

Global War and Violence: Implications for U.S. Social Workers

Resources and Suggestions for College Educators



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Cover Images (Left to Right)

1. "Torture Victim in a Spiders Web," International Rehabilitation Counsel on Torture
2. "Disappeared But Not from My Heart," Sushil Thapa, CVICT, Kathmandu, Nepal



Introduction, Description, and Objectives

"In the 21st century, no country can shut itself off or seal its borders."

Michael Blumenthal,
Former U.S. Secretary of the Treasury and
Jewish refugee from Nazi Germany

Introduction

Current estimates of the number of people who have fled to another country to escape civil violence range from 10 to 15 million. An additional 20 to 25 million people move from their homes but stay within the borders of their own countries. A large percentage of the world's displaced are women and children.¹

A small percentage of those who are unable to return home settle permanently in the United States through its formal refugee resettlement program, through the asylum process, or by other means. These newcomers face continued stressful situations as they seek to build new lives for themselves and their families.

Most refugees initially resettle in larger metropolitan areas, but many move to smaller communities and rural areas in pursuit of affordable housing, jobs, and a quieter environment. The majority of social workers have, or will have in the future, refugees and asylees among their clients. It is, therefore, important that social workers are given the opportunity to explore and to understand the special needs and issues of refugees and asylees, as well as to examine their own professional skills and value systems as social workers.

The trauma experienced by refugees and asylees presents challenges to both caregivers and clients.

Secondary traumatization refers to trauma-related stress that is caused by living closely to or working with someone who has suffered major losses or has experienced the horrors of war. Fatigue, depression, nightmares, physical pains, and survivor guilt are some of the possible symptoms of secondary traumatization.

Social workers face ongoing challenges in working with refugee individuals, families, and communities as they confront complex justice and social policy issues surrounding benefits and delivery of services. Additionally, they must understand the global factors that lead to displacement and the local and international determinants that shape intervention.

Members of the social work training staff of the Center for Victims of Torture compiled this resource guide.² It is offered as assistance to educators as they help students to become aware of the history and reality of refugees and asylees and to prepare for work among these newcomers as social work professionals.

The Center for Victims of Torture is a private, nonprofit organization founded in 1985 to heal the wounds of politically motivated torture on individuals, their families, and their communities. CVT has pioneered a program of direct services for

survivors that is unique in this country. In recent years, the programs have expanded to include research, training, and public policy initiatives in order to develop healing resources and build strategies for abolishing torture worldwide.

Description

Global War and Violence: Implications for U.S. Social Workers suggests accessible resources in two related subject areas: refugees and asylees; and torture and war trauma as they affect refugees and asylees. This resource guide includes:

- Introductory material concerning the effects of war trauma and torture on refugees and asylees;
- A glossary of key terms used in this publication;
- Examples of basic skills-building exercises, case studies, discussion questions for social workers and sample research ideas for student projects;
- A bibliography of resources for instructors and students.

General Objectives

The guide offers resources to help instructors:

- Raise students' awareness of the long-term effects of torture, war violence and conflict that cause people to flee from their homes and countries of origin;
- Encourage students to explore social work theories, ethics, and practice regarding work with war trauma and torture survivors;
- Provide resources to students to prepare them to assist clients who have fled war violence.

Footnotes for Introduction

1. Statistics of the United Nations High Commissioner on Refugees, 2001.
2. A variety of educational resources, including consultation, are available from the Center for Victims of Torture. Please call 612.626.1400 for assistance.



Instructors' Notes

Skills and Values

Global War and Violence: Implications for U.S. Social Workers can help students to develop **skills** in:

1. Critical Thinking
 - ✓ Students should be able to approach critical issues with an open mind. They should recognize and expose bias and bigotry.
 - ✓ Students should be able to recognize barriers that prevent refugees and asylum seekers from accessing and receiving social services.
2. Advocacy
 - ✓ Students should be able to use assertiveness skills to speak out for the rights of others.
3. Trauma Management
 - ✓ It is important that students develop the ability to recognize the effects of torture and trauma in individuals and groups, and decide when and how it is appropriate to intervene.
4. Professional Self-Care
 - ✓ Students should be able to identify as well as develop personal, collegial, and organizational resources to deal with their own and others' feelings of helplessness and powerlessness as well as their changed perception of the world, in working with refugee trauma. They should have the ability to find for themselves the balance between over-involvement/burnout and detachment/coldness.

Global War and Violence: Implications for U.S. Social Workers provides resources to assist students in analyzing, clarifying, and acquiring **values** in the areas of:

- Social justice and responsibility;
- Respect for others and self;
- Global concern;
- Service;
- Integrity.

How to Use This Guide

The guide is not prescriptive, but provides interested instructors with starting points for lesson preparation. Instructors may integrate these ideas into their own schemes of work. A glossary of key terms complements the overview of topics, while an extensive reading list provides resources for in-depth learning and references for special topic research. Examples of related activities for students are offered to stimulate creativity in the educational process.

The content of this guide deals with potentially disturbing issues. It is recommended that opportunities for debriefing and discussion be offered frequently during the presentation of the material.

Potential venues for the use of this material in schools teaching social work practice include:

- * Special lectures within a course;
- * Special projects (e.g. in a policy or evaluation course);
- * Seminars;
- * Readings or case studies included in various courses;
- * Independent coursework;
- * Curricula incorporated into courses such as methods, international social work, public policy, social work methods, psychopathology, and cross-cultural social work.

Rationale and Overview

Part One: Flight from Danger to Safety: The Refugee and Asylee Story

At the start of 2001 the number of people 'of concern' to UNHCR was 21.8 million, or one out of every 275 persons on Earth.

Refugees by Number, United Nations High Commission for Refugees, 2001 Edition

A refugee is a person who has left his or her country and is unable or unwilling to return to that country because of a well-founded fear of persecution on the basis of race, religion, nationality, political opinion, or membership in a particular social group.¹ The United States Refugee Act of 1980 defines a refugee in words that closely parallel those of the United Nations Convention Relating to the Status of Refugees.²

Asylum seekers and asylees fall within the general category of "refugees." Excluded from the UN definition are people who, although displaced, have not crossed an international border³ or who are fleeing in a desire for human betterment rather than from persecution. Under the U.S. act, the refugee process is also open to people who are from or still reside in the former Soviet Union and Cuba.

In 2001, the United States admitted 72,500⁴ refugees from 20 countries. This number has fluctuated over the past two decades, but reached a peak in 1980, when 207,000 refugees resettled here. In that year, 79% of the refugees admitted were from Southeast Asia.

The terrorist attack of September 11, 2001, caused a temporary halt to the refugee resettlement program in the

United States. The program resumed before the end of the year, but the number of admissions was very small. It is unlikely that the program will reach pre-9/11 size in the near future.⁵

Asylum seekers come to the United States from a wide variety of countries. In 1999, the U.S. Immigration and Naturalization Service approved 17,800 individuals for asylum. The largest number of men and women granted asylum during that year came from the countries of the former Yugoslavia, Somalia, India, and China.⁶

The journey of a refugee begins in conflict, oppression or war in his or her country, continues on the often-perilous flight to a neighboring country, and may or may not culminate in safety through voluntary repatriation or the offer of permanent refuge. The focal point for humanitarian aid and protection for both externally and internally displaced refugees is the United Nations High Commissioner for Refugees (UNHCR). Some refugees are accepted for permanent residence in third countries, if unable to return home through repatriation or unable to settle legally in the country of first refuge.⁷

Many refugees in the United States have experienced traumatic incidents during times of war and repression, while traveling and in refugee camps and in exile.⁸

Traumatic events are repeated, severe experiences in which a person perceives the imminent loss of his or her life, or that of someone close to him or her. Exposure to

extreme trauma and suffering may result in long-term psychological and physical effects for individuals, their families, and the refugee community.⁹ These consequences may impede and delay the recovery process for refugees in the country of resettlement and may be exacerbated by social and policy barriers.

Traumatic events characteristic of the refugee experience may include:

- Harassment and deprivation of human rights
- Forced displacement
- Perilous flight or escape
- Extreme deprivation: poverty, unsanitary conditions, lack of health care
- Disappearances of loved ones, colleagues, community members
- Witnessing death squads or mass murder
- Rape or witnessing rape
- Torture or witnessing torture

Losses are many, severe, and often final for refugees, and they may encompass:

- Family and community support systems;
- Economic and social status;
- Culture and language of country of origin; and
- Familiar social, cultural, and political structures.

Social and Policy Barriers for Refugees and Asylees

- Separation from family and ongoing danger to family
- High expectations of family members
- Barriers to resuming former level of profession
- Fear of discovery by authorities
- Racism and religious intolerance
- Lack of understanding by caregivers
- Lack of understanding of systems and laws
- Language barriers
- Possible incarceration (for asylum seekers)
- No eligibility for safety net programs (for asylum seekers)
- Employment authorization not available until 150 days after filing asylum (for asylum seekers) or until asylum is granted

Local, federal, and state benefits in the United States, available to ease some of the challenges of resettlement for newcomers, are determined by the legal and practical distinctions among refugees, asylees and other categories of displacement and immigration. Asylees, who are processed in the United States rather than abroad (as are refugees), are eligible for fewer benefits than are refugees.¹⁰

The challenges of fulfilling basic needs and reconstructing communities in a new culture are many for both newcomers and the social workers assisting them. It is imperative that social workers assisting refugees develop a degree of expertise in three areas:

- Awareness of the experiences and needs of refugees (including knowledge of the rights and benefits to which refugees are entitled);
- Knowledge of the consequences of refugee trauma and how to address it; and
- Cultural, religious, and gender sensitivity

The level of expertise needed in each of the areas depends on the type of services being provided and the specific situation of the refugee client. For example, when working with a victim of domestic or sexual abuse, the legal status of the refugee client and the implications of prosecution may be critical

information (for example, if she is filing a self-petition under the Violence Against Women Act [VAWA]). If the worker is suggesting a food shelf, expertise in refugee trauma may not be as important as is sensitivity to dietary customs or knowledge of gender roles.



ArtToday 2002



Refugees from Sierra Leone, Czaia, CVT 2001



Children in refugee camp, West Africa, Czaia, CVT 2001

Footnotes for Part One: Flight from Danger to Safety: The Refugee and Asylee Story

1. From *Protecting Refugees: Questions and Answers*, written by the United Nations High Commissioner on Refugees (UNHCR) and available on-line at www.unhcr.ch/un&ref/who/whois.htm.
2. See Glossary of Key Terms, p. 17, for "Refugee." Refugees and asylees fall under the category of "Immigrants." Note that "Other Categories of Immigration" (see Glossary of Key Terms) includes some that are distinct from those of refugee and asylee status.
3. Internally displaced people (those who have fled a disastrous situation but remained within their country's borders) are not eligible for refugee status but are "of concern" to UNHCR.
4. World Refugee Survey 1999, Immigration and Refugee Services of America (IRSA)/United States Committee for Refugees (USCR).
5. Refugee admissions quotas for the United States are set each year by the U.S. Congress.
6. The number of individuals granted asylum increased in the five years from 1995 to 1999. This was due to changing country conditions and to the effort made by the INS to reduce the backlog of unprocessed cases. In 1993, 7,344 individuals were given asylum in the United States. Statistics from the Immigration and Naturalization Service of the U.S. Department of Justice.
7. According to *Refugee Reports*, a news service of the Immigration and Refugee Services of America, "Less than one percent of the world's refugees are referred for resettlement to a third country." www.refugees.org/world/articles/RR_May_2002_box1.cfm.
8. These experiences are referred to as a "triple trauma paradigm" for refugees. See Orley, J. (1994). "Psychological Disorders among Refugees: Some Clinical and Epidemiological Considerations." In A.J. Marsella, T. Bornemann, S. Ekblad, and J. Orley, eds. *Amidst Peril and Pain: the Mental Health and Well-being of the World's Refugees*. Washington, D.C.: American Psychological Association, 193-206.
9. A list of possible psychological effects from torture is included in Appendix 6, p. 32.
10. The terms refugee and asylee are used interchangeably in the international language of human rights, but are distinct with regards to rights and benefits in the United States.

Part Two: Torture and War Trauma

"Torture is the most effective weapon against democracy."

The Center for Victims of Torture

The universal experience among current refugee groups is exposure to traumatic events and human rights abuses. This is due to political instability, war, and repression in the home countries.

In general, the changing nature of how wars and conflicts are being conducted throughout the world has significantly affected the experiences of civilians. During World War I, only 5 percent of the casualties were civilians. In World War II, that figure rose to 50 percent. In current world conflicts and war, over 90 percent of the casualties are civilians rather than combatants.¹

Social workers may assist refugee clients from war-torn areas who are experiencing long-term effects of war-related violence. It is important

that social work students are educated about the special considerations that are needed when working with survivors of war trauma and torture.

It is estimated that between 5 and 35 percent of refugees in the United States are primary or secondary survivors of politically motivated torture.² Due to the nature of torture, torture survivors may require more than the standard health care and social services available to all refugees. The U.S. Congress recognized this need in adopting the Torture Victims Relief Act (PL 105-320) in 1998.³ This act, funded in fiscal year 2000, provided funding for specialized treatment services to torture victims and their families in the United States and abroad.

"Life was a disaster and devastating to each of us, and each one of the kids thought of dying as a reason to be free from pain of the body."

Young Dinka man from the Sudan describing his flight to Ethiopia



From ArtToday.com 2002

Students should know:

- The prevalence of torture among refugees and asylum seekers;
- Physical, psychological, spiritual, and social effects of torture and war trauma on individuals, families, and communities;
- Strategies and interventions in working with survivors of war trauma and torture;
- Resources for self-care for service providers.

Definition of Torture

"Any act inflicted by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity." UN Convention Against Torture, 1984



Above and left: International Rehabilitation Council for Torture Victims, Copenhagen, Denmark



CVICT, Kathmandu, Nepal

Torture is an attack on all aspects of a person's life. Its effects reach beyond the individual to the family and the community. To heal the wounds—both psychological and physical—the survivor must heal as a whole person and as a member of many communities. Recovery eventually includes reintegration into social and community life.

Torture is the deliberate dismantling of a person's identity and humanity. It is the attempt to destroy one's will to live, one's ability to trust in anyone or anything. *As torture occurs within a cultural and social context, it breaks the connections between individuals and their social environment and breaks the bonds of communities affecting social perceptions, roles, and functioning of individuals, families, and communities.*

The Characteristics of Torture:

- At least two persons are involved—a perpetrator and a victim.
- The torturer has complete physical control over the victim.
- Pain and suffering are an integral part of torture.
- Torture is a purposeful, systematic activity.⁴

The effects of trauma that is deliberately inflicted by human beings tend to be more severe than that of other forms of trauma, such as natural disasters. There is tremendous variance in the effects on individuals. The sequelae range from a few short-lived difficulties to multiple long-term disabling conditions that may interfere with functioning at many levels. For example, a client may experience a range of symptoms from major depression and posttraumatic stress disorder (PTSD) to social isolation and emotion-management difficulties.

Western psychiatric diagnoses, useful in their own right, focus on particular symptoms and on individuals. They do not cover the full range of effects on survivors, their families, and targeted communities.⁵

Torture and war trauma affects everyone in the family as well as the refugee community. The impact of torture and trauma may result in a number of outcomes for families and children.

Effects of Torture on Families

- Vicarious traumatization of family members
- Altered family roles and responsibilities
- Reduced capacity of individuals to provide emotional support for family
- New traumas for children caused by the attachment and emotional disturbances of parents
- Continuing consequences of loss of trust and survivor guilt.

The ripple effect of torture and repression can follow a community of refugees from the land of violence into the country of resettlement. Resettled communities are often filled with fear, anger, and guilt, which may be repressed and silenced. Sometimes perpetrators of torture, or those from clans or factions that represent the torturers, may live in the same neighborhoods as the victims. Division and distrust may thwart the regrowth of a strong community. Social stigmas related to speaking of traumatic experiences (e.g., rape), mental illness, and help-seeking may be present in some communities. Communities require information to understand the effects of war trauma and torture on individuals, families, and their communities.⁶

The community is an important social structure that can foster resiliency and healing among survivors.⁷ Resettled communities, with assistance, can rebuild leadership and regain the capacity to support and heal their members. Both refugee communities and the larger society can support the implementation of strategies for healing individuals and communities. Individuals, families, and communities have resources within themselves for recovery. The social work strengths perspective seeks interventions that restore and build on these capacities. Survivors can be (re)empowered to resume as full a life as possible by (re)connection to their own capacity to cope with the effects of the past, as well as with current life stresses, in order to (re)build relationships and choices in their lives.

As social workers perform their many roles—such as advocate, service provider, or therapist—they provide valuable assistance to survivors of torture and war trauma in their journey to recovery. Judith Herman's book, *Trauma and Recovery: The Aftermath of Violence* (see Resource List), provides some excellent guideposts for interventions that can be adapted for refugee populations as well. Four areas of recovery are briefly outlined below.

Restoring safety and stabilization

It is essential for survivors to attain a condition of relative safety and stabilization of their basic needs (e.g., food and housing) before recovery can begin. This process can be complex and unpredictable—especially for asylum seekers who are not assured of their immigration status. When the conditions of safety and stabilization have been adequately met, steps toward re-establishing health and trust, as well as reducing chronic fears and anxieties, can begin.

Restoring attachment and connection

A purpose of torture is to destroy a person's attachments and connections to his or her own self, family, and community. It takes courage and resilience to renew or make new attachments and connections. Survivors are faced with the difficult process of mourning the myriad losses that have been sustained when moving toward rebuilding meaningful relationships.

Restoring identity, meaning and purpose

Survivors will need to work through, in their own unique ways, what has happened and find a way to incorporate these experiences into the context of their whole lives. Reclaiming a sense of the future and identity through meaningful relationships, work, educational endeavors, and activities can restore context and meaning to life. Social workers are often in roles where they can support the empowerment of survivors to make their own life choices.

Restoring dignity and value

War and torture in the world today strip away the humanity and value of human life for all of us. Experiencing war and torture places victims in untenable positions that often leave them with feelings of guilt and shame for what was done or not done. Acknowledgment and validation that these situations are horrible, undeserved and beyond their control is necessary for the process of restoring dignity and value to the survivor's life and their ongoing efforts toward health and healing. Justice, equality, and human rights are principal concerns in the profession of social work.

"More than any other country, our strength comes from our own immigrant heritage and our capacity to welcome those from other lands."

Ronald Reagan's Statement on U.S. Refugee Policy (July 30, 1981)



From ArtToday.com 2002



From ArtToday.com 2002



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Footnotes for Part Two: Torture and War Trauma

1. Summerfield, D. (1995). Addressing Human Response to War and Atrocity: Major Challenges in Research and Practices and Limitations of Western Psychiatric Models. *Beyond Trauma: Cultural and Societal Dimensions*. New York: Plenum.
2. Jaranson, James, and Popkin, Michael. (1998). *Caring for Victims of Torture*. Washington, D.C.: American Psychiatric Press, Inc.
3. See Appendix 8, p. 38.
4. Stover, Eric and Nightingale, Elena O., eds. (1985). *The Breaking of Bodies and Minds: Torture, Psychiatric Abuse, and the Health Professions*. New York, NY: W.H. Freeman and Co.
5. Northwood, Andrea. (2002). *New Neighbors, Hidden Scars: A Handbook for Working with Refugees Who May Be Torture or War Trauma Survivors*. The Center for Victims of Torture. Available on-line at www.cvt.org.
6. Robertson, Cheryl. (2001). Healing the Community After Torture and Repression. *Lessons from the Field: Issues and Resources in Refugee Mental Health*. The National Alliance for Multicultural Mental Health. Available on-line at www.irsa-uscr.org.
7. Harvey, M. (1996). An Ecological View of Psychological Trauma and Trauma Recovery. *Journal of Traumatic Stress*, 9.1.

Glossary of Key Terms

Alien: Any person not a citizen or national of the United States.

Asylee: An asylee is, according to the 1951 Convention Relating to the Status of Refugees, a person who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership in a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, unwilling to avail himself of the protection of that country." (See *asylum seekers* below)

Asylum: Humanitarian permission to remain in the United States. Asylum is discretionary under United States law. Individuals have the right to seek asylum, but have no right to receive asylum. Asylum is the vehicle through which the United States provides protection to aliens who are physically present in this country and who are in danger of persecution if forced to return to the countries from which they fled. The basic idea of asylum is protection, so a grant of asylum allows the persecuted individuals to remain in the United States in safety, regardless of whether she or he has any other legal means for staying in the country.

Asylum seekers apply and are processed in the United States after they have entered the country or are at the border. Once an asylum seeker is granted asylum, he or she becomes an asylee under U.S. law.

Employment authorization: The required permission and documentation to work from the Immigration and Naturalization Service (INS) and Social Security Administration in the United States (e.g., Employment Authorization Document [EAD] from the INS and a Social Security Number from the Social Security Administration).

Immigrant: An alien admitted to the United States as a lawful permanent resident. Immigrants are those persons lawfully accorded the privilege of residing in the United States. They may be issued immigrant visas by the Department of State overseas or adjusted to permanent resident status by the INS. Refugees and asylees are eligible to apply for adjustment of their status after one year of residency in the United States.

INS: The U.S. Immigration and Naturalization Service (INS), an agency of the Department of Justice, is responsible for enforcing the laws regulating the admission of foreign-born persons (i.e., aliens) to the United States and for administering various immigration benefits, including the naturalization of qualified applicants for U.S. citizenship. The INS also works with the Department of State, the Department of Health and Human Services and the United Nations in the admission and resettlement of refugees.

Internally Displaced Person (IDP): A person who has left home to flee persecution, but who stays within the borders of their home country (for example, Colombians or Sudanese fleeing from south to north in their respective countries).

National: A person owing permanent allegiance to a state.

Other Categories of Immigration (in addition to "refugee" and "asylee"):

- Migrants: Persons who leave their country of origin for economic reasons or for reasons not covered under the limited refugee definition.
- TPS (Temporary Protected Status): A designation by the U. S. Attorney General that nationals from a particular country (or particular stateless people) need temporary refuge and work permission in the United States.
- DED (Deferred Enforced Deportation): A designation by the U. S. Attorney General that nationals from a particular country (or particular stateless people) continue to require temporary refuge and work permission but may be required to return to their home country as soon as conditions are deemed satisfactory by the United States.

Refugee: A refugee is, according to the 1951 Convention Relating to the Status of Refugees, a person who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership in a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, unwilling to avail himself of the protection of that country." Refugees apply and are processed in other countries before reaching the United States.

Secondary traumatization: Secondary traumatization is one of several terms that are used to describe trauma-related stress caused by working closely with traumatized individuals, families, and communities. Other terms include "compassion fatigue" (Figley, 1995) and "vicarious traumatization" (Pearlman and Saakvitne, 1995). Many of the signs and symptoms are similar to the effects of the trauma itself and include: fatigue, depression, withdrawal from others, forgetfulness, difficulty concentrating, feelings of helplessness and hopelessness, nightmares and intrusion of violent images into daily thoughts, physical complaints such as headaches and frequent illnesses, survivor guilt, loss of compassion, and feelings of isolation.

Torture: "Any act inflicted by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the

consent or acquiescence of a public official or other person acting in an official capacity." UN Convention Against Torture, 1984

Traumatic event: A traumatic event is one that is outside the realm of normal human experience. It overwhelms the (coping) capacity of the organism to deal with the experience. The disruptive effects of the event on the individual may be profound and long-lasting and may affect all aspects of functioning.

United Nations High Commissioner for Refugees (UNHCR): The Office of the United Nations High Commissioner for Refugees was established in 1951, in response to the needs of 1 million, mostly European, refugees. Currently, UNHCR cares for almost 12 million refugees worldwide and is concerned with the safety and well being of an additional 10.4 million internally displaced people.

Basic Skills, Discussion, Critical Thinking and Research Projects

- A. Topics for student research:
- Origins of asylum
 - Immigration history in the United States
 - U.S. refugee program quotas
 - The role of UNHCR, its support base, its challenges
 - Refugee benefits in Sweden, Canada, Australia, or another country with a refugee resettlement program vs. benefits in the United States for refugees
 - Impact of politics on refugees and displaced persons (e.g., Cuba vs. El Salvador, Guatemala or Haiti)
 - Impact of social welfare reforms on refugee and immigrant populations
 - Impact of immigration reform laws on refugees and asylum seekers
- B. Experience a "flight from danger" with the "Packing Your Suitcase" exercise (Appendix 1). Where will you go? What will you take with you?
- C. Critique a popular movie that concerns refugees and the conflicts that produce exile. Note how the film portrays the refugee story, the attitudes of the receiving community, the stages of refugee adjustment (Appendix 2), and refugee trauma.

Movies to View

Broken English	Enemies: A Love Story
Moscow on the Hudson	Journey of Hope
El Norte	Welcome to Sarajevo
Savior	The Killing Fields
The City (La Ciudad)	Beautiful People
Pretty Village, Pretty Flame	They Come in the Night
Lumumba	

- D. Explore resources in the community that exist to provide services to refugees and asylum seekers. Pay special attention to differences between the two populations of people, time restrictions on services, and community perceptions of new populations coming into the community. Interview service providers and have them identify the challenges they see for refugees and asylees.

Areas of focus for community services:

- Legal needs and services
- Social services: housing, food, employment or other sources of income, welfare and child support, social security benefits, etc.

- Education and training opportunities for adults and children
 - Medical services
 - Mental health services
 - Community support systems: cultural/community support groups, religious institutions, etc.
 - Collaboration and cooperation among service providers (e.g., coalitions of service providers)
 - Special needs: language, gender, age (children/elderly), disabilities, etc.
- E. Review "Characteristics of a Good Working Relationship," (Appendix 3), and discuss the role of social workers in nontherapeutic relationships with clients. How should a social worker respond to disclosure of traumatic events?
- F. The General Assembly of the United Nations adopted the Universal Declaration of Human Rights in 1948. It sets forth the basic civic, economic, political and social rights and freedoms for everyone and is meant to serve "as a common standard of achievement for all peoples and all nations." Explore the meaning of asylum with discussion of Article 14 of the UDHR (Appendix 4). Investigate the issues of asylum policy for a country with a large population of refugees (e.g., Tanzania or Senegal) or for the European Union. Play the role of an officer determining protection, either in a role abroad or in the United States. Experience the process from the other side of the desk.
- Good resources for this practice include *Human Rights and Refugees* (UNHCR materials and web –site, www.unhcr.ch) and *A Well-Founded Fear* (documentary that follows asylum seekers through the asylum process in the United States) available at www.well-foundedfear.org and *Abandoned: The Betrayal of America's Immigrants* (documentary about imprisoned asylum seekers and their treatment in the United States) available at www.bullfrogfilms.com. Without assistance, complete the asylum application (Appendix 5).
- G. Discuss the psychological effects of torture and war trauma on individuals and communities (Appendix 6). What are the possible implications for employment, child-raising, education, and other skills for successful living? For example, how might sleeplessness, loss of trust, a heightened startle response, or short-term memory loss have an impact on a survivor's ability to function well at a job in an office building?

Video Resources:

- *From Terror to Healing: Part 1: Overview of Political Torture Today and Part 2: The Torture Survivor's Perspective* (available from the Center for Victims of Torture, www.cvt.org)

- *Calling the Ghosts: A Story about Rape, War and Women* (documentary on the situation in Bosnia-Herzegovina and efforts for justice through the UN Tribunal Against War Crimes in the Former Yugoslavia) available through www.wmm.com.
- *Operation Fine Girl* (documentary about the impact of the war in Sierra Leone on women and girls (including rape, abduction and sexual slavery) and child soldiers) available at www.witness.org.

H. Work with case illustrations of torture survivors (Appendix 7 and 8).

I. Investigate the interaction of social attitudes and policy-making on local, national, and international levels. In Minneapolis-St. Paul, contact the Immigration Task Force, Minnesota Advocates for Human Rights, Immigration Law Center, or a Southeast Asian community organization for information about local refugee and immigrant responses. Research the history of the passing of the Torture Victim Relief Act (Appendix 8). How does this national legislation affect local situations? Look for updates on the international movement to bring perpetrators of war crimes to trial (log on to www.impunity.org or use key words: war crimes tribunal).

J. As providers of services to people who have been traumatized, social workers may experience changes in their own feelings, perceptions of the world, and relationships. This is *secondary traumatization*. Secondary traumatization is a normal, inevitable part of working with individuals, groups, and communities that have suffered major losses or experienced terrible events. Although it cannot be avoided or eliminated, attention to self-care may modify or reduce the effects of secondary traumatization.

Read the article in Appendix 9 and answer a sample of the questions for use in small groups.