Frequently Asked Questions

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Q. What is torture?
A. Torture is the intentional infliction of physical or psychological pain and suffering by or at the behest or acquiescence of any member or official of the state in power. This abhorrent practice represents a deliberate and systematic dismantling of a person's identity and humanity through physical or psychological pain and suffering. The most common forms of torture reported by CVT clients are beatings and psychological torture. It is estimated there are over 50,000 torture survivors in Minnesota and as many as 1.3 million in the U.S. The United Nations definition of torture is contained in the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

Q. What are the effects of torture?
A. Torture can lead to multiple disabling conditions that interfere with even the most basic functions of daily life. Symptoms can include chronic pain in muscles and joints, headaches, incessant nightmares and other sleep disorders, stomach pain and nausea, severe depression and anxiety, guilt, self-hatred, inability to concentrate, posttraumatic stress disorder and thoughts of suicide. Survivors of torture and war atrocities can become immobilized by their feelings and symptoms, unable to function within their communities or contribute to their family's well-being.

Q. Why is torture wrong?
A. Torture affects five basic human needs: the need to feel safe, the need to trust, the need to feel of value (self worth), the need to feel close to others, and the need to feel some control over one's life. Torture's purpose is to break an individual's will and render them helpless, destroy a sense of community, stifle civil society, create a climate of fear and silence dissent.

Q. What does CVT do?
A. CVT rebuilds the lives and restores the hope of people who survive torture and war atrocities. CVT trains local mental health staff in the countries it serves. These counselors
contribute to the long-term mental health needs in their countries. CVT provides technical assistance and training to torture survivor rehabilitation centers in the U.S. and around the world to strengthen each center’s mental health services, organizational management and financial stability. CVT conducts research on and evaluation of rehabilitative care for survivors to determine the effects of torture and successful treatment approaches. CVT engages in public policy and public education initiatives to end torture and to increase government support for torture rehabilitation programs in the U.S. and abroad. CVT directs the New Tactics in Human Rights project and manages the HealTorture.org website.

Q. Where does CVT work?
A. In the United States, CVT extends interdisciplinary rehabilitative care at CVT’s Healing Centers in St. Paul, Minnesota and Atlanta, Georgia. Internationally, CVT extends rehabilitative care in Kenya in Nairobi and at the Dadaab and Kakuma refugee camps; in Jordan we care for refugee survivors living in Amman; in Ethiopia we care for Eritrean survivors in refugee camps near Shire and South Sudanese survivors in the refugee camp in the Gambella region; and we care for survivors of war in Northern Uganda and South Sudanese refugees in the Bidi Bidi settlements.

Q. How many people does CVT care for each year?
A. In Minnesota, teams of interdisciplinary professionals work each year with more than 270 clients; and in Georgia, we worked with 59 clients in 2018. In the international locations, CVT extends rehabilitative care to more than 4,400 clients through group and individual counseling, and in some locations, physical therapy.

Q. Where do most torture and war trauma survivors in the Twin Cities and Atlanta come from?
A. The majority of clients at our healing center in St. Paul, Minnesota, come from countries in Africa; overall, the most common countries of origin for clients in 2018 were Ethiopia, the Democratic Republic of the Congo, Cameroon, Liberia and Myanmar. The Healing Hearts project in St. Paul is focused on Karen refugees from Burma. CVT Atlanta clients come from 15 different countries of origin: the most represented countries are the Democratic Republic of the Congo, Myanmar and Somalia.

Q. How do survivors hear about CVT?
A. Many survivors hear about CVT through word of mouth in the community and referrals by health care, legal and community services organizations.

Q. What are CVT’s public policy priorities?
A. CVT advocates to heal the wounds of torture and to stop its practice worldwide. Our policy priorities focus on prevention, protection, rehabilitation and accountability. To learn more about CVT’s public policy work, go here.

Q. How is CVT funded?
A. CVT is funded by earned revenue from program services and government contracts and by contributions from foundations, individuals, corporations and institutions such as the United Nations Voluntary Fund for Victims of Torture and the International Criminal Court’s Trust Fund for Victims.

Q. What is the New Tactics in Human Rights project?
A. Through the New Tactics in Human Rights project, CVT promotes tactical innovation and strategic thinking within the international human rights community on various human rights issues. Through a vast network of workshops, publications and online discussions, local
activists can share strategies and tactics that have worked elsewhere and apply them to new regions or issues.