

# Connections

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Refugees experience so many losses in their lives: their homes, their families, their sense of safety, and, often, their self-esteem. Many are severely traumatized by their past experiences and continue to worry about loved ones left behind. Memories are often too painful to recall and memories before the trauma may seem beyond reach altogether. Their identities change in a new country: they may have had professional careers in their former countries while, in their new homelands, they often must take entry-level jobs in order to support themselves. All aspects of life may seem very strange to them as they confront the realities of their new lives in a new land.

When refugees come to a new country, they also lose that which is familiar and comforting to them, including their cultural arts. Ceremony is an important part of life and, when enacted within the context of one's own culture, it is particularly important as transitions are made. Not only are cultural arts important in making newcomers to a country feel at home, they can also be important means of communication. Traumatized individuals often find verbal communication to be very difficult, especially when they must speak through interpreters and to strangers. Stories often come far more readily and comfortably when told through the expressive arts. This is particularly true when working with children.

We are devoting this issue of *Connections* to the overall topic of "The Use of the Expressive Arts in the Healing Process." The following articles on dance and movement therapy, theatre and healing, story-telling, poetry and journaling, music, the use of art, and the re-creation of *Ayong*, or Cambodian shadow puppets, provide outstanding examples of how the expressive arts can contribute to the healing process. There are important lessons to be learned through these articles and wonderful examples of how the use of expressive arts has made a substantial difference in the lives of those we serve. We hope that our readers will be inspired to look toward these traditions as ways of helping newcomers feel more at home in their adopted country as they reflect on and practice the best traditions of their home countries.

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## **The Body as Voice: Somatic Psychology and Dance/Movement Therapy with Survivors of War and Torture**

*By Amber Gray*

*Movement, to be experienced, has to be found in the body,  
not put on like a dress coat.*

*There is that in us which has moved from the very  
beginning: it is that which can liberate us.*

Mary Whitehouse  
DMT Pioneer

The suffering of people who have fled the horrors of war, political violence, and human rights abuses often represents “the unspeakable.” Survivors cannot verbalize the horrors of their experiences for many reasons: they cannot remember, due to the severity of their trauma, or they try not to remember because it is too painful. Such “terrible knowledge” can be difficult, overwhelming, and shameful to share. Refugees fleeing war have lost everything: homeland, home, cherished possessions, and often, beloved family members. These losses lead to what can feel like a complete loss of one’s own self-identity. Torture is widely known to be a regressive trauma; survivors are stripped of their humanity, dignity, sense of self, and self-agency. While survivors of torture may find that it is unbearable to describe the violence they experienced, they are left with somatic imprints: intrusive memories, nightmares, heightened startle responses, dissociation, and flashbacks. The emotions and excitations, or arousal, that such attacks produce are often necessarily repressed as a means to survive.

Somatic psychology and dance/movement therapy (DMT) are powerful aids in working with the interruption of one’s entire context of life that war and torture create. Somatic Psychology recognizes that the body is the source of feelings, thoughts, emotions, actions, symbols, images, and sensations. The body is a resource for integrating the physical, emotional, cognitive, spiritual, and energetic aspects of the self. Somatic, body-based psychotherapies posit that mind and body exist on a unified continuum; they are not separate. DMT, while a psychological discipline in its own right that focuses more specifically on movement as its primary language, also states that body and mind are inseparable. As such, its basic premise is that movement is the primary language we all speak and is the first language we all share developmentally.

DMT, as both somatic and creative arts psychotherapy, is cross-culturally adaptable as it has its roots in the rituals and traditional healing practices of indigenous cultures from around the world. This is a major consideration in working with refugees and survivors who are fleeing many parts of the world. Because DMT focuses therapeutic work directly on the body and its movement, it provides a uniquely targeted therapy modality for refugees and survivors of torture. Body movement reflects inner states and, therefore, changes in movement can facilitate changes in the psyche.

Theoretically, DMT is holistic; the individual is viewed as an integrated unity with mind and body reflecting and affecting each other. Inherent in this integration is the premise that muscle tonus affects the psychic attitude and vice versa. DMT theory posits that the health-dysfunction continuum is reflected somatically in the body. An early and ongoing focus of DMT is to foster movement patterns that begin to mobilize and release the tensions of chronically tight areas, thereby supporting the expression of repressed excitation and affect. There is relevance in this approach to clinical work with survivors of war and torture. DMT is also an interpersonal therapy; it offers opportunities to explore the process of resocialization vis-à-vis human interaction. This perspective takes into account that healthy human development requires a communicational relationship between an infant and his or her caregiver. This early foundational relationship is carried out primarily through mutual sensory-motor engagement. The fact that movement is the earliest form of communication has implications for clinical work with torture survivors, for there is often a verbal language barrier between client and therapist. Movement is a language that is spoken by all people, everywhere, to some extent, especially in the early part of life. DMT, with its emphasis on movement as the primary means of expression, facilitates access to pre-verbal information. Given the pre-verbal nature of traumatic experience and traumatic memory, the ability to relate to another person through movement is clearly important.

Dance is both art and sacred experience, and in the joyful, ecstatic, and often painful states expressed by many forms of ancient and contemporary dance, the body is the medium for expression and divination.

One dance therapist has written: "By virtue of the non-literal or apparently non-rational aspects of the creative act, deep feelings that defy words can be symbolically represented." Dance is an ancient form of worship in many cultures, and the use of dance in communal rituals of mourning, celebration, and divination is frequently cited. DMT is particularly well suited for group work and it has been shown that group intervention, in general, can address the disruption to one's familial, social, and communal ways of life caused by severe trauma and the resulting isolation that so many survivors experience.

One example from a clinical case demonstrates the power of DMT. I worked with a young woman, a survivor of the war in Sierra Leone, who had been tortured during three different detainments throughout the war. She had also experienced the disappearance of her parents. She was referred to me because, in the course of providing information to her lawyer for her asylum claim, she was unable to speak of her past traumatic experiences. She literally froze, and eventually, when pressed to speak, began to cry uncontrollably. The lawyer's request was that I help her work through her emotions so she could eventually tell her story.

In our first several sessions, she would not speak of anything. Attempts to elicit positive memories and resources in her past or present life were, initially, unsuccessful. Finally, on one rainy day, when we were literally discussing the weather, she shared that she had loved going to fetch water because she loved the water itself. We discussed the texture, temperature, and movement of water and I asked her to show me how she fetched water. Quite enthusiastically, she took a calabash off my wall and asked for a cloth to make the appropriate head wrap for her to carry it. She moved through the act of fetching and carrying water several times, and then I asked her to teach me. From this interaction, rooted in a familiar movement phrase and accompanying gestures, we began to compose a shared dance. Each week, we took turns sharing a movement from our respective cultures: she taught me how to fetch and carry water, how to bathe a baby with the water and then carry it over my back, and how to pound millet. I taught her how to honk a horn and wave someone out of the way, how to swaddle and rock a baby, and how to wave goodbye. We, then, constructed a dance,

based on these phrases, accompanied by live drumming (our interpreter was also a drummer).

One day after we had “rehearsed” our dance, she broke down and cried “for all I have lost.” She then began to tell me, unprompted, what had happened to her family and her village, and to tell pieces of her own story, which included being in a rape camp for several weeks. She has never repeated her entire story, and I have never pressed her to do so. It was and is clear that she is too overwhelmed by the memories; she begins to dissociate and is prone to flashbacks. However, she was able to recall and communicate enough to testify for her asylum claim. When I asked her why she thinks she was able to

do this, she said, “You let me tell my story in a way I love, in dance. I felt safe to say some of the bad parts of my story after that.” Therapeutic trust had been fostered through the use of a culturally familiar language: movement, rhythm, and dance. Using these modes of communication to tell a story, also a tradition of her culture, facilitated increased verbal communication between us. She was also able to access inner resources and strength through the recollection and sharing of positive memories of things she loved to do.

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## Theatre and Healing: Creative Approaches to Addressing Trauma of Forced Relocation

By Sara Kahn

### A Journey Begins

In the Spring of 1995, I had just gotten back from an 8-month stint in Bosnia, where I helped develop a psychosocial program for children and families displaced by the war. As a former actress, I was all-fired up from the often inspiring, sometimes harrowing experiences of that time, and ruminating on one particular thing: the capacity of art to serve as an antidote to war and suffering.

A few months before, I sat with the Director of the National Theatre in Sarajevo, where its director talked about the production of the anti-war musical, “Hair,” he had mounted (and filmed for television broadcast) in 1993. With no money for sets or costumes, with no heat or hot water in the theatre – not to mention the challenge of dodging shells while traveling to and from the theatre – his multiethnic cast of performers transcended atrocities through art. The sometimes satiric, sometimes defiant anti-war songs of “Hair” had touched an earlier generation of young Americans struggling to make sense of the Vietnam war, and now – over two decades later – brought a healing message of hope to thousands of young people in the Balkans, confronting a war that was destroying their country.

The Bosnians had not lost their passion for creative expression under the weight of war; on the contrary, theatre and music were critical avenues of survival. These ventures represented a way to hold on to sanity, civility, and meaning when the world around had gone mad.

Since then, I’ve had the good fortune to be involved with several projects that incorporate theatre as a mechanism for healing from the trauma of war, oppression, and forced relocation. While moving through the life cycle, every culture has rituals to mark important transitions, arrivals, departures, joys, and grief. There are no rituals, however, for those entering another culture; no rituals for the loss of a way of life, of a home, of an identity, of connection with a community and culture. No rituals to welcome to their new home those who have suffered such powerful losses. No rituals to awaken members of the host community to the plight of their new neighbors. Theatre pieces can serve as rituals of psycho-spiritual healing for participants and audiences alike.

The different models discussed below share one binding theme – best summed up in the words of Igor Damaianovic, an actor with the Kosovo National Theatre: “Art must win against evil. It always has.”

### Balkan Theatre Project

In the summer of 1995, the playwright and actress, Ellen McLaughlin - who had recently appeared in the AIDS-era drama, "Angels in America," - received a grant from the Lila Wallace/Readers' Digest Fund. A mutual friend introduced us and the seeds for the Balkan Theatre Project were planted.

We began a series of discussions with Jack Patterson - then Co-Director of Conflict Resolution at the American Friends Service Committee in New York City - who introduced us to participants of the Committee's multiethnic Balkan Dialogue group, who had been airing their feelings about the war since its outbreak. Despite political differences, we all shared the belief that creating a play together would enable the beginning of healing relationships to counteract the ethnic divides, the disempowerment, and the disconnection caused by the trauma of war and relocation.

In the summer of 1996, a multiethnic cast of 15 mainly non-actors was assembled for a one-week rehearsal period and two performances in an off-Broadway theatre, The Classic Stage Company. All participants had roots in the former Yugoslavia; some were first generation Americans, but many others had recently fled the region and were resettling in New York.

In this model, developed with participants, no one was required to tell his/her own story of private trauma. From the very beginning, participants were considered artists, not victims, not patients, not even "survivors." Instead, the essence of their personal stories could be expressed, and shared, and ritualized through an existing text of the ancient Greek anti-war play, Euripides "The Trojan Women," which Ellen had adapted. The play, well-known to all participants who had studied Greek drama in school, was universal enough to speak across ethnic and temporal chasms. The choice to move beyond the text itself, to speak about how the story reminded them of their own experiences, would be left up to the participants in de-briefing meetings following rehearsals.

Each cast member shared a role with one, or sometimes two other members, and were charged with translating the text into their own language. Each part would then be read by the different actors, each

speaking either English, Serbo-Croatian, or Albanian. Differences were overcome in the service of working on a common goal: the staged poly-lingual reading of the play in front of an audience after only one week of rehearsal. Later in the week, cast members were asked to sing traditional songs, and several were chosen and woven throughout the spoken words.

Working with the cast during rehearsals, we tried to understand and utilize the rich cultural traditions of song, deep conversation, coffee, and humor to underpin the ritual of the culminating performance. Cultural norms, which transcended ethnic differences, helped strengthen a sense of community. Pre-rehearsal socialization time was built in to allow for informal linking with a community. Participants shared coffee and snacks in the theatre's café/lobby area before rehearsals, in what became a reasonable facsimile of the ex-Yugoslavia's café society.

The first performance was a sheer triumph of will; some were sick with stage-fright. But cast members relied on one another to make it through, and felt tremendously empowered when they did. By the second performance, the meaning of the words emerged for many for the first time. After the performances ended, emotions ran high, and the cast transformed into a natural mutual support group, accompanied by lots of cigarettes. The impact upon the audience was palpable. One Nazi concentration camp survivor rushed forward to proclaim: "this is my story."

The Project continued through two more summers. By the third round, cast members declared that they had had enough tragedy, and wanted to move on. Instead of the Trojan Women, this time they asked Ellen to adapt "Lysistrata," the Greek comedy about women of warring factions in Greece who unite and refuse to have sexual relations with their husbands until they make peace. Several members of the original cast have gone on to found the not-for-profit group, RACCOON, a support center in New York for people from the Balkans.

### Project An Campe

In 2000, the International Institute of New Jersey's (IINJ) Cross-Cultural Counseling Center launched Project An Campe (Rising Together), a parent empowerment project for Haitian families.

Born out of the frustrations of IINJ's Haitian psychologist, Dr. Evens Lafontant, and his despair when Haitian children were removed from their families by child welfare workers because of corporeal punishment or neglect, Project An Campe sought a creative avenue for educating families about the child protective laws in the United States, while respecting cultural values. The community had become a target for child protective services agencies, and felt blamed and misunderstood. The Project had to develop a novel approach: plays highlighting common parenting dilemmas faced by Haitian families were to be created, and performed by Haitian actors on Creole radio for a wide listening audience.

First, Dr. Lafontant and drama therapy intern Bree Luck, met with community leaders, religious leaders, and parents to discuss the approach, define the themes to be addressed, and recruit actors to perform the plays. They then constructed plays focused on several issues: one play enacted a scenario where a young girl comes home after her curfew and is beaten by her father. The next day, her bruises bring her to the attention of a teacher, who notifies the authorities. In another scenario, a mother leaves her young children unattended while she goes to the market (a common practice in Haiti, where neighbors are always willing to check in on each others' children).

Actors performed the plays in bi-monthly broadcasts on the radio, and callers were then invited to phone in with responses. A panel of experts from the community, including Dr. Lafontant, parents, and spiritual leaders responded to the callers' comments, offering facts about the laws protecting children in the United States and alternative approaches to discipline. Callers were also invited to attend parent education seminars led by Dr. Lafontant at a nearby church.

Religious leaders and community members alike have noted that the Project has broken a long-held taboo against speaking out about the use of corporeal punishment in the Haitian community. The responses are often heated and controversial. At one point, a caller raged on the air at Dr. Lafontant: "If your parents hadn't beaten you, you wouldn't have become a doctor!" Still, it is felt that controversy is preferable to silence. "At least we are talk-

ing about it," remarked the radio station's program director.

It is hoped that this model can be adapted for use in the future with a wide range of other cultures whose approaches to childrearing may clash with American laws.

### **Playmaking for Seniors**

For the last two years, Dr. Vladimir Jelnov, Coordinator of the Russian Program for the Cross-Cultural Counseling Center at IINJ, has led a drama workshop for elderly Russian refugees. Dr. Jelnov - a Russian refugee himself who has worked with this population for over 5 years - recognized the inherent interconnectedness of language and identity, and observed how the inability to speak the language of the new home tended to destroy identity, value, and self worth. He was also acutely aware of the social isolation experienced by many Russian elderly - many of whom were Jewish, highly educated, and disconnected from their families.

Dr. Jelnov enlisted the support of Bree Luck, IINJ's drama therapy intern, to help a group of seniors write a play - in English - and analyze the text, the motivations, and the conflicts of its characters. At the same time, participants would gain comfort in expressing deep feelings in their new language. Each week, participants would explore a section of the play, rehearse it, and discuss the feelings that were generated by the process - all in English. With the help of a native English-speaker, participants gained confidence in using English to express deeper feelings, and thus began to feel closer to each other, as well as less alienated from American society.

The project is nearing the end of its second year, and shows no signs of diminishing. New seniors are hearing from current participants how rewarding the group is and how it helps participants feel valuable and alive. IINJ is currently at work on a grant to enable the project to expand into other ethnic communities.

### **Theatre of Witness**

In response to the terrorist attacks on September 11<sup>th</sup> and the anti-immigrant sentiments and human rights abuses that have blossomed in its aftermath, IINJ has begun work on a new theatre project.

Melanie Trimble, the new Project Director, will be working with consultant, Paula Sepanuck, founder of TOVA – an organization promoting theatre as a tool for social transformation ([www.tova.org](http://www.tova.org)). Ms. Sepanuck has utilized the theatre of witness model for 15 years, most often with disenfranchised groups, from welfare mothers, to survivors of domestic violence, to men serving life sentences in prison.

For this new venture, a multiethnic group of young people, comprised of representatives of ethnic communities most impacted by bias in the wake of September 11<sup>th</sup>, including Arab-American Muslims, and South Asian-Americans, will be assembled. Each will tell their stories – including tales of family members being picked up for secret detention, harassment by former friends and strangers, and the pervasive fear that has replaced the freedom they once knew. Voices of American-born persons will also be represented in the piece, to include perspectives from the so-called ‘host community.’

Ms. Sepanuck then weaves the stories together - with themes she gleans from interviews with other members of the community - and writes them into a play. Participants work with Ms. Sepanuck to finalize the script. They then collaborate together to create a musical underpinning for the text.

The piece will be performed for the first time near the one-year anniversary of the attacks, next September. Performances will serve as the centerpiece for a dialogue among audience and cast on cultural, religious differences, and ways to promote understanding, compassion, and healing.

### A Terrible Weapon

The founder of Theatre of the Oppressed, Augusto Boal, says that empathy is a “terrible weapon” in the fight against suffering, hatred, and oppression. Aristotle notes that “empathy is the emotional relationship established between the character and spectator in which whatever happens to the character, happens vicariously to the spectator.” Through the use of theatre, not only can internal healing happen, but external healing can take place as well.

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## Telling Our Stories: a Morning of Renewal

By *Andre Heuer*

On the morning of December 12, 2001, the Center for Victims of Torture in Minneapolis, Minnesota, sponsored a morning of storytelling, renewal, and respite. The participants came from many organizations that serve refugees within the Twin Cities. They were men and women from many cultures and many places including Egypt, Somalia, South East Asia, Ethiopia, and Bosnia. As a storyteller and licensed clinical social worker, I served as the facilitator of this session that can, hopefully, serve as an example of the healing powers of storytelling.

### Sharing The Stories

Several circles of six chairs fill the room, with a ball of multi-colored yarn and several pairs of scissors in each circle. The participants arrive and take their seats. The facilitator greets them and tells them that he hopes the day will be a time to share their stories, to reflect upon their work, to experience community, to be renewed, and to learn how to utilize storytelling in their work. He begins the session by instructing them to share a personal story of hope. It is to be a significant event in the person's life that motivates them in their work.

A person in the circle is selected to share his/her story. When the person finishes, he/she holds onto the end of the yarn and passes the ball of yarn to another person. As each tells their story, the ball of yarn is unwrapped and passed on. The participants relax and begin to smile as they share their stories. Soon the unrolled yarn becomes a colorful star-shaped web between them.

When the individuals in the circles finish telling their stories, they share the themes of their stories with the other story circles in the room. Their ball of yarn is tossed to all the circles that share a simi-

lar story. There is laughter as the balls of yarn float uncontrollably across the room. Soon the variegated rainbow-colored yarn ties everyone in the room together. When the telling is finished, everyone in the room stands and as they pull and tug on the yarn, the room becomes a colorful kinetic sculpture of yarn. There are sounds of appreciation. When the session ends, participants cut a piece of the yarn to take with them as a reminder that their stories connect them with others.

### Why Use Storytelling?

There is a story of a wise man who always rode his donkey backwards. When asked, "Why?" his answer was so that when he arrived to the place he was going he knew from where he came.

Story or narrative is an essential part of being human. We are storytelling animals. The stories we carry in our souls and hearts condition who we are and how we behave in the world. Our stories give us an ability to reflect upon our lives, to know where we have been, and to determine how we want to live. The sharing of a personal story enables individuals to recover and heal from the strains of life; thus, sharing works by supporting an individual in regaining a sense of self, in integrating experiences, and in acquiring a new perspective. The shaping and telling of story also enables individuals to take ownership of their experiences while helping them to create a healthy detachment.

An equally important aspect of storytelling is that our stories connect us to each other. The sharing of our personal, family, and traditional stories helps us to come to the heart of our experiences as a community, to discover our deeper human connections, and to illuminate the important values found within our community. When people gather together to share their stories in an atmosphere of openness

and tolerance, a sense of trust, cohesiveness, and community develops. It gives persons an opportunity to receive empathy and support.

The primary hope for the participants was that they would feel renewed. As the session ended, participants shared their thoughts. One person said, "I was nervous at first but now I am feeling relaxed."

Another said, "Often people do not think they have a story to tell but we proved today that we all have stories."

And another participant said, "Thanks for giving us the chance to share ourselves with others."

And finally, "...communication, interaction, and good listening are methods for any human being to make life easy, bearable, and practical."

The power of storytelling is simply that it helps us to become more human and compassionate.

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## Poetry and Journaling: A Chance to Express What Can't Be Said

*By Thad Rydberg*

For the past few years on June 26, I have attended gatherings in Chicago honoring survivors of torture worldwide. June 26 is the date the United Nations has designated for this special recognition. There is usually artwork, great food, a sense of solidarity for the survivors, and speakers from various organizations. There are also a few survivors who speak and often recite poems. They come from countries all over the world, such as Bosnia, Nigeria, Guatemala, and Cambodia. Some were poets in their countries before they were tortured while others have only begun to write after having survived. As an art therapist, I have worked with some of these survivors. Others who share their poetry at these events are survivors who are also my work colleagues. I see them every day in the halls. I meet with them on work related matters. We have lunch together sometimes. Nothing would really suggest to you that they are survivors of torture; perhaps, because they have done a considerable amount of healing. But when they take the stage and recite their poetry, a poetry that expresses tremendous rage, silencing sorrow, paralyzing fear, and painful political views, the audience knows, if only momentarily, in a way that

only poetry can offer, what these survivors have had to endure. Their poetry helps us recognize our own humanity and our true nature. It makes so many of us wonder how it is possible that one human being can inflict so much pain on another human being. We, as an audience, bear witness to the survivors' world as we share their pain. After the events, I often reflect on the healing importance for these survivor poets to express their pain and for us to be there to hear it. It always reminds me of the intrinsic healing nature of art. This is some of what poetry and journaling can offer.

Poetry and journaling each lend themselves to intimate expression. Each one has its place as a therapeutic technique that could be utilized with the many different refugees and immigrants who are resettled in a third country. I would like to discuss each one separately in order to point out some of the benefits each can bring to the dynamic processes of healing, adjusting, and re-creating.

Poetry as therapy is used across the world as a means of expression and communication for people suffering from a broad range of psychological difficulties. I have seen free verse poems written and

read by refugees who have survived trauma. In a correctional facility, I have witnessed free association group poetry therapy. In Japan, traditional Japanese poetry such as Renku and Haiku are utilized to work with people living with schizophrenia. These forms of poetry therapy are used in individual, family, and group therapeutic settings.

One of the most important aspects of poetry therapy is to assure the participants that they will write in their mother tongue. This allows for greater and deeper expression in a therapeutic setting. Moreover, there may be culturally specific forms of poetry with which the clients will find it easier to work. It is also true that some forms of poetry are more appropriate with specific clients. For example, Haiku with its three lines of 5-7-5 syllables is beneficial for people living with schizophrenia by giving them a certain structure and guideline to follow. Of course, Haiku would be inappropriate for schizophrenics with severe thought or language disorders but has worked well with those in remission or mild cases.

Whatever language or form of poetry one chooses to use in group or individual therapy, poetry provides the opportunity to express what can not be said in spoken language. In fact, for many refugees who have survived 'unspeakable' horror and trauma, poetry may be a powerful way to begin the expression of their experiences and emotions. It may allow them the chance to probe their true feelings, or perhaps the painful secrets they have been holding on to since they fled their country. I have seen how poetry can allow for the expression of intense anger and despair, as I mentioned earlier. Also, like many other artistic therapies, poetry may seem less intimidating to some refugee clients than verbal therapy. However, for those who feel that it is too intimidating, it is, of course, important not to push them to write. At all times and as much as possible, therapy with the arts should be provided in a safe, non-threatening, and non-judgmental environment.

Journaling is another written method that can allow for one's deeper and more difficult feelings, emotions, thoughts, or beliefs to surface and be expressed. The simple act of writing one's intimate thoughts can have a profound effect on one's state

of being. The act of expressive communication that one believes is private can provide the safety for troubling and often understood feelings to come to light. It has been my experience in working with refugees that some are better able to understand and cope with what they have been through by writing about it in a journal. There is great value for them in simply getting their experiences out and on to paper. It does not change the events that affect them but journaling can lessen the burden of those events. It also helps the counselor or therapist understand the effects of trauma. Journaling works best when it is done daily as it can provide a structure and a ritual or routine for the client. It can give them a place to go with their struggles.

Journaling, like poetry, is certainly not for all refugees. A therapist or mental health worker will have to be very careful in its use. Clients suffering from posttraumatic stress may not find it comforting to write about the events they survived and the emotions linked to them at home. They may find it more consoling to be with their counselor and interpreter, or in a group. They may need to leave their struggles in the therapeutic environment and choose not to carry them home. It is important then, to create a safe therapeutic environment in which the client can write. This need should not be underestimated.

I once worked with a teenager from El Salvador who did not want to keep a journal because he was afraid someone would steal it and discover all his secrets. This was an adolescent who had been forced to survive as a homeless orphan on the gang-ridden streets of San Salvador and so it made sense for him at that time in his therapeutic process not to leave himself vulnerable to any possible threat. Perhaps his fears were unfounded, but, to him, they were not and that is what mattered.

In this brief article, it has been my hope that some of the benefits of poetry and journaling would be recognized. Both forms of expressive writing can lend themselves to certain refugees and immigrants, depending on their needs and struggles. Mental health workers need to be sensitive to their use with the many people for whom poetry and journaling would not be appropriate. For those that do take to poetry and journaling, the benefits may be profound.

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## Music and Healing

**By Katuko T. Coelho and Yara Maria Teshima**

Following the traumatic events of September 11th, the workshop "Resonating in Art and Music" was specifically designed for the therapists and administrative staff members of the Center for Multicultural Human Services in Falls Church, Virginia. This workshop was intended to provide healing opportunities in which there would be art making facilitated by harp music.

Harp music has both vitality and resonance, helping to create a certain mood or environment. This creation of a musical field helps to both unite a group and to facilitate emotional expression. Recorded music does not have the same effect as "live" music since the vibrations are less three-dimensional and, for the most part, lack harmonics. Harmonics happen naturally when a string is struck; they are like faint after-images that happen when the string is vibrating at higher and higher frequencies until it stops. Even if the string is stopped abruptly, harmonics are still present since the other strings whose vibrations are similar vibrate instead. The sound box amplifies harmonics enough so that both player and audience can be bathed in sound.

Music is always carefully chosen for its expressive potential: the initial piece is structured in such a way as to help the group to connect to their own sense of loss and suffering, while the second piece is chosen for its ability to awaken healing responses by focusing on hope and restoration. Af-

ter immersion in sound, the creative experience of drawing and painting bypasses the rational mind and activates the emotional brain and body memories with powerful results. Symbolically, each participant's unique experiences are often eloquently expressed in images of both trauma and recovery. Verbally sharing experiences with the group adds another dimension to the healing process, as seeing the similarities of their experiences in other participants may lessen their sense of suffering and isolation.

Audio and visual arts have their own inherent healing qualities, which, combined, have a much deeper and lasting impact. Soothing harp music is played in the end so that the participants can transition to their regular activities.

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## The Use of Art as a Stress-Management Technique

By Lisa Valiquet

Have you ever had an experience that began as a simple task, and before you knew it, your thoughts, feelings, and emotions became one? The use of art in human services may be beneficial in awakening one's unspoken attention as the individual is connected to his/her inner self. I would like to share with you an experience of a group encounter that was guided by an artist in creating an environment for the use of visual representation of thoughts and perceptions, in an attempt to teach the group members the option of using drawing as a tool for stress-management.

In order to describe the events that occurred during the group time, I must first share some of the details with you. The group consisted of nine people, including an artist, the group facilitator, an MSW student, and six individuals who work directly with refugees. Over half of the group was African, either from Ethiopia or Somalia. The diversity of the group added to the richness of the experience. We began the session with a light-hearted "trust" game to get the individuals acquainted with one another and to gain unity within the group.

The facilitator then gave an overview of secondary traumatization and the effect that the participants' work with refugees has on their own personal lives. Workers may be impacted by the difficult stories of war, violence, and family loss that they hear on a daily basis. The stress of assisting clients finding housing, employment, dealing with issues at school, and language barriers also plays an important and stressful role in the lives of the workers. Some of the professional refugee workers are refugees themselves and they may be reliving some of their difficult memories through their clients. Another stressful aspect of their lives is the idea that they may be working all day to help and assist refugees, to then come home and feel that they are expected to help their neighbors, family, and friends. The working day of a professional refugee sometimes never ends until they go to sleep at night.

Following the discussion of secondary traumatization and identification of stresses within the group, the artist then led the participants in some basic drawing techniques. The fun and casual drawing helped the members of the group discover how they could transfer their feelings, thoughts, and ideas onto paper. It allowed them to become comfortable with the concepts of drawing. Prior to the session, these individuals were assured that they did not need to have any experience with drawing, only an open-mind to the experience. The artist then led the group into a deeper frame of mind by directing the group to identify their perception to two different thoughts: *peace* and *fear*. Each person began with his/her own piece of paper and began to draw the initial perception of the word. As a group, we then passed the paper around and spent a few minutes drawing on each person's paper. One by one, the paper went around and each person added to the initial drawing. It was amazing to see the perceptions each individual had of the same word. By the time the drawings went around the circle and back to the original person, the participants were almost speechless to see what was added to their initial drawings. The distinction between *peace* and *fear* was incredibly interesting.

*PEACE* was a good and relaxing place to start in the group-drawing exercise. Participants appeared to feel comfortable and at ease with their initial drawings. There were a number of pictures of water, beaches, sun, and birds. One picture even had a camel in it; others had boats, houses, trees, people gathering, children, and people smiling. All of the pictures were created by use of light pastel colors. An interesting observation is that the colors used were all light and soft to the eye, as was the texture of the drawing. The drawing appeared to be soft flowing lines across the paper that was done in a carefree and comfortable mode.

*FEAR* was quite different in the perception of the participants. The most noticeable aspect was the dark, hard, hand-crafted lines exhibited on the paper. The majority of the drawings were colored in dark purple, black, red, and green. The techniques used were short jagged edges and identifying vivid clear objects. The drawings included knives, guns, blood, people hanging in trees, jails, people hit by cars, people scream-

ing, bullet holes in people and houses, crying eyes, haunted eyes, hands coming toward a person with long sharp fingernails, an individual tied-up, and a cemetery.

The difference between the two experiences was extraordinary. When passing the *peace* drawings around, it was fun to see what others had drawn. On the other hand, when the pictures of *fear* went around the table, the tension in the room increased. When the first vivid picture of a gun and blood passed me, I knew we were just beginning to get to the truth of the participants' experiences and hidden fears.

After each word, *peace* and *fear*, was drawn as a group, we posted the pictures on the wall for discussion. The *peace* pictures were easy to discuss as the pictures depicted a sense of comfort and safety. However, the *fear* pictures were shocking to view. It was evident that there was a range of different experiences shared within the group that led to such an overwhelming end product. The group was able to discuss the interesting distinction between the end products and feel what those words meant to them as individuals.

The use of drawing was helpful in encouraging individuals to create a sense of who they are and an image of their inner representations. The participants overwhelmingly felt surprised that they had created the end products that were posted on the wall. The end discussion, interestingly, focused on the participants who have never experienced drawing as a means of communication. Many of the issues that the individuals who work with refugees are confronted with are difficult to discuss. This technique encouraged participants to communicate through drawing in a safe and supported environment. The purpose of the session was to connect individuals with their inner selves, and I believe it was successful.

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## AYONG: A Resurrection of an Art Form and the Human Spirit

By Wawa Baczynsky

*(Based on an interview with Marguerita Reczycki, RN, MEd, CS and Svang Tor of Harvard Program in Refugee Trauma in Cambridge, Massachusetts.)*

Throughout the centuries, authoritarian governments have destroyed arts that symbolize cultural and/or religious heritage and beliefs in an effort to control their citizens and to eliminate any personal thought or creativity. The latest destruction we have witnessed is the result of the Taliban rule in Afghanistan where art was destroyed, music was banished, and women were forced to wear *burkas*, rather than their traditional clothing. It was the Taliban in the first decade of 2000, the Khmer Rouge in the seventh decade of 1900 - and we still dare hope "never again..."

As we watch the news unfold, we are reminded, once again, of the basic reality of refugees and the traumatic events that have led them to resettle in a new, unfamiliar country. Safety (ironically enough these days) is the main goal, but once one has arrived, one has to breathe and live. The presence of familiar connections to refugee homelands as they were *before* the trauma, the battle, the war, the loss, becomes so important. Cultural rituals marking birth, marriage, and death are recreated quickly by the family unit. Significant community ethnic holidays, religious or secular, such as New Year's Day, easily grow in any environment where there is a substantial group of refugees from any one place.

In addition to these traditions, there still remains the need for a native cultural activity in order to create that familiar environment which makes one "feel at home." Such cultural activities within the

ethnic refugee community not only solve the “familiar” issue, but also give opportunities for former cultural leaders to reclaim honored positions in the community and recapture former identities, such as that of a theater director or musician, rather than who they have become in their new roles as factory workers or janitors.

Native cultural activity serves the individual and the community well. For the individual, it reestablishes self-esteem; for the community, it creates a venue in which something of the native culture can be depicted and passed down to future generations. Most refugees have an easy time defining that they came to this new resettlement place “for the sake of their children” - for a better future for them. They also hope to pass on some of their beloved cultural heritage to this next generation - be it language, tradition, and/or the arts.

The general American public often sees only the external cultural ethnic manifestations as “cute” or “interesting” - be it tasty food, exotic dance, mysterious ritual, or colorful dress - without the realization of the important role of “self-empowerment” that it signifies. All too often, the public’s recognition of “self empowerment” is only crystallized when the minority makes a statement within the framework of the majority. The public forgets that for these folks to be able to re-establish themselves within their own community, it is this essential self-assertion that often encourages the bolder steps of real interaction with another, perhaps even mainstream, community.

“Weekend reprieves,” at times initiated by various ethnic communities, can relieve the continued trauma that refugees often suffer, even in their new countries. These events help these newcomers reclaim their past roles through a cultural milieu or involvement in ethnic political issues, thereby creating an opportunity to psychologically find a balance in what is seen as a meaningful life in a new environment. One such example is a community’s revitalization of the *Ayong* - Khmer Shadow Puppetry, which empowered a depressed group with no other outlets. This activity provided self-esteem for refugees who were otherwise lost. It made a twofold contribution to the community by exposing and enrolling youth in a native tradition and

validating their talents by performing on both ethnic and mainstream stages.

This case example started when Dr. Richard Mollica, Director of the Harvard Program in Refugee Trauma/Indochinese Psychiatry Clinic (IPC), was interested in learning more about the age-old tradition of the *Ayong*, destroyed in Cambodia during the reign of Pol Pot. Well known for his interest in the arts, Dr. Mollica often sprinkles his presentations with an array of creative expressions, be they art or poetry. He emphasizes the importance of retelling the trauma story, gaining ownership and validation for it, and, thus, being able to integrate it as a unique part of one’s experience.

In 1989, when Dr. Mollica and Ms. Svang Tor were conducting an IPC mental health needs assessment in Site 2, a refugee camp on the Thai/Cambodian border, they learned that a head monk there, the Venerable Pin Sem, remembered the process of making *Ayong*. A project was launched to recreate genuine puppets, to record stories and to learn about the spirits therein, and to breathe back into life one of Cambodians’ dearest traditions. Two years later, in 1991, IPC staff members, Marguerita Reczycki and Svang Tor, recorded on tape and film the process of the making of the puppets. This “recreation” of the *Ayong* was a challenge in itself, particularly in the less than ideal environment of a refugee camp.

The challenges were great: proper material was needed, including a certain kind of leather, paint, and other tools, some of which were available only in Bangkok, six hours away. Craftsmen were recruited from the camp population and worked under the Venerable Pin Sem, the “oral director.” The first attempts were met with great suspicion by the camp authorities. The project paid for a buffalo to be slaughtered in order to get the needed hide, only to be accused of smuggling stolen goods. Religious beliefs do not permit monks to touch animal hide; therefore, the craftsmen had to specifically follow the directions of the Venerable Pin Sem and several monks as they recreated from memory the techniques of drawing, cutting, and painting the puppets. These works of art were both large and small and each one had a specific personality that had to be artistically rendered.

Upon completion, the puppets were blessed by the head monk; it is only when these puppets are properly blessed that they become incarnated with spirits that speak through them. IPC was fortunate in filming an evening performance during which a traditional bonfire illuminated the back of the screen to produce shadows. Even though violence in the camp at that time dictated a sunset curfew, the lure of “the familiar” led both the performers and watchers to attend these shows at their own risk.

Additional challenges arose when planning the transfer of the 120 puppets to the United States: the paperwork and negotiations alone involved a great deal in assuring that these were not “stolen museum pieces.” In addition, extraordinary meticulousness was necessary in the packing of these fragile art objects and transferring them without damage from Site 2 to their destinations. Remarkably, even though there were delays in Los Angeles due to lost paperwork and the boxes were tattered by the time they arrived in Boston, the puppets themselves were not damaged, perhaps protected by the spirits. Even wood-boring beetles in the bamboo sticks were discovered in time to be de-infested before too much damage was done. A custom designed rear-projection screen was created in New York City and each one of the puppets was photographed in preparation for an archived collection of *Ayong*. However, in order to start using them in their rightful roles, a puppet master needed to be found.

During this time, Ms. Reczycki was conducting a Cambodian women’s group at the Lynn Community Health Center that included many severely depressed individuals. One of their activities included the creation of “temporary puppets” out of paper, using flexible straws for support and maneuvering and a refrigerator box as a screen. When first seeing the real *Ayong*, the women became silent, having not seen them since pre-Khmer Rouge 1975. Subsequently, some expressed an interest in learning the art of shadow puppetry and the first student group was formed. At that time, the only known Khmer puppet expert lived in Rhode Island. Ms. Reczycki, a few volunteers, and six students traveled to the neighboring state on weekends to begin learning how to manipulate the puppets, to study traditional folk tales, and to practice the bless-

ing ceremony that must be performed prior to any performance. Remarkably, the students who were still active members of the Khmer Women’s Group in Lynn became more lively and active. What previously had been defined as a passive weekend evolved into a meaningful adventure. In the *Ayong*, they had found something that reached into the “familiar” beyond the trauma, which enlivened them and gave them a sense of competency and self-esteem.

However, there still was a need to find a puppet master in the Boston area. Here, fate again seemed to play its turn. Ms. Reczycki, for some time, had been visiting a severely depressed Cambodian woman in her home; the woman rarely spoke and her husband answered all questions addressed to her. During one home visit, the husband became very emotional and said that he had become blind after witnessing the death of their children in Cambodia. He avoided going outdoors in order to avoid the painful sound of children’s voices. Immediately following this revelation, the therapist, not quite knowing why, asked the husband whether he knew anything about puppets. Amazingly enough, it turned out that he was a puppet master in Cambodia. The missing link was found.

Throughout 1991-96, stories were gathered, costumes were made, and the Cambodian puppet master began leaving his apartment and venturing into his community of Chelsea, Massachusetts. He invited young Cambodian youth, roaming the streets with time on their hands, to join the puppet troupe. Some of the boys were just beginning to be involved in local gang activities and the teacher wanted to offer them an alternative. They created a kind of “puppet gang,” complete with Khmer Shadow Puppet T-shirts, and gathered for weekly rehearsals. Interestingly, the teacher and his wife exhibited a noticeable change in mood and their signs of clinical depression greatly diminished. Both became more involved in the Khmer community and the local Buddhist temple. At the same time, the Khmer women in the original troupe left the project because they were feeling well enough to engage in other endeavors, including employment. Although this was a disappointment in terms of the project development, it was satisfying to watch their self-affirmation and confidence in proceeding to other interests in life.

The collection of traditional Khmer folk tales grew through the hard work of Max Niedzweicki and the artistic troupe offered shows throughout the Boston area, accompanied by traditional musicians. One of the most common tales performed was “Khel and Khouch” (The Bad and the Naughty) which is a moral tale about two boys who get into trouble for skipping school, for lying to their teachers and parents, and finally engage in gambling on rooster fighting. The Boston Foundation provided financial support and local community organizations, such as the Lynn Arts Center and ROCA in Chelsea, offered space for rehearsals. This provided the young troupe with an environment where their talents could be showcased among non-Cambodian peers.

Some refugees from Site 2 camp were repatriated to Cambodia in 1993; in Siem Reap, they proceeded to recreate, once again, a set of *Ayong* which perform to this day. There has been a pause in activity due to funding issues; but, soon the puppets in Boston will be moved into their new home at the Cambodian Mutual Assistance Association of Greater Lowell where they will once again perform their shows and tell their tales. It is hoped that more financial backing will be forthcoming in order to complete the project by producing a documentary showing all stages of the making of the puppets, editing oral histories, and finishing the photography archive to include an additionally purchased 100 puppets to complete the set.

This program has already proven how a resurrected form of traditional art can provide a therapeutic opportunity for both individuals and groups, all the while giving the Cambodian community an invaluable gift of restoration. Depressed women found an activity that sparked their creative response and gave them a reason to interact outside the confines of their home. For the puppet master, a validation of a reclaimed role broke the bounds that kept him isolated following the death of his children and created a following of enthusiastic youth through which both his and their self-esteem was enhanced. Finally, the age-old spirits spoke through the puppets by protecting them during a tumultuous journey from a Thai refugee camp to the United States, by giving the beetles a sound warning of impending destruction if not treated, and by giving voice to numerous individuals who were able to reach beyond the Pol Pot trauma and recreate the stories and melody of something “familiar” from a time long gone.

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## Register Now for Refugee Mental Health Conference

The National Alliance for Multicultural Mental Health will be holding its next annual conference in Atlanta, Georgia, June 8-11, 2002. The Bridging the Gap Project will co-host the conference. Watch for more information on the IRSA website: [http://www.refugeesusa.org/who/prog\\_info\\_sp.cfm](http://www.refugeesusa.org/who/prog_info_sp.cfm). Events include a special one-day Institute (June 8) to provide four simultaneous full-day trainings on the following topics:

- Assisting Refugees and asylum Seekers in the Public Mental Health System: Overcoming Linguistic, Cultural, and Systems Barriers
- Basic Therapeutic Skills
- Mental Health and Refugee Youth
- Integrating Indigenous Practices into the Healing Process

Topics Presented at the Conference will include:

- The Relationship of Civil and Human Rights to the Mental Health of Refugees and Minority Americans
- The Mental Health Consequences of the September 11 Tragedy on Refugees
- Integrating Mental Health into Resettlement
- Cultural Considerations in Working with Specific Refugee Groups and Special Populations
- Evaluation, Sequelae, and Care of Survivors of Torture and Extreme Trauma
- Clinical Work with Refugees
- Refugee Program Implementation, Funding, and Policies

- Establishing a Continuum of Care Through Communal and Alternative Methods
- The Resilience of the Human Spirit
- Use of Art in Healing
- Refugee Mental Health in the School System
- Children, Adolescents, and their Families
- Legal Issues for Mentally Disabled Non-Citizens
- Caring for the Caregiver and Caregiver Stress
- Innovative Approaches for Mental Health Treatment

Mary Pipher, Ph.D., author of Reviving Ophelia: Saving The Selves of Adolescent Girls will present a keynote address about her experiences in researching her new book about refugees entitled, The Middle of Everywhere: The World's Refugees Come to our Town. The book will be available at the conference and Dr. Pipher will be available for a signing.

IRSA is applying to the National Association of Social Workers for Continuing Education Units (CEUs).

The fee for the entire conference is \$175 before *May 1, 2002* and \$200 *on-site*. The June 8, 2002 Institute has a separate fee of \$80 and the one-day and student rate for the conference itself is \$80.

For further information, contact Ellen Mercer at [emercer@irsa-uscr.org](mailto:emercer@irsa-uscr.org) or via telephone at 202-797-2105.

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***The National Alliance for Multicultural Mental Health offers expert technical assistance through:***

**On-Site Training and Consultations** tailored to each agency's needs. Topics have included:

- Refugee mental health
- Cultural backgrounds of newly arrived groups
- Integrating resettlement and mental health services
- Innovative approaches to working with special populations:
  - Children and adolescents
  - Refugee women
  - Older refugees
  - Survivors of torture and extreme trauma
- Addressing family conflict
- Models for using interpreters
- Working with the schools
- Community approaches to mental health
- Working with natural support systems and indigenous healers
- Creative therapeutic approaches using the arts and media
- Spirituality and mental health
- Stress management and self-care for service providers

**Community Workshops** aim to increase communication and coordination among refugee-serving agencies in communities. IRSA and its partners will work closely with your agency to organize a workshop, tailoring it to agency and community needs.

**National Training Conferences**—Local and national service providers and experts in the field offer sessions crafted to participant needs. These gatherings have proved an excellent opportunity for networking, sharing experiences, and learning from one another.

**Best Practices Documents** have been and are being prepared on a number of subjects, including "Lessons from the Field: Issues and Resources in Refugee Mental Health" and "Mental Health and the ESL Classroom," currently on the IRSA website: [www.refugeesusa.org](http://www.refugeesusa.org). Additional documents are in preparation and will be announced in future newsletters.