



Members of the Center for Victims of Torture—Guinea 2004–2005 International Mental Health Team are, from left to right, Jon Hubbard, Jean-Baptiste Mikulu, Erika Falk, Maki Katoh, Potiphar Nkhoma, Shanee Stepakoff, and Yuvenalis Omagwa.

Center for Victims of Torture—Guinea 2004–2005 International Mental Health Team

International Humanitarian Award

Citation

“For their outstanding commitment to the healing of torture victims and to educating the world community about torture and war trauma. The Center for Victims of Torture’s Guinea Team touched the lives of thousands of refugees in the Albadariah region of Guinea. While working under difficult conditions and the threat of cross-border violence, the Guinea Team provided mental health services for adult and child refugees who fled from civil wars in Sierra Leone and Liberia. Understanding that the enormity of the trauma among refugees meant individual psychotherapy could not be the primary approach, they used a combination of group counseling; community empowerment; and training of community and religious leaders, teachers, counselors, and health care workers to develop a permanent human resource for each traumatized community. The team’s direct work with torture survivors has changed the lives of many who have endured the worst experiences imaginable.”

Biography

The Center for Victims of Torture (CVT) was founded in Minneapolis, Minnesota, in 1985 and was the first organization in the United States dedicated to providing psychotherapy for survivors of politically motivated torture. CVT–Guinea was launched in Gueckedou in 1999 to address the needs of refugees who had fled massive

war atrocities in Sierra Leone and Liberia. Because of cross-border attacks, CVT–Guinea later relocated to Kissidougou, in a remote forest region 10 hours by road from the capital.

From 2001 to 2003, most Sierra Leonean refugees returned home. CVT–Sierra Leone was created in 2001 to serve the needs of these returnees. At the same time, the war in Liberia re-escalated, and thousands of new refugees flooded the camps, most of whom had experienced unimaginable horrors. In 2004–2005, most CVT–Guinea clients were Liberian. The United Nations High Commissioner for Refugees began repatriating Liberian refugees in late 2004. As a result, funding for CVT–Guinea ended after March 2005. CVT–Liberia was created in April 2005 to serve the needs of returnees and other war-traumatized Liberians.

In 2004–2005, CVT–Guinea operated four community mental health centers in the camps. Services included psychosocial assessment and individual, group, and family counseling. The goal was to support survivors of torture and war in regaining the ability to function effectively in their families and communities. A hallmark of the clinical model was the combination of contemporary Western psychotherapy approaches with traditional methods of African healing (e.g., ritual, storytelling, song).

CVT–Guinea built capacity within the refugee population through the recruitment of 40 paraprofessional counselors who were provided with intensive and continuous

training in mental health, trauma, human rights, gender-based violence, child development, torture, counseling, and group facilitation. Trainees were provided with consistent clinical supervision, including direct, on-site supervision of counseling groups. The most talented trainees later assisted in supervising their peers.

In addition, CVT-Guinea trained community leaders, nongovernmental organization workers, teachers, and health care workers on how to more sensitively address the needs of their war-traumatized constituents. CVT-Guinea collaborated actively with the United Nations High Commissioner for Refugees and other nongovernmental organizations and advocated for clients' broader needs. CVT-Guinea conducted community awareness campaigns about trauma, torture, and human rights that reached over 5,000 refugees per year. Methods included Paulo Freire's problem-posing technique as well as dramas, musical performances, facilitated dialogues, posters, and cultural stories.

Between January 2004 and April 2005, CVT-Guinea provided psychosocial services to over 5,000 Liberian refugees (over one quarter of the refugees in the region). During the same 15-month period, the clinicians/trainers supervised and co-conducted over 125 counseling groups, and counseling was provided to over 1,200 refugee clients.

CVT-Guinea was committed to research and program evaluation, and follow-up data were regularly collected and analyzed. After receiving services from CVT, clients showed significant improvements on several measures of mental health. The findings suggest that CVT's services enhanced clients' ability to resume productive, meaningful lives.

Guinea is one of the poorest countries in Africa. Team members traveled two hours each way daily to reach the camps. The road was extremely rough. In the rainy season, a nearby river overflowed, threatening to engulf the team members' vehicle. Heat and humidity were high year-round. There was no running water, electricity was scarce, telephones rarely worked, and e-mail access was limited. Several team members battled serious tropical diseases. The security situation was precarious, with frequent reports that Guinean rebel forces were planning attacks in the region.

The CVT-Guinea 2004-2005 international mental health team embodied gender, ethnocultural, racial, religious, age, economic, linguistic, geographic, and academic/professional diversity. At the same time, team members engaged in active interdisciplinary collaboration and shared many values and visions. All had extensive previous experience with victims of ethnopolitical violence. All are passionately committed to human rights and social justice. All have a deep appreciation for the dignity and

resilience of the human spirit. The team consisted of the following individuals.

Erika Falk (United States), a licensed psychologist, holds a doctoral degree in clinical psychology from the Wright Institute in Berkeley, California, where she won the Outstanding Dissertation Award for her dissertation on the Truth and Reconciliation Commission of South Africa, in which she examined how psychologists could apply their clinical skills to promote political reconciliation. She spent over two years providing psychotherapy for torture survivors at Survivors International in San Francisco. Falk was a clinician and trainer with CVT-Guinea from April 2003 through December 2004. She is presently a clinician in the San Francisco County jails, and she also works with the Liberian Community Wellness Initiative and conducts psychological evaluations for political asylum seekers in California.

Jon Hubbard (United States) is director of research and a psychotherapist at CVT headquarters in Minneapolis. He received his doctoral degree in developmental and clinical psychology from the University of Minnesota. His work includes developing measures for studying the impact of torture and war trauma on survivors. He seeks to develop assessment and program evaluation methods that have utility across diverse cultures. He has initiated a project aimed at building local capacity for conducting research and program evaluation in torture treatment programs in Sri Lanka, Peru, Pakistan, Kenya, Liberia, and Sierra Leone. Hubbard was instrumental in launching CVT-Guinea in 1999 and continues to spend several months per year in West Africa. He provides the clinical oversight for CVT's West Africa programs.

Maki Katoh (Japan) holds a master of science in international affairs from Florida State University. Her thesis focused on participatory development in Nigeria and Côte d'Ivoire. She spent over three years as program coordinator and project director of the Human Rights Clinic at Doctors of the World, managing a large program that trains physicians and mental health professionals to evaluate and document the medical and psychological sequelae of torture for survivors seeking asylum in the United States. She was also a consultant in Rwanda with Forum des Activistes Contre la Torture (Activists' Forum Against Torture), a treatment center for torture survivors in Kigali. Katoh was the country director for CVT-Guinea from March 2004 through March 2005. Since April 2005, she has been the country director for CVT-Sierra Leone.

Jean-Baptiste Mikulu (Democratic Republic of Congo) holds a doctoral degree in psychopedagogical sciences from the University of Mons-Hainaut in Belgium. Mikulu was the psychopedagogical director of a large psychoso-

cial program in Gueckedou, Guinea (Enfants Réfugiés du Monde/Refugee Children of the World), and was instrumental in founding the CVT-Guinea program in 1999. After more than four years as a clinician and trainer, he became CVT-Guinea's field coordinator in March 2004 and continued in that position until April 2005. He was responsible for coordination of multiple components of the program and for administrative supervision of the clinicians and trainers. Since April 2005, Mikulu has been the country director for CVT-Liberia.

Potiphar Nkhoma (South Africa) holds a bachelor of social sciences in social work from the University of Cape Town. He spent nearly four years as a counselor and program coordinator at the Trauma Centre for Survivors of Violence and Torture in Cape Town, South Africa, where he provided psychotherapy to survivors of apartheid torture, former political prisoners, refugees, returnees, and former detainees. Nkhoma was a clinician and trainer in CVT-Guinea from March 2004 through February 2005 and was a clinician and trainer for CVT-Sierra Leone from March through August 2005. He now divides his time between Cape Town, South Africa, and Savannah, Georgia.

Yuvenalis Omagwa (Kenya) holds a Kenya National Hospital diploma in registered nursing from Kenya Medical Training College and holds a diploma in Kenya registered psychiatric nursing from Mathare School of Psychiatric Nursing, where he received an award for being the most outstanding student of the year. He also holds an advanced diploma in psychological counseling. Omagwa was the chief nursing officer for the Ministry of Health at several district hospitals in Kenya, and he spent over five years with Médecins San Frontières (Doctors Without Borders) as a Community Mental Health Nurse and Trainer in refugee camps in Kenya. Omagwa was a clinician and trainer with CVT-Guinea from January 2003 through January 2005. Since then, he has been a clinician and trainer for CVT-Sierra Leone.

Shanee Stepakoff (United States), a licensed psychologist, holds a doctoral degree in clinical psychology (St. John's University), a master's degree in clinical/community psychology with graduate certificate in women's studies (University of Maryland), and postdoctoral certificates in child development (University of Colorado), psychology and ethnopolitical conflict (University of Pennsylvania), trauma studies, and contemporary psychoanalysis. She began working with torture survivors in 1986-1987 in South Africa. She came to CVT-Guinea from the Center for Violence Prevention and Recovery at Beth Israel Deaconess Medical Center in Boston. She was a clinician and trainer with CVT-Guinea from April 2004 to April 2005. In 2005, she was also a trainer and consultant for CVT-Liberia and for mental health nongovernmental organizations in Cambodia. Since May 2005, she has been the psychologist at the Special Court for Sierra Leone.