## **Core Concepts in Service Provision**

With the understanding we're developing about survivors' experiences – the torture and trauma in their home country; the prolonged painful aftermath; and the needs, strengths and resources they bring to our torture survivor programs, we can now consider the services we offer and how they help survivors to heal.

To orient us to some key dimensions of the topic, we'll start with some thoughts from leaders in the field.

Jose Quiroga, MD is co-founder of the Program for Torture Victims in Los Angeles, CA; Roger Gurr is a Psychiatrist specializing in rehabilitation in Australia. This if from their Desk Study entitled "Approaches to torture rehabilitation," a survey of the professional literature published in the journal *TORTURE* in 2001. They lay out broad principles underlying the creation of service programs.

"What is clear, based on quantitative evidence and judgment, is that if services are to meet the needs of their consumers and become sustainable in the longer term, then there are principles that need to be followed. These principles can be summarized as:

- 1. Intervention should be based on the best current knowledge, taking cultural differences into account.
- 2. Interventions must be diverse to meet the range of needs, of both type and severity.
- 3. Participation is essential in determining the best use of resources.
- 4. Participation is essential in developing sustainability.
- 5. Good governance of services is essential for good performance.
- 6. Education and training at all levels will improve performance.

Participation means the involvement of the target community in the creation and management of services."

Another core issue is the attitude or stance that service providers take in their interactions with survivors. Richard Mollica, MD is the founder and director of the Harvard Program in Refugee Trauma in Cambridge, MA. This excerpt is from his book *Healing Invisible Wounds*.

"Listeners need to remember that the inherent purpose of trauma stories is healing and survival. Survivors must be allowed to tell their stories in their own way. We must not burden them with theories, interpretations or opinions, especially if we have little knowledge of their cultural and political background. We must never be intrusive, but remain enthusiastic and sensitive listeners, and the trauma story will flow without any outside influence."

The attitudes of respect, humility, genuine interest, and compassion are essential for our work, recognizing that each survivor is unique and has healing capacity within them.

Orlando Tizon is a sociologist from the Philippines, a torture survivor who has lived in the United States for over 10 years. He is a long time staff member at TASSC, International, the Torture Abolition and Survivors Support Coalition. He wrote this piece by request for this course.

## Torture survivors in the treatment process:

- Survivors are the main actors in the treatment process. It is for them that torture treatment is planned and implemented and they should be seen not merely as recipients of services but as actors actively involved in the healing process. They should be at the center of the entire torture treatment process, from policy discussions, to implementation and evaluation.
- They have the capacity to heal themselves and only they, in the end, can decide to take the necessary steps to heal themselves.
- But survivors' voices are seldom heard because
  - Very few of them will identify themselves as torture survivors. The fear and terror inflicted by the torturer on a victim last for a long time, making it extremely difficult for a survivor to speak about their experience even with close relations, and even in a therapy session.
  - Mainstream society, including government officials, health workers, the media, and lawyers, often fails to ask their opinions and to listen to them.

## When they arrive in a country of refuge:

- They arrive in a society that is often very different from their own with a strange language, culture and social and economic organization.
- Many of them arrive with no friends or relatives, deprived of the social support networks that they are used to in their home country. They live here as exiles, literally uprooted from their home country, culture and families.
- A lot of experiences may trigger flashbacks of their torture, like officers in uniforms carrying guns, police cars and sirens blaring, and images of violence in the media.
- They often approach government offices, hospitals and clinics with fear, distrust and suspicion.

## In working with torture survivors:

• Do not make assumptions that you understand them and grasp what happened to them and what it means to them.

- They come from diverse backgrounds and experiences. Learn from them.
- *Listen with the heart.*
- Survivors do not trust others easily. It will take time and patience.

Now we'll focus on concepts for service provision. The next two reading selections illuminate the balance between, on the one hand, attending to the severe injuries and losses that survivors have experienced and the symptoms they currently suffer and, on the other hand, supporting their resilience and self-healing capacities. An effective healing program integrates these two dimensions.