



The Center for Victims of Torture 2008 Client Demographics

In 2008, CVT provided care for 243 clients in the United States, including 55 new clients. The average length of treatment is 18 months. A total of 96 cases were closed in 2008.

Providing a community where survivors of torture are welcomed and protected is particularly important, since **20 percent of our new clients are refugees and 58 percent are seeking asylum.** The asylum-seeking process itself can retraumatize those who have escaped violence and trauma.

The majority of new clients (85 percent) are from Africa. They are educated people, with 58 percent having completed high school and 45 percent advancing to college, vocational, graduate or other professional training. **In their home countries, they were often persons of great accomplishment, representing a significant resource that has been lost to their families and communities.** Many (27 percent) new clients were considered professionals in their home countries. 20 percent were students, and 25 percent were technicians or in sales and services.

New clients speak, read and write some English (43 percent do so fluently and 15 percent with some difficulty). **Despite their level of education and occupation in their homeland, almost three-fourths were unemployed when they began treatment at CVT,** and only 45 percent had legal authorization to work in the U.S. Those who were employed tended to be working in lower paying, entry-level jobs.

In 2008, new clients range in age from 16 to over 60. Gender distribution is 54.5 percent male and 45.5 percent female. Most new clients have children (76 percent), yet **81 percent of those with children are separated from at least one child and 73 percent of those who are married are separated from their spouse.** This results in two stresses for clients: Helping their children adjust to a new culture and worrying about those still at home, who are often living under very dangerous circumstances.

Torture Experience

New clients in 2008 had, on average two other family members killed or disappeared, and two members of his/her family imprisoned and tortured. The **average length of longest detention and torture for new clients was 293 days;** 36 percent were detained 2-3 times, and 11 percent were detained on 4 or more occasions. The average age when first subjected to torture was 30.



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Just as there are multiple motivations for torture, there are multiple types of torture administered, including:

Physical Assaults, including beatings, prolonged enforced standing, hanging, suffocation, burnings, electric shock, sexual assault and rape, and exposure to extreme heat or cold;

Psychological Torture, including verbal abuses, threats against family, friends and loved ones, false accusations, forced choices, mock executions, and being forced to witness torture, mutilation and murder of others;

Deprivation of Humane Conditions, including deprivation of food and water, being held in isolation, restricted movement, blindfolding, sleep deprivation and withholding of medical care; and

Sensory Over-Stimulation, including exposure to constant noise, screams and voices, powerful lights and forced ingestion of drugs.

Of CVT's 55 new clients, **almost all (43) experienced beatings, 23 experienced psychological torture and 15 reported sexual torture.**

Psychological Diagnosis

Given the experiences of new clients, it is not unexpected that they were highly traumatized when they began treatment at CVT. **Sixty-seven percent of new clients received a diagnosis of posttraumatic stress disorder *and* major depressive disorder.**

Evaluation

CVT collects information from the survivors we serve to ensure our work is helping to reduce their trauma symptoms. Data is collected to measure the following symptoms: depression, anxiety, posttraumatic stress disorder, and quality of life indicators (such as basic/biological needs, social needs and psychological needs). In 2008, CVT found that 86 percent of total clients experienced at least a 25 percent decrease in posttrauma symptoms after three months of services.

CVT is also examining how a client's asylum seeking status might affect their improvement, as well how the severity of a survivor's trauma affects healing. Although we do not have enough data to offer conclusions on the relationship between asylum status or trauma severity on a survivor's symptoms, by examining this relationship we will be in a stronger position to answer questions about torture, the effects on individuals and the effectiveness of healing services for survivors of torture.