



The
CENTER for
VICTIMS of
TORTURE

A Conversation about the Dadaab Refugee Camps

Curt Goering, executive director, and Paul Orieny, PhD, LMFT, international services clinical advisor, participated in a live Facebook chat in June 2013 about CVT's work in Dadaab. Below is a transcript of that conversation. You can view photos of [CVT's project in Dadaab, Kenya on our Facebook page](#).

Curt Goering, executive director, The Center for Victims of Torture

Paul, thanks for joining us. Let's start by just setting the scene.

Paul Orieny, PhD, LMFT, International Services Clinical Advisor

Thanks Curt. Dadaab is in north-eastern Kenya, very close to the border of Somalia. The camp was built in 1991 at the start of the Somali civil war and it was originally a complex of three camps intended to shelter 90,000 refugees. Today, there are more than 460,000 refugees. There has been some expansion of the camps but it is still overcrowded. So right away, you get a sense that conditions are challenging and complex. This area is remote, dusty and very hot, temperatures are routinely above 40 degrees Celsius. Also important to know, about 10,000 refugees are third-generation – that means they were born in Dadaab to refugee parents who were also born there. You can understand that in addition to challenging physical conditions, people also struggle with a sense of hopelessness, feeling idle and isolated.

Curt:

Can you tell us more about the refugees?

Paul:

The vast majority is Somali but we also have survivors from South Sudan, Ethiopia, the Democratic Republic of Congo and other countries. Life is extremely challenging for those who are not among the majority population. Refugees from minority Somali clans or other countries face discrimination, harassment and even assault at times. There is also a stigma attached to people with mental health illness or physical disabilities. For example, there are many amputees and in some cases, they have been ridiculed and even stoned for having a physical or a mental disability.

Curt:

What kinds of trauma have refugees experienced?

Paul:

Our experience after working in Dadaab for three years now is that torture and war

violence among civilians in Somalia was widespread and indiscriminate. Many experienced targeted violence as well as random atrocities of war. As I said before, there are many people with missing limbs. We've had survivors with bullets still lodged in their head after many years. We have a significant number who experienced sexual violence, both at home, while fleeing to Kenya and continuing in the camps of Dadaab.

Curt:

Can you describe the services we provide for refugees?

Paul:

We provide mental health care through both small group and individual counseling. We have two experienced psychotherapists who supervise and lead counseling sessions, and train a team of paraprofessional psychosocial counselors. We see survivors who struggle with crippling anxiety, posttraumatic stress, depression, terrible nightmares, hopelessness and thoughts of suicide. The counseling helps survivors reduce those high levels of distress and improve their ability to function as they once did. Right now, we have ten groups in counseling – six women's groups and four men's groups. They meet for about 10 weeks, and then we conduct follow up assessments and home visits to monitor their well-being, offer support as well as to educate family members.

Curt:

You said the physical environment is challenging. How are you working to create a healing environment?

Paul:

We were lucky to be given an area in one of the camps that is relatively quiet and shady. There were several large trees when we arrived and we continue to care for them. The trees have become an important metaphor for healing. On some, the branches were cut back. So in our counseling groups, we talk about the branches being cut but the roots are still there and the tree continues to grow. We've also built tukuls – culturally appropriate shelters where groups and individuals meet for counseling. The tukuls are round with a thatched roof and we've made them dust-proof to protect those inside during dust storms. The tukuls stay cool inside with Somali mats to sit on. When small groups finish their counseling cycle, they've established a closing ritual where they put a tag on a new tree with their group name and they plant that tree in our healing compound. Today, you can see several trees that have grown quite tall and the group tags are still fluttering from the branches. We also see many survivors who come to our healing compound even when they don't have an appointment. They come for the peace and solace our space offers them.

Curt:

How do you do outreach in the camps?

Paul:

We have a team of 17 paraprofessional psychosocial counselors (we call them PSCs) who are Kenyan nationals and refugees who live in the camps. They use bicycles to travel in the camps and go door-to-door to talk with people. Because everyone lives in tents, their shelters are very close together so it's not difficult to talk with neighbors and build relationships with block leaders and family members. Generally, the response from refugees is really positive. One sign of that is that community members are referring people to us – that's generally an indication that we're building trust and understanding about our work and how it helps survivors.

Curt:

Tell me more about the PSCs.

Paul:

Hiring and training community members is the core of our mental health initiatives. The PSCs receive intensive orientation and ongoing training, learning alongside professional psychotherapists while working with survivors in individual and group counseling settings. The growth that I've seen in learning and skills as counselors is really astounding. I think they also are becoming incredible advocates for nonviolence, for responding to people who are seen as different with compassion. They have an incredible passion for the work as well as empathy for the survivors they work with.

Curt:

Let's talk a little about security in Dadaab. I know this is an ongoing concern. How has this affected our ability to provide mental health services in Dadaab?

Paul:

We're very aware of the risks of working in Dadaab. We work very closely with the UN refugee agency and with INSO (a security NGO), and we're always assessing risk for our staff as well as the survivors we provide care for. It is challenging. Most NGOs like CVT have restricted access to the camps. Our clinic is actually on the edge of one of the camps. We have hired primarily African staff in Dadaab so they don't stand out. We're really fortunate that we've got two excellent mental health professionals who supervise and train the PSCs and provide counseling to survivors. When the PSCs do outreach in the camps, we know where they are and when they are expected back so we can monitor their safety.

Curt:

How does the security situation impact refugees?

Paul:

There is a very specific impact and it's not unique to refugees in Dadaab but I would say it's very pronounced, and it's what I call a culture of terror. The violence and terror refugees experienced in Somalia is carried over into the camps, creating an overall sense

of mistrust and suspicion as well as a culture of silence. We see this in countries where torture is used routinely: the fear is used to silence people, create distrust and tear apart all the things we need to build community. And it's not just the remnants of the terror designated organization Al Shabaab that exist in the camps. The security forces that are meant to keep refugees and Kenyans safe also exhibit brutality when conducting security sweeps. So the violence and fear just perpetuate. But, I don't want to make it seem hopeless. We are seeing that our services, including the direct counseling as well as the community outreach, are making a difference in the lives of people.

Curt:

Can you give me an example of that?

Paul:

There was a family where several family members were amputees. They had come to the camps with the hopes of finding relief from what they had gone through in Somalia and thought that if they got food, shelter and healthcare services they would be fine. They instead were stigmatized and discriminated by neighbors. They felt they couldn't withstand the abuse and became withdrawn, bitter, angry and more isolated just like in Somalia where the torture happened. Through our outreach in the camps, they felt like they might benefit so some family members joined a small group counseling session. The counseling really helped them deal with the stigma. But the outreach also helped the neighbors recognize their role in isolating this family. In the end, they felt that CVT had changed their life. We do have those kinds of small successes that are incredibly important for the individuals but we can see it having a bigger impact on the community.

Curt:

Tell us about the work you're doing with other NGOs in Dadaab.

Paul:

When CVT first began providing services in Dadaab, about three years ago, we were the first NGO that was solely focused on mental health. There were a couple NGOs that provided medication for chronic mental illnesses, and there were NGOs providing basic psychosocial support. But no one was providing clinically sound, culturally appropriate mental health counseling for torture and war survivors. So one of the first things we did was establish a mental health working group among the NGOs in Dadaab so we could coordinate care and refer refugees to the most appropriate place for services.

Curt:

You do a lot of trainings for other NGO staff as well, right?

Paul:

Yes. We've done trainings on psychological first aid, which was much needed in 2011

when the famine in Somalia caused a large number of Somalis to flee to Kenya. We train NGO staff to recognize the effects of torture and war, the symptoms and how to provide sensitive care to survivors. We've trained interpreters. And I think we also learned that humanitarian aid workers themselves were really in need of training and support for secondary trauma. If you think about it, Dadaab is the oldest refugee camp (over 20 years), it's a physically challenging environment but it's also emotionally challenging because we are all working with people who experienced unimaginable violence and loss. So understanding how that can affect you and what you can do to take care of yourself so you remain emotionally and psychologically healthy is very important. We don't want them to burn out because their skills are needed – as educators, as health care providers, as mental health counselors, and as advocates for the men, women and children living in Dadaab.

Curt:

Paul, thank you for sharing your knowledge and experience with us. Thanks also to our incredible team in Dadaab who are doing important, vital work. I also want to thank the U.S. State Department's Bureau of Population, Refugees and Migration, the United Nations Voluntary Fund for Victims of Torture and the United Methodist Women International Ministries for their support of our work in Dadaab.