

asia justice and rights



lahir di Roidi
pada tanggal
15 Maret tahun
1953
Saya umur 4 tahun
Masuk sekolah
dasar di PEKA
Roidi
sampai umur 10 tahun
masuk kelas 2
guru SEMKRAR
Mulai 1964

Mulai tahun 11-20
saya masuk sekolah
BAK MULAI NAIK
Kelas 3
TENZAR NAIK
MUSNAN
KAMPUR Roidi
jadi tidak
sekolah BAK

Tahun 21-30
saya naik dengan
sami tagul-22
tahun 1973. di
sampai
tahun 1975-28
saya beranak
anak tapi kem
dingin tapi mati
tahun 1975-7

Tahun 31-50
tahun 1980
sudah keluar
di dwan dengan
BAK BAK
Tapi tinggal
di kampung
di BAK BAK
tidak BAK DARI
ORANG

Tahun 51-60
keluarga saya
KEADARAN BAK
saya masuk
AKA ASKOL
BAK

KARTU POS
NAMA PENGIRIM
Marthina Workar
ALAMAT PENGIRIM
Desa Dusi
Distrik Kaki Barat
Jalan Kaki Barat
Kampung Kaki Barat
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A memory box of Marthina Workar, a survivor from Papua

Report Training of Facilitators on Community-Based Strategies for Strengthening Survivors of Torture

AJAR Training Center, Bali, Indonesia
13-20 June 2014



Report

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Community-Based Strategies
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POINTS of

TJ as a
LENS
SEE
UNDERSTAND
SEARCH
JUSTICE
HOLISTIC WAY

+ SIMILARITY

HISTORICAL EVENTS

Violences
Victims
Trauma
Various
PAIN

SHARING
KNOWLEDGE

- Concept - Tools
- IN OWN GROUP
 - IN COMMUNITY
 - IN THE NETWORK

Initiate/strengthen
SUPPORT
GROUP

for trauma victims

- Capacity buildg
- Institutional - u -
- STATE responsibility

Referee
Program

KNOW
the
LIMIT

- PARTICULAR

Selfcare
Program

Relaksasi
Picnik

SPORT
regularly

School
f. VICTIMS

INTER regional
SURVIVOR
NETWORK
JOGJA, KUPANG, BURU

Modul =

Awareness
Advocacy
Program

Policy
Advocacy

add on
Rencana
AKSI
NATIONAL

documentation

CONSELING

individual
group

- CHILDREN

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In June 2014, Asia Justice and Rights (AJAR), Komisi untuk Orang Hilang dan Korban Tindak Kekerasan (KontraS), and the National Peace Council of Sri Lanka (NPC), co-hosted a seven-day training on community-based strategies for strengthening survivors of torture and other forms of ill-treatment.

The aims of the workshop were to:

- Educate participants about trauma and train them in the facilitation skills of the Trauma Support Model
- Create awareness about and develop strategies for self-care and institutional support
- Train participants in participative methods to generate grassroots discussions on transitional justice issues

The workshop was led by Ms. Valdi Van Reenen-Le Roux (Executive Director) and Mr. Tatenda Mamoyo (Senior Trainer) from the Trauma Center in Cape Town, South Africa (www.trauma.org.za). Tati Krisnawaty and Galuh Wandita from AJAR provided additional facilitation.

The workshop program was filled with a mix of sessions on trauma concepts, education and strategies for self-care and institutional support, and experiential training on participative tools. At the end of each day participants had a chance to practice self-care through yoga and dance classes.



Key Lessons from the Workshop



Do No Harm and other key principles in working with survivors

Over the course of the workshop, the participants learned key values, approaches, and principles for working with victims of torture and other forms of ill-treatment. Participants learned how to identify and avoid creating interventions that are harmful to survivors. Other key principles and approaches include: maintaining confidentiality, being non-judgmental, being an active listener, and keeping the focus on the person/people you are helping.

Defining Trauma: Complex and Continuous

The first days of the training focused on learning what trauma is: a response to a distressing event outside the range of expected life experiences. We learned that trauma impacts people on the physical, psychological, emotional, and spiritual levels. Small groups explored the differences between a crisis and a trauma. We also learned about symptoms of Post-Traumatic Stress Disorder (PTSD) outlined in the Diagnostic and Statistical Manual (DSM-V). Most of the participants felt that trauma in their countries is different from how trauma is defined in the DSM-V. It is often not just one event, but ongoing. Some people experience multiple traumas and are dealing with complicated situations. For instance, in Timor Leste there are cases of women who were raped who end up having relationships with the perpetrators. The participants learned about the emerging fields of study around Complex Trauma and Continuous Trauma, and found them particularly relevant for their local contexts.

Empathy, Apathy, and Sympathy

Participants also learned how to respond appropriately to trauma through the use of empathy. Tools of empathy include active listening, making referrals, being non-judgmental, and working in a culturally sensitive way. We were alerted to the dangers of over-identifying with or feeling sorry for survivors (sympathy), which can be disempowering and keep victims trapped in trauma. Small groups also developed and presented key strategies for showing empathy to torture survivors in their communities.

Knowledge, Reflection, and Empathy: Key Components of the Ideal Health Professional

A “Trust Fall” activity highlighted the role of community facilitators in “holding” victims and survivors. In order to hold victims, we learned that facilitators should strive to embody all three components of an Ideal Health Professional: empathy, knowledge, and reflection. Participants recognized the importance of making time to reflect on their work and their relationships with the community, in order to help personal growth. During the workshop, many participants reflected on and spoke about their own experiences of trauma or the impact of living in a community affected by violence. Learning about the characteristics of a health professional helped them to reflect on their dual roles as both survivor and helper/facilitator.

The Four Dragons of the Helping Profession: Vicarious Trauma, Secondary Stress, Compassion Fatigue, and Burn Out

The participants gained insight into the four types of hurts, or ‘dragons’ that can negatively affect those working with victims and survivors. We learned that vicarious trauma can arise when a facilitator or counselor works with a person who is traumatized. Secondary trauma can come about when people know about a trauma experienced by a family member, friend, or significant other. With many facilitators living in areas that have seen violence and trauma, they are affected in both professional and personal areas of their lives.

Self-Care and Institutional Support

Participants learned about the critical importance of self-care to prevent and treat vicarious (and secondary) trauma, compassion fatigue, and burn out. This was a new concept for many of the participants. In Indonesia, for example, people just carry on with their work, documenting violations and writing report after report without ever taking a break. Some questioned how they could care for themselves when there was so much suffering in their communities to attend to. As the workshop progressed, we began to see how taking care of ourselves will help us take better care of the survivors that we work with. As one Indonesian activist noted, the fight against impunity in Southeast Asia is long, and so facilitators must take care of themselves to sustain their energy for the long journey. Throughout the workshop, the participants experienced and learned a wide range of self-care techniques including massage, dance, yoga, writing in journals, meditation, and breathing. By the end of the workshop, participants developed practical and holistic self-care strategies to maintain their physical, emotional, and spiritual health.



We also learned about the need for institutional support systems to back up individual self-care strategies. Such support might include changes in organizational structure to ensure that each facilitator receives proper supervision. It might also mean creating (and implementing) leave systems so that those working with survivors are encouraged to take time away from work to restore their energy. This is a new concept for all of the countries represented at the workshop. Participants considered ways to raise institutional support issues at their agencies.

Individualized Trauma Support to Victims and Survivors

Participants learned the basic foundations of individual counseling as part of the Trauma Support Model. These included:

- The need for multiple interactions (6-12 hour-long sessions are the ideal) rather than one-off meetings with victims
- The importance of individualized treatment plans for each client
- The importance of taking notes and keeping records

There was a range of experience among participants. While a handful of participants work at agencies where individual counseling is the core business, the vast majority work



at agencies that offer more flexible and informal individual support. For instance, one participant from Sri Lanka explained how she frames her work as “befriending” instead of counseling. Most of the work takes place outside of the office and set sessions. For many participants, individual counseling is seen as a Western approach that is still new to the Asian context.

Group-Based Trauma Support to Victims and Survivors

The Trauma Centre also shared its approach to working with groups of survivors through moving through a sample 7-session template for a support group for families of the disappeared. Practical steps were given on how to recruit and engage group members from the first session to the closing ceremony. Only a handful of the agencies at the workshop provide formal group counseling, although some offer interventions or workshops with groups. For the vast majority it was a first taste of how group counseling works. Many participants noted that group work might be more effective in reaching a larger number of survivors and helping them to feel less isolated and marginalized within their communities.



Transitional Justice and Breaking the Cycles of Violence

We learned about the cycles of violence and how isolation, fear, anger, and the desire for revenge can help fuel ongoing conflict and trauma. Assisting survivors and communities to address trauma can help break cycles of violence. Linked to this, we also learned about transitional justice (TJ) and its four prongs of truth, justice/ accountability, institutional reform, and healing. Addressing trauma is at the core of healing, and therefore an essential part of the transitional justice framework. While participants from Sri Lanka and Timor Leste have had some exposure to the concept, the concept is still a relatively new one for Burma and Indonesia.

Participatory Action Research Tools

Over the course of the workshop participants had the opportunity to learn about a range of tools for generating grassroots discussion about transitional justice and healing in their communities. Participants were so hungry to learn these methods that the workshop program was expanded to include more of them. AJAR staff facilitated each of the tools as mini workshops, in order to give participants practical experience with the tools and how to use them. The tools covered at the workshop were:

- Photo storytelling
- Flower and Stone
- Resource Mapping
- Community Mapping
- Community Timeline
- Memory Boxes

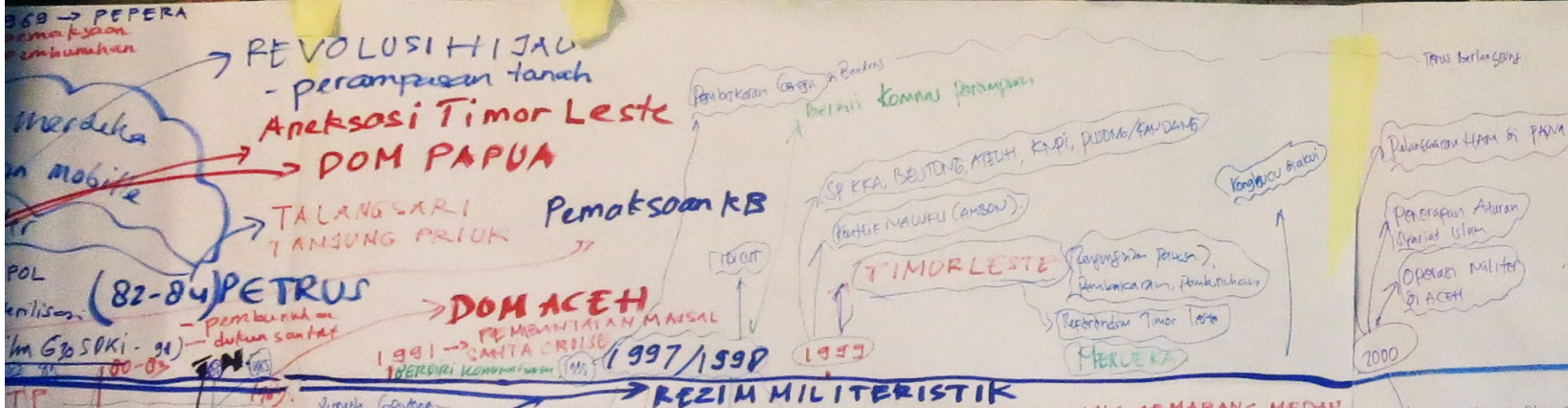
Photo storytelling was particularly well received by participants. Many saw the value in creating an intimate space for survivors to share painful memories and moments of hope and resilience. AJAR's photo story specialist also shared practical skills for how to improve the content and quality of photographs. Participants greatly enjoyed testing their skills, and the improvement was noticeable.

The timeline exercise proved to be an engaging and stimulating tool for participants. Although the session was aimed at training participants on how to facilitate the tool, it still managed to open debate and discussion among participants exposed to it for the first time (most notably those from Burma). It highlighted the need for strong facilitation of this tool with groups from different cultural and religious backgrounds.

Most participants also found memory boxes to be powerful tools for both research and psychosocial work. Participants were trained in how to help clients/participants collect documents and objects that have meaning for them. It is a powerful visual and narrative representation of the challenges faced by survivors and their resilience in overcoming these challenges.



Country Reports

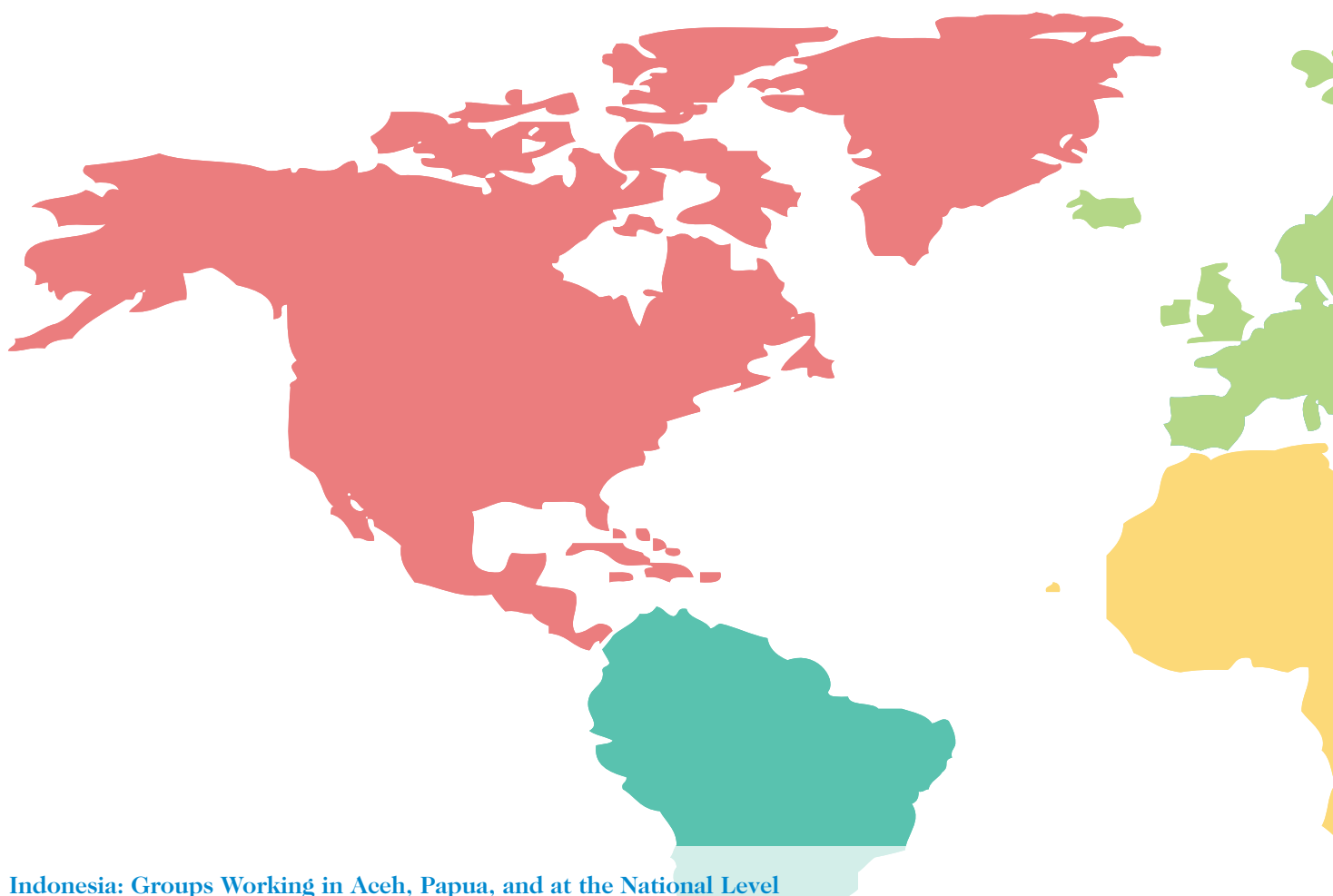


On the final day of the workshop, participants worked with colleagues from their country or regional area to present plans for practical implementation of what they had learned.

Indonesia: Survivors of 65

This group presented their vision for working with victims of 1965 violence in several areas in Indonesia. The group will collect and update information on victims in Palu, Buru, Kupang, and Jogja. They will use the participatory action tools to update information about what support victims have received from the government and what they still need. Self-care and institutional support will be an important part of the project. Other activities will be a cross-areas network, listing needs and mapping resources, and initiate community learning centers. The participants will share what they learned about self-care with other organizations in their area.





Indonesia: Groups Working in Aceh, Papua, and at the National Level

The participants in this group (IKOHI, KontraS, LPSK, ELSHAM, Sobat KBB, K2HAU) work on different issues, but found common themes such as responding to militarism, addressing freedom of religion issues, and working with survivors. All groups see their work inside the TJ framework. The group came up with a number of ideas for how to use what they learned at the workshop:

- Share knowledge about self-care with their colleagues and organizations, in hopes of developing new policies and systems of institutional support
- Build capacity in Indonesia for trauma support
- Conduct victim sensitivity training with the Witness and Victim Protection Program, the National Ombudsman, and the National Commission on Domestic Violence
- Continue to advocate for urgent interim reparations and the establishment of a truth and reconciliation commission
- Launch a project focused on children who were abducted
- Establish trauma centers, safe houses, scholarships, and reparations programs in Papua

Myanmar/Burma

The delegation from Burma was made up of four organizations that were meeting each other for the first time. After the workshop, they will continue to meet and share information and ideas for joint work. Three potential areas for work are:

- Advocacy and awareness-raising about transitional justice
- Advocacy and awareness-raising about trauma and mental health
- A national trauma referral network

Many of the organizations were interested in more training on the DSM-V, transitional justice, and child psychology.





Sri Lanka

The delegates from Sri Lanka plan to take the work from the conference forward in various ways at their different organizations. All hoped to adapt and use participatory tools, educate others about self-care, advocate for institutional support programs, and include victims in discussions about transitional justice.

Timor-Leste

Participants from Timor Leste plan to implement the trauma healing and self-care methods as a part of their training for survivors. They will carry out the training on trauma healing with survivors and frontline workers representing districts and organizations. In addition, they hope to create a module that reflects the context of Timor Leste, develop group counseling for survivors in each organization, improve system assessment and the victim referral process, strengthen support groups through coordination and action plans, and implement periodic self-care activities.





“Wounded healers” can benefit from support, supervision, and training that provides them with the space to reflect on their unique role.

Reflections on the Workshop

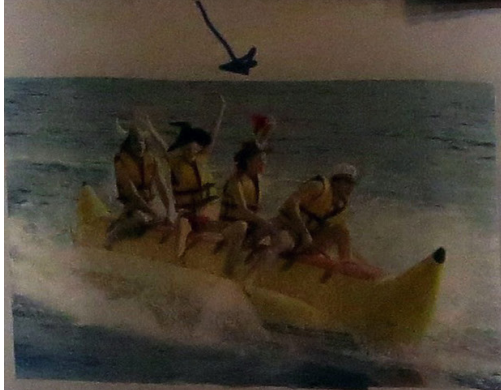
- The workshop succeeded in offering participants an introduction to trauma and a taste of a broad range of interventions to address it. As trauma and psychosocial support are still relatively new concepts in many Southeast Asian countries, it was a useful way to engage interest from a variety of participants with diverse experiences. The workshop was the perfect tool to lay the foundation for follow-up and more in-depth training for those interested.
- Although the workshop provided a unique opportunity for cross-cultural learning in the Southeast Asian region, it is clear that there is still work to be done to build psychosocial capacity and networks at the local and national level. Many participants (particularly those from Burma and Sri Lanka) met each other for the first time at the workshop. For some, it was their first opportunity to reflect on their work and/or issues of working with survivors with someone outside their organization. There is a need to create space at the national level and support burgeoning networks in each country.



- Many of the workshop participants (like many of those who work with survivors in general) have a history of trauma or victimization. This has a great impact (which can be both positive and negative) on their ability to support other survivors. “Wounded healers” can benefit from support, supervision, and training that provides them with the space to reflect on their unique role.
- It is important to respect indigenous knowledge and practice while introducing Western concepts of trauma and psychosocial support. While it can be useful to share information about the DSM-V and Western concepts of mental health, it must be done with a critical approach so that individualized medical models do not necessarily take precedence over long-standing, community-based methods. Follow up trainings should give space to those working with survivors to explore existing best practices as a starting point for exploring models of trauma support work.
- Workshop participants reflected on the realities of frontline work with survivors. Many enter the field to conduct documentation, research, and advocacy with survivors, and end up providing psychosocial support as they go deeper into their work. Many more readily identify themselves as activists than professional trauma support workers. As a result, not everyone may wish to develop specialized clinical skills or become a “counselor.” Yet these workers can still benefit from learning basic helping skills, self-care, and guiding principles to improve their effectiveness and reduce the potential for harm from their work.
- Participants enjoyed learning about participatory action research tools and felt confident that they could facilitate them in their communities afterward. Some participants who are currently involved in purely psychosocial work learned how to link their work to action research. AJAR can play a key role in assisting frontline/psychosocial workers to integrate participatory research (and advocacy) into their work in the future. There were also discussions about whether participatory action research tools could be adapted for use as stand alone therapeutic interventions. This is something that AJAR and its partners can also explore as the tools are used and adapted in different communities.
- There is interest and need to build capacity at the local and national level for more specialized trauma support services. Many participants identified the need to develop national referral networks for victims. More work needs to be done to map existing services and gaps for survivors of torture in each country. Programs and specialized training that could be identified or developed include case management systems, group interventions, wellness activities, self-help groups, and individual counseling.
- Diversity of language and the large number of participants proved to be a challenge. The first three days were facilitated as a plenary with simultaneous translation in Indonesian and English. After careful consideration, the conference organizers rearranged the program on Day Three to split the workshop into groups operating in English and Indonesian. Although this precluded some cross-cultural learning between participants, the benefits far outweighed the costs. There was more time and space for participants to learn and engage more deeply with facilitators and each other. This led to increased feelings of trust and safety. Participants for whom neither Indonesian nor English is their first language also benefited from this shift, as smaller groups were a less intimidating space to engage. Future trainings, especially those seeking to impart clinical skills, might be more effective with a smaller number of participants and limited translation (if feasible).

Recommendations for the Way Forward





The workshop provided a great introduction to trauma, self-care, and transitional justice, and opened the door for a variety of activities to build capacity and ensure that a psychosocial perspective is effectively integrated into all of AJAR's work. Some practical ideas moving forward include:

- AJAR can explore **developing basic educational materials** on identifying trauma, depression, and other mental health issues faced by victims and survivors. These can be adapted and translated for use in local and national contexts.
- AJAR and its partners can develop a **short training package (or training modules) on “Working with Survivors”** for those working on AJAR projects. This will ensure that a psychosocial perspective is brought to all of AJAR's work. Training workshops should be largely experiential and use role play and other hands-on teaching approaches. Key components should include:
 - Guiding principles: Do No Harm, a strengths-based approach, survivor-centered work
 - Identifying trauma, depression, anxiety and other mental health issues faced by victims/survivors
 - Active listening skills
 - How to handle emotions/difficult situations with survivors
 - Identifying and linking to community support mechanisms
 - Self-care
- For AJAR partners interested in developing more specialized work or programs, AJAR could work with psychosocial consultants or organizations to provide **in-depth psychosocial support training and/or program development**. Programs and projects would be developed/adapted locally in order to ensure that they take a culturally appropriate and gender-specific approach. Types of trainings/projects that could be developed include:
 - Short-term group interventions
 - Case management/referral systems
 - Psychosocial accompaniment/ individual counseling or support
 - Family interventions
- AJAR should offer ongoing exposure to and **training in participatory action research tools** to organizations conducting psychosocial work. These agencies can benefit from linking clinical interventions to research and advocacy initiatives.
- Frontline workers and trauma support specialists could participate in **exchanges** with organizations doing similar work in other countries. Exchanges could last 1-3 months and enable workers to get a hands-on and in-depth training on selected trauma support models and methodologies. The Trauma Centre in Cape Town is a potential host.
- AJAR and its partners should consider mapping existing services for survivors and victims of torture and other forms of ill treatment in specific countries.

Participants' organizations

INDONESIA

Bersatu Untuk Kebenaran (BUK)
Ikatan Keluarga Orang Hilang Indonesia (IKOHI)
Jaringan Perempuan Indonesia Timur (JPIT)
Kiprah Perempuan (KIPPER)
Komunitas Korban Pelanggaran HAM Aceh Utara (K2HAU)
Komisi untuk Orang Hilang dan Korban Tindak Kekerasan (KontraS)
Lembaga Studi dan Advokasi Hak Asasi Manusia (ELSHAM)
Lingkar Pemberdayaan Perempuan (LAPPAN)
Lembaga Bantuan Hukum (LBH) Apik Aceh
Solidaritas Korban Pelanggaran HAM (SKP HAM)
Solidaritas Korban Pelanggaran Kebebasan Beragama/Berkeyakinan (Sobat KBB)
Lembaga Perlindungan Saksi dan Korban (LPSK)

TIMOR-LESTE

Associaaon Chega Ba Ita (ACBIT)
Fokupers
Luzeiro

MYANMAR/BURMA

Assistance Association for Political Prisoners (AAPP)
Institute for Political and Civic Engagement (IPACE)
Wimutti Volunteer Group

SRI LANKA

Human Rights Office of Kandy Diocese
Center for Protection and Promotion Human Rights (CPPHR)
Child Development Initiatives (CDI)
National Association of Counselors
National Peace Council

Asia Justice and Rights (AJAR) is a non-profit human rights organization based in Jakarta, Indonesia, established in 2009. AJAR works to increase the capacity of local and national actors, including victims' organizations, in the fight against entrenched impunity, and to contribute to building cultures based on accountability, justice, and a willingness to learn from the root causes of mass human rights violations in Asia-Pacific.

Visit our website at <http://asia-ajar.org>

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