

HEALING the HURT



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We dedicate this guide to our clients.

— THE STAFF OF THE NATIONAL CAPACITY BUILDING PROJECT
AT THE CENTER FOR VICTIMS OF TORTURE



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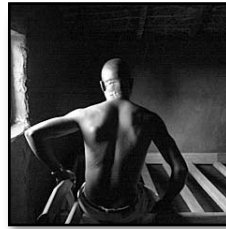
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FOREWORD

My name is Richard Oketch. I am a teacher by profession and was born in Uganda. I am a survivor of torture.

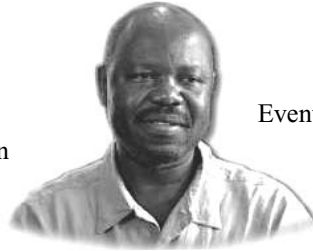
I was a young man in Uganda when the brutal regime of Idi Amin cut short my youth and disabled my entire family structure. Tribal and political affiliation landed us on the wrong side of the government. My two brothers, my younger sister and her boyfriend, the husbands of my two sisters, and other relatives disappeared. My uncle was shot and thrown in a river. My father was badly beaten and left for dead. He survived but died from those injuries several years later.

From the coup of 1971 through 1979, military harassment of the population in Uganda was constant and brutal. By the end of the regime in 1979, half a million people were dead or missing.

Between 1973 and 1977, I was arrested three times and mostly held at military detention centers. At this time, military detentions were known as death traps because no one really came back. Soldiers tortured us prisoners with whips, canes, sticks, gun butts, fists, bayonets and large knives. We were forced to ingest large amounts of vodka. I had to wash away others' blood and load wasted bodies on trucks. I endured broken ribs, a dislocated shoulder, serious lacerations, wounds on my back and thigh and, most lasting, mental numbness.

When I escaped from the prison in Uganda, I received treatment and healed well physically. Psychologically, I felt that there was a scar somewhere in my head and the memory could not and would not leave me alone.

When I came to the United States in the early 1980s, my nightmares got worse. Regular health care was not meeting my needs. The hospital setting brought back bad memories, and it was difficult to tell people what had really gone wrong with me. The doctors never asked questions about the source of my nightmares but gave me medication anyway. My symptoms were not clear cut and the medical staff suspected me of having a drug-related mental illness.



Eventually, I did not take the medications prescribed.

When I finally ended up at the Center for Victims of Torture (CVT), there was a sense of calmness about the environment. The psychiatrist, physician, clinical psychologist, and the rest of the staff all have reverence in approaching the clients. I felt completely safe going there.

After a series of multi-disciplinary treatments, including physiotherapy and psychotherapy, a heavy load was lifted from my psyche. My nightmares were significantly reduced within six weeks and my ability to sleep returned within the first few weeks of medication. My healing process proceeded at first weekly, then bi-weekly, followed by monthly and then occasional visits.

I am a father of six children, four boys and two girls. Two of them were born in the United States. I met my present wife during the course of my treatments and while on my first adventure out to a social gathering in many years.

Currently, I am on special assignment from Special Education teaching working for the Multicultural Excellence Program, an inner city curriculum to prepare and encourage minority students to attend college in Minnesota. I also serve on the board of the Center for Victims of Torture. My children and I have started a development association to care for the many widows and orphans in my former village in Uganda. I was in Uganda this past summer to attend the launching of this project. These events would never have been part of my life without the treatment and services I received at CVT.

I feel like I came back to life to embrace my family and friends and to provide a new world for my older children with whom I was reconnected in 1999. The bonds of suffering have been broken, and trust and love have been restored.

RICHARD J OKETCH

PREFACE

“I didn’t know what to do. My pain was almost unbearable. I was afraid to ask for help because I thought no one knew what I had suffered. Then I heard about The Center and found hope.”

— CLIENT AT THE CENTER FOR VICTIMS OF TORTURE, MINNESOTA



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REFUGEES in the Korem camp in Ethiopia, 1984.

A growing number of treatment centers provide rehabilitative and supportive services for many of the more than 500,000 survivors of political torture in the United States. By offering specialized assessment and care, these programs help survivors to heal and to rebuild lives of self-reliance and hope for themselves and their families.

The existing torture rehabilitation programs and adjunct services cannot meet the needs of all torture survivors living in the United States. Services may not be geographically accessible to all survivors.

Not all torture survivors require a full-service torture treatment program. Sometimes survivors are looking for specific services, e.g., counseling, medical services, legal assistance, help with family reunification, or in finding housing and/or employment.

Sometimes they may simply want help and are unsure what they need or the services possible to enable their recovery process to begin. In either case, torture survivors can benefit from referrals to the appropriate agency or individuals that can help.

THE PURPOSE OF THE GUIDE

This multidisciplinary guide was designed to encourage individuals and organizations who want to help torture survivors. It was produced by staff at the Center for Victims of Torture who provide training and consultation to programs for torture victims in the United States under a special grant from the Office of Refugee Resettlement — the National Capacity Building Project.

It does not specifically reflect the clinical program at the Center for Victims of Torture. Instead, the expertise gained from direct work with clients at the Center has been generalized through many years of providing training to a wide variety of audiences.

The information offered is not exhaustive, nor is it a substitute for training. This is a “getting started” and “where to go for more information” type of guide. We present options for providers along a continuum of services, from implementing a helpful service component to developing a full-service torture rehabilitation program.

The guide is also useful to mainstream health and social service providers who want to serve the special needs of

this population among their current clientele.

CONTENTS OF THE GUIDE

To best prepare personnel to work with survivors, this guide presents both general and discipline-specific information in the following chapters:

CHAPTER 1: The torture rehabilitation movement

CHAPTER 2: The effects of torture on families and communities

CHAPTER 3: Core competencies in working with survivors

CHAPTERS 4-7: Interventions and treatments in social work, medical, psychological, and legal services

CHAPTER 8: Existing models of treatment and suggestions on how to build communities of support for torture survivors

SUPPLEMENTAL RESOURCES: Listing of Web resources and referral agencies to connect readers with a national network of experts

HOW TO USE THIS GUIDE

This guide was written and reviewed by professionals who work with torture treatment centers in the United States: therapists, social workers, attorneys, nurses, physicians, and administrators. The information given is relevant for practitioners in these fields and also for human services workers, leaders of communities affected by torture, volunteers, interpreters, and others. It is meant for use by anyone who works with clients who have experienced political torture. This book is a primer, a starting point for those who

would provide services to survivors.

You may read the entire guide, or you may choose to read only the chapter that relates to your discipline or the discipline that is most pertinent to the work that you do (Chapters 4-7). If you plan to read one of these chapters, begin with Chapter 3. Note that there are cross-references in each chapter to other places in the text that offer information that may also be of interest to you.

As you read, you will want to learn more about serving torture survivors. Access the in-depth literature of your profession and connect with others doing this work. A list of U.S. torture treatment programs is included in this handbook. Reach out to members of these organizations for resources and as teachers and mentors.

Building a network of services, either community-wide or within an agency or several agencies, will be the next step in your journey. Volunteer or partner with appropriate individuals or agencies; this can strengthen your response to your clients and connect you with other services. Pull together those interested with a consortium-building or an educational event.

Join activists for human rights on the local, national, and international policy level. Strong efforts are needed to sustain and to improve the provision of resources to aid in the rehabilitation of survivors. Of equal importance are the steps taken at all levels to uphold human rights and to prevent torture worldwide.

We hope this guide is helpful to you as you join the rehabilitation movement on behalf of survivors of torture. ■

The symbol of the labyrinth has been used throughout history in many diverse cultures and has had many meanings. Most often, it consists of a path leading in a patterned way from the entrance to the center and back out again. It symbolizes the journey through the daily and seasonal



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cycles, that of life and of death and of rebirth.

In this guide, the labyrinth symbol marks personal stories of clients as they struggle to rebuild their lives as survivors of torture. Their names and certain identifying characteristics have been changed for this publication.



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THE LABYRINTH SYMBOL at left and its inspiration above, the pavement labyrinth in the porch of Guingamp's church in Brittany, France.