

Center for the Victims of Torture

Torture, Former Combatants, Political Prisoners, Terror Suspects, & Terrorists

<https://www.cvt.org/blog/healing-and-human-rights/reaching-out-survivors-amman-%E2%80%93-and-after-covid-19>

Public Facing Advocacy Writing

CVT Jordan extends interdisciplinary care to refugee survivors of torture, almost all of whom live in urban Amman and nearby cities. In order to come for care, clients must first overcome a number of barriers, the first of which is an understanding that help is available, at all.

Stigma is also a concern many people are cautious about pursuing mental health care out of fear that people will judge them negatively. Another barrier is simply navigating the foreign urban landscape in their new place of refuge.

And now, the COVID-19 pandemic has interrupted the work. Salwa Al-Haj Saeed, outreach worker at CVT Jordan, noted that the team has had to stop outreach activities including home visits and sensitization sessions to provide information and awareness to the communities. Because of the coronavirus, we can't conduct on-site visits or arrange meetings with national and international partners, she said. For now, we rely on phone calls and online meetings to update our clients and contacts on the available services. We suspended the work of our volunteers until we can resume our work directly with the communities again.

Under normal circumstances, to help survivors find CVT, Salwa works with a key group of volunteers who engage in community outreach in a number of forms. This team helps community members understand the care CVT provides, and they identify individuals who are in need of help.

One form of outreach is sensitization sessions, which provide education about mental health and the effects of torture and war trauma, as well as information about the counseling, physiotherapy and social work care offered by CVT. In addition, prior to the pandemic the team conducted home visits when they learned of refugee individuals or families who were experiencing the effects of traumatic experiences.

The volunteer team includes four people, all of whom have important skills to share. One volunteer provided community outreach work before volunteering with CVT, as well as work in education, health and women's and girls' centers. The volunteers share tasks, and those who are Syrian mentioned finding particular satisfaction in their work on communication and sensitization with the Syrian community, as so many have been exposed to torture and war.

One volunteer shared, "I'm part of this because I too am Syrian. He does home visits to meet with families, which he notes often help to reduce the anxiety and pressure many survivors feel after escaping war trauma. Another volunteer said that because she too is Syrian, I have good relationships with the community."

And another volunteer has a medical background and has worked with many organizations and health programs in the past. He is a consultant and lecturer, and does home visits for CVT in refugee neighborhoods where survivors are located. He said, "Our work is not just paperwork; we give an impression of CVT to survivors. Some need more support or services that are provided by other organizations, but we give them information about CVT's care and help them understand the nature of mental health care."

Using information about neighborhoods gathered by the volunteers and Salwa, the team works together to knock on doors and have conversations with people. Once they meet with refugees, the volunteers often find that people need information for a wide range of benefits and service things beyond the scope of CVT's care. One volunteer said, "Often, people think we can do everything. I see different populations of people different nationalities, different needs, different cases. Each has their own needs. She works to identify what their needs are and then educates people about mental health care and psychosocial support."

Of course, before the COVID-19 crisis, this work was done in person. A volunteer commented that some families are willing to spend more time during a visit than others. When we are able to spend the time, it helps to make an emotional connection. We develop trust, he said. And it's a good feeling to make the connection. He said, "Doing this humanitarian work feels nice. We can see that we are making a difference."

Being well known in the community is very helpful, for the community and for the volunteers. It gives a warm, close feeling, a volunteer said. We go inside in order to find people who need help. We sit with them; it's face to face. You see the reality of home and family and the mentality of people.

People are forthcoming once they meet with the volunteers. They feel comfortable enough to express what is going on for them, and they say that they appreciate the patience shown by the volunteers. In addition, CVT's policy of confidentiality is key. A volunteer said "Keeping secrets of the people is unique to CVT. Confidentiality is so important. Many have fear of sharing what they have endured. They feel shame. Another noted that not all can talk about their problems, But we let them know we assume all is confidential. Some information is dangerous. We work to build good trust."

Indeed, the stories can affect the volunteers emotionally. We keep these stories in our hearts for a long time, he said. This is not an easy job.

Another said that its important to do this humanitarian work, saying We show empathy for the people. In a way, we act as a humanitarian mirror. We see the strength in the people we meet.

And the team looks forward to making progress against the COVID pandemic. Although right now we cant screen new potential clients or conduct community engagement sessions for university students or partner staff, we allhope to back to our normal work soon, Salwa said. Its difficult to be away from ourclients, volunteers, colleaguesand the center.



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877.265.8775 cvt [at] cvt.org

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