

Story 6

1-Family Information :

Household's Name: A,S.M

Address: Gaza

Household's Profession: Municipal: employee

Family economical level : poor.

|Educational and cultural level for the family : Intermediate.

Father's educational level : junior high

2-The main traumas that the family has experienced:

Father's dad death has impacted the family because the father was completely dependent on his father on all financial and emotional needs.

The household has set up his oldest son on fire that has led to his death immediately and caused burn injuries to the perpetrator's mother when she was trying to save her grandson from being burned, and she currently receives medical care in the hospital.

3-The family's need for therapeutic intervention and psychological support:

The family is experiencing a tragedy that has not to do with the death of the oldest son but the dad's admission into the mental health hospital because of the crimes that he has committed against his son and mother. The dad's case is still being handled by the court. In addition, the public opinion is preoccupied with this matter and the thing that makes the problem worse is the fact that the dad who committed the crime has only brother who is physically handicapped and mentally retarded who lives in adjacent house. In light of these developments, the whole family is suffering from trauma and a feeling of loss and being labeled in the society, therefore, the whole family needs therapeutic intervention and psychological support.

4-Complaint as stated by the mother:

All of my family members are lost and do suffer from the way that we have been stereotyped especially my oldest daughters. My husband tried to cut off my daughter's leg four years ago because she asked him to buy a shoes and he could not afford it. He did buy her a shoes after he broke a glass bottle on her leg. He was a very abusive person and he has no sense of responsibility. My husband was rarely staying home with us, but after his father's death he started living with us because he has a brother that is handicapped and he needs some assistance. He always fighting with his son Mohammad until his son could put up and tolerate his behavior and started disobeying his father, the son started threatening his dad with his uncles and he then poured the gas on himself and when the dad saw that he lit the lighter on his son's body and the son's body was completely set on fire which caused the death of the son and burning wounds to his grandmother.

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5-Complaint as stated by family members;

Alaa and Iynas are the oldest daughters say that we are not enjoying life and we have never felt that we have a father like other girls, and since our dad lived with us we have been having daily problems because our brother do badmouth him because he is very nervous and always violent and can never meet our financial demands. After our brother has died we started feeling very scared and anxious and afraid to leave the house. My small brother started having a nightmare and we all don't feel like eating or drinking or even living.

6-Prognosis and getting to know the family :

One family member has suffered adjustment disorder in its different forms, depression, anxiety, and behavioral disorder. The father has been admitted to the mental hospital after the medical committee has finalized his assessment. The father has initially suffered from acute stress disorder and also suffers a severe depression and post trauma and receives medical care in the mental health hospital.

7-Therapeutic or Support Intervention :

As a psychiatrist in the family therapy project in Palestine center for trauma, I have assessed the father with two other committee members and we concluded that he is conscious for his actions and feels responsible for what he has done, I do keep in touch with him in the hospital and prescribe him some anti-depression and ant-anxiety medication and that has improved his condition but I still have not discharged him from the hospital due to the incomplete jurisdictional procedures perceived as the killing was accidental. We do assess the family and the social circumstances and the place appropriate for his discharge from the hospital until I work with the psychologist Zeinat Nseir to treat the whole family on individual and collectible basis.

We have visited the family in their house and evaluated its situation and the father's family circumstances and have held five different meetings with the family members on individual and group levels. We have notified the NGOs that do desire to visit such as those pertaining to child protection and child protection network that we will provide a complete care and follow up for this family as well as solving all problems that has to do with the legal and social aspects.

In the first five visits, a human and professional therapeutic relation has been established with all family members and the children's uncle who is presently taking care of the family affairs. The family structures have been redesigned in such a way that the mother would take a sole responsibility of the family with the help of her brother. The oldest daughters have also been assigned some roles in supervising their young brothers. A social network consisting of the father's uncle, mother's brothers has been established in order to guide and communicate constantly with the family. Additionally, an individual therapeutic and psychological sessions have been arranged and the family has been divided to two therapeutic groups and organize a visit to the father in the hospital in order to narrow the existing gap.

8. Medication:

The father receives medication in the mental health hospital as follows;

Risperdal 2 mg daily

Prozac 20 mg daily

Tegretol 200 mg twice daily

Medication has been postponed for the rest of the family except for the mother who has been prescribed Zanax 0.5 mg

Risperdal 2 mg daily

Prozac 20 mg daily

Tegretol 200 mg twice daily

9-Feedback and improvements:

We have been able to overcome the social stereotyping resulting from the incident and getting the children back to school after leaving it for a while.

The father has been cured from the disengagement symptoms accompanying the severe trauma disorder and it is now possible to talk to him normally.

Palestine center for trauma was the only center permitted by this disastrous family to intervene in this case

Forming a social network from relatives who never had an idea about the family circumstances before the incident and they started having a pivotal role in supporting and supervising the family

The family as a whole and especially the mother was refusing to let anyone come into the house after the incident, but we had been able to help this family

We have visited two schools whom two of the family members are attending and talked to the teachers in order to play a positive role in the school

10-Follow Up Plan:

Keep visiting and holding sessions with the family on a regular weekly basis in order to apply the individual and group therapy and the family therapy sessions by the end of each visit.

Psychologist: Zeinat Nseir

Psychiatrist: Dr. Mohammad Abuelsebah