Since 2006, the Center for Victims of Torture (CVT) has been healing the wounds of torture in the Katanga province in the southeast region of the Democratic Republic of Congo (DRC). During the last three years, more than 800 survivors have been helped through individual counseling and small therapy groups. Outreach, education programs and events have touched at least 7,000 people in this region.

While rape is historically a weapon of war, the frequency and intensity of sexual assaults during the conflict in the DRC are overwhelming. In war, sexual assault is a political tool used to humiliate men and women. It is often committed in front of family or community members. Individuals may be forced to assault a loved one or to applaud or laugh during an attack. Women who are assaulted are often shamed or ostracized by their families and communities. Both women and men are devastated by the intrusion of sexual violence and torture into their lives.

With a near-plague of divorce and marital difficulties following the war, CVT was spurred to pilot couples therapy groups, focusing on women who survived sexual assaults and their partners.

Erin Morgan, who served as a clinician and trainer in Pweto in the DRC and now works as an International Programs Clinical Consultant, designed and conducted the groups with CVT’s psychosocial counselors. “Most women I met were raped,” said Morgan. “And to find a woman who was raped only once is quite rare.”

When a woman experiences a sexual assault she typically withdraws from her husband because she is so ashamed and physically and emotionally hurt. Many Congolese women in Katanga describe their experience by saying, “I was forced to become an adulterer,” emphasizing how they perceive their own role in, and sometimes responsibility for, the rape.

Husbands are often angry and humiliated by the victimization and assault. Frequently they were also tortured by beatings or forced labor. They feel sad and defeated by the poverty and homelessness caused by the war.

CVT’s goal in working with couples was to educate them about

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These Congolese women with a civil society organization walked 45 kilometers in the rain to attend a CVT training on sexual and gender-based violence. In the DRC, rape was used as a weapon of war to humiliate men and women and destroy communities. Most women that CVT clinician Erin Morgan met in the DRC were raped, frequently more than once.
The first credible reports that the United States was engaged in the use of torture and cruelty emerged in late 2002. Since that time CVT has worked to end this misguided policy. We were the first human rights organization to call for an executive order ending torture, and we secured strong, bipartisan support for that position from senior leaders in the nation’s military, national security and foreign policy sectors.

We were thrilled when, on only his second full day in office, President Obama issued an executive order banning torture and cruelty. Thank you for supporting our efforts to gain this Presidential directive.

As I write this letter, the nation is still digesting the information contained in four memos written by the Office of Legal Counsel in 2002 and 2005. In the face of fierce protest, President Obama demonstrated extraordinary leadership in releasing those memos, which attempted the unthinkable: legalizing torture.

And with the release of those memos, our elation over the executive order turned to dismay and disgust at the cruelty that was inflicted on prisoners as part of the CIA’s interrogation program.

In addition to beatings, sleep deprivation, forced nudity, locking prisoners in small cages and even locking a prisoner in a box with an insect (to exploit his fear of being stung), we learned that one prisoner was subjected to waterboarding 183 times in a single month. When interrogators told superiors of their great distress at watching the torment of a prisoner, they were told to resume the torture.

Now the country is embroiled in a contentious debate over the question of whether there should be an investigation into who authorized and ordered the torture. We’re working hard for a nonpartisan investigation; those who authorized and ordered such sadistic treatment should be held accountable.

For more information about CVT’s work, please sign up at our Web site (www.cvt.org) or by using the reply card enclosed with this newsletter.

Thank you for taking the time to make your voice heard, and for supporting the Center for Victims of Torture.

Sincerely,

Douglas A. Johnson
Rebuilding Relationships

From page 1 the effects of torture, renew trust and communication in the relationship and promote healing within the families.

The therapy groups ran ten weeks with full group meetings and women-only and men-only time. The 13 couples also had time during some sessions to talk together about their situations and feelings, before sharing with the group what was meaningful to them in their discussions. To help couples process their experiences and feelings, the therapy focused on couples integrating their experiences before, during and after the war.

After the orientation session, couples discussed what they enjoyed about each other to build a base of appreciation and respect. Spouses shared what was good in their relationship before the war, what they missed from that time in their lives and how much easier things were before the torture.

The group members also addressed how they had changed because of the war. First in gender groups, and then in a large group, men explained how they became angry and had blamed their wives for the actions of the soldiers. “We talked about how much easier it was to be angry at the person who was still there, rather than at the soldiers, who were long gone, and against whom they were powerless,” Morgan said. Women talked about how they had withdrawn from their husbands and wanted to avoid them.

Follow-up sessions addressed the darkest moments during and after the war. As couples, group participants reflected on how they tried to save each other or their family. For some couples this was the first time they talked with each other about their experiences and feelings. They talked about sexual assault, surviving beatings, fleeing their homes, watching their children being harmed and losing their income. Finally, the couples talked about what they wanted to experience in their relationships and their families.

After the group ended, these couples agreed to participate in interviews to evaluate the effectiveness of the groups. “The couples reported fundamental shifts in how they relate to each other,” said Morgan. “They changed how they talk to each other, treat each other and show compassion. Most of them reported that they appreciate their spouse in a more profound way than they had before the war.”

The feedback confirmed that CVT’s initial work with couples was tremendously successful. Several group members found it helpful to talk with other men or women about the war’s impact on their marriage, especially the effects of sexual assault. Many couples reported feeling relief and solidarity after learning that others had experienced many of the same things, and wished more couples could go through the group.

Group members shared their hopes to be better and more supportive spouses. With stronger marriages, better communication skills and restored spirits, these survivors have a solid foundation for parenting their children and rebuilding their community.

Madeline Kabemba is a psychosocial counselor in the DRC. Since 2006 CVT has provided individual and group counseling to more than 800 torture survivors living in the DRC.
Pharmacist Tom Sengupta
Caring for Survivors for 20 Years

For over 20 years pharmacist Tom Sengupta has been serving CVT clients from his store, Schneider’s Drugs, located just a few miles from the Minneapolis Healing Center. He plays a key role in helping many survivors by preparing their medications to treat anxiety, depression and other medical conditions resulting from their torture.

“My purpose is to take care of people,” said Sengupta. Working directly with survivors, he explains the side effects, benefits and interactions of their prescriptions. Sengupta personally connects with survivors. “You can make an impact on people by doing simple things,” he said. Sengupta routinely mails survivors their medications at no cost. He recognizes survivors’ financial limits and insurance situations, working within each person’s individual circumstance. With warmth and concern Sengupta strives to make survivors’ lives easier.

“Tom’s commitment to survivors is obvious in his work. He goes way beyond his work as a pharmacist,” said Sharyn Larson, the nurse and clinic manager at the Minneapolis Healing Center. “Tom cares how our clients are doing emotionally as well as physically. He is truly a holistic pharmacist.”

Planned Giving for Hope, Healing and Your Future

In today’s uncertain economic climate, we’re hearing from many donors who are looking for creative ways to continue supporting CVT’s mission of hope and healing. An increasing number of donors are establishing Charitable Gift Annuities.

A Charitable Gift Annuity (CGA) is a type of planned gift. In return for a transfer of cash, marketable securities or other assets, donors receive a guaranteed lifetime income. The income is based on the donor’s age, and is especially favorable to older individuals.

Here’s what CVT’s long-time donor Dudley Flamm from Northfield, Minnesota, said about setting up a CGA to benefit CVT:

Given the financial uncertainties of the times and the confusing array of investment programs, the intent and clarity of a charitable gift annuity is really a blessing. And while I am pleased to see the distribution credited to my checking account each quarter, I am even more pleased to know that my gift is supporting an organization I really believe in—CVT.

The gift officer simply took care of all the paperwork. For me and any other older person who wants a no-fuss investment that makes your heart and wallet both feel good, the gift annuity is a gift in itself.

CVT’s planned gifts are managed by the Minneapolis Foundation (www.minneapolisfoundation.org). The expert staff there have arranged thousands of CGAs and other types of planned gifts.

If you’d like to learn more about Charitable Gift Annuities or other giving options to support CVT, please contact Pete Dross at 612-436-4868 or pdross@cvt.org.