roginsky described her sense of communicative inferiority in English-dominated professional events. Her survey of the Israeli music therapy community mentioned previously (Roginsky, 2022) explored the cultural and linguistic experiences of Palestinian and Jewish respondents working in an Anglo-centred and Western-oriented professional space. She found limited literature is available for Israeli music therapists, and said the difficulty of expressing oneself in another language and understanding others at international events poses an obstacle to professional advancement.

Ultimately, it seemed our personal experiences of marginalisation had a strong influence on our professional identities, and we were left with questions based on our marginal position within the global community of music therapy. In what other ways are we in Israel affected? Do we fear loneliness and try harder to conform? Do some of us dismiss and marginalise even smaller minorities within the local community? Alternatively, does this marginalised position give some of us the courage to embrace our uniqueness and turn against the flow? To expand this limited, localised perspective, we should question the ethics of music therapy education and practice in countries with similar political contexts. Unfortunately, there is little literature on this topic.

Developing an authentic professional identity

Our small-scale study suggested Palestinian-Arab music therapists have difficulty developing an authentic professional identity, and participants explained this by pointing to the lack of a culturallynurturing environment. Efrat, a Jewish participant and music therapy lecturer, acknowledged the lack of training adapted to the language, culture, and musical heritage of Arab students. Rozan, a Palestinian-Arab music therapist, vocalist, and educator, described her efforts to connect Arab children with their mother culture. Nihal and Buran talked about their ongoing effort to be part of the global Palestinian professional community.

Norris and Hadley (2016) highlighted the challenges of incorporating culturally-diverse musical forms without overshadowing them. They argued the overwhelming influence of Western classical music in most music therapy training programmes has excluded many potential professionals from the field. Nihal expressed a lack of essential 'musical mirroring' opportunities, typically offered in courses such as group facilitation or supervision, because of the smaller numbers of Arab students in training programmes compared to Jewish-Israeli students. Efrat, an experienced lecturer in these programmes, agreed with this impression, saying that the absence of the Palestinian language, culture, and music in Israeli music therapy programmes could result in reduced musical resonance and feedback for Arab students. This gap significantly impacts the growth of music therapists. As one participant put it, 'It's like a child of a depressed mother,' emphasizing the need for culturally adapted feedback in students' musical development. Developing their music therapy skills within

their cultural context, we believe, may offer music therapy students the opportunity to establish deeper connections with their authentic voice and identity.

Voicing the pain safely

Efrat commented, "I rarely hear such experiences and opinions within training or the professional community. I always feel there is something kept inside, in secret, and cannot be spoken mutually – Jews and Arabs." Khouriyeh (2021) examined the perceptions of seven Arab music therapists on the status of music therapy in Arab society in Israel. She suggested an obstacle to the establishment of music therapy as a profession in the Arab public in Israel is the oppressed position experienced by many. Our Zoom interview within a small and protected professional forum allowed the voices of Arab participants to be heard, and the Jewish-Israeli participants felt it was safe enough to express their authentic thoughts and experiences. Is there a need for the development of culturally-sensitive practices in smaller, more balanced shared spaces like ours?

Culturally-sensitive ethics

The Palestinian Arab participants stressed the significance of reconnecting with their musical healing heritage. They also emphasised the necessity of culturally-sensitive ethical codes, rooted in their unique communal structure and value systems. In a related discussion, Hadley and Norris noted the importance of an "understanding of the ethical standards that guide practice, the Eurocentric perspectives embedded in theory, and the ways in which clinical work is experienced and perceived cross-culturally. This also includes knowledge of cultural musics and their functions" (Hadley & Norris, 2016, p. 131). Our group recognised the need for Arab music therapists – still a minority within the Israeli professional community – to deepen the thinking on culturally-sensitive ethics, despite the difficulty of doing so, to provide more effective therapy to the Palestinian-Arab public. Engaging in mutual reflection on local professional ethics could be a model for cultivating a more inclusive approach to the ethics of music therapy in culturally-diverse countries.

Breathing war - dreaming connection

Holding multiple truths

All participants had predispositions towards distinct parts of society, rooted in their biographies and education and fuelled by recurring escalations of tension within the country. Some expressed concerns about being able to provide ethically adequate services when treating individuals from different cultural backgrounds. At the time of writing this paper, Israel is experiencing one of the most extreme war situations in its history, resulting in heightened social tension. Considering this kind of deep social crisis, Hadley (2023) asked, "Whom do we grieve?" In asking this, Hadley is pointing to the ethical need to be in a position that can hold multiple truths, one where people can grieve the wartime losses of both sides. The painful, ongoing dialogue of our multicultural group, presented in this paper, expanded on these ideas by asking questions about Arab-Jewish co-existence. Can we truly embrace a culturally ethical approach when treating an individual from the "other side?" What is the best practice when doing so?

Can music bridge the gap?

The concept of multiculturalism, which involves blending cultural heritages, may be a solution in a highly diverse society like ours. An interesting observation from this study was the diverse perspectives expressed by the participants. While all the Arab participants emphasised the pressing need to study and promote the rich legacy of Arabic music and its characteristics, Rozan also highlighted the importance of establishing a meta-musical identity. She shared her experience as an Arab musician who seamlessly transitions between playing Western classical cello music and authentic Arabic music. Rozan raised thought-provoking questions, such as why choose between cultures when integration is possible.

Our study revealed varying perspectives on multiculturalism and multilingualism in music therapy practice, echoing previous findings (Hadar, 2022; Hadley & Norris, 2016; Roginsky, 2022). Hadley and Norris (2016) stressed the importance of providing music therapists with multicultural musical education, but they cautioned against the risks of appropriation when using musical styles with individuals from different cultural backgrounds. Hadar echoed Rozan's sentiments about embracing a meta-cultural approach. In her musical therapy sessions with a Chinese family who had recently immigrated to the United States, Tamar took a multilingual approach. She said creating a shared musical and non-musical language with the family not only facilitated closeness between the therapist and the parent, but also supported the speech development of their autistic child. Considering the complex situation in Israel, is it feasible to adopt such a pluralistic cultural approach?

Arab and Jewish musicians already collaborate in many initiatives, including orchestras, choirs, and festivals that promote the values of dialogue and coexistence (e.g., Creative Community for Peace, 2021; Youth and Music Israel, 2024; Ynet News.com, 2022). Can the ongoing experiences of Israeli musicians from both communities offer us, as music therapists, a fresh perspective on our work in this country? Concepts from community music therapy (Stige et al., 2010) and culture-centred music therapy (Stige, 2002), for instance, could inform this potential approach.

LIMITATIONS

The study was conducted on a small scale to establish our group's ethical approach to future activities. While the study had limited objectives, and the findings might not be broadly generalisable, they nonetheless hold significance, warranting further discussion and exploration by a larger community of music therapists in Israel and possibly elsewhere.

CONCLUSION

We acknowledge the tragic circumstances under which this paper has been written. Nonetheless, we see it as a valuable reminder for music therapists in this country, highlighting the potential to establish a shared, or at least more culturally-sensitive ethical framework that will work for all music therapy students, practitioners, and service owners. The research sheds light on complex issues, such as bias, segregation, cultural isolation, and the yearning for connection. It also reveals our group's strong desire to bridge cultures, and deepen the connection with our mother cultures. We

aim to lay the groundwork for an ethical dialogue between music therapists in Israel, encouraging an environment that honours all rich legacies, while developing a shared musical and clinical language. We conclude with a timeless prayer that reflects the challenges we currently face: "We shall overcome together, we shall overcome."

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Ελληνική περίληψη | Greek abstract

Αναπνέοντας πόλεμο, ονειρεύοντας σύνδεση: Ο διάλογος ως ηθικό θεμέλιο για το συνεργατικό έργο Παλαιστινίων και Εβραίων μουσικοθεραπευτριών στο Ισραήλ

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ΠΕΡΙΛΗΨΗ

Μια συλλογικότητα έξι Παλαιστινίων-Αραβισσών και Εβραίων μουσικοθεραπευτριών, ερευνητριών και εκπαιδευτικών, που είναι Ισραηλινές πολίτες, συγκεντρώθηκε για να διερευνήσει και να ενισχύσει τις ιδιαίτερες ανάγκες των Αραβισσών μουσικοθεραπευτριών στο Ισραήλ. Ως πρωταρχικό ηθικό βήμα, ξεκινήσαμε μια συμμετοχική μελέτη, εμβαθύνοντας στις προσωπικές και επαγγελματικές μας εμπειρίες ως μουσικοθεραπεύτριες σε μια χώρα που επηρεάζεται βαθιά από μακροχρόνιο τραύμα και σύγκρουση. Όλα τα

μέλη της ομάδας συμμετείχαμε σε μια ομάδα εστίασης διάρκειας 90 λεπτών, σχεδιασμένη ως ημιδομημένη συνέντευξη, με ένα μέλος να λειτουργεί ως συνεντεύκτρια και ένα άλλο ως μεταφράστρια. Η συνέντευξη ηχογραφήθηκε και απομαγνητοφωνήθηκε. Τρία από τα μέλη της ομάδας, Εβραίες και Αράβισσες, ανέλυσαν τα δεδομένα για να διασφαλιστεί η διασταύρωση των ευρημάτων. Μετά από τρεις διαδοχικούς γύρους θεματικής ανάλυσης, μια συζήτηση μέσω Zoom διάρκειας 90 λεπτών επιβεβαίωσε την ανάδυση πέντε βασικών θεμάτων: (1) ασαφή όρια που προκαλούν την ηθική σκέψη, (2) διαμορφωμένοι από τον πόλεμο, (3) κατακερματισμένες ταυτότητες, (4) πολιτισμική μοναξιά, (5) η μουσική στη θεραπεία – ανάμεσα στην πόλωση και την κοινή ταυτότητα. Τα ευρήματα κοινοποιήθηκαν σε όλα τα μέλη της ομάδας, τα οποία παρείχαν επιπλέον σχόλια. Η συζήτηση αναδεικνύει τις βαθιές επιπτώσεις του πολιτισμικά βασισμένης επαγγελματικής ανάπτυξης, καθώς και ένα κενό στην πολιτισμικά ευαισθητοποιημένη επαγγελματική ηθική για τις Παλαιστίνιες-Αράβισσες συμμετέχουσες. Αντιμετωπίσαμε το ηθικό δίλημμα της διατήρησης πολλαπλών αληθειών ως Ισραηλινές μουσικοθεραπεύτριες, ενώ ταυτόχρονα αγκαλιάσαμε την ελπιδοφόρα ιδέα ότι η μουσική μπορεί να λειτουργήσει ως ενοποιητικό μέσο, να γεφυρώσει πολιτισμικά χάσματα και να προάγει μια πλουραλιστική προσέγγιση στη μουσικοθεραπεία.

ΛΕΞΕΙΣ ΚΛΕΙΔΙΑ

μουσικοθεραπεία, εμπόλεμη ζώνη, ηθική, πολιτισμικά-ευαισθητοποιημένος διάλογος