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VICTIMS of  
TORTURE

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# Healing Across Cultures and Languages Spanning the Globe

**O**n any given day, a CVT clinician's work traverses the world, as the survivors of torture and war atrocities are from diverse cultural and linguistic backgrounds. In helping them heal, each detail, each word or phrase, and each individual person involved in a survivor's care is regarded with significance.

Professional interpreters are integral members of what CVT refers to as the "therapeutic triad." In each therapy session, the room is set up with the client and clinician

facing each other to simulate direct conversation, and the interpreter sits to the side. Many torture survivors arrive at their initial counseling sessions feeling fearful and often reveal that they have difficulty trusting. CVT uses the triad model to alleviate this uneasiness and to demonstrate to clients that they are part of a cohesive team.

Interpreters are required to interpret everything said in the room, including side conversations or phone calls. Every word matters. When survivors understand what is being said and do not feel that anything is left out, it helps to increase trust and transparency in the healing relationship.

Interpreting for mental health appointments across cultures adds a layer of complication that interpreters and clinicians grapple with on a daily basis. Expressions of psychological and emotional distress are deeply embedded with cultural meaning, and it is part of the interpreter's role to find a way to

communicate concepts of distress across cultural barriers, while still adhering to professional boundaries and role expectations.

In CVT's Healing Hearts, Creating Hope project, we work with Karen survivors, an ethnic minority from Burma with a distinct linguistic and cultural heritage. They often describe their distress with heart-based idioms, such as expressing that they have a "heavy heart" or a "tired heart." The interpreter must find the words to communicate this concept in a way that retains the original meaning and that makes sense to the clinician, often a cultural outsider. The clinician, then, must unpack the meaning of these expressions as it relates to a client's past trauma history and current experience of suffering and healing.

CVT staff were intrigued by the process. They wondered, how are idioms of distress being interpreted? How do interpreters deal with

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How do interpreters deal with expressions that are so culturally bound and may not have exact equivalents in English?

Restoring  
the Dignity of  
the Human Spirit

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## Letter from the Executive Director

Dear Friends,

In caring for survivors of extreme violence, torture and atrocities committed by militias, violent governments and armies, every day we hear about the nightmares they endured and the duress of flight. They speak of loss—loss of loved ones, homes, communities, countries. The loss they know is like the air they breathe. For many, pain is part of their daily existence.



**Curt Goering**

For people in these circumstances—fleeing atrocities in a desperate attempt to reach safety—to be met at America’s border by United States officials who pulled their children from their arms was an outrageous act of cruelty. The Trump Administration’s “zero tolerance” policy is *intentionally* compounding the trauma and fear these people are experiencing—including survivors of torture and horrific violence. The impact of separation on children who are already traumatized is devastating and long lasting, particularly for toddlers and young children.

And locking children up with their parents indefinitely is not a “solution” to the family separation crisis the president’s policy created. It only trades one set of harms for another. Herded into an immigration detention system that has proven to be both unsafe and unaccountable, the Justice Department’s goal is to deport these families as fast as possible with no regard for their right to due process. And that includes asylum seekers who face a credible fear of persecution and possible death if returned to their home country.

The Trump Administration’s policies of punishing, expelling and excluding the world’s most vulnerable people are monstrous. Terrorizing children and deliberately inflicting more pain and anguish on families fleeing for their lives is not who we are as Americans.

Thank you for standing with CVT in condemning this outrage being conducted in our names and taking action with us to stop this extreme cruelty. Together, we must be a strong moral beacon in these very dark days in our country’s history, and we are grateful to have you at our side.

Gratefully,



Curt Goering

# Helping Survivors Realize All They Can Do for Themselves

by Habiba Mohamed, psychosocial counselor, CVT Nairobi

In my work with survivors of torture, at first clients tell me the very dark stories about their past, but with counseling we can help them move away from their experience of torture and begin to reconnect with the resources they have inside. They begin to help themselves to move ahead with their lives.

I remember a young woman who came to the center for help who was very sick. We sat down to do an intake interview with an interpreter, but when I asked about trauma and pain, she started crying. She could not go on and couldn't do the intake.

With this survivor, I could see from that first meeting that she needed to move forward at her own

pace. I stopped the interview, and we did another appointment the next day. The following day, I felt that she was brighter and not as weak as the day before. She had been through a lot.

She told me warriors came to her village early in the morning. They were torching houses, killing people haphazardly, and taking women and girls into captivity, including her. They were gang raped. When she refused, she was tortured on every part of her body. She eventually came to Kenya alone. All her family was gone and her husband had been killed. But as she began the healing process with CVT, she was also reunited with her children. That was



her happiest moment. After she went through the counseling cycle, at her three-month follow-up session she said now she has hope. She was not as frail, smartly dressed, and taking good care of herself. At her 12-month follow-up session, she said she has started a small business.

We know torture has profound long-term effects, so we give survivors skills to take care of themselves. As they practice these skills, they can go on with their lives. We show them that they can't heal in one day, but with time, they will see improvements. We give them hope that what they are doing is not lost.

*CVT's work in Nairobi is made possible by a grant from the U.S. State Department's Bureau of Population, Refugees and Migration; the United Nations Voluntary Fund for Victims of Torture; United Methodist Women; and the S.L. Gimbel Advised Fund at The Community Foundation—Inland Southern California.*

## CVT Acts to End Intentionally Cruel Treatment of Asylum Seekers

The Trump Administration's policy of adding barriers against individuals and families seeking asylum is reprehensible. People fleeing violence and persecution have the legal right to seek safe haven in the United States, and CVT forcefully condemns the decision of the Attorney General to unilaterally overturn years of case law that afford asylum seekers basic protections.

Deporting and turning away fam-

ilies and individuals who have a legitimate claim for asylum is cruel and inhumane. The vast majority of CVT clients in the United States are asylum seekers who have survived torture, and the vulnerable people this policy targets have a right to rehabilitative care, not punitive treatment.

From the beginning of the humanitarian crisis the Trump Administration created at the southern border, CVT has been working diligently with coalition partners to end family separation and overturn the Attorney General's decisions on asylum. We have been visiting congressional offices and mobilizing people nationwide to pressure their elected representatives to take action to end this despicable policy.

CVT has been explaining the impact of these policies on torture survivors to lawmakers and the media and stressing how efforts to narrow asylum protections will endanger them. Quite literally, it will send them back to their torturers.

In addition, many survivors in our care in the U.S. have been deeply affected by what is happening to other asylum seekers like them, reliving their own harrowing flight from life-threatening persecution and violence, and our counselors are working extra closely with these clients.

We cannot be complacent in the face of this continued harsh treatment of survivors, and CVT is calling on all Americans to join us in raising our voices against this cruel policy.



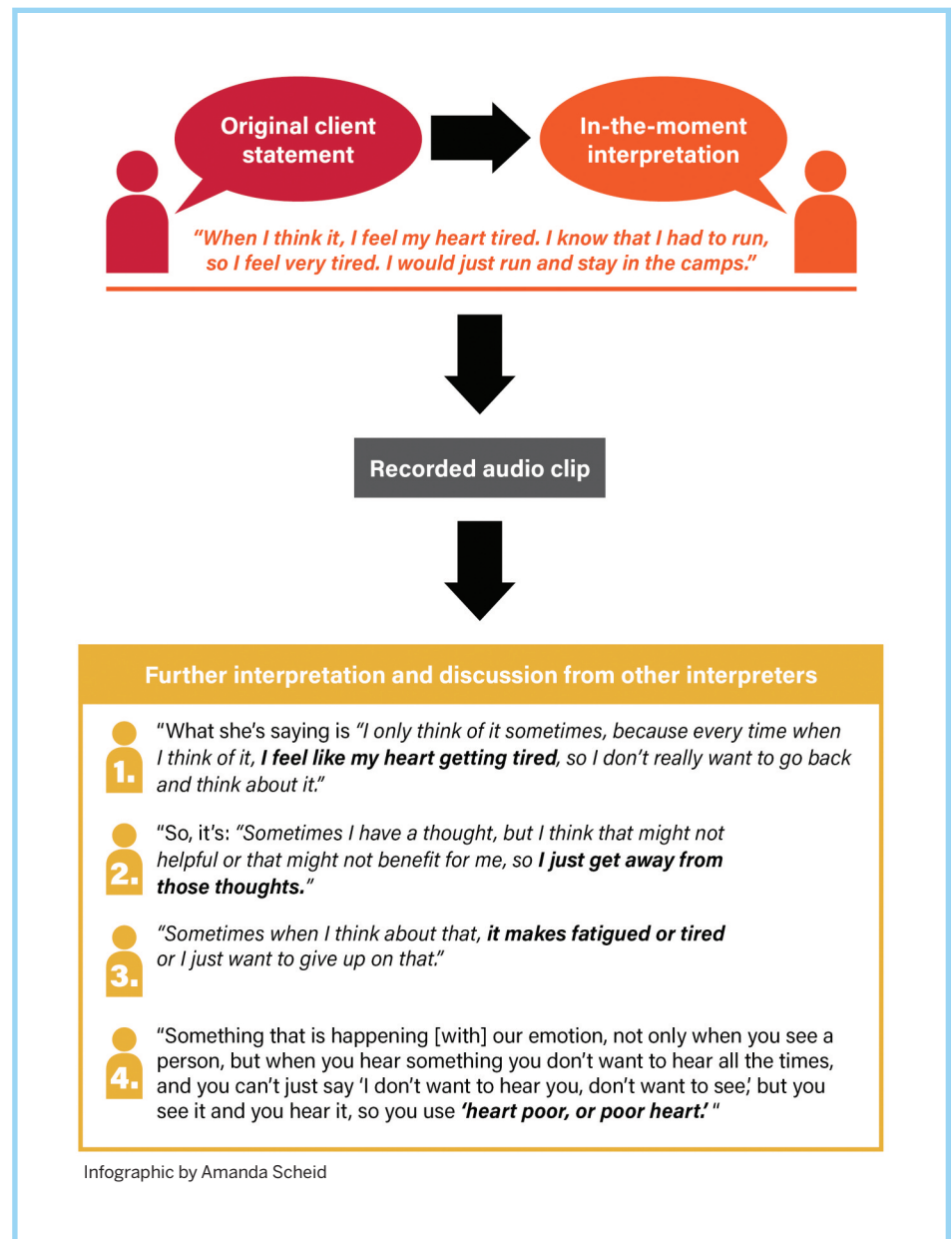
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expressions that are so culturally bound and may not have exact equivalents in English? To answer these questions, clinical and research staff collaborated to design a small-scale project working with interpreters.

For this project, staff obtained permission to use audio clips of clients describing idioms of distress, and then met with Karen interpreters to listen to clips together, and discuss the many ways a single phrase could be interpreted. The goal was not to “check” whether an interpreter translated a certain phrase correctly; the research team rejects the idea that there is only one way to correctly interpret most cultural statements. Instead, we wanted to more thoroughly explore the idiomatic phrases used by Karen participants and the different ways these might be interpreted into English.

Many factors are at play in these situations. Interpreters don't only consider cultural context, but also religious beliefs, ethical considerations, technical terminology, beliefs about traditional healing, and the role of mind, body, heart and soul in suffering and healing. From interpreters' perspectives, one thing rang true: trust on all ends is essential to interpreting for torture survivors.



*The Interpreter Project group includes Alyce Eaton, CVT's former research coordinator; Leora Hudak, MSW, LICSW, psychotherapist with CVT's Saint Paul Healing Center; and EhTa Zar, client services coordinator for CVT's Healing Hearts project.*



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