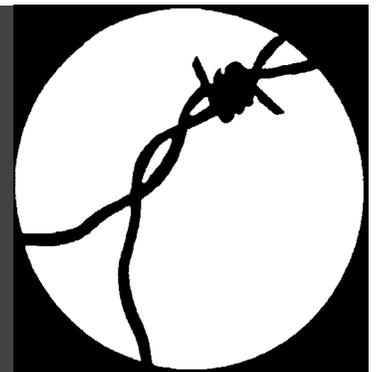




Helping Survivors of Torture Since 1977

Special 25th Anniversary Issue

First Light



A Quarterly Publication of the Canadian Centre for Victims of Torture (CCVT)

Fall/Winter 2001



First Light, which is published semi-annually, is intended to inform the interested reader about torture, its effects and what we can do in aiding survivors to overcome their experience of torture and war. CCVT views itself as part of a larger global community and is committed to the struggle for human rights, justice and the end of the practice of torture.

We chose to call this publication *First Light* because as the first light before true dawn, it symbolizes the first ray of hope for survivors of torture.

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Mandate

The Canadian Centre for Victims of Torture aids survivors in overcoming the lasting effects of torture and war. In partnership with the community, the Centre supports survivors in the process of successful integration into Canadian society, works for their protection and integrity, and raises awareness of the continuing effects of torture and war on survivors and their families.

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Editor's Note

By Michele Millard, CCVT Volunteer Coordinator



2002 marks the 25th anniversary of the Canadian Centre for Victims of Torture (CCVT). It is an ambivalent triumph: on one hand, to have 25 years of successfully providing desperately-needed services to survivors of torture and war, and on the other hand, recognizing that the fact of our very existence must lie in acknowledging the prevalence of this particular kind of evil that appears to be so endemic in human society. Indeed, on a worldwide basis, there is cause for both great hope and sorrow. When CCVT was founded in 1977, there was only one other organization in the entire world that openly provided support and rehabilitation to survivors of torture— the International Rehabilitation Council for Victims of Torture (IRCT), which was founded the previous year – and since then over 200 such organizations have been created across the globe. The fact that these organizations exist at all is completely due to the courageous and ethical positions taken not only by professionals in the healthcare and legal communities, but by members of the general public as well.

It is not easy to create an organization, particularly one that deals with such painful and traumatic experiences, but it is a fascinating process to observe. This edition of “First Light” documents, albeit incompletely, the incredible amount of grassroots effort that went into the creation of CCVT. If we were to be traditional about this, we would use 1983 as “Year One”, since that was when CCVT was legally incorporated as a non-profit organization. However, it took seven intense years of activity, public

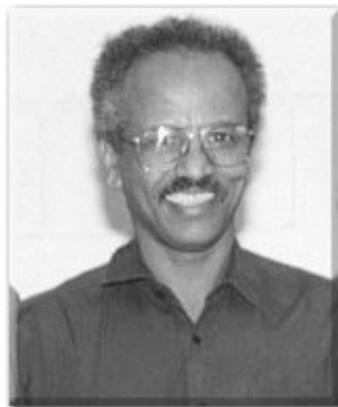
education, community development and sheer hard work – all of it unpaid - on the part of the founders even to be able to get to that place, and we must acknowledge this astonishing accomplishment.

As part of our 25th anniversary celebrations, we decided to dedicate this issue to our founders. As a volunteer-driven organization, what better way to do this than to send out current CCVT volunteers to interview the original CCVT volunteers? And we did precisely that, asking, in a general sense, the following questions: What prompted you to get involved with starting an organization like CCVT? What did you hope to achieve in creating such an organization? What was it like to start an NGO in Canada, especially one that dealt with such trauma? What was it like in the beginning – getting space, staff, clients, volunteers? Why and how did you decide on a community development model for the organization, rather than a clinical one? Can you talk about what some of the challenges were? Rewards? Triumphs? How did you know you were helping – what results did you see in the clients? What did you do to convince the Canadian public and government (and others) that the work of CCVT was important? Where do you see CCVT (and organizations like it) developing in the future? And finally, we made sure that the voice of the survivor was also not forgotten as you will see in the article on surviving torture.

We hope you find the results as powerful and affecting as we did.

From Our Archives

By Mulugeta Abai, CCVT Executive Director



The 1960s and '70s were eras of energy and revolution worldwide. In Africa, people were breaking loose from long-time colonial control and fighting for their basic rights and dignity. In Europe, students and intellectuals had opportunities to demonstrate their force and power. In Asia, particularly in China, the campaign towards communism was fueled with raw and even blind nationalism. In the United States, the Civil Rights and Anti-War movements were in full swing. In Canada, things were changing - John Porter's *The Vertical Mosaic* made extraordinary information available for those who were concerned about, and willing to know about Canadian society. Pierre Elliot Trudeau made multiculturalism the official policy, and a legal definition for refugees was incorporated into the Immigration Act of 1976.

The 1970s saw Canada begin to accept immigrants and refugees from countries other than Europe. This flow presented challenges in terms of care and support for newcomers. Among the refugee populations were people who had been tortured and traumatized and who started showing up in doctor's offices with complaints about torture. At the time, awareness of what refugee torture victims went through was low and medical professionals were shocked and anxious as to what could be done to attend

to the needs of this group of people.

In 1977, psychiatrist Dr. Federico Allodi and family doctor Dr. Philip Berger began to see victims of torture as part of their practices. Soon, other physicians in Toronto and elsewhere in Canada started to participate in this work and in the spring of 1978, they established the Canadian Medical Group of Amnesty International. Under its auspices, physician members and their associates received training to treat and document the effects of torture. In 1979, members of Amnesty International's Canadian Medical Group organized a seminar for physicians, which was attended by 100 people.

The Canadian Medical Group of Amnesty International was able to provide assessments for torture victims but could give little or no organized help beyond the initial contact. Physicians soon realized the need for a structure, a centre where the needs of survivors could be attended. They subsequently embarked on public education initiatives and the first paper on working with torture victims in Canada was presented at an international conference in Athens by Dr. Philip Berger. Dr. Federico Allodi participated in the Amnesty International Medical Mission to Latin America and spoke frequently on psychiatric aspects

of torture at both domestic and international conferences. Their studies and others' started to appear in major journals. Media coverage on torture also started to appear in newspapers, to be heard on radio and shown on TV.

In 1982 Drs. Allodi and Berger, and Dr. Donald Payne, Ms. Genevieve Cowgill, and others met for several months and formulated action plans and the Canadian Centre for the Investigation and Prevention of Torture (CCIPT) came into being. The Centre had three objectives:

1. To organize care for persons who have been tortured
2. To coordinate research and investigations arising from the needs of persons who have been tortured
3. To educate health care professionals in the work for torture victims and in opposition to the practice of torture.

Major Activities were:

1. Coordination of professional services and arranging assessments of a victim's physical/psychological condition and to provide treatment
2. Community support through a volunteer program to offer basic information on relevant life skills, and assistance in adapting to the new society
3. Public information service and consultation

The founding members developed the Centre along a community-based model as opposed to a purely medical model. While the choice of a community-based model was decided by a number of factors, above all, it was a product of social and historical de-

velopments. Early on they realized and understood that victims need a wide support network in order to rebuild their trust, confidence, and self esteem.

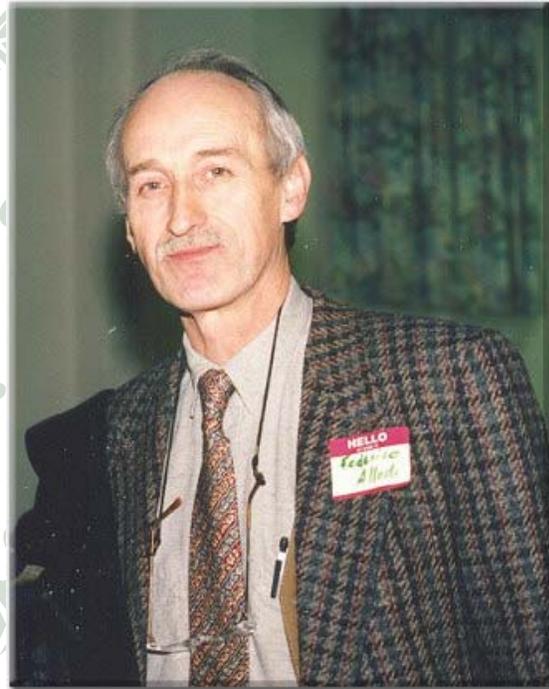
In 1983 the first Board of Directors with the following responsibilities was elected: Dr. Federico Allodi, Chair; Trevor Bartram Legal Advisor; Philip Berger, Educational Program; Michael Berman, Secretary; Davis Etlin, Referral Systems; Ron Hanson, Treasurer; Margaret Michellepis R.N., Volunteer Programs and the following were elected as Members at large: Sister Mary Alban, Eva Allman, Ted Gordon, Fionula Martin, Frederica Rotter, Edmund Sullivan, Jermy Fox and Nestor Fantini. Many more joined the group over the years and the Centre has become one of the most respected, innovative organizations in the world. Special thanks is due to all founding members for their vision and setting the organization on a solid foundation but also to all others who have provided much needed support and guidance.

The movement against torture continues to grow worldwide and in the current geopolitical environment, it is more important than ever for the whole community and for that matter the global community to join together to reaffirm the absolute prohibition of the use of torture and the shared commitment towards its eradication.

On June 26 this year, CCVT will organize its fifth consecutive campaign to commemorate the UN International Day in Support of Victims of Torture, to look back and see what has been learned from its 25 years of service to survivors and their families and to work together with the community to meet the challenges to overcome torture.

A Conversation with Dr. Federico Allodi, CCVT Founding Member

*Interviewed by Nadia Halim, CCVT
Volunteer*



Why has Dr. Federico Allodi, psychiatrist and professor, devoted much of his professional life to helping refugees? “What was my internal motivation? This is difficult to explain,” he muses. “Motivation is a very complex thing. It might have to do with my experience as a child in the Spanish Civil War.” Allodi was five years old when the war ended, but he remembers hearing the adults around him talk about it “constantly” throughout his childhood and adolescence. One uncle was tortured to death by the Republicans; another was imprisoned by Franco. Young Federico quickly learned that in societies brutalized by torture, “politics play very little role – it’s the cruelty or kindness of people that matter most.”

In the mid-1970s, while practicing psychiatry and teaching at the University of Toronto, Allodi began to encounter a group of people who had suffered considerable cruelty, and were in need of a little kindness. “I had seen a number of patients coming from Latin America, usually refugees. They were referred to me by priests, by lawyers and by family physicians. They gave these unusual and terrible stories of being imprisoned and tortured.” Such cases were almost unheard of at the time in First World countries; “I’d never heard of this, so it was rather shocking,” Allodi remembers.

A friend of Allodi’s, family physician Philip Berger, told him about a patient who displayed great “reticence and sensitivity.” Berger had finally realized the man had been tortured. “This patient had more problems than [Berger] could deal with: legal necessities, housing, jobs, language, general medical insurance, and so on,” recalls Allodi. “I said, ‘I know what you mean, it’s a terrible situation, I’ve already seen 26.’”

The pair decided to bring together a group of people who might be able to help. “We called anybody who had anything to do with refugees. There were inter-church people, there were lawyers, physicians, Quakers and so on. We got together on the 8th of May, 1977, in my house, here in Toronto. When we finished, I told Philip, ‘This has been the first meeting of the medical group of Amnesty International.’”

They soon realized, however, that “the mandate of Amnesty International is merely to investigate and report torture; it provided no resources for education and treatment. So we decided to create our own organization. It was very much the same style of Amnesty International, but the support that volunteers gave was more engaged.” The idea of “befriending” had been used in the UK by the Fish People, a group that sup-

ported suicidal psychiatric patients. Allodi, Berger and their growing pool of cohorts recognized that “a friend with a particular mission and training and attitude” could be very useful to torture survivors as well.

Funding did not arrive until 1983. “We were functioning before that with... I don’t know what money!” says Allodi. Volunteers did all the work, and nurse Genevieve Cowgill’s kitchen “was the office of the CCVT for many years.”

The structure and mandate of the organization was calculated very scientifically; Allodi was teaching the Mental Health Program Administration at the School of Community Health at the time. “We wanted to be oriented towards the community. Our mission would be community integration for refugees, rehabilitation of victims. We did not want to label patients immediately.” Only about 16 to 20 per cent of torture survivors, he explains, will develop severe symptoms and require specialized medical attention. “The rest, with social support and their own resources, will manage very well.” But it was essential that they receive that support. “They were immigrants, apart from being victims. They were refugees, people fleeing from other parts of the world, they had no networks here, no community. Some of them would face discrimination in housing and jobs and so on. This made us define the services in a very broad way.”

The approach proved to be exceptionally efficient. “We were creating an enormous amount of services, even though the resources we had were very limited,” says Allodi. In Sweden, he visited a facility “where 3 or 4 psychologists and support staff would see in a year 126 new cases. We [CCVT] climbed very quickly to 800 new cases a year. Over 5,000 visits a year.”

In addition to providing direct services, the staff of CCVT worked to educate the government and the public. A group including Allodi and Berger travelled to Ottawa to train customs officers who dealt with incoming refugees at Pearson International Airport. The officers couldn’t understand why a person would arrive at the airport, claim to be “visiting,” then claim refugee status a few days later. Why would they lie? The CCVT doctors explained that in many countries, including Chile, torture and repression were carried out by the “customs police.” Imagine being one of these refugees, said Allodi: “The customs police tortured me yesterday, I escaped

through Guatemala or Mexico, I arrive at the airport, and then another customs officer says, ‘What are you doing here?’ I’m not going to say, I’m escaping from you!”

Allodi, with the CCVT, was also instrumental in helping to set up clinics in several Latin American countries to treat survivors of torture. Clinic administration in countries suffering under violent regimes could be tricky, to say the least. Allodi once travelled to El Salvador to meet with the board of an organization that ran a clinic for the poor, and wanted to set one up for victims of torture and violence:

“Just going to the clinic was an incredible experience. You cannot go to a taxi and say, ‘Take me to the human rights commission.’ You don’t know, the driver might be a spy. So I had to say: ‘I’m looking for a clinic for children where a friend of mine, my girlfriend, an American nurse, is working.’ If you put sex in the middle, people will take the red herring, and they won’t question anything!” He laughs.

“The driver drove me to all kinds of clinics that had nothing to do with the poor -- the opposite, they were very right-wing private clinics. Finally, I located the place. I realized this was the right clinic -- it was attended by people coming from the provinces and so on. Quietly, I made myself known. But... ‘Where are the directors?’ I asked. ‘Oh, all of them are in prison!’ So I asked, ‘Where is the prison?’ ‘Well, we’ll take you there.’

So Allodi and an American lawyer went to the prison, and there they met with the board of directors: “In the prison! We sat at a table in the garden, and the chair [of the board] sat at the table, and I gave them my proposal. They said, ‘Okay, we’ll deliberate and we’ll give you an answer in half an hour.’ So I had a look around the prison. In half an hour I returned, and they said ‘Fine.’” Allodi and the directors signed the contract, witnessed by the lawyer; Allodi sent it on to the World Health Organization head office in Geneva, and the organization received US\$20,000 to start up a new clinic.

Dr. Allodi has seen many changes in the international situation since that first meeting in his house. “The world is not the same as it was 25 years ago; the delinquent countries are not the same. It is shocking to people and they’re not accepting that it might be us who are violating hu-

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man rights.” He cites the US’s violation of the Geneva Convention in its treatment of Afghan prisoners as a current example, and notes that Canada is complicit in this situation.

If CCVT is to survive, he stresses, it must remain aware of the changing needs of its clients. “You have to know this society very well, you have to know the problems of the new refugees. The gov-

ernment will bypass you if they realize you’re obsolete.” Since the organization began, he says, immigrant communities have grown and developed in Canada, and can now do some of the work of providing newcomers with social support. CCVT must recognize this and focus on those areas where the need is greatest.

A Few CCVT Founders



Left to right:
Diane Posthelwaite, Susan Beattie,
Brent Knazan, Trevor Bartram, Ted
Gordon, Paul Bentley, Dr. Phillip Berger



“Being a Canadian Citizen” Philip Berger, MD, FCFP, CCVT Founding Member

Interviewed by Jean Hackney, CCVT Volunteer



“A citizen of Canada has a job description - a duty to hold the State responsible for its behavior,” says Dr. Philip Berger, one of the founders of the Canadian Centre for Victims of Torture (CCVT). According to the Canadian Immigration Centre website, when you become a Canadian citizen you take on the responsibility to care for and protect our heritage and environment, obey Canada’s laws, express opinions freely while respecting the rights and freedoms of others, and eliminate discrimination and injustice.

When asked about his involvement in the work with torture victims 25 years ago, Berger is quick to emphasise that he was just doing his job as a citizen of Canada. He describes himself back then as an upper middle class kid whose dad was a doctor. He had no idea about how the world worked. As a political activist, Berger was shocked and outraged that governments torture people for their political beliefs and for expressing them.

Berger’s involvement with victims of torture began with one phone call in early 1977. Brent Knazan, a friend, and a refugee lawyer at the time called to say he had a woman client from Chile claiming refugee status who said she had

been tortured. She said she had been beaten around the breast, among other things. Knazan sent her to Berger because he was concerned about her medically. Berger examined her, got a very lengthy medical history and put together a thorough report letter for the lawyer. When Knazan got the letter he immediately saw the value of it in the refugee determination process. Berger’s letter was the medical evidence needed to support his client’s allegations of torture. The letter increased her credibility in the refugee determination process.

Knazan’s colleagues quickly got wind of the value of such a letter to a refugee applicant’s case and soon Berger was flooded with phone calls from refugee lawyers. Berger was amongst a few family physicians in Canada to work with the refugee lawyers on claims of physical torture, and the hours that he put into the medical examinations were long, lasting up to four hours with the assistance of an interpreter. The process involved exhaustive documentation. Berger, an energetic and driven young man, spent much of his free time, including most weekends, just to examine these people. He explained how painful it was to listen to their stories. As a physician bearing witness to the torture, Berger felt he had a duty to act

politically, beyond just providing the traditional medical intervention service to the patient. Berger, then in his late 20's, responded with outrage to the stories of torture, not in an unproductive fashion, but more as a channelling of energy. He realized that alone he could do nothing about the atrocities that were going on, so, he phoned a few other physicians and specialists to get them involved. At that time, none of the refugees had access to the Ontario Health Insurance Plan (OHIP) so these specialists had to agree to see them for free.

A significant event in Berger's early work was when he met Dr. Federico Allodi. They met after Berger heard from a South African friend, who was active in anti-apartheid politics, that an "unusual psychiatrist" had joined a demonstration in downtown Toronto against Noranda, a big investor in Chile at the time. According to Berger's friend, Allodi had told the other demonstrators that he was at the demonstration to protest against companies that invested in governments who were responsible for the torture of some of the patients in his practice. Hearing this, Berger called Allodi to see if he would be interested in working with him. They have remained friends ever since. Working very closely together, they established a medical group to work with refugees who had been tortured. Soon after, Dr. Donald Payne, a psychiatrist, and Dr. David Etlin, a general internist, and community volunteer Ms. Genevieve Cowgill, joined the group. By the spring of 1978, the Canadian Medical Group of Amnesty International (AI) was established.

From the start, Berger remembers having the support he needed to do the refugee medical work, even if there were difficulties in getting some things done for free at St. Michael's Hospital, where he worked at the time. He recalls having to face one of the hospital Chief Administrators, a Sister of St Joseph's, a stern-faced woman who called him into her office one day to call him on why there were suddenly such a lot of people coming into St. Michael's Hospital who didn't have OHIP. Berger explained the difficulties he was having in this work, particularly with ordering X-rays through the hospital Radiology Department for fractures. Of course, he added, OHIP was not paying the hospital for any of these services at that time. The Sister's only response was "fine". After

that meeting, Berger said, he never again had any trouble in getting X-rays.

Berger was consumed about what to do, how to get the word out about torture, how to make governments accountable, how to join up with others, lawyers, church groups and how to provide services for the new refugees. He had to go out into the Toronto community and speak a lot, talk to people, and give interviews on the radio and TV about the torture that was happening in the world. "It was the political part that took the time to organize," said Berger. In talking with him, it is easy to see that this part of the Centre's work excited him - the political part, the one that challenges a country's status quo.

Philosophically, Berger felt his role was to listen and "bear witness" to the intimate historical details of what happened to victims of torture (rape, other types of sexual abuse, whipping, electrodes, cigarettes burns). He felt it was necessary to take on the responsibility to disseminate that information bringing it to the media and publication in medical journals, which he did.

Part of the work that Berger and his colleagues did in the early years was around immigration policies. Berger and Allodi joined with other activists to shake things up in Ottawa as they lobbied to get immigration refugee policies changed. They criticized Canada's immigration policies, attended to protestors who were on hunger strikes, and became involved with activist George Cram of the Interchurch Committee on Human Rights in Latin America. Berger spoke up at bank shareholder meetings against investments in countries that tortured citizens. "I was viewed dimly, [people] did not like my politics," he recalled. Other less public people involved in the Centre's work, such as Dr. Allodi and Dr. Payne and Ms. Cowgill, engaged in applications for government funding. Berger remembered the first dollar amount that the Centre received from the Settlement Branch of Immigration Canada was \$12,000.

Berger noted that there was a lot of media coverage during those early years. "We began to look like a good thing to the Canadian Government." Berger said the Government began to see that they were not a "kooky" organization. As time went by, funding was increased and the Centre

became a United Way, permanently funded agency. “It’s about the highest you can reach,” he said. In 1978, the *New England Journal of Medicine* published one of Berger’s letters protesting the disappearance of an Argentinean obstetrician who had a patient who was an activist. The woman patient’s husband was an activist – the government threw him into jail. More visibility for Berger’s political work came in 1979 when the *Canadian Medical Association Journal* published a paper entitled, “Medical examination of torture victims applying for refugee status,” co-authored with L.M. Cathcart and B. Knazan. The article discussed the physical findings of torture and presented protocols for the use of physicians in their examination and subsequent medical reports on applicants for refugee status in Canada. It was a wake up call not only to Immigration Canada to show them that torture was real, but also served an educational purpose to the public. “But, Allodi was a true academic,” said Berger, “which I wasn’t”. Allodi published papers and spoke widely on torture at many conferences. Berger and his colleagues at the Centre sponsored a few conferences locally to try and bring in a few more doctors.

Berger still fondly holds onto the image of climbing the stairs at the first office the Canadian Centre for Victims of Torture had on College Street, and taking the little elevator up to two rooms they used. He remembers the place as very busy yet warm and welcoming. The Centre’s mandate was broad at that time, but its work was limited initially, because it didn’t have the resources. The primary reason for the Centre was to organize and secure physician, dentist and lawyer services. The refugees needed support to integrate into Canadian society, they needed to see people who were not going to question

their credibility, somewhere that they could go to where they would be accepted unconditionally. The request for medical examination by refugee lawyers was needed legally for the refugee determination process. The next immediate step for the Centre was realizing that it needed settlement services. The service side is the Centre for Victims of Torture – somewhere refugee applicants can go to that has a welcoming and friendly environment. If they want to talk they can talk, if they don’t they don’t have to. The Centre was also a central place to record -what it was doing to engage a political process. Also, Berger remembers doing his fair share of licking envelopes, stamping envelopes, mailing things, Xeroxing in the years leading up to the founding of the Centre, which are all important organizational work. Establishing a Board of Directors took time to get rolling. Another phase of the work was to form the Centre to coordinate services and activities. They also set up English as a Second Language (ESL) classes, and established a Volunteer Coordinator who recruited volunteers to accompany clients to appointments or to provide transportation.

Berger retired from the Board of Directors at CCVT in 1988 as he became fully busy in the AIDS epidemic, which was exploding in Toronto around that time. He continues to be a strong supporter of the CCVT.

Today, Berger is the Medical Director of the Inner City Health Program, and Chief of the Department of Family & Community Medicine at St. Michael’s Hospital in Toronto and is an Associate Professor at the University of Toronto. He also continues to take his citizenship responsibilities seriously with his frontline work as an AIDS physician.



From left to right:
Jaap Walkate, UN Voluntary Fund for Torture Victims, Sri Sivakumaran, former Board Member, Dahir Afgarsh, former Staff

"Uniquely Canadian" Dr. Donald Payne

Interviewed by Connie Karpel, CCVT Volunteer



THE BEGINNING

In 1978, when the seed of CCVT was started as Amnesty International's Canadian Medical Group, Dr. Donald Payne answered an ad for doctors in AI's newsletter "The Activist". He had been a supporter of Amnesty International for many years and was looking for a way to become involved.

Starting in the late 1970's, due to military rule in both Chile and Greece, Canada (along with Denmark) started to receive an influx of refugees. There are two ways refugees can come into Canada: the official way and the unofficial way.

Officially, if someone wants to apply for refugee status and enter Canada they must get themselves registered with the United Nations. However, this process can be time consuming and place hardship on those fleeing difficult situations.

The A.I. Canadian Medical Group was created to serve clients who generally came via the unofficial route. Once they landed in Canada they applied for refugee status and this was where CCVT came in. In order for clients to substantiate their refugee claim, CCVT's doctors provided the necessary medical assessments.

CRYSTALLIZATION

In 1981 Dr. Payne became coordinator of the national Amnesty International Medical Group. This group consisted of concerned medical professionals from cities such as Vancouver, Calgary, Halifax, Saskatoon, and Toronto.

In 1983, as the Toronto-based group kept growing and maturing into an organization which focused on refugees inside Canada and their concerns, rather than on prisoners outside Canada as did Amnesty, CCVT was officially incorporated.

BIRTH OF CCVT

At the very beginning, CCVT was not a place but rather a telephone number for referrals. Soon however, they were able to get office space at the old Doctor's Hospital near Kensington Market.

Initially, CCVT was created to provide medical assessment. Then, the doctors, nurses and lawyers involved recognized that people also needed befriending. Thus the Befriending Program was created to help clients get established and deal with things and integrate into Canadian society. The development of CCVT has been organic, ongoing, and evolving around the needs of its clients.

CCVT EVOLVES

As more physical space became available to CCVT, counselors came on board and then began the development of social support groups. For example there were many Somali women at that time who had experienced various forms of sexual abuse, and the groups offered them the opportunity to get out and socialize and talk a bit about their problems and feel less ashamed about them. There was an ongoing development of support groups around communities of refugees.

During the early stages of CCVT, the doctors met once a month to discuss and report on their findings, any upcoming problems; basically to have their own support group as they were learning how to deal with the unique problems facing refugees. As time went on, these meetings dwindled to a few times per year as the doctors became more experienced and comfortable in what they were doing.

The first centre for victims of torture started in Denmark, and to this day continues to have a medical / clinical focus. However, the community orientation of CCVT seemed more helpful to treating people and getting them integrated into the Canadian community. Dr. Payne feels that this approach to helping people in a broader based way is uniquely Canadian. Not only are there physical and psychological problems, but clients also have difficulties with housing, welfare, and learning English, and settling into a new country. The needs are social as well as psychological.

Things started slowly with CCVT. There were low numbers of refugees, which gave CCVT volunteers time to adjust, work out what would be important, and set priorities on what people would need. One of the first needs identified was for English classes / ESL classes, taking into consideration the unique problems of torture victims, such as poor concentration and the need for fre-

quent breaks.

CHALLENGES

The major hurdle CCVT faced was getting a location that was somewhat permanent. From Doctor's Hospital they moved to Major Street, then to a church basement for a couple of years, then to offices at Yonge & Queen for another couple of years, then to Merton Street, and finally to the current location which CCVT owns. Until they managed to purchase their present location at 194 Jarvis St., these constant relocations created a lot of disruption for both staff and clients.

REWARDS

The major satisfaction for Dr. Payne has been the positive spirit of community fostered by the work at CCVT, sharing a common cause that everyone is working towards. Socializing with clients at holiday parties, summer parties, and getting to see them as people and to see their culture in music, dance and food have been added benefits of being part of CCVT. To see people moving on and getting themselves together and becoming independent and integrated into Canadian society has given Dr. Payne a very rewarding feeling.

CCVT'S FUTURE

CCVT can continue in its role of a centre for people to go and be referred. It can also play an educational role, for the public in general and specifically for immigration officials in their training programs for new members. CCVT can serve to train other organizations. CCVT will continue to be there to meet the need of its clients, and as different needs come up, CCVT will evolve to meet those needs. The biggest hurdle facing CCVT is finding a stable form of funding. Not having to survive from grant application to grant application would free up time to further expend and develop programs as they are needed.



Recipients of Ontario's Volunteer Service Award
Left to right: CCVT Volunteers Calvin Dadian, Dr. Jill Blakeney, Abdoul Darbo, Diane Dadian

Doctors and Lawyers Working with the Community.

Based on an interview with **Geraldine Sadoway, CCVT Founding Member**

By *Allyssa Case and Paulina Wyrzykowski, CCVT Student Placements (previous and current)*



When Gerry Sadoway was a law student back in the late seventies, she came across a refugee client from El Salvador, a medical student who told her about his experience of being tortured. He had never shared the story before, either with friends or family. At a loss and struggling to make sense of what she had heard, Gerry turned to the medical profession for an explanation. She has been involved with the Canadian Centre for Victims of Torture and with their network of legal and health care professionals, ever since.

In Gerry Sadoway's eyes, cooperation between the two professions is crucial in ensuring that survivor needs are addressed throughout the asylum claims process. The CCVT is a unique institution, partly because it was one of the first centres for victims of torture to be established in the world, but also because of its unique partnership of medical and legal professionals, some of whom are themselves survivors.

Ms. Sadoway stresses the role that doctors can play in strengthening asylum claims by explaining in plain language the likely aftermath of trauma and the effect this is likely to have on the client's ability to tell their story. "As soon as I'd heard that there'd been imprisonment and abuse," Gerry says, "I suspected torture. And at that point I

would say okay, we're not going to talk about this now, you're going to talk about it with a doctor who is one of the special group of doctors who knows about the effects of torture, and the effect of imprisonment and persecution on ordinary people, and will prepare a report that will help us tell this story to the board."

Public discussions of torture now find some place in the international community, and the Convention Against Torture bears testimony to the fact that torture is commonplace around the world, part of state planned and state implemented policy, rather than the rare and bizarre aberration people once thought it to be. The existence of places like the Canadian Centre for Victims of Torture lends credibility to survivor stories of terror and abuse. This was not the case, however, when Ms. Sadoway first began her work back in the early eighties. Back then, torture was an unspoken thing, and not something that could safely be mentioned even in the context of a medical examination.

Gerry Sadoway's voice drops a notch lower and her sentences waver as she recalls the case of a Chilean woman who had been tortured and had subsequently made a suicide attempt in Canada. "She woke up in the hospital, surrounded by doc-

tors and everything, and they were talking very kindly to her about what happened, what the problem was, and she said something like “I’m a refugee from Chile” and they all laughed. They all laughed. And the way she described to me afterwards, afterwards she couldn’t talk about this, there’s no way she could talk to these people who were laughing at her, they made some joke about “well, you should have been a refugee from Cuba”. You know, it was just she didn’t fit their stereotypes.” Gerry sighs and adds that it was incidents such as these which made her realize how important it was to have a network of “safe” doctors. She applauds doctors for their ability to pick up on things she as a lawyer would not think to ask, such as thoughts of suicide, which could be crucial to supporting the legal case. She recalls the story of a fifteen-year-old Sri Lankan woman who was denied asylum and was about to be sent back to Sri Lanka. On a hunch, Ms. Sadoway referred her to a doctor who was part of the CCVT network. When the doctor examined the woman, she found scars from cigarette burns all over her body. Although she had not told this to the refugee board, the woman had been hung upside down at the age of nine, abused and burned with cigarettes in an attempt to obtain information about her brothers’ whereabouts. The medical report based on that examination was sufficient evidence for the board to reopen the case and grant the woman asylum in Canada.

Some scars may not be so evident, and in those cases the assistance of a sensitive and aware professional may be even more important. In one case Ms. Sadoway worked on, another Sri Lankan woman was about to be deported when her doctor noticed that she was extremely suicidal and had suffered massive weight loss in a short period of time. Eventually, the patient told her doctor that she had been raped on an altar while much of her village looked on. It is stories like these which partly fuel Gerry’s concerns with recent legislative change which may “make it harder on people who are survivors of trauma. They don’t tell their story the first time, and we will rely even more on doctors telling us why that happened.” For their part, lawyers need to be aware of the possibility that their clients may have been victims of torture

even if they do not speak of it, and be prepared to refer their clients to agencies such as the CCVT when needed. Ms. Sadoway comments that people rarely self-refer where torture trauma is the issue. “The word torture is too embarrassing, too humiliating for them to self-direct. I’m sure there are exceptions, but I would say the majority are based on referrals.” It is lawyers, ESL teachers and others in the community who must take initiative and let suspected survivors know what resources are available to them.

Since she became a CCVT board member in the late eighties, Ms. Sadoway has found that the ability of the Immigration and Refugee Board to approach survivors of torture with sensitivity varies greatly from individual to individual. While some board members are extremely good about not re-traumatizing clients and will abstain from detailed questioning about traumatic incidents, particularly if a medical report describing what happened has already been prepared, others refuse to accept the findings and indulge in interrogation-style questioning which may be extremely damaging to the client. “I’ve had other board members who, with a medical report describing gang rape of this client, actually then question her in detail about the rape, like where did it happen, were you outside, were you inside, how many (...) And I mean it’s so... it was very shocking, and I’ve had doctors actually contact me after a first hearing saying that the patient had got to square one, and had been so traumatized, and is there anything I could say to the board to indicate that they should be more careful with their questioning, because we’ve just had to start all over again with her.” She points out that in reviews by federal court, the Board has been criticized on more than one occasion for its failure to give weight to evidence from independent medical professionals. Members of the board have been known to reject a diagnosis of Post Traumatic Stress unless there is evidence that the client had gone back for counselling after the initial assessment. This is particularly problematic under the Interim Federal Health Plan (provides basic health care services to refugee claimants), since follow-up appointments are not typically covered. In fact, CCVT has lost many doctors who felt it was unethical for them

First Light

to address issues of trauma with clients during assessment unless they had the capacity to offer subsequent treatment.

Asked about personal successes, Ms. Sadoway launches into a description of a trip to Chile which she undertook back in 1992 together with several CCVT staff members. It was soon after the fall of the Pinochet regime, and she recalls the suspicious looks they received from the Chilean customs officers when they first laid eyes on boxes full of materials and clearly labeled “Canadian Centre for Victims of Torture” across the tops. As part of that trip, CCVT staff visited men and women’s prisons and passed a petition around the conference urging the release of remaining political prisoners. They also visited places which had been well known torture houses, and which Ms Sadoway describes as being “covered with graffiti, but otherwise looking like sophisticated little brownstones in downtown Santiago”. Then she adds: “the most incredible experience I had was actually just after our arrival. I discovered that we were right next to the national stadium, and Wendell Block and me

went for a walk in the national stadium. It was a beautiful, brilliant, sunny day, because it was November, and the jacaranda trees were in bloom. I was practically fainting walking through there, because this was the place where so much horror happened, and you realized how devastating torture is, that it can be so easily concealed, and that this place can just become a place where people go and play sports afterwards.”

This shadow of a horrific past is juxtaposed in her recollections with stories of meetings she had with the families of former clients and the enormous satisfaction of seeing how well people had survived. Ms. Sadoway speaks of the entire trip as an experience which made her aware of CCVT as an international network that has managed to stay connected at a very human and individual level. This mixture of horror and hope, concern over systemic issues and a simultaneous faith in individual human beings seems to be a distinctive feature of those who, like Ms Sadoway, have lent their support to the CCVT network over the years, and who continue to contribute towards its success.

A Few Legal and Health Network Members



Dr. Jill Blakeney,
Dr. Rosemary Meier,
Douglas Lehrer



The Early Years: An Interview with Joan Simalchik, CCVT's First Executive Director

Interviewed by Tanya Brusselers, CCVT Volunteer



Since 1973, I had been working with the Chilean's who were refugees from the Pinochet dictatorship. During the late 1970's in Toronto, the Chilean's were the refugee group who really prompted the need for such a group (CCVT) to begin. Working in the Chilean community, I knew what had gone on and what was still going on. People were being misdiagnosed and finally after years a doctor would connect some dots and ask 'What happened to you in your country?' One key reason I decided to join the organization was because I had friends who had been tortured.

I was CCVT's first Executive Director and the first staff member. In 1986 I joined CCVT through Immigration and Settlement for what was originally to be a 6-week contract. By this time, they had already existed for nearly 10 years and during those intervening years the organization was completely volunteer driven. The work was there long before the structure existed and I was there to set up and establish a routine for the volunteer work. I stayed with CCVT until 1994.

It is often said that CCVT was the second organization of its kind in the world but in fact this work was already going on in other countries, this is a very important historical point. For some time people had been working underground, risking

their lives. Working in a country of asylum is very different than working under the threat of the gun, and people did work under these conditions. The CCVT model was taken from the underground work being done in Chile, Argentina, Uruguay, South Africa, Central America, Iran and Ethiopia. In a country where we have the privilege of operating openly, people need to remember this.

When CCVT began, the idea for a specialized centre was new and in 1986 there was still much debate about whether this was a solution to the needs we had identified. The debate was happening all over the world and at the time, even I was unsure. We were pioneers and no blue print existed to refer to. No one could say for sure what would happen. We knew that something had to be done but we also realized that we had to be cautious about how we did things, trying to make sure as much as we could, not to make mistakes. Some of the concerns were: Would this further ghettoize people? Should the people be served within a multi-service organization, would that be more appropriate? Would a freestanding centre serve? We realized that at that time there seemed to be a need for a specialized centre and

it was best to start out this way even if we couldn't be sure it would continue this way. Twenty-five years later the debate is over. Everyone internationally, through a quarter century of practice, understands that a freestanding specialized group is needed.

The community model of CCVT was already in place when I joined the organization and this is another reason why I agreed to stay on. Because of my experience, I would have been opposed to having the torture experience pathologized. Even the medical volunteers were not interested in developing a clinical model. In fact, it was the medical people who were saying, this is not a purely clinical endeavor here. This is not to say that people didn't deserve a health response, people definitely needed and deserved medical treatment, but a community model recognized that torture has a political and social dimension to its practice. I have never seen torture as a freestanding thing; it is always part of something else. People who were removed from society and tortured needed to reintegrate back in, and the process is different in a country of asylum than it would be in a home country. Canada had some of the pre-conditions that allowed for a community model. For instance, having ideas of universality and a universal health care system allowed for a community network of care. We also have the nature of multiculturalism and the history of volunteerism and community based groups in Canada. I find it interesting that the Australian model is the closest one to the Canadian. One simple explanation for this is that they share a similar history to Canada. From the beginning we understood that the work had a social and political dimension and that meant that public education and preparing the community was important.

When I arrived, CCVT was living in an apartment (a third floor walk-up) that had been donated and was then part of the now defunct Doctors Hospital. Paul Bentley (former President of Amnesty International-Canada) used to joke that all the board members would rush to be the first ones to the meetings because there were only two chairs, and when Teresa Dremetsikas joined CCVT as a staff member there was no desk available for her to use. Teresa had gone to a language school and discovered they were throwing out furniture. So, she borrowed a van, collected some volunteers one

Saturday and headed to Bloor and Avenue Road to load up the free treasures. Furniture wasn't the only thing we didn't have and managed without. Even in 1986, there wasn't a budget or a paid staff and still many were served and assisted. At that time there was already an active volunteer befriending program and ESL classes were being conducted on Sunday mornings, people were being served even though there wasn't a cent of money being poured through. During my tenure we were unable to secure a permanent home and Mulugeta Abai (CCVT's current Executive Director) has done the unattainable. I remember the volunteers used to joke that we were really good nomads. We could pick up and move at the drop of a hat, and sometimes we had to. There was the office space at Yonge and Queen that had been donated by a real estate mogul. The space was empty when we arrived and we had put in time and money into building it up. That donor claimed bankruptcy and we were required to leave the space overnight. The donor had been carrying the cost of hydro and electricity; since he had gone bankrupt the holding company wanted us to pay. The \$35,000 a month greatly exceeded our available funds; which was the donors' contribution, quite a generous one. We were dependent on donated space and when in this position, you're always at the mercy of being evicted. We then moved into a church basement. It was a good thing Mulugeta didn't mind catching mice. Herbert Whittaker, the retired Globe & Mail theatre critic and a hallmark person in Canadian theatre, actually came and designed the space for us to make it more appealing. Some of his suggestions: Put the desks at angles, get paint, put toys on the shelves going down the stairs so it doesn't look like a dungeon. He had some very clever ideas, which helped the volunteer spirit. Following the church basement, we moved into a space at Yonge and Davisville, but then there were plans to build condos and again the nomads had to pack up. Finally, the CCVT has found a permanent home and they can pack their tents once and for all.

Since 1977, people had been finding out about the CCVT by word of mouth. CCVT had already been working for 10 years without funding, our only resource being volunteers. We already had a track record and were likely going to continue our work whether we were funded or not. In 1977, Dr. Philip Berger (one of the founders of CCVT) wrote the first protocol for examining torture vic-

tims. Ground breaking work was being done by an organization that had only two chairs, we didn't sit around waiting for a grant. Chances were, we weren't going to go away, if somebody would take a chance on us. We didn't fit the Settlement criteria and it was very difficult to find funding for this organization because we fell between the cracks. Still to this day you would think that health would be the first group to support us and they were the hardest nut to crack. We had much more support from Immigration, Multiculturalism (now Heritage) and community groups. Once we had Teresa on staff and someone doing the volunteer program on a part-time basis, we set out to build up incremental funding. There was a member of the board, Trevor Bartam (who was a lawyer) and the two of us would go beat down the doors. We were denied Metro Toronto funding and had decided to appeal the decision. Trevor and I waited and then we were bumped, so he would go to his office and then he would come back later. There was a lot of this kind of work happening, trying to build the organization silently by volunteers. People contributed in amazing ways. We had to do all we could to expand, putting people on a waiting list wasn't an option. People were saying: here we are, we need this service and the number of clients was quickly increasing.

How to measure and evaluate success was something that always came up in strategic planning. It's not as simple as something like a minor allergic reaction where you prescribe some medicine and then it's gone.



We never talked about a cure we talked about care. After much thought we decided that what was important, was that the person was able to cope. That people started working when they hadn't been working, that people were having better relationships. Another possible indicator of success was that we didn't see a particular person anymore. There were also cases where people were coming back to the centre not as clients but to contribute as volunteers and board members. I remember one young man who had trouble sleeping; he would be awake all night, needing to sleep during the day. His cycles were really out and he was cut off from contact with other people. He had been imprisoned for a long time and required a lot of health care and dental work. Through the befriending program I matched him with two young students. The day following his first meeting with the two volunteers, he called me overjoyed saying 'Thank you, thank you, thank you. It was so wonderful. I'm so happy.' His response was overwhelming (a call I

will never forget) but I was slightly suspicious about the response so I called the volunteers. They told me that they liked him a lot; they had similar interests and ended up taking him to a coffee shop. Later that man told me that during his nights of sleeplessness he would be wandering the streets and everywhere he looked 'there were people on the inside, chatting and laughing'. He said this was the first time he was taken inside.

CCVT's first and current Executive Directors:
Joan Simalchik
Mulugeta Abai

Ann Harrington, Befriending Pioneer

*Interviewed by Andrew Webster,
CCVT Volunteer*



“I asked myself, what would I do if I was visiting a friend?”

The thing about befriending that gave Ann Harrington the most anxiety was what to do if victims started talking about the brutality and devastation they had suffered at the hands of their torturers. “I thought I could cope with anything but that,” she said, reminiscing about her pioneering befriending experiences. It was the mid-70s in Toronto and Ann, herself a newcomer to Canada 20 years earlier from her native Ireland, was writing letters on behalf of Amnesty International while working full-time as a nurse at St. Michael’s Hospital.

“I remember the first time. I was asked to meet with this family, a lovely woman and her husband and three children from Central America. They were staying at a hotel near Sherbourne and Wellesley. I remember the day I went, a Friday. Maria, the mother, was terrified. The daughter spoke English quite well. They were very nervous. I got the sense they had no food to eat.”

Ann said she knew she had to be careful about boundary issues—for example offering money and creating expectations that might later boomerang. “So I asked myself, what would I do if I was going

to visit a friend?” She went out and bought some bananas, which she knew had nutritional value, and some flowers.

“The husband, whose name was Jorge, came in around 4.30. He had been sitting all day at the welfare office waiting for a cheque to come in. But by then all the banks had closed, so he couldn’t cash his cheque. It was quite hot. I was still worried about them being quite hungry. So I took the couple and their three children to an ice cream store and treated them.”

Eventually Ann found them an apartment near Keele and Lawrence. “That was really exciting.” But within six months there was a fire. Ann describes what happened next: “We all rallied. But one of my friends suggested, let’s allow them take some of the initiative. That was one of our most valuable lessons. Because if we did everything, it would deprive them of the accomplishment. Jorge was able to do a lot of the work, plastering and painting and so on.”

“Once I got to know them, I got to know the wonderful people they were. We became real friends. If you really like the people, you don’t think of them as refugees, but just as people you’ve found a friendship with.”

Crying together

“One Saturday night I went to visit. The children were playing in the back room. Jorge was in one of the bedrooms drawing. Maria and I were sitting at the kitchen table, and all of a sudden she started to talk about what happened in their country. She talked and talked. We ended up crying together. That was one of the most profound moments for me—when she started talking about the torture. It just happened naturally. I realized that people are not going to share their innermost experiences until they get to trust you.”

The experience dispelled Ann’s fear about what to do “if they start talking about torture.” It also taught her that denial often acts as a protection when the horrors of torture are too painful for victims to confront. “We as befrienders may feel it’s best to confront the demons and move on. But we must honor the right of each individual to seek help when he or she feels ready. For some people this may be years or even never.”

What prompted Ann to begin befriending in the first place? She was letter-writing for Amnesty. “When I learned that victims of torture were right here in our city, I knew that they would need a lot of help to adjust and survive in a totally strange and foreign land. I remembered what it had been like for me when I came to Canada.”

Ann grew up in a large family in County Roscommon, Ireland. She had five brothers and one sister. “My father died when we were kids, so I knew what it was like to grow up on very limited resources. Mother always spoke about the kindness of our neighbors. That’s why the befriending program suits me so well. I really believe that kindness and goodness goes around, and that’s how the befriending program works. It’s a constant passing on and sharing.”

Another of Ann’s core beliefs spoke to her: “I knew how important it was for torture victims to understand that they are believed, and that they are truly valued enough to be given every assistance to recover.”

Early obstacles

Ann’s work preceded the formal establishment of CCVT. She recalls it wasn’t very organized. Early obstacles were the lack of resources. Building a volunteer base didn’t happen overnight. “Volunteers were self-directed. I can’t remember once calling the lawyers. The people coming in were sponsored by the government—they had been taken out of refugee camps. So they had some financial support.”

Ann recalled, “There were lots of shortages: space, people resources. But when I look back, I remember the incredible commitment of one paid staff member, Carmen, who worked incredibly long hours to provide and organize a friend for each individual person who came her way.”

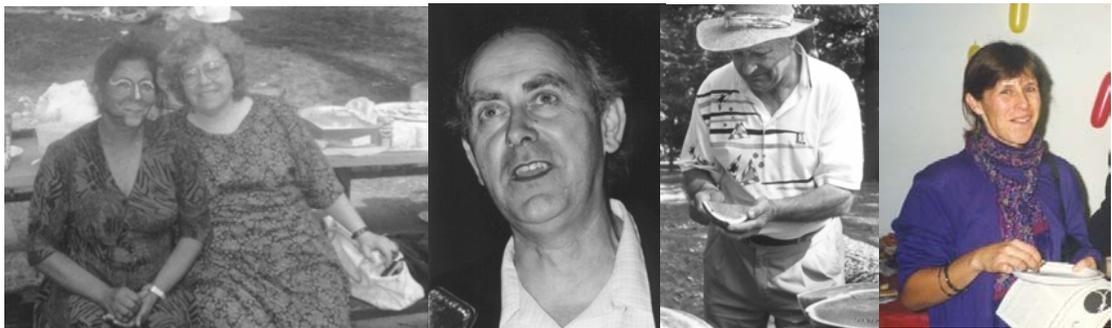
“It was a slow process, but always filled with enthusiasm and the belief that we would succeed. I remember the premises the early centre staff moved to. It was one enormous room with bare unplastered walls. A group of us met for a few weekends and, lo and behold, beautifully plastered and painted office walls were the result.”

How did Ann know when her work was bearing fruit? “I realized recovery was happening when people started taking English classes and mastering the language. When they started making their own decisions about their children’s schooling. Also getting jobs, planning outings.”

Ann currently is an active RN who heads the Hemophilia Department at St. Michael’s Hospital. She feels amply rewarded by her befriending experiences, still visiting today with people she encountered back then, her acts of caring having blossomed into long-term friendships.

CCVT Volunteers

Left to right:
Diane Dadian
Chas Lawther
Bill Clarke
Cathy Price



Surviving Torture Through Self Rehabilitation and Love

By Ezat Mossallanejad, with assistance from Paulina Wyrzykowski



My entire life is a story of trauma and exile on one hand, and love and happiness on the other. I have escaped tyranny and persecution three times in my life, and I am a victim and survivor of torture, having spent four years in jail in Iran because of my human rights activities. I came to Canada as a political refugee on February 12, 1985. Devastated by my past and living as a refugee in Canada, I experienced both tremendous hardship and unbelievable grass-roots generosity. I chose to work for and with refugees and traumatized people as a way of creating meaning in my life and recognizing that we exist only in relationships to others, and that this interdependency is at the heart of all human connections. I am pleased with my present job as a Counselor and Policy Analyst with the Canadian Centre for Victims of Torture. Prior to that, I worked for seven years as a Refugee Policy Analyst and later as the Coordinator of the Jesuit Refugee Service of Canada. I found these jobs highly rewarding because of their direct impact on the lives of those most vulnerable people who had similar experiences as myself.

I was a human rights activist in Iran during the late 60's and early 70's under the Shah. I was involved in civil and human rights movements at the University of Tehran, and later I tried to organize small groups of students and intellectuals

to fight against tyranny. There was a notorious secret police in those days called SAVAK. This unscrupulous intelligence service was omnipresent, monitoring each and every citizen. Very little dissent was tolerated, even from the moderate reformists. The Shah was considered the shadow of God and SAVAK committed crimes of torture and murder in his name.

Nevertheless, I found it possible to function as a human rights activist in this environment, provided I was circumspect in my activities and did not attract SAVAK attention. Or so I thought... until one day I too was arrested.

It was on a beautiful April day in 1973 when two well-dressed and quite nice-looking men entered my office wearing civilian clothes. At that time, I was working as the Deputy General Manager of Organization, Education, and Methods in the Ministry of Water and Power. They asked if my name was Mr. Mossallanejad and I said yes. Then they ordered me to put both my hands on the top of my head, and began searching me. They were tense and panicky; I could hear the sound of their panting – I don't know why they were so nervous – perhaps they were worried I had a bomb strapped to me. Next, they searched my desk and took some documents, none of which happened to be of a political nature. Finally, I was hand-

cuffed from the back and blindfolded and taken away in a car. I did not know where they were taking me or where I was when we stopped. I was led into a building where the men left me alone for a few minutes. Eventually they returned and the interrogation began in earnest. They yelled obscenities at me for a while before taking off the blindfold, at which point I found myself in a dungeon.

They tied me to a metal bed, spread-eagled, and a large, burly man who looked like a gorilla, began beating me with a wooden stick (I later found out that his name was Mr. Hussein). He struck me so hard that the stick broke in half after four blows. After a few more blows, the remaining stick broke into two pieces. He beat me another 20 times with the thickest part and then changed his stick to a thick black electric cable. Over the next several hours, I was beaten with a variety of instruments. Every once in a while new people would come into the room, always elegant and well groomed, and I used to think they would surely put a stop to the beating. Instead they would laugh and take a turn. I was beaten on the soles of my feet and forced to run around the room, pushed from one man to another. In that way the interrogators sought to restore the circulation in my feet so that I would continue to feel pain when they hit me.

The object of all this beating was to extract information about my friends and associates. I was supposed to give the names of guerrillas and their safe houses, despite the fact that I was not involved with any violent faction and had no idea about their whereabouts. After a while I began to scream. At one point, one of the interrogators held his hand over my mouth and held my nose so I was unable to breathe. He would only allow me to breathe if I gave him the information he wanted. I indicated that I would talk. Then I insisted that they untie me before I would say anything. Finally, I began to talk about myself – where I was born, how beautiful the city was, where I went to school – none of it having to do with politics and none of it the kind of information they wanted. They tied me back down and resumed beating me.

At some point, they took me back to my house and searched it in front of me. I remember one of the torturers, the Gorilla that had beaten me on

the soles of the feet, whispering that I shouldn't be limping because it was shameful; my neighbors would feel that I was ridiculing them. Yet I couldn't walk normally because my feet were badly injured. They did not find anything in my house except a single pair of hiking boots, which they made a fuss over, insisting they must belong to a guerilla, and quite a few fresh dates, which they also said were there to feed my guerilla friends.

After I was taken back to jail, they blindfolded me again and ordered me to stand facing the wall in front of the torture chamber. I could hear the sound of lashes followed by torturers' shouting and insults mixed with the pleading, weeping, and screaming of the victims. I waited for half an hour or so – that seemed like an eternity to me – until my turn came again.

A boy I knew, a second year law student to whom I had given two pamphlets on human rights, was brought in and I was asked to identify him. It was then I learned that he had been arrested and had given my name, along with some others, to SAVAK, implicating me in guerilla activities. All the information he had given them was false; he must have simply told them anything he could think of in order to end his own torture. So all my pain was over a false confession, extracted under torture. When I contradicted him, and asked whether he was not ashamed of himself, they immediately took him away and intensified my torture. It was so difficult to stand the pain. With every blow I felt an intolerable pain running all through my body. After some time the man who had arrested me (he was, in fact, the chief interrogator) entered and said my interrogators had permission to torture me to death, and that they should not worry about the consequences.

The beating continued until I could not feel any more pain, only a vague tingling sensation each time I was hit. It was at that point that the Gorilla decided to stop, since there was no point in continuing. All the torturers went away and left me in an agonizing limbo in the middle of the night in the dark torture chamber. After some time two soldiers entered. They took me by the arms and helped me towards a large brightly lit room where I found the Gorilla and three of my torturers including the person who had arrested me. "I

am," he told me, "Dr. Hosseinzadeh. I am the inventor of torture. I will design a torture suited to your nature and character. We will extract all the information you have." In SAVAK, all torturers called themselves doctors. Later I found out that his real name was Reza Attarpour, the most notorious torturer and the chief of all interrogators in Iran. He threatened me with burning and that he would pump boiling water into my rectum, but thankfully, neither threat was carried out.

The moment in which I saw my cell was one of the happiest in my life. It was a small room, but it had a mattress on the floor and four pillows, and I knew I would have at least a small reprieve from the torture. Yet, paradoxically, as soon as the door closed behind me I felt everything that had happened wash over me and I became desperate – if I could have died then, I would have. Every single person I have spoken to who has been tortured has confirmed that there always comes a point when you wish to die.

In the morning, all four pillows (the cell had probably been occupied by four prisoners before me) on which I had rested my legs were stained with blood. Since I was unable to walk, one of the guards carried me to the prison doctor. When the doctor unwrapped the bandages from my legs, I saw that strips of flesh were hanging off the bottoms of my feet. The doctor said to me, "You must be an extremely dangerous man, one of the guerrilla leaders, to have been tortured so badly." I told him no, I was merely a human rights activist and had been falsely accused. After that the doctor apologized for having to cause me more pain – he said that he had no anaesthetic, but in order to prevent gangrene he would have to trim the flesh off my legs and feet before dressing the wounds. It hurt, but not as much as the beatings had.

Both of my legs, especially the left one, were completely black right to the knees. I passed blood instead of urine for 24 hours. For one week I could not walk at all – a guard had to carry me to the bathroom in his arms. For 50 days I walked with great difficulty. Over the next four years I spent time in many prisons and was beaten on numerous occasions, but never was I tortured as badly as that first time.

In time I learned that they had arrested me because the boy who broke under torture told them I was a liaison between the Marxist guerillas and the fundamentalists, which would have made me extremely dangerous. SAVAK must have realized their mistake soon enough, certainly within a short time of the arrest. Yet I was kept in prison for another four years, first because they feared that if I were released before my wounds had healed the story of the torture would get out, and later because they hoped I would eventually give them some excuse that would allow them to justify the initial arrest. For four years, I lived in constant fear that one of my former associates would be arrested and would give my name under torture, which would cause SAVAK to make new attempts at extracting information from me. I remain proud to this day that while I gave them bits and pieces of information about myself in order to get them to leave me alone, I never incriminated anyone and no person was arrested because of me.

They kept me in the limbo of torture and interrogation until they sent me to a military tribunal. Although I was a civilian and a civil rights activist, I was sentenced to three years imprisonment. Immediately before the end of my prison term, the Shah had established his one-party system and ordered SAVAK not to release any political prisoners. Thus, people like me, who had served their sentence, were transferred to a new prison and kept in indefinite limbo. Eventually, President Carter came to power in the United States and put pressure on the Shah of Iran to release some political prisoners. I fell under this category and was allowed to go free.

My troubles did not end with my release. I felt as if I had been transferred from the small prison of a cell to the larger prison of a police state. I was terrified of being rearrested and felt as if a shadow followed me everywhere. Finding work was impossible, as any kind of job required security clearance, which was routinely denied to former political prisoners. For all of these reasons I decided to escape to India, where I registered for a Ph.D. program. It wasn't until after the Shah was overthrown that I returned to Iran.

The society I found when I went home was very different from the one I had left behind. There was much upheaval, and the religious fundamentalists had by that point gained a near monopoly on political power. They did not believe in the democratic process, and I suddenly found myself persecuted by my former friends from prison who now occupied important positions in government. Often I had to change locations four or five times each day to evade capture and once spent a night hiding out on a battlefield, with bullets flying all around.

Life was impossible in such circumstances and I fled Iran again, this time seeking refuge in Turkey. If things were difficult back home, they were certainly not easy in Turkey either, particularly for an alien with no residence permit. This feeling of living under constant threat became part of my experience and followed me for many years to come. Soon I left Turkey and sought refuge in various European countries, eventually returning to India from Finland, where I continued my studies. The situation in India was far from stable, however. I discovered that the Iranian Hezbollah had organized in the country and were busy persecuting political refugees such as myself. Many of my friends were beaten and two were killed when they were attacked by an angry mob. While all this was going on, my son was killed in an accident. Still grieving and in shock, my wife and I decided to leave for Canada. We arrived in Montreal on February 12, 1985.

My first jobs in Canada were all minimum wage or less. I worked in a bakery from 9:00 p.m. until 10 a.m. with no break, with a wage of \$3.25 per hour (minimum was \$4.25 per hour). My next job was working as a demolisher in a construction site for one and a half-years. It was hard physical labour for which unionized workers were paid at least \$15.00 per hour. It could be done by machine but the cheapest way for the employer was to use a needy refugee like myself who would do it for \$5.00 an hour. Very quickly, demolition became part of my psychology. I used to demolish buildings in my dreams and plan how to demolish various buildings in my mind. One day, a friend invited me for supper. When I entered his house, I found it was built of stone and concrete. I reacted spontaneously:

"It will be an extremely hard job."

"Which job?" my host reacted with astonishment.

"Demolishing your house," I answered

"You are my friend, why are you going to demolish my newly-built house?"

I realized my mistake and made a sincere effort to convince him of the psychological impact of my job.

In the following years (up to 1990) I did whatever was necessary to support my family and myself. For a long time I worked as a mover, which caused me severe back pain later. I was a ditch digger. I worked in a sausage-making factory and even in a traveling circus – not as a clown though, since that was considered a professional job. Along with a friend, I was responsible for loading and unloading the circus materials. I resigned when the racist supervisor harassed and then fired my friend.

Wherever I applied for jobs, they considered me overqualified because of my Ph.D. degrees. For at least five years in Montreal, I got used to being overqualified and unemployed.

Throughout my life, when I felt most hopeless and desperate, several things helped to sustain me and give me hope. It is those things I wish to share with you, in the hope that they may help others, including CCVT clients, who have had similar experiences.

First among these is physical activity. In the four years I was in prison I discovered the value of regular exercise. It may sound trivial, but exercise is also a method of resistance, a way of regaining control over your life. If you are healthy, you are better able to withstand torture. Since the goal of torture is to destroy you as a person, by refusing to be broken you gain a victory over your oppressors. Even when I was so injured that I could barely move, I made a point of flexing those parts of my body, such as my arms and my neck, which had not been injured. The regime, which I had established for myself while in prison, continued after my release and to this day hardly a day passes when I do not engage in some form of exercise.

The second coping mechanism that I found useful was that of task setting. I discovered something

important when I first began to exercise in jail; that if I set a task for myself, it allowed me not to think about my surroundings, not to worry about the future. For the amount of time it took me to exercise my arms, I was not unhappy, and this occasional escape allowed me to survive the rest of the time. To do nothing in prison, day after day for four years, is to go mad. My friends and I knew this, and so we would invent all sorts of distractions for ourselves. For instance, we would take out the less cooked inner part of our bread, mix it with our saliva by chewing, and knead the bread for hours until we got a dough similar to Playdo. We would use the dust off the walls, flakes of medicine pills or cigarette ash to color our creations, and we made everything from chess pieces to pipes out of the dough. I never had any inclination towards visual art before my imprisonment, yet in jail I became known among the guards as an artist, and it afforded me some measure of respect.

From my little figurines I learned the next lesson of survival; that no matter what happens, we must always look for alternatives. I was not an artist. But when it became necessary, I found myself capable of creating art in order to survive, and seeing the finished products in my hand gave me great joy. Such experiences help me to appreciate the Art Therapy Program of the Canadian Centre for Victims of Torture. Under this program, survivors of torture and trauma express their feelings by involving themselves in visual arts and receive counselling in the process.

I also learned that aesthetic appreciation is yet another way of discovering some goodness in our surroundings. Singing, for instance, was a common pastime and those with good voices were considered a blessing. We would all join in with them as they sang their songs of love or resistance. That second day, after I had been tortured, as I lay in my cell I began singing songs about courage to give myself heart and the will to survive, and I always used to tell myself that I must not give up, no matter what.

Whenever we were transferred to a new cell, everyone would exchange information: who you were, what had happened to you, who you knew. We never shared more than what we had told the torturers, because we knew that there were informers in every cell, but nevertheless, it was a

valuable source of information for us. It was a paradoxical situation; living as we did in tiny crowded cells under extremely harsh conditions, our cellmates were our only source of support – yet we also knew that we could never fully trust anyone in case they turned out to be an informer. Immediately after the exchange of information an exchange of song would follow. I remember one particularly good singer who used to go to the bedside of a severely ill cellmate and sing the most beautiful songs. That inmate was a very young boy, perhaps eighteen, who had been arrested at random and severely tortured by burning before the interrogators realized he simply didn't know anything. He was ill for a long time, and also severely traumatized by his experience, and the singing was one of the few things that seemed to make him happy. Ever since then I have valued music as a way to overcome feelings of depression. I listen to cheerful music to make myself happy and sad music if I want to find some outlet for my feelings.

I myself had no talent for singing, and so in prison I learned to tell stories instead. I found that humor in particular was valued and that by laughing at things we could relieve our tensions. We could make ourselves feel better by making our oppressors appear ridiculous. For example, when I was transferred from my first cell, I told everyone in the new cell about being tortured and they all laughed at the stupidity of the interrogators and the Gorilla before telling me their stories. When I think back on it, it seems that my time in prison was full of this kind of contradiction; torture on one hand, humor and satire on the other, mistrust and friendship at the same time. I remember one time when we were all led to the showers together, people began to sing and dance spontaneously, for no reason. On another occasion, we were all told that we would be executed in the morning in retaliation for the assassination by the guerillas of a government official. We thought we only had a single night left to live, and chose to spend it telling jokes and laughing about our predicament. Satire was a form of humor particularly suited to our situation, since it is as much about pointing out the absurdity and injustice of a system as it is about laughter. In this way it became another form of resistance, of minimizing the amount of power that torturers and interrogators held over us. Again, the lessons

I learned about humor in prison helped me survive later on in life. I published my first satire shortly after the death of my son, when I was suffering and in pain, because I felt I had to have some way of conveying the absurdity of human existence to others. Throughout life, I have continued to cultivate a sense of the absurd, which stems from the knowledge that in the end things have no meaning other than that which we ourselves create. Realizing this made me able to appreciate the humor and irony in life and literature alike, and to live for the moment, enjoying small things as they came my way.

These things, humor, music, work and physical activity helped me survive in prison and afterwards. But perhaps the most important among them was love.

Love for me is a general and profound feeling of passion and good will and devotion towards the universe. Love is the free manifestation of the depths of human – and also animal – nature. It may bring with it an intellectual ecstasy that could surpass personal sufferings and bitter experiences. I agree with Hegel when he said, "the true essence of love lies in forgoing one's consciousness of self. Forgetting one's own self in another 'I' and yet, in this very disappearance and oblivion, winning one's self and taking possession of one's own self for the very first time."

Love lifts you to the top of the world. You are yourself and at the same time you are not yourself. You transcend your "self" and anxiously seek a unity with the subject of your love. Rumi (1207 - 1273 AD) depicted the feeling of love in his masterpiece *Massnavi*:

A beloved asked the lover: whom do you love: yourself or me?

"I abandoned," the lover answered, "all I loved when I fell in love with you; I changed my philosophy of life to love that of yours; I broke with my own mysticism to discover yours. If I love you, I have loved myself; if I love myself I have loved you."

As a victim of torture, if you feel that you have suffered for a cause you loved, you can deal with your trauma in the context of love and understanding. Love opens up a vast horizon before

your eyes. Love provides you with a generous gift that could heal most of the wounds. Shakespeare's Juliet says:

"My bounty is as boundless as the sea
my love as deep: the more I give to thee,
The more I have, for both are infinite."

The healing impact of love is further elaborated by Rumi:

"So, shrinks from love the tender heart
as from threat of being slain
for, when true love awakens, dies
the Self, that Despot, dark and vain
then let him die in night's black hour
and freely breathe in down again"

Saint Paul was right when he remarked that "love is always patient and kind: it is never jealous; love is never boastful or conceited; it is never rude or selfish; it does not take offence, and is not resentful. Love takes no pleasure in others people's sins but delights in the truth; it is always ready to excuse, to trust, to hope, and to endure whatever comes ... There are three things that last: faith, hope and love; and the greatest of these is love"

Based on my experience in jail and exile and as a frontline worker helping refugees and survivors of torture, all components of love (as mentioned by Paul) have healing impacts: hope, faith, forgiveness, patience, compassion, gentleness, devotion, trust, peace of mind and stoicism. I disagree with Saint Paul, though, in bringing "faith and hope" under separate categories. Those two also belong to the realm of love.

You cannot have healing without hope, and it is based on 25 years of hard work and frontline experiences that the Canadian Centre for Victims of Torture (CCVT) has made it an essential part of its mandate to provide its clients with "**hope after the horror.**"

I will never forget an engineer who became completely dysfunctional as a result of the tortures he had undergone. We made a desperate attempt to take him out of his self-imposed isolation. Our complete failure made some of our friends believe that the poor victim was suffering from paranoia and schizophrenia. A few weeks passed

and a man from his town was brought in. He started caring for the so-called lunatic engineer. They spoke the same dialect and shared sweet memories about their town. The new inmate took it upon himself to wash the engineer's clothes and persuaded him to eat well. He provided him with lots of hope. Within a period of two months, an unbelievable miracle happened. Our engineer was completely cured.

Loving others and being loved by them have frequently saved my life. When, for example, I lost my son in India, I received support from many Indian and Iranian friends who went far out of their way to show my wife and I their love and affection. Without that genuine love we would probably not have survived.

I am a living witness to the positive impact of the CCVT befriending program for survivors of torture, war, and organized violence. This program has proved to be effective in bringing meaning to the lives of both CCVT clients and its volunteer befrienders. In the case of one of our clients, he had gone through such a devastating trauma that the befriender was unable to teach him English. The befriender became so committed to his friend that he learned his language and was able to communicate with him in his own mother tongue. The befriender is now an expert in that language and is enjoying the friendship of many people from his friend's ethnic community.

On another occasion, we matched a client suffering from PTSD with a befriender who was a poet. Our client is now in good condition and has just started composing poetry again in his own language.

We are by nature social beings; we do not exist in isolation. We cannot exist at all without the help and support of others, and acknowledgement of this interdependency lies at the heart of love. People who expect to be helped all the time without offering any help in return are selfish – but so are those who profess to only do good without accepting reciprocity. I read a letter once, written, in 1854, by First Nations Chief Seattle (leader of the Squamish tribe in Washington territory) to the then President of the United States. It is a great and prophetic letter. It talks of the uniqueness of every offering and the impossibility of compensation. He speaks about the attachment of human

persons to and their love for nature when he writes to the U.S. President "how can you buy or sell the sky, the warmth of the land? The idea is strange to us. If we do not own the freshness of the air and the sparkle of the water, how can you buy them?"

If I offer you a smile, how can you put a value on that smile and decide what it was worth? If you cook a dinner for me, and spend a day in the kitchen over the pots, delighting in the surprise, whom then should be compensated for the end result, you or I? Prison taught me that survival means depending on the love of others and having them depend on yours in return. And this insight, born as a survival strategy, gradually became part of my character so that I was able to worry less about others and about myself. Just as one can discover places, one can also discover people. There is beauty in human relationships.

I remember one day when I received forty lashes on the soles of my feet, and when I was brought back into the cell, many people rushed over to try and help, giving me strips of torn fabric for bandages and offering backrubs to ease the pain. It is such exchanges that give rise to enduring friendship, and such love that gives rise to the willingness to make personal sacrifices. It is because of this passion for others and the idea of reciprocity that I became involved in refugee protection long before coming to Canada (I was the founder of the Union of Iranian Refugees in India and became active in the People's Science Movement there).

In my experience, sharing common goals and understanding can be extremely helpful in recovering from trauma. It is part of what I think of as cultivating a general passion for life. Sometimes it seems as if we are living in a heartless world and in a spiritless situation. It is important for survivors of torture and war to create an atmosphere of love, sympathy, and support among themselves. There is a saying that "the sorrow hearted knows sorrow." If nobody understands us, we should try to understand one another. During the last few years of working with CCVT, I have frequently observed the effectiveness of our mutual support groups organized for our clients in their own native languages.

Another aspect of the same passion is recognizing the importance of a unity with Nature. We are all a part of Nature; we cannot exist without it, and to disrespect nature is to disrespect ourselves. I frequently read and reflect on the prophetic message of Chief Seattle to the U.S. President:

"But if we sell you our land, you must remember that the air is precious to us, that the air shares its spirit with all the life it supports. The wind that gave our grandfathers his first breath also receives his last sigh. And the wind must also give our children the spirit of life. And if we sell you our land, you must keep it apart and sacred, as a place where even the white man can go to taste the wind that is sweetened by the meadow's flowers."

Some may laugh to hear it, but nature is beautiful to me and spending time in it, developing an appreciation for aesthetic beauty, has helped me survive through many hardships. When I first moved to Canada, I used to plant flowers on a bit of public land along the street in front of my apartment building. I didn't know anyone in the neighborhood, but people used to stop and ask me if I was from the City. When I told them no, they asked me why I was planting things. I told them it was just because I like to do it, and gradually they began to come by offering me tea, giving me flowers, and talking to me about their dogs and their memories of home. Suddenly, I had friends.

Finally, there is the idea of travel. By travel I do not mean getting on a plane and going to the other side of the world. Rather, I mean what in Arabic is described as *t'aamol*, the action of seeing something, pausing and considering it very carefully before taking action. For me, the purpose of education is to discover yourself and to explore things and phenomena in order to further your own knowledge. Since we are always changing, it is a continuing process; each day we discover a new person in ourselves. Travel, whether through space or in our thoughts, is an essential part of this educational process.

After the death of my son in India I began to attend the lectures of Krishna Murti with a doctor friend of mine. Murti talked about the need for education to be a completely voluntary process,

without any element of coercion. He was completely non-judgmental, asking questions and allowing people to debate them freely, each individual contributing a different point of view. People of all sorts were welcome. Once I saw a beggar, dressed in rags, being addressed with great respect by my doctor friend. I asked my friend if he was simply making fun of the man, but my friend said no, the beggar had been a very respected professor and the dean of homeopathic medicine at the university. Nobody knew quite what had happened, only that he had left his job and family one day, and took up begging. He wouldn't accept money, only some food, and because of his status nobody dared question him about the reasons for this change in lifestyle. All this was very novel to me, and different from my previous educational experiences, which generally consisted of the presentation of a series of facts to be learned.

These sessions made me realize the extent to which truth is constructed. Opposites can sometimes be equally true and a single thought can be arrived at from many different directions. I began to think about my own suffering in this way, to understand what had happened to me from a global perspective. Philosophy allowed me to recognize that my trauma was not somehow separate and unique, but part of the ongoing struggle of humankind. It made me question human nature and human values, but it also made me notice all the things that were right with the world, and beautiful. I came to recognize that everyone suffers, and that sadness is part of our human condition. At the very root of this suffering is the recognition of our own mortality, and the fact that nobody knows when he or she will die. Yet we cannot surrender to sadness, but must try to be as happy as possible given the circumstances.

In this way, I came to see happiness as a virtue, but also to recognize that it was counterproductive to think only about myself and my own suffering. Rather, I felt I needed to use my own experiences to help others, to help address some of the root causes of the tragedy that had taken place in my life. I think that it may sometimes be easy to become trapped in one's own suffering, remembering things over and over and dissecting them to the point that even once the original suffering is forgotten, we create new sources of pain

First Light

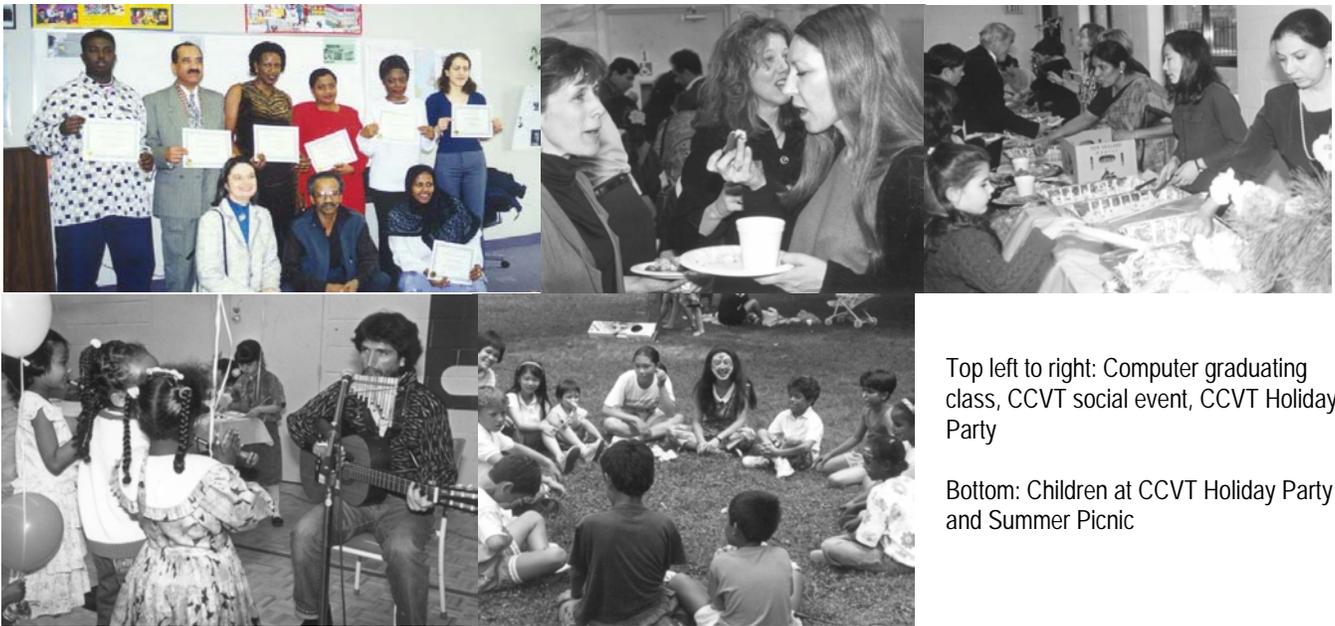
in our lives. Recognizing our underlying mortality, on the other hand, leads to a kind of acceptance both of sadness and of our own limitations. It is important to recognize that there are inevitably things we cannot change as individuals, that some events are beyond our control, and that even those things we can affect sometimes take a long time, years or even generations, to change. This understanding has helped me to see patience and tolerance as an effective way of coping with personal tragedies.

I do not belong to any organized religion, although I grew up among people whose religion was strong and well organized. My faith stems from the belief, perhaps irrational, in the ultimate emancipation of humankind, in the idea that, for all the mistakes we make and all the atrocities now taking place, we are moving towards a future where people will no longer inflict suffering on one another. This faith, and the drive to continually assimilate new experiences and strive to push back my own limitations, to see exile not as a prison but as an opportunity to understand and appreciate many different people and ways of life, is what gives me the will to survive and to strive continually for my own happiness and that of others.

In conclusion let me reiterate that the after-effects of torture are not something that can go away. The scars, especially the psychological ones, re-

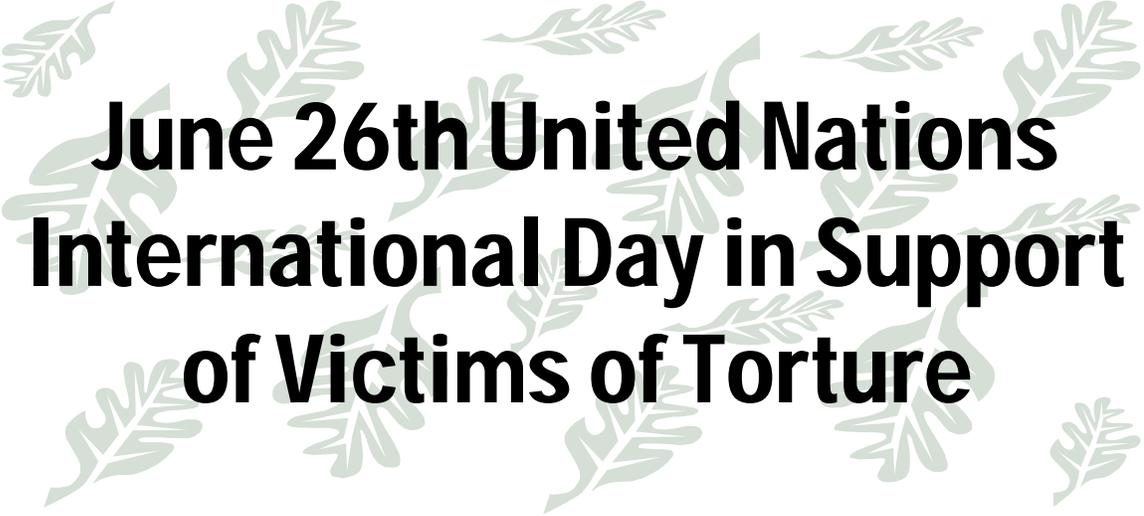
main for the rest of the victim's life. When I used to be under torture in jail, I often dreamed that I had returned to my childhood, working in our family garden. It was a beautiful garden of date palms and citrus fruit, where my brother, father and I worked together. My mother and sisters used to bring food and sweets, and we had pleasant family parties. Then, years before my imprisonment, the trees died due to a very cold winter and the garden turned to a wasteland. It was surprising to me why it appeared in my dreams so frequently in jail. The worst part of this dream was when I woke up and saw myself imprisoned in the limbo of torture. My dreams still continue, albeit in a totally opposite way. Now after more than 26 years, at least twice a week, I see myself either in jail under tremendous torture or waiting on death row or among my family members in Iran (alive and deceased) while authorities are looking for me in order to arrest me. The best part of these nightmares is when I wake up and see myself in my safe home and comfortable bed. I heave a sigh of relief.

In attempting to cope with my trauma of torture and exile, I have tried my best to acquire internal richness and strength. I strongly feel that if we train ourselves to go beyond ourselves and see the source of love and life in nature, society and other individuals, no burden will be too heavy and no suffering could be intolerable.



Top left to right: Computer graduating class, CCVT social event, CCVT Holiday Party

Bottom: Children at CCVT Holiday Party and Summer Picnic



June 26th United Nations International Day in Support of Victims of Torture

Torture is the ultimate denial of humanity and an appalling betrayal of its aspirations. The torturer, face to face with another human being, denies any common bond between them through the purposeful infliction of pain and suffering. In this way, torture shatters the common bonds of empathy that exist among members of the human family by harming, sometimes irreparably, an individual's ability to trust in others and in humanity as a whole.

The Canadian Centre for Victims of Torture (CCVT) is dedicated to helping victims of torture and their families. As an organization that deals with the aftermath of torture on a daily basis, the CCVT contributes towards the prevention and eradication of torture at a global level by using its experiences in exposing the scourge of torture and by being very active in public education work on this social evil.

Fifty years ago, the United Nations recognized the need to call for an end to the widespread use of torture. In Article 5 of the Universal Declaration of Human Rights it stated: "No one shall be subjected to torture or cruel, inhuman or degrading treatment or punishment." In 1966, this admonition was restated in Article 7 of The International Covenant on Civil and Political Rights. "Freedom from torture" is regarded as one of the "basic" human rights. On December 10, 1984, the General Assembly of the United Nations adopted the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. On June 26th, 1987, the family of nations finally enacted the International Convention against Torture. This Convention was the latest and most important effort by the international community to emphasize the urgent need to bring to an end the continuing practice of torture.

Torture is practiced surreptitiously. The majority of the world's population is unaware that it is taking place. Thus, in countries like Canada, very few people are aware of its worldwide practice. Torture occurs in secret places and is accompanied by such an atmosphere of fear, threat and intimidation that those who survive continue to experience the terror and hesitate to expose this oppressive practice. This is especially true if torture survivors are still in the country where they were victimized. These conditions put the onus on human rights organizations, particularly those dealing with torture and its survivors, to raise public awareness about the scourge of torture, its continued widespread use and its devastating impact on human lives and the dignity of not only individual survivors, but also the greater society of which they are a part.

In late 1997, the Canadian Centre for Victims of Torture picked up the call proclaimed by the United Nations' General Assembly to celebrate June 26 as the UN International Day in Support of Torture Survivors. An Evening of Solidarity with Survivors of Torture took place in Toronto on June 26, 1998. Since then, we have celebrated June 26th on a regular basis. The CCVT celebrations have commemorated the spirit of survivors and have included speeches, skits, music, dancing, pantomimes and refreshments. Hundreds of people from dozens of communities have responded each year to CCVT's invitation. They rallied together to enjoy this special event in the hope that one day torture will be eliminated completely.

This year, the Canadian Centre for Victims of Torture (CCVT) will enthusiastically celebrate June 26th and will commemorate its twenty-fifth anniversary.

sary at the same time. CCVT will also give the Trevor Bartram Award (organizational development, particularly in setting up new community based organizations), Amina Malko Award (for women with refugee experience who have significant experience in policy, advocacy and settlement service for newcomers) and Youth Award (outstanding contribution in the area of human rights, community service and academic excellence) to distinguished people who have served the community in these areas.

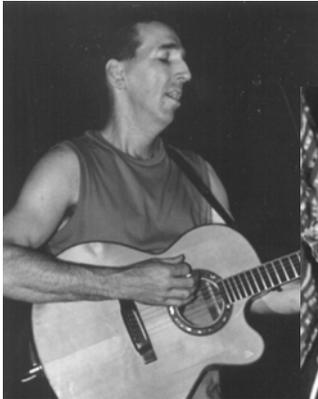
While the celebration of June 26th has broadened our work against torture, there is still more work to be done to encourage our government to play a leadership role in this vital area. Canada is a party to the Convention against Torture and Other Cruel and Degrading Treatment or Punishment. She is obligated to bear international responsibilities for the abolition of torture and protection of torture survi-

vors. We urge Canada to demonstrate her support through additional financial contributions to the UN Voluntary Fund for Victims of Torture. There is an urgent need for the Canadian government to reiterate its obligation to the principle of non-refoulement of people who could be subjected to torture in other countries. This principle is enshrined in the Article 3 of the Convention against Torture and is an absolute, which cannot be balanced with any political considerations.

Let us act today; let us do all we can to stop torture; let us expose oppressive and torturing regimes wherever they may be; let us identify torturers and bring them to justice; let us not allow torture to continue and take the lives of innocent people. And in the words of UN Secretary-General Kofi Anaan, "it is too late to prevent torture from accompanying us into the new century. But it is not too late to redouble our efforts to contain this menace."

Scenes From Past June 26 Events With Guest Performers

Stephen Fearing



Raices De Cuzcatlan
(Roots of Cuzcatlan)



Victor Sopiqoti and Fatmir Fani



Toronto Tabla Ensemble



Tahereh
Nowroozi



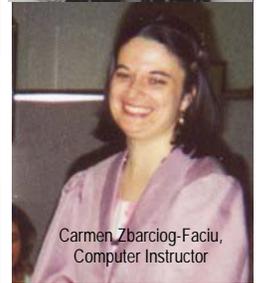
A Brief Picture of CCVT



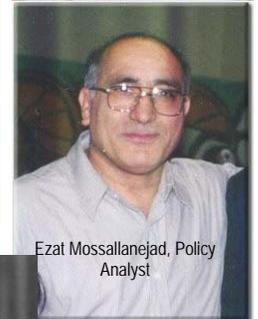
CCVT Staff and Board with Sadako Ogata, former United Nations High Commissioner for Refugees



Afsaneh Shafai, Counsellor



Carmen Zbarciog-Faciu, Computer Instructor

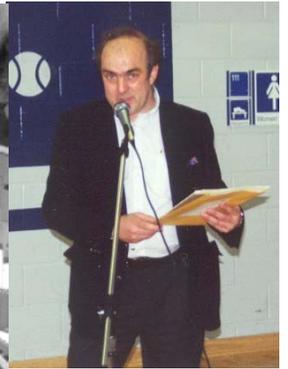


Ezat Mossallanejad, Policy Analyst



Left to right: Dr. Mario Roldan, former Chair; Ted Gordon, former Chair; James Lane, former Chair; Hari Lalla, current Chair

Bottom
Left to right: CCVT Board, 1998-1999; Mahendra Bungaroo, current Treasurer; Monica Franklin, former Board member; Dr. Robert Frankford, former Board member



First Light



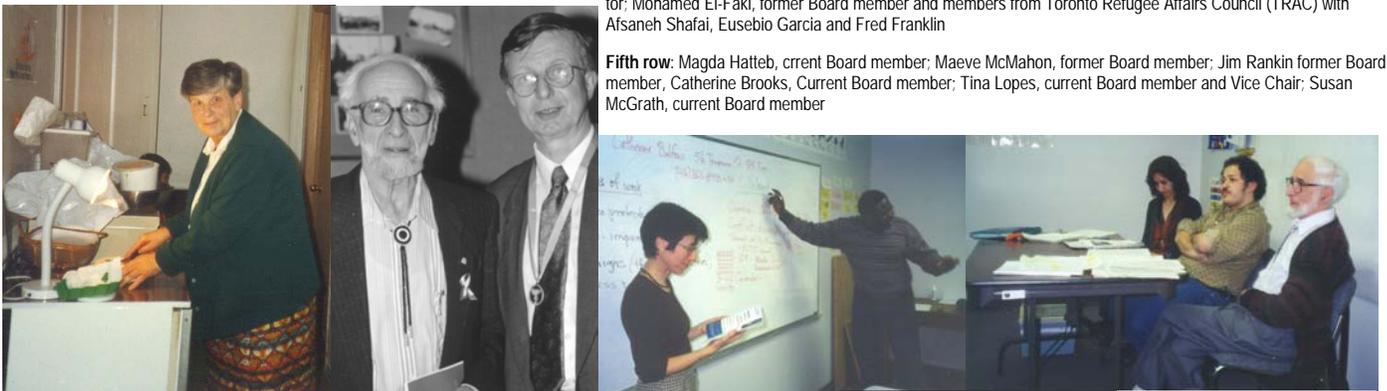
Top row, left to right: Elizabeth Jones, ESL Instructor; Mary Sanderson, Art Therapist; Michele Millard, Volunteer Coordinator; Joan Borja, Child/Youth Program Worker; Peri Lebovitz, Teaching Assistant; Tsering Choedon, Admin Assistant; Delfina Vega de Paiz, Admin Assistant; Munnie Subhani, LINC Instructor

Second row: Sean Watson, former LINC Instructor, Teresa Dremetsikas, Program Coordinator; Nazlije Isufaj, Counsellor; Mohamed Ahmed, Counsellor; Marion Abel, LINC Instructor; Abdul Abubakar, LINC Coordinator

Third row: Jo Furley, LINC Instructor; Paulina Wyrzykowski, Student Placement; Lawrence Hrubes, former LINC Coordinator

Fourth row: Gerda von Bitter, Volunteer; Dr. Donald Payne, Founder and network Member; Fred Franklin, Volunteer; Public Education Meetings at CCVT with Catherine Balfour, Amnesty International Canada Refugee Coordinator; Mohamed El-Faki, former Board member and members from Toronto Refugee Affairs Council (TRAC) with Afsaneh Shafai, Eusebio Garcia and Fred Franklin

Fifth row: Magda Hatteb, current Board member; Maeve McMahon, former Board member; Jim Rankin former Board member, Catherine Brooks, Current Board member; Tina Lopes, current Board member and Vice Chair; Susan McGrath, current Board member



The Canadian Centre for Victims of Torture Awards

The Canadian Centre for Victims of Torture has established three categories of awards to recognize those individuals who are making significant contributions in the field of human rights. Below is a brief description of the award and a nomination form. The deadline for nominations is May 3rd, 2002. If you require information or the nomination form to be emailed as an attachment, please contact Mulugeta Abai at ma-bai@ccvt.org or call 416-363-1066 ext. 25.



The Trevor Bartram Award

Trevor Bartram was a founding member of the Centre and remained an integral part of its life throughout the years. As the founding member and legal advisor, Trevor undertook the tedious and unglamorous tasks that developing organization require. He wrote (and rewrote) the agency's bylaws, negotiated leases, contracts and other related agreements. He served as the secretary, Chair of International Committee and member of Fundraising Committee. He was a jack-of-all-trades.

Over the years, Trevor contributed much to the organization and befriended newcomers and included his many new friends into his active social life. He traveled to Africa, Latin America & Europe attending international conferences on behalf of CCVT.

The Trevor Bartram Award will be given to individuals who have made a significant achievement in organizational development, particularly in setting up new community based organizations, consistent with the human rights mandate of CCVT. Experience in developing programs and policies, structures and success with funding initiatives.



Amina Malko Award

Amina was one of the first CCVT staff to be hired and was Office Manager for over 5 years until she moved to OCASI. Amina was an extremely hard working, tireless and committed staff member. Her particular interest was in improving the lives of refugee women and she did indeed have a positive impact through her dedication and perseverance. She advocated on behalf of women refugees, worked for policy changes at the local, national and international level and was a key member in organizing Refugee Rights Day.

Amina undertook to organize a conference "African Women in the Community" with CCVT funding and support, in an effort to have women's voices expressed directly.

The Amina Malko Award will be given to a woman with refugee experience who has significant experience in policy, advocacy and settlement service for newcomers.



Youth Award

This award will be given to youth that have made outstanding contribution in the area of human rights, community service and academic excellence.

Purpose of the Awards:

To recognize the valuable contributions individuals make to build an equitable and just society.

To recognize those who have made a sustained and innovative contribution in the community, demonstrating leadership, initiative, perseverance and originality.

Who is eligible?

Nominees must be residents of Canada. Self-nomination will not be accepted. No person shall be awarded posthumously unless death occurs after his or her name has been selected by the advisory council. CCVT staff and Board members are not eligible.

How are recipients selected?

Recipients will be selected by a committee that will be set up by the Board of Directors of the Canadian Centre for Victims of Torture.

When are the awards presented?

June 26, 2002 United Nations International Day in Support for Survivors of Torture.

Need more information?

Additional information and nomination forms may be obtained by contacting the Canadian Centre for Victims of Torture at (416) 363-1066 Ext. 25

E-mail: mabai@ccvt.org

Mailing Address: Canadian Centre for Victims of Torture
194 Jarvis Street 2nd floor
Toronto, Ontario M5B 2B7

CCVT Programs and Services

1. **Settlement Services**
 - Includes information/orientation, interpretation/translation, counselling, employment-related issues and referrals to resources relating to the economic, social, cultural, educational and recreational facilities that could contribute to the initial settlement of the client.
2. **Mental Health**
 - **Counselling**
 - **Individual and Group Therapy, Mutual Support Groups**
 - **Crisis Intervention:** suicide attempts, breakdowns, family problems, etc.
 - **Art Therapy**
 - **Coordinated professional services:** doctors, lawyers, social service workers provide treatment, documentation and legal support
3. **Children/Youth Program:** Intake/assessment, settlement services, mental health services, recreational and empowerment activities that incorporate conflict resolution, mentoring, peer support and story-telling
4. **Volunteer Program**
 - **Befriending** to assist survivors in rebuilding their connections to others as well as to the greater community.
- **ESL Tutoring and Conversation Circles** to help students learn and practice their English.
- **Escorting and interpreting** for survivors at different appointments (medical, legal, social).
5. **Public Education**
 - responds to numerous requests for information, assistance and consultations on torture and the effects of torture as well as regularly producing resource materials
6. **Refugees in Limbo**
 - Providing services to refugees in limbo that include counselling, assisting in sponsorships, family reunification and other immigration-related issues.
7. **Language Instruction and Training**
 - LINC/ESL classes specially designed to address the needs and realities of the survivor of torture (concentration, memory, depression, triggers)
 - Computer training: basic and intermediate levels
8. **International Projects:** CCVT is associated with a coalition of Centres which support victims of violence, repression and torture, in exile or in their own countries

**Any comments or thoughts about *First Light*?
We warmly welcome letters to the editor!**

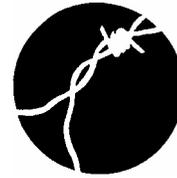
Just mail your comments to:
CCVT
194 Jarvis St. 2nd Floor,
Toronto, Ontario, M5B 2B7
Canada

Or email them to: The Editorial Committee c/o mmillard@ccvt.org

and we'll do our best to publish them in the next issue. We reserve the right to shorten any letters due to space requirements.

YES!

I want to help CCVT respond to the needs of survivors of violent oppression who have sought refuge here in Canada.



Canadian Centre for Victims of Torture

194 Jarvis St.
2nd Floor
Toronto, On M5B 2B7

Tel: (416) 363-1066
Fax: (416) 363-2122

Charitable Reg. 13332 7908 RR0001

- \$20 \$40 \$50 \$150
- \$250 Other

Name _____

Address _____

Telephone _____



CCVT MONTHLY GIVING PLAN

You can pre-authorize small monthly deductions on your credit card. It's so convenient, most of our Monthly Giving members hardly notice their small monthly donation, but it allows them to contribute more. CCVT can plan better knowing how much money to expect each month. And, because we save on paper and postage, more of your contribution goes directly toward helping torture survivors.

Yes I'd like to join the CCVT Monthly Giving Plan by making a monthly donation of:

- \$10 \$15 \$20 Other \$ _____

Please charge my: VISA MasterCard

Card Number: _____ Expiry: _____ Signature: _____

I understand that payments will continue automatically until I notify CCVT of a change.

I'd prefer to spread out my gift by using post-dated cheques.

I have enclosed _____ (number of) post-dated cheques each in the amount of \$ _____

Charitable Reg. 13332 7908 RR0001

Thank you for your support!