

Mending a Torn Psychic Fabric:

Torture and Tikkun Olam

by Erik Gleibermann

NO ACT MORE PROFOUNDLY VIOLATES HUMAN RIGHTS THAN TORTURE. While governments may conceivably defend certain deadly military actions as painful necessities, can any government defend deliberate torture? Widespread evidence documents that physical and psychological torture is not merely a brutal interrogation tactic. Repressive governments around the world, and apparently the U.S. military, often employ torture as a mechanism of collective control, targeting select individuals to systematically traumatize entire communities and cripple their belief in the future.

But torture survivors can restore the future. The healing stories of courageous survivors bear witness that individuals can overcome even the most egregious attacks on human dignity. While torture produces devastating psychological impact, survivors now safely residing in the United States and abroad have been able to undergo rehabilitation and begin leading productive lives. A powerful international movement to support survivors has emerged in the last twenty years led by professionally staffed torture treatment centers in major metropolitan areas, offering psychotherapy, medical aid, social services, and asylum assistance. This work testifies that the inner power to heal can overcome the destructive will of political authority, and additionally serve as a spiritual base for the long struggle to end government-sponsored torture worldwide.

Most Americans are hardly aware how extensively the invisible wounds of torture permeate our national community. Survivors from well over a hundred countries and every major continent reside in the United States. According to Immigration and Naturalization Service statistics, over two million refugees have entered the United States within the last twenty-five years, an estimated 5 to 35 percent of them torture survivors. Anywhere from 100,000 to 700,000 refugee survivors may be living in this country. If the substantial numbers of legal asylees and undocumented immigrant survivors are added, the totals may be more than twice these figures.

We may feel powerless and even ashamed recognizing the widespread presence of torture's legacy in our midst. This understanding may be particularly painful in light of evidence that implicates our own government in the use of torture at military facilities including Guantanamo Bay and Abu Ghraib, and through 'rendering' terror suspects to repressive foreign governments for interrogation.

Supporting the emerging work of the torture treatment movement challenges the belief that individual citizens have no power to address the grave injury of torture inflicted beyond our borders. At least thirty treatment centers operate in or near major metropolitan areas

across the United States, and over 200 exist internationally. Although at present only a fraction of survivors receive treatment, every individual who reclaims a fulfilling life in the wake of being tortured provides a model for others and helps repair the fabric of a torn community.

Rehabilitation is a deeply individual process that must respond to the particular complexities of a survivor's experience. The varieties of wounding are unimaginably vast. A student picked up at a demonstration, detained, and beaten in an overnight interrogation has a far different experience than an activist isolated in long term detention and forced to participate in the torture of others, or a mother who witnesses genocide and is raped in front of her children. The living situations for survivors resettling in a foreign country also vary tremendously. Does the individual have a protected legal status, adequate economic means, local family ties, functional language skills, or limiting medical conditions?

The term treatment implies a medical approach, but generally treatment centers offer practical service assistance as a first order, including living and cultural skills training, forensic documentation for asylum applications, and social service referrals. Because the aim of torture is to fundamentally paralyze an individual's and, in turn, a community's capacity to function, healing primarily involves holistically rebuilding one's ability to live with dignity in a new social environment. Helping a person to find productive work can be particularly effective. In addition to its material benefits, work can provide a sense of personal worth, social connection, distraction from emotional pain, and social respect. Many survivors, particularly women overcoming sexual abuse, face ostracism in their families and communities and work becomes critical for regaining social acceptance. Psychotherapy to address the acute psychological consequences of trauma may also be necessary, but must fit naturally into this multi-layered process.

A common starting point for the survivor who chooses to begin psychological work is to retell his or her story. Even to comprehend the torture experience as a story, as something coherent and meaningful, may be difficult because torture can so profoundly rupture self-concept. The nightmare of undergoing repeated mock execution or being forced to watch a companion being sexually tormented almost belies the possibility of narrative. Torturers aim to make victims question their own experience and sanity. Perpetrators often tell the victim that recently inflicted torture never happened, or that no one else will ever believe it. According to Dr. Uwe Jacobs, executive director of Survivors International, the San Francisco Bay Area's major treatment center, "The key is that somebody who cares is there to listen to what has happened. The survivor does not have to fear being retraumatized by being misunderstood." Survivors often fear that recounting their experience will trigger repulsion and social rejection. A therapist who remains attentive through the telling helps the survivor regain trust.

Survivors naturally tend to frame their stories to facilitate rebuilding a core self. People's subjective experience of how torture damages the sense of self varies greatly. While one person may need acknowledgement of the most excruciating details of specific acts to reduce a sense of experiential isolation, another may need to work through tremendous shame and guilt over how others have been affected. One of the most vicious elements of torture is the perpetrator's attempt to manipulate victims into feeling implicated in their own suffering. Forced to commit humiliating acts in front of family members, they may feel responsible for degrading themselves or inflicting trauma upon loved ones.

Jacobs describes a patient whose psychological anguish was more existential, involving a lost faith in humanity that could be recovered only by understanding what could compel human beings to inflict unspeakable pain. One Bosnian survivor Jacobs treated described only the political events that led to his torture, never revealing details of what happened to him personally. Therapy manifested in this case as political testimony rather than psychodynamic inquiry.

Talk therapy as a recovery method must expand beyond the traditional one-on-



one consulting room when possible, and draw on the healing cultural traditions of the survivors themselves, especially for individuals whose cultures may find traditional Western psychological practices alien. At the Trauma Centre for Survivors of Violence and Torture in Cape Town, South Africa, a group of survivors from the anti-apartheid struggle collaborated with clinicians to construct a collective storytelling process integrating songs and rituals similar to those used during the African National Congress's meetings. Former political prisoners not ready to attend the group sessions could read a printed newsletter in Xhosa and English with transcripts of the stories.

It is a myth that all survivors avoid publicly recounting their stories because they fear the experience may retraumatize them or place them in danger of retaliation. In fact, many activists discover public revelation of their experience to be empowering, a decisive refusal to succumb to the intimidation and humiliation perpetrators intend.

For others, spiritual practice precedes speech as a healing vehicle. In his recent book *Healing Invisible Wounds*, Dr. Richard Mollica, director of the Harvard Program in Refugee Trauma, describes a Cambodian survivor of the Pol Pot genocide that killed all of her children. She did not want psychotherapy. She believed the only act that would allow her to survive was building a temple on the shore of the ocean. One Tibetan Buddhist activist tortured by the Chinese government experienced his recovery as a crisis of compassion. From a Buddhist perspective healing meant maintaining loving kindness and empathy even toward a sadistic assailant. He began to investigate the background of his torturer and explore how a life of poverty had damaged his spirit.

Since torture trauma expresses itself on the physical, social, and spiritual, as well as psychological levels, treatment centers offer a wide range of healing techniques that includes bodywork and massage, play and art therapy, and community building projects often initiated by the survivors themselves. In Oakland, a woman who worked as a seamstress in her native Bosnia began a sewing group for female refugees of the Bosnian War with the help of Survivors International. These women, largely isolated as refugees, built a nurturing community that helped them develop practical clothes-making skills, and embodied a symbolic ritual of collective mending.

These many powerful recovery methods by themselves will never prove fully adequate to heal unless the international community also addresses torture at its source. Survivors who undergo treatment can reclaim productive lives and recover hope within a community that acknowledges their stories, but the trauma still resonates internally in a world where torture persists. We should commend the United States for historically providing safe haven to survivors from foreign countries, but recognize that the government undercuts its own offer of safety by condoning and practicing torture at the same time.

A true commitment to healing the pain of torture will require a global attention similar to that which followed the Holocaust, when an international movement publicly brought perpetrators to justice, pursued reparations for victims, and began a worldwide campaign to keep the world's conscience in touch with history. The work of the International War Crimes Tribunal in The Hague and South Africa's Truth and Reconciliation Commission can be models, provided they mindfully integrate the difficult blending of psychological healing and political justice.

The distinction between psychological healing and social justice activism must finally be considered artificial. As interconnected members of a global community, each of us, whether consciously or not, inevitably absorbs some level of the widespread trauma of torture. The direct survivors have been the ones conspicuously afflicted, but they carry the trauma of our entire society. And so their mending repairs the wider world. ■



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