

APS COLLEGE OF CLINICAL PSYCHOLOGISTS CONFERENCE - HOBART 2026

Expanding Narrative Exposure Therapy Intervention

Culturally-driven adaptations for the Palestinian context

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Bridgify Contributor

What we will cover today

- 1: Understand NET's original trauma-focused purpose
- 2: Extend toward ecological and collective narrative frames
- 3: Situate *sumud* as key mechanism to frame creation of PAL-NET
- 4: PAL-NET training: PCC Pilot Partnership
- 5: Adaptations specific to Palestinian context
- 6: Reflect on early learning and responsible innovation

PLEASE ASK ANY CLARIFICATION QUESTIONS THROUGHOUT THE PRESENTATION

1: UNDERSTAND NET'S ORIGINAL TRAUMA-FOCUSED PURPOSE

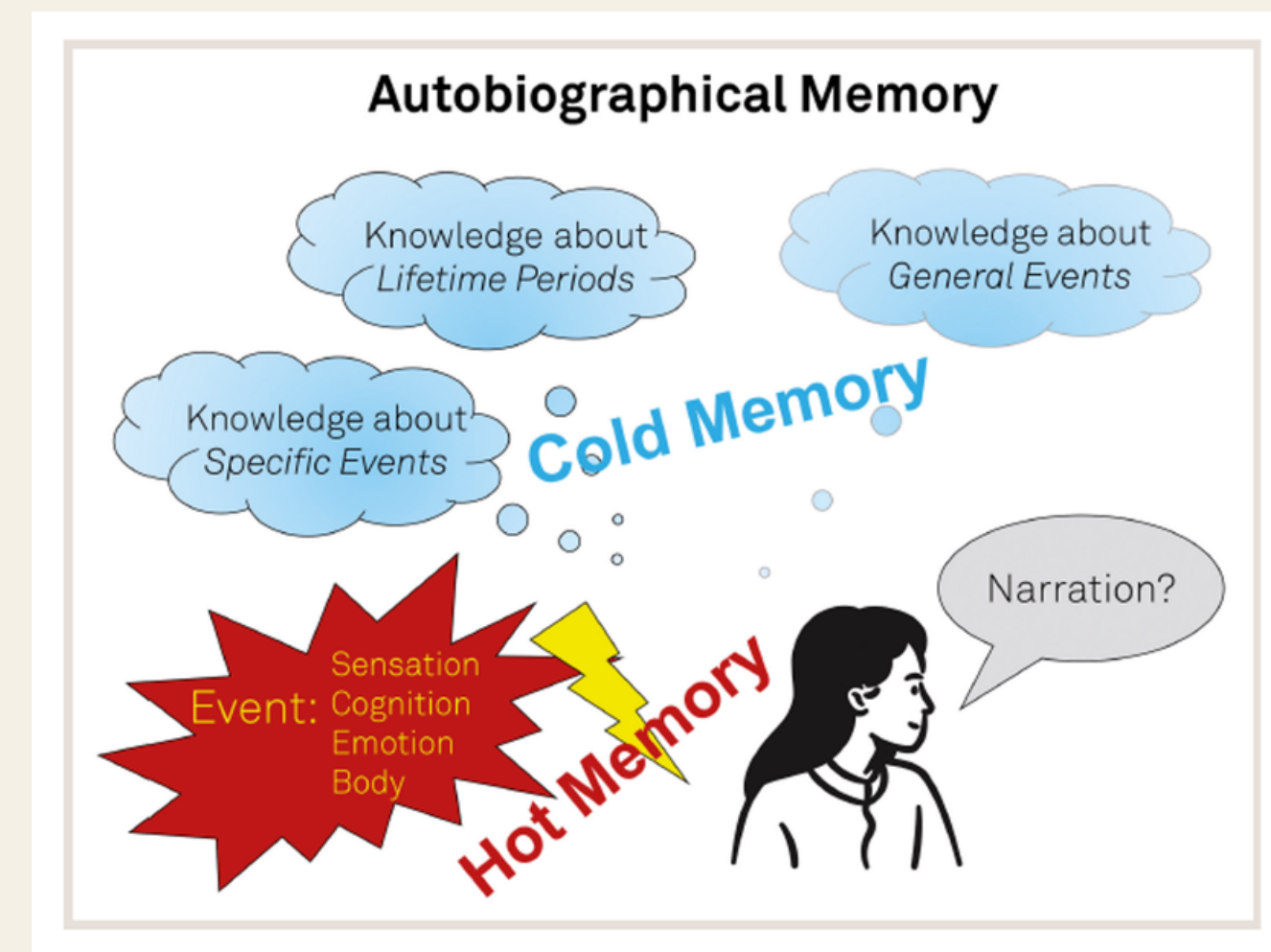
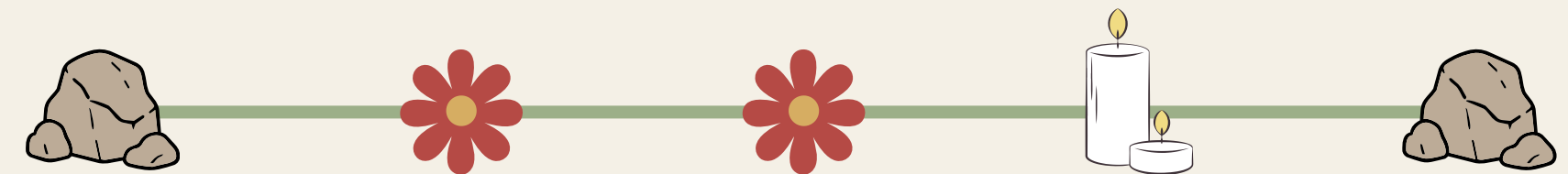
NET turns fragmented memory into a coherent life narrative

NET is a short-term, trauma-focused therapy for multiple and complex traumas. Chronological autobiographical narration and prolonged imaginal exposure support contextualisation of traumatic memories and reduction of trauma symptoms.

NET works by helping the narrator progress through their life chronologically, locating traumatic experiences in time and context, and integrating highly activated sensory-emotional memory with autobiographical memory.

Developed for refugees in unsafe conditions, while holding therapeutic and social-political purposes together, NET is particularly relevant to survivors of organised violence, displacement, and human rights violations.

LIFELINE OF EVENTS



1: UNDERSTAND NET'S ORIGINAL TRAUMA-FOCUSED PURPOSE

NET turns fragmented memory into a coherent life narrative

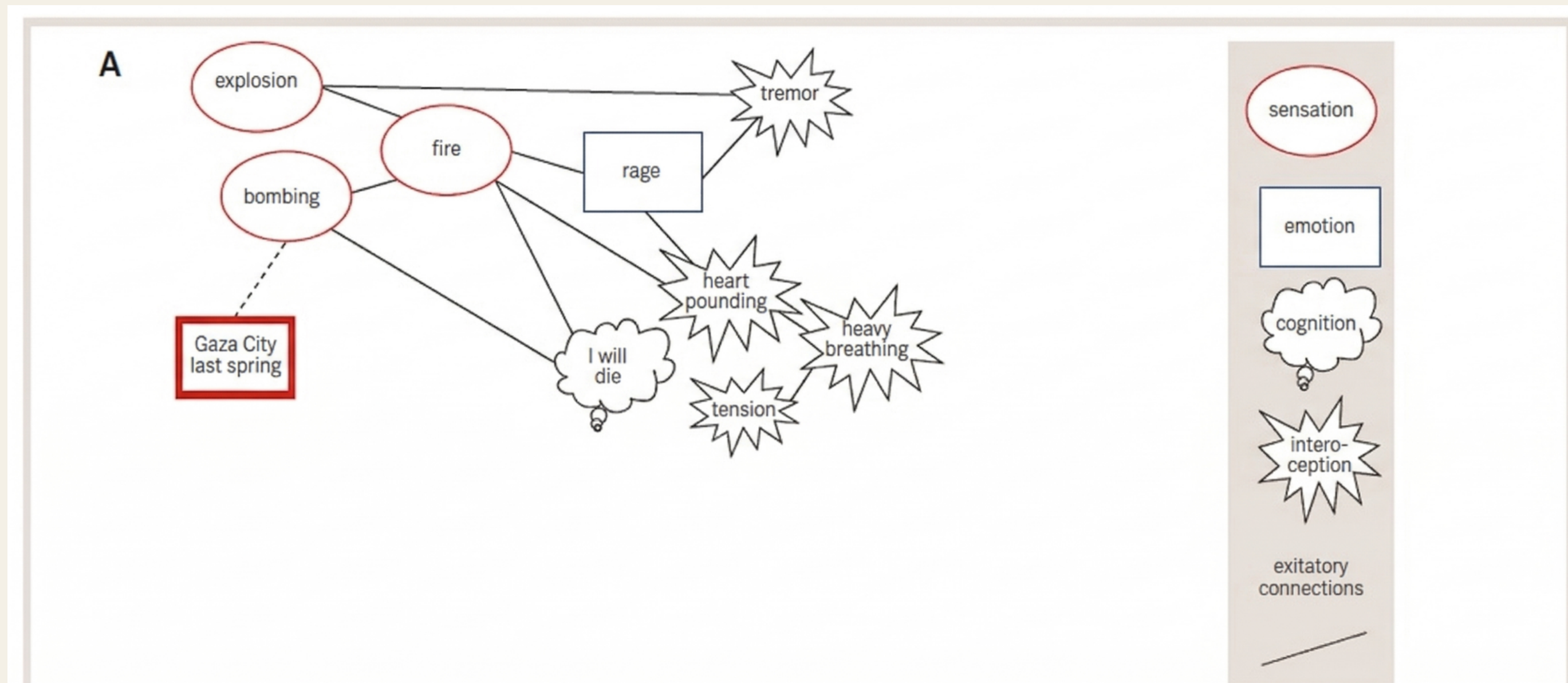
NET is explained to participants as a process that helps to organise their life story, including painful events, to reconnect them to their autobiographical context. These memories are organised into a coherent narrative structure.

As a result, memories feel less intrusive and overwhelming while reducing difficult experiences like nightmares and flashbacks.

- Enables reflection and comprehension of complex connections between explicit and implicit emotional aspects of significant experiences - it reveals the relevance of interconnected events, and insights about the past connect into place
- Initiates an inner process towards understanding and realising the origin and perception of their emotions, thoughts and behaviour patterns, while having a committed listener can support mentalisation processes
- Can lead to developing a new sense of self-awareness that holds both their current identity and the person they were during the traumatic experiences, while building clarity of their desires about the future
- Aligning different versions of the 'self' during storytelling can foster growing self-compassion and self-acceptance; while the listener bears witness, honouring and respecting the survivor and every part of their life
- Survivors are given the opportunity to seek justice through documentation of narration to build evidence/data, as well as create a lasting memory to pass to future generations

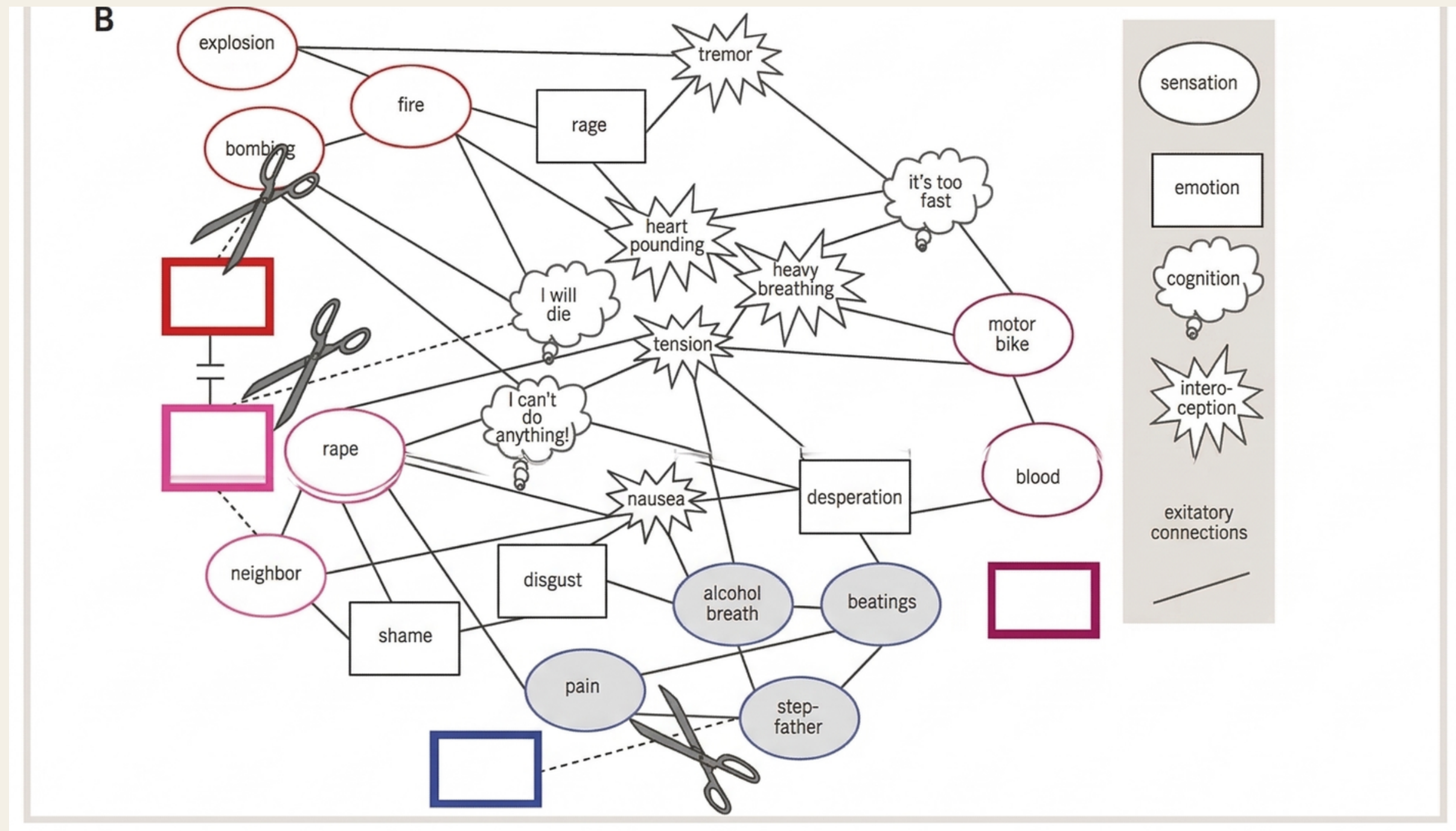
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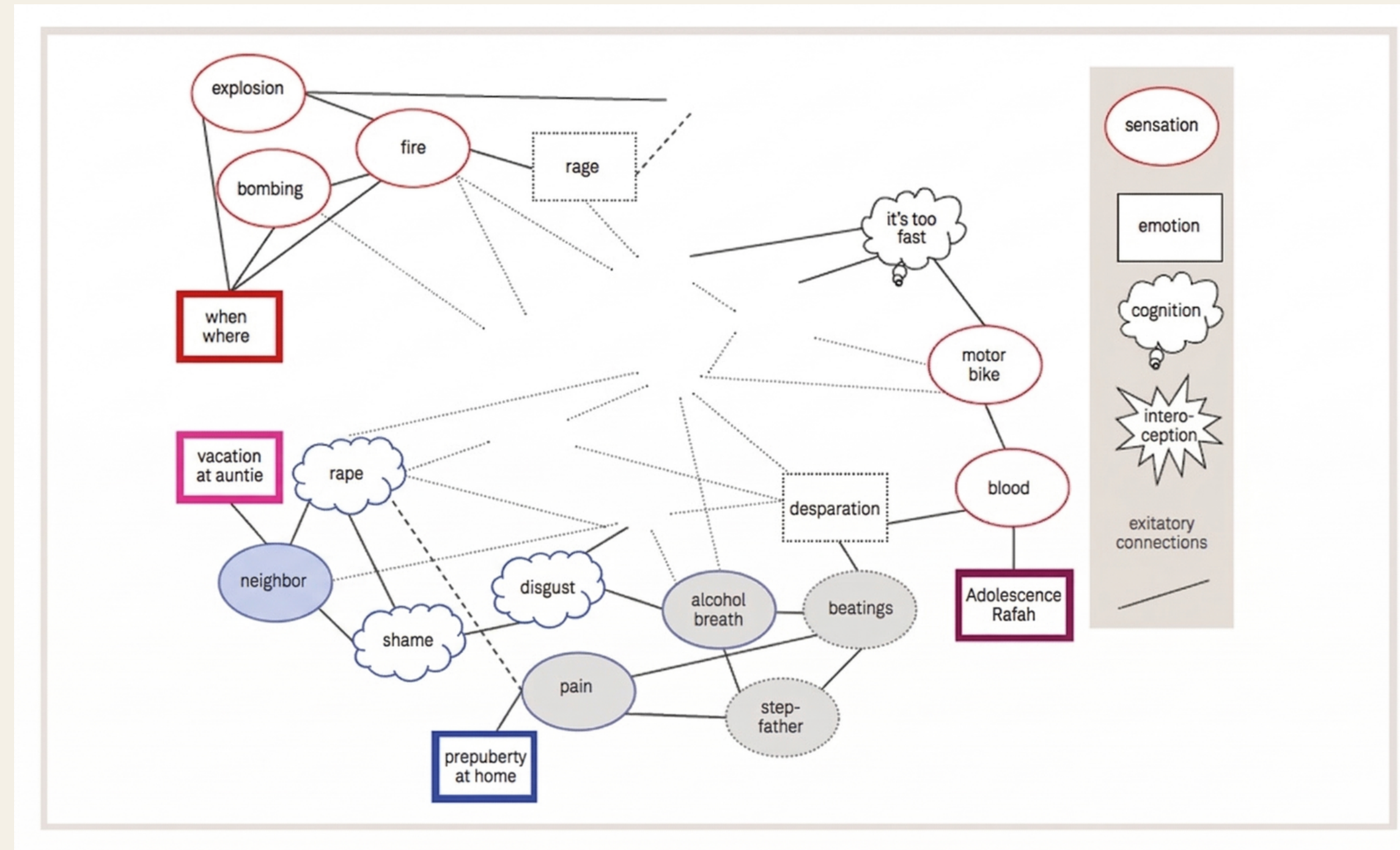
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2: EXTEND TOWARD ECOLOGICAL AND COLLECTIVE NARRATIVE FRAMES

From “my story” toward “our meanings”

Trauma meaning-making is situated within social, political and cultural worlds. Collective and indigenous storytelling can locate identity, continuity and responsibility beyond the individual.

PAL-NET is an attempt to preserve the active therapeutic mechanisms of Narrative Exposure Therapy while relocating those mechanisms inside a Palestinian ecology of family, collective identity, faith, connection to land, political violence, displacement, grief, and *sumud*.

The approach is not replacing the person’s experience of NET, but widening the frame around them. PAL-NET asks what fidelity looks like when the self is relational, trauma is collective, and threat is ongoing.

INDIVIDUAL NARRATIVE

COLLECTIVE STORY

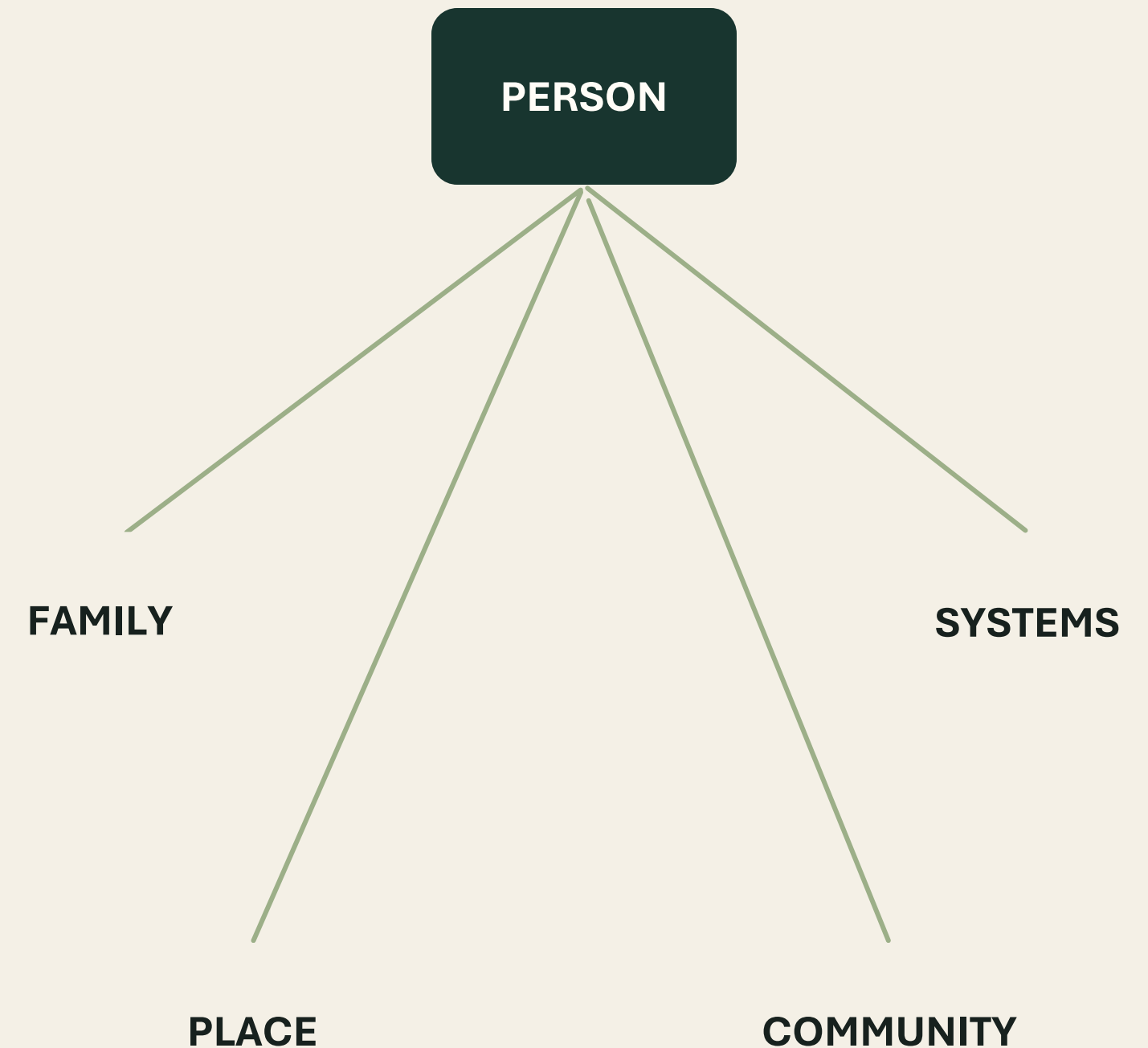
Interconnectivity between people, places and systems

An ecological frame recognises the interdependence of family, community, land, culture, institutions and political conditions. Palestinian context includes:

- family is often part of the memory, not a support around the memory
- safety is often relational rather than internal
- grief is collective and ritualised
- displacement affects identity, not only housing and physical location
- future orientation may collapse under ongoing siege, war and survival demands

PAL-NET uses ecological interconnectivity to reformulate what counts as context in NET. It goes beyond “where and when did the event happen?” to:

- who the person was responsible for
- who was absent or lost
- what home meant
- what family role was activated
- what collective rupture was occurring
- what cultural or religious meaning was available or unavailable
- what systems of protection remained accessible.



3: SITUATE SUMUD AS RESILIENCE MECHANISM WITHIN PAL-NET ADAPTATION

Resilience as dynamic flexibility

Bonanno's conceptualisation of resilience and the application of his *flexibility sequence* broadens the clinical question from “What is the correct response?” to “What response fits this moment, this person and this ecology?”

Bonanno considers resilience to be flexible, context-sensitive, and culturally shaped. He recognises adaptive responding under stress depends on a person's capacity to accurately read situational demands, select from a broad repertoire of regulatory responses, and monitor whether that response is helping or needs to shift.

He critiques universal debriefing of ‘trauma events’ and cautions against assuming that all people need the same type of emotional processing, at the same time, in the same way.



3: SITUATE SUMUD AS RESILIENCE MECHANISM WITHIN PAL-NET ADAPTATION

Sumud

Steadfastness and persistent resistance that emerges within a particular ecology of survival

Distinct from Western resilience models, *sumud* carries collective identity, continuity and psychological endurance.

PAL-NET draws from Bonanno's flexibility sequence to recognise how *sumud* provides a culturally and politically situated account of what adaptive endurance may look like within the Palestinian context.

Sumud should be understood as culturally situated steadfastness that may emerge through narrative integration, but should not be prescribed by the clinician as an obligation to endure.



3: SITUATE SUMUD AS RESILIENCE MECHANISM WITHIN PAL-NET ADAPTATION

BONANNO'S FLEXIBILITY SEQUENCE	PAL-NET ADAPTATION	LINK TO SUMUD
CONTEXT SENSITIVITY Reading what the situation requires	PAL-NET asks what is actually possible under ongoing threat rather than assuming safety, emotional expression, or future planning are always available	Sumud may mean restraint, endurance, action, silence, prayer, caregiving, or testimony depending on the context
REPERTOIRE Having multiple coping and regulatory responses	PAL-NET expands the participant's protective systems: sensory, relational, community, moral, spiritual, symbolic and temporal supports	Sumud is not one coping strategy, but a flexible field of culturally meaningful responses
FEEDBACK MONITORING Noticing what is helping and adjusting	PAL-NET requires careful pacing, monitoring of arousal, readiness, dissociation, family dynamics, and if exposure remains integrating rather than flooding	Sumud is not rigid perseverance at all costs; it includes knowing when to continue, pause, seek connection, grieve, rest, or protect oneself



Adaptive training, in real time

PAL-NET translates Bonanno's flexibility sequence into a Palestinian therapeutic ecology:

- Context sensitivity → attention to ongoing threat and collective life
- Repertoire → protective systems and culturally meaningful symbols
- Feedback monitoring → iterative co-design, pacing, and fidelity safeguards

Arabic-language materials

Context-specific case examples

Reflective supervision

4: PAL-NET TRAINING: PCC PILOT PARTNERSHIP

Iterative, Co-designed Training Pilot Partnership

Palestinian Counselling Centre (PCC; est. 1983) supports all members of Palestinian society, with the aim to advance psychosocial services in the community, promote wellbeing and resilience, build local capacity, and advocate for health-based policies and legislation.



Six-session pilot training with PCC

NET foundations, lifeline practice, exposure cycles, scripts and role plays, reflection, and adaptation discussion
Arabic-language materials; context-specific case examples and peer-to-peer learning; reflective supervision



Training centred on co-design principles

Participant feedback identified where standard NET assumptions strained against Palestinian realities



Key adaptation signals

Ongoing threat: safety as “safe enough” protective systems

Collective identity: individual lifeline situated within family, Gaza, home, land, faith, and community

Traumatic grief: extension of ‘candle’ memories to disrupted mourning, survivor guilt, and the missing goodbye

Children/families/groups: need for KIDNET, family lifelines, collective witnessing, and exposure boundaries



Emerging PAL-NET principles

Preserve NET’s active ingredients - chronology, exposure, hot/cold integration, testimony - while adapting the therapeutic ecology in which those mechanisms become clinically possible

1. Reframing safety as “safe enough” rather than “safe place”

1 Standard NET / trauma-therapy assumption being adapted

Many trauma interventions use ‘a safe place’, grounding imagery, or stabilisation strategies that assume the person can access either actual safety or an imagined sense of safety.

2 Adaptation offered in the training

The training used “safe enough”: Not the absence of danger, but the presence of “enough” accessible support for the person to remain oriented, regulated, connected, and able to proceed.

This was especially important because PCC participants were not working in a context where danger was clearly “over.” Safety could not be framed as being within a ‘typical’ refugee context.

3 Why this was needed for PCC / Palestine

In the Palestinian context, particularly after October 7 and under conditions of displacement, siege, grief, family separation, and ongoing threat, “imagine a safe place” can become clinically inaccurate and alienating.

The adaptation asked:

1 What helps this person stay oriented?

2 What helps them remain connected to the present?

3 What can they access when danger remains real?

4 What helps them continue without denying the reality of threat?

4 Clinical function

This adaptation protects NET fidelity because exposure requires the person to remain within a tolerable window of activation. “Safe enough” resources support exposure rather than replacing it.

2. Protective Systems Network

1

Standard NET element being adapted
Standard NET includes attention to safety, stabilisation, grounding, preparation, and therapist containment. However, this is often framed in individualised terms.

2

Adaptation offered in the training
The training developed a Protective Systems Network: a broader, culturally grounded ecological systemic map of resources that support regulation and orientation.
The Protective Systems Network included:

moral resources: justice, dignity, values, identity, refusal of erasure	interpersonal resources: family, colleagues, neighbours, trusted others
sensory resources: breath, sound, touch, smell, prayer beads, music	community resources: shared ritual, collective respect, language, belonging
cognitive / temporal resources: “this feeling has passed before”, orienting to “now”/present moment	symbolic resources: keys, olive trees, embroidery, family photos, objects of continuity
spiritual resources: faith, dua, prayer, trust in Allah/God	physical resources: shelter, blanket, tea, warmth, movement

3

Why this was needed for PCC / Palestine
In Palestinian contexts, regulation is often not only using internal systems. It may be held through family, faith, community, culture, moral clarity, or connection to home and land. PCC practitioners in this context needed their own protective systems during learning, role plays, and eventual clinical work delivering PAL-NET in their community.

4

Clinical function
Protective systems help the client and practitioner maintain dual awareness during exposure:

1

The memory is being activated

2

The danger may still be real in the broader environment

3

But in this moment, the person has enough orientation and support to continue

5

Link to Bonanno’s flexibility sequence and *sumud*
Expands the person's regulatory repertoire and asks which response fits this context, rather than prescribing one universal coping strategy. *Sumud* is the culturally grounded form of steadfastness; the Protective Systems Network is the clinical map of what sustains that steadfastness.

3. Situating the lifeline inside family and collective history

1 Standard NET element being adapted

Standard NET uses an individual chronological lifeline, mapping life from birth to present, placing significant events and transitions in sequence.

2 Adaptation offered in the training

The training preserved the individual lifeline but adapted its conceptualisation. In PAL-NET, the individual lifeline is understood as relationally embedded. The person remains the narrator, but the narrative field includes:

- family
- Gaza/land
- home
- community
- intergenerational memory
- faith
- collective violence
- political history

3 Why this was needed for PCC / Palestine

Participants reflected it could be difficult to separate one's own life from family and collective experience. In the Palestinian context, the self may be experienced through family, place, duty, and collective history. An overly individualised lifeline risks misrepresenting the client's actual experience.

PAL-NET clinical questions

Instead of only asking:

- 1 What happened to you?
- 2 Where were you?
- 3 What did you feel?

The practitioner may also ask:

- 4 Who were you responsible for?
- 5 Who were you trying to protect?
- 6 What did this mean for your family?
- 7 What did home mean in this memory?
- 8 How did this affect your role in family/community?
- 9 Where are you inside the collective story?

Clinical function

This adaptation protects:

- NET fidelity: the exposure must still be anchored in the person's own autobiographical memory;
- Cultural truthfulness: the person's story is not artificially detached from family and collective life.

4. Expanding lifeline symbols

1 Standard NET element being adapted

Standard NET often uses a rope or drawn line, with:

- stones for traumatic memories
- flowers for positive memories
- sometimes other markers for significant life events

2 Adaptation offered in the training

Adaptations explored included:

- stones: fear, violence, displacement, life threatened
- flowers / seeds / berries: weddings, graduations, births
- candles: death, grief, mourning, significant loss
- sticks / nails / screws: perpetration of violence or harm
- shells / seashells: safety, connection to place
- leaves / butterflies: migration, transition, change
- olive leaves / olive branches: rootedness, land, continuity, identity
- keys: home, Nakba, displacement, return, loss of place
- embroidery / tatareez: history, continuity, cultural identity, stitching memory
- family photos or personal objects: relational continuity and witness

3 Why this was needed for PCC / Palestine

The Palestinian context carries specific symbols of home, land, displacement, identity, survival, and resistance. The training recognised culturally meaningful objects makes the lifeline more clinically accessible.

4 Clinical function

These symbols are not decorative. They help:

- organise memory
- differentiate event types
- titrate exposure
- mark complex grief, ambiguous loss, and disruptive mourning
- locate survival and positive memory events
- connect the person to home, continuity, and identity
- make abstract memory work visible and concrete

5 Fidelity boundary

The symbol must support NET's purpose of connection to key memory events. It should not impose meaning on the participant or allow avoidance of exposure.

6 Key idea

Culturally meaningful symbols are clinical tools, not decoration.

5. Sumud as narrative emergence rather than imposed resilience

1 Standard trauma / resilience concept being adapted

Western trauma discourse often uses “resilience” as an individualised construct, sometimes implying recovery, growth, optimism, or coping success.

2 Adaptation offered in the training

The training material and the Bonanno link suggest that sumud should be treated as emergent, not prescribed. Sumud may appear through:

- caring for children
- remaining connected to family
- protecting others
- continuing prayer or faith practices
- refusing erasure
- remembering home
- surviving displacement
- holding dignity
- continuing under impossible conditions

3 Why this was needed for PCC / Palestine

In the Palestinian context, sumud has political, relational, moral, cultural, and spiritual meanings. It is not “resilience.” If used carelessly, it could become a demand to be strong, endure, find meaning, and stay hopeful. That would be clinically harmful.

4 Link to Bonanno flexibility sequence

Bonanno’s flexibility sequence helps prevent this misuse. Resilience is not one fixed response. It involves:

- reading the context;
- selecting from a repertoire;
- monitoring whether the response helps;
- adapting as conditions change.

PAL-NET treats sumud as flexible steadfastness, not rigid endurance.

5 Clinical function

The practitioner may ask:

- What helped you continue?
- Who or what were you holding onto?
- What did you learn about your capacity?
- Does the word sumud fit here?
- Or is another word more true?

6 Key idea

Sumud is discovered in the story, not demanded before the story.

6. Future collapse and the open-ended lifeline

1 Standard NET element being adapted

The lifeline often exceeds into the future. Clinicians may invite hopes, wishes, plans, or future orientation.

2 Adaptation offered in the training

The training recognised that, after October 7 and under ongoing threat, the future may feel collapsed or unavailable.

PAL-NET co-designed a flexible adaptation to honour reality

- a blank future end “open rope”
- a provisional future focused on the next day, week, etc.
- no forced hope
- no demand for future planning
- focus on present integration before future orientation
- regular contact with *sumud* and Protective Systems Network

3 Why this was needed for PCC / Palestine

Participants discussed “survival mode”: day-by-day functioning, food scarcity, shelter uncertainty/displacement, safety of children. In that context, asking for future dreams may be clinically disconnected.

The adaptation asked:

1 What helps this person connect to their story?

2 How can reviewing memories support present reality?

3 Can documenting stories protect future collapse?

4 What helps them continue without denying the reality of what was lost and remains uncertain?

4 Clinical function

This adaptation prevents the therapist from imposing premature hope.

5 Key idea

The future end of the lifeline may need to remain ambiguous.

7. Relational and collective NET pathways

1 Standard NET element being adapted

Individual therapist–client dyad, one lifeline, one autobiographical testimony.

2 Adaptation offered in the training

Expand the circle of witnessing through KIDNET, caregiver support, family lifelines, and NET-informed group work.

3 Why this was needed for PCC / Palestine

Palestinian trauma is often held through family, children, home, displacement, faith, collective grief, and shared rupture. Standard individual NET can remain clinically useful, but risks becoming culturally thin if the person's story is separated from the relational and collective systems that give it meaning.

4 Clinical function

To situate the individual lifeline within a wider ecology of family, community, land, faith, grief, survival, and testimony, while preserving NET's core mechanisms: chronology, exposure, hot/cold memory integration, and autobiographical ownership.

5 Safeguarding

- Expand who can witness the story without changing who owns the story.
- Keep high-intensity, graphic, shame-laden, or personally exposing material in an individualised and carefully governed container.
- Protection of testimony ownership, so no family or group member corrects, dominates, interprets, or takes over another person's narrative.
- Attention to power dynamics, including family violence, coercion, shame, hierarchy, gendered expectations, and child safety.
- Confidentiality boundaries in family and group settings.
- Caregiver involvement only where safe in KIDNET.
- High-intensity exposure kept individualised unless there is a very clear clinical rationale and strong containment.
- Group work framed as NET-informed when it uses psychoeducation, collective timelines, protective systems, and witnessing, but does not deliver full individual exposure.
- Careful pacing and monitoring for flooding, dissociation, withdrawal, or pressure to continue.
- Clear follow-up pathways for participants who become activated or require individual support.

Qualitative review of PAL-NET pilot training program

Data source	What it revealed
Participant reflections	Standard NET concepts needed to account for family, collective identity, Gaza, displacement, faith, and ongoing threat.
Training feedback	Safety, pacing, translation, emotional load, and practitioner support were implementation issues, not side issues.
Case examples	Grief, survivor guilt, caregiving under threat, disrupted mourning, and the “missing goodbye” were central clinical themes.
Adaptation discussions	PAL-NET required protective systems, relational lifelines, culturally meaningful symbols, KIDNET, family lifelines, and governed group work.

Reflections for continuing PAL-NET development

- The training generated practice-based qualitative data through participant questions, reflections, case examples, roleplay discussion, and feedback across six sessions. Each training session was adapted to accommodate dynamic feedback ‘in real time’ to form PAL-NET’s content through co-design processes.
- These co-design processes identified where standard NET translated well, where it strained, and what adaptations were clinically necessary for the Palestinian context. It continually framed the adaptations within an ecological systems approach that aligned with conceptual elements from Bonanno’s flexibility sequence, the Palestinian process of *sumud*, and the Protective Systems Network.
- These reflections inform future research and are not efficacy claims. Ongoing work with PCC will monitor implementation of PAL-NET within the community and continue to add to the practitioner knowledge base of trauma intervention for genocide.
- The qualitative data showed that PAL-NET was capable of preserving NET’s core mechanisms while adapting the therapeutic ecology around them. The adaptation becomes useful when the clinical method can speak with - not over - the context.

FOUR TAKEAWAYS

Centre core NET elements.
Adapt the frame.
Iterate and be flexible.
Follow local leadership.

PAL-NET's potential rests on cultural frameworks, clinical governance and careful evidence-building.

There are infinite opportunities to support Palestinian mental health services. PAL-NET is one such opportunity. Anyone wanting to contribute to this work or to engage with organisations like PCC is warmly invited to contact me.

Thank you

Questions and further discussion

Contact me

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