



The  
CENTER for  
VICTIMS of  
TORTURE

*Paul Orieny, International Services clinical advisor led a [live Facebook chat](#) in September 2013 with CVT Nairobi Psychotherapist/Trainer Ilya Yacevich and Physical Therapist/Trainer Jepkemoi Kibet. Below is a slightly edited transcript of that conversation.*

**Paul Orieny, International Services Clinical Advisor.**

Ilya and Jepkemoi, thanks for joining us. Ilya, let's start with you. When many people think of refugees, they envision a camp. But most refugees live in urban areas. Can you tell us what life is like for refugees living in Nairobi?

**Ilya Yacevich, LMFT, Psychotherapist and Trainer, CVT Nairobi**

Sure. The UN estimates 50,000 refugees live in Nairobi but others believe there are many more, maybe as many as 100,000+ in the city. And it's very, very challenging for people here. While there are some similarities to people living in a camp situation, there are unique challenges as well. They live in very impoverished neighborhoods. They can be quite isolated, staying in their homes and not going out. One of the unique challenges in Nairobi for many of the refugees we're working with is that they do not have the UN mandate, which is the paperwork that says they're legally a refugee. That can be for many different reasons but most often it's NOT because they're not a legitimate refugees. When that happens, they can't access medical care or food assistance. It's a huge issue among our clients because we see a lot of people with multiple needs and we're not able to easily refer them to other agencies. So it creates a lot of roadblocks for them just to provide for their basic needs. We also have clients who have lived here for many years – one who arrived 12 years ago. And we have one client who arrived last February. So the length of time they've lived in Nairobi as a refugee varies.

**Paul**

Who are the refugees you're seeing in Nairobi?

**Ilya**

We're seeing many people from the Great Lakes Region of Africa – Rwanda, Burundi and the Democratic Republic of Congo. We also have clients from Ethiopia and Somalia.

**Paul**

And what kind of torture and war experiences are you documenting?

**Ilya**

Our clients have experienced really horrific treatment. There is a lot of torture, and in the Great Lakes Region there is ongoing conflict, especially in the Congo. We're seeing that the general population is being directly targeted by militia groups for all sorts of reasons. It's hard to even know exactly why people are being targeted. We're seeing lots of people who have been beaten, a huge amount of sexual violence, some electrocution, forced labor. In terms of their mental health, most survivors have depressive symptoms, people who are very hopeless and struggling with suicidal thoughts. There are significant post-traumatic stress symptoms, so people have a lot of intrusive thoughts, intense startle responses, a lot of nightmares, flash backs where they're reliving violent experiences.

**Paul**

Tell us about the care CVT Nairobi provides?

**Ilya**

The core of our care in Nairobi is mental health counseling to refugees who are severely affected by torture or war experiences and physical therapy. Most of our counseling is done through 10 week group counseling sessions, but we also work with some survivors individually who are not emotionally ready to participate in a group. Another important part of our work is training. We have a staff of 10 Kenyan psychosocial counselors who are providing mental health care to survivors, are developing very strong clinical skills, and receiving ongoing supervision. The same with the physical therapists. Jepkemoi provides leadership and direct supervision and they are getting direct experience working with torture and war survivors in a setting that includes collaboration and consultation with the counselors.

**Paul**

Jepkemoi, let's talk about physical therapy. First, can you explain why physical therapy is integrated into the counseling in Nairobi?

**Joanne Jepkemoi Kibet, MSc, Physical Therapist and Trainer, CVT Nairobi**

Hi Paul and everyone. Our knowledge of how torture and war experiences affect people is growing and we understand better how the psychological effects of torture affect someone physically. So, for example, torture survivors suffering from depression or anxiety often will have physical symptoms as well. Sometimes those physical symptoms are caused by stress and sometimes they are the result of their torture. For example, if someone was held captive and forced to carry wood for their captors, they might have back pain. Another person might have severe headaches caused by stress. What we do with CVT's project in Nairobi is work closely with the counselors and Ilya. They do the initial intake and assessment, then refer survivors to us if there is agreement that physical therapy could help. We're getting very good response.

**Paul**

In addition to the mental health symptoms that Ilya explained, what are the physical symptoms you're caring for?

**Jepkemoi**

Most of the men and women we see are in pain. They've had broken limbs, suffered multiple and repeated rape, backaches from forced labor, like carrying wood, for militia groups. We see a lot of issues with bones and muscles. We take them through three stages of physical therapy just as the counselors take them through three stages of counseling: Safety & Stabilization, Remembrance & Mourning, and Reconnection. In the Safety and Stabilization stage, the physical pain might worsen because the exercises we're teaching them cause muscles to stretch and get strong. But ultimately they feel better. In Remembrance, the client can talk about what they could do before their torture, like work on a farm, carry water or walk a certain distance. I tell them they can get back to where they were. During the final stage of Reconnection, we empower survivors to use their strengths and skills. I'll give them an exercise chart so they can do exercises at home. If they need to do certain activities, like wash clothes for income, I'll give them directions on how to do the laundry without injuring or hurting themselves. Also, as they learn what causes stress and how their bodies react, we'll give them specific things to do to manage that stress, like breathing exercises or simple physical exercises and talk about what they can do to help themselves regulate their body.

**Paul**

What kind of results are you seeing?

**Jepkemoi**

We're getting great results. Of the survivors receiving counseling, about 80 percent are being referred for physical therapy. In our first group cycle, which ended in early July, there was a man who used to sit in group hunched over with his head down. He received physical therapy along with the group counseling and at the end of the ten week counseling cycle, he could sit up straight with his head held high. He told us that he complained for years about his pain but no one took him seriously. But by the end, he felt strong and like he was completely changed.

**Paul**

I should mention that Nairobi is only our second international healing project, after CVT Jordan, to be able to combine counseling and physical therapy care. I know we'd like to do more of that.

Ilya, training is an important part of our work. Tell me about the psychosocial counselors in Nairobi:

**Ilya**

We have a great team of ten counselors in Nairobi that have a lot of formal education. A lot of the counselors on our staff have master's degrees, bachelor's degrees, some type of formal education. I think what we're providing through our work is the direct clinical experience and supervision and consultation that isn't always available to further develop their clinical skills. And of course, they're getting direct experience working with torture and war survivors. They're learning what it means to develop trauma-informed systems and how to educate communities about the effects of torture and war. And they're learning how to work with larger groups of people in different and very creative ways that really address the core issues when someone's experienced severe torture or war trauma. With their experience, they are going to be able to train and support other counselors coming up over the years to come and be an ongoing resource in Kenya as care providers and educators.

**Paul**

Jepkemoi, what about the physical therapists?

**Jepkemoi**

We also have a great team of physical therapists – Stephen and Jennifer. Both are trained and experienced physical therapists. But for all three of us, this is the first time we are working collaboratively with counselors and providing care specifically to torture survivors. My team of physical therapists and I have had to learn how to recognize when the stories we hear are too much and how to manage our own trauma as part of this work. Ilya has helped provide training and we have ongoing consultations. But I think all of us providing physical therapy find it very rewarding. Before we came to CVT, we had the experience of helping clients manage physical pain but also seeing that there were deep emotional and psychological issues that we didn't have the skills or resources to help with. So working collaboratively with the counselors, we're seeing the benefits of providing that psychological support along with the physical therapy and the transformation is incredible.

**Paul**

Let's talk about that. Ilya, this week we shared [a video of a group of men who received counseling and wrote and performed a song](#). Tell me about them.

**Ilya**

When these men first started group counseling with CVT, they were very immobilized – very shut down, very frozen. If there was any emotion, it was tearful but even that was probably more energy than they had. They would sit slouched in their chairs, hunched over, looking down or avoiding any eye contact. When you tried to talk or engage in conversation, there wasn't much initially. So it's really been incredible to see them come back to life. They're able to connect with their bodies more, you see they're aware of how they're feeling and what is going on around them. They're able to discuss things with each other. Many of them had physical therapy and they tell us they feel physically and emotionally better. They tell us, and they smile when they say this- "I feel strong, I

can talk about what's happening in my life and I have a better relationship with my wife or I can relate better to people."

**Paul**

What's it like to see this transformation?

**Ilya**

Incredible, incredible. It's really touching. I think one of the challenges is that we have so many clients and we can only see them for a limited amount of time because we're really doing emergency mental health. But the thing that's very hopeful and encouraging to me is that even though we're only working with them for 2 ½ months or 10 counseling sessions, we're seeing really dramatic, significant changes. And that's not just the men in the video but all the groups. All of our counselors and physical therapists will tell you that the change is very, very powerful.

**Paul**

Jepkemoi, what about you?

**Jepkemoi**

I agree with Ilya. The transformation we're seeing is extraordinary and very moving to witness. I had a client, a woman, who had terrible experiences in her home country. She was shot at, she was raped. She tried to run from her country but was caught by rebels. They made her a captured wife for six months. She was finally able to flee to Kenya and when she arrived at CVT, she had a broken bone and a torn muscle. She would cover her face because she was fearful and didn't have any confidence. Now, she no longer covers her face. She smiles and she can walk without pain. When I see her, she makes me happy. Now she is a community leader and helps others who are coming to CVT. She was in the depths of despair and today she is the very embodiment of the strength of the human spirit.

**Question from Mary Therese:** Joanne, when early in your work during Safety and Stabilization, I suspect the pain of muscle stretch and strengthening itself acts as a PTSD trigger. How do you help your patients past the triggering to do the work, rather than withdraw from treatment?

**Jepkemoi**

Mary Therese...we emphasize on relaxation exercise as well and we are very gentle with our clients.

**Paul**

Hi Mary, during intake we take the history so we are aware of potential triggers. Even as the physical therapy is happening they always work in close connection with the counselors and always assess whether it's safe to proceed or not.

**Question from Ondogah:** Hello all, I would like to inquire from Ilya Yacavich, what her take is on Physical therapy being part of rehabilitation of torture victims and how it impacts the process of Psychotherapy. Thanx

**Ilya**

Ondogah: It has been extremely wonderful to have Physiotherapy as a part of our integrated healing work. Clients report the most benefit when they are receiving both psychotherapy and physiotherapy. When working with trauma, it's very important to work with the body, not only with physical pain symptoms, but also to increase physiological regulation. We see our clients becoming more able to connect with their bodies, more able to identify what's happening internally, and having more skills and resources to do something about it.

**Question from Ondogah:** Jepkemoi, kindly share with us your initial experiences as Physical therapists dealing with torture victims; because it is common place for these clients to open up to Physical therapists while under their care. Thanx

**Jepkemoi**

Ondogah, that is very true. In fact, during my first physio session with a torture survivor, I became very affected by the story they immediately started sharing. This is one way that it's been great collaborating with the psychotherapy team. They have helped to train our physio team on how to set certain boundaries, and how to protect ourselves from hearing traumatic things. Because of how physiotherapists work with clients some clients share with us stories they have never shared before and we often consult with the psychotherapist.

**Paul**

Ilya and Jepkemoi, thank you for sharing your experience with us. It's been fascinating. Thanks also to the team in Nairobi who are doing this difficult and important work. I also want to thank the U.S. State Department's Bureau of Population, Refugees and Migration for their support of our work in Nairobi and thank those of you who follow us on Facebook