

How torture tears apart societies from within

October 4 2018, by Lotte Buch Segal



Utö, Finland, graffiti. Torture is a process which doesn't stop at the event itself but that eventually goes on through generations. Credit: <u>aaron blanco</u> <u>tejedor/Unsplash</u>, <u>CC BY-SA</u>

Munir is a Kurdish man in his forties. We met several times in his home, with his family, and in the clinic where he has been for therapy. It took him a long time to open up.



Even though his wife knew that he had received medical assistance to counter the long-term effects of physical <u>torture</u> under Saddam Hussein's regime in Iraq, she did not know the details of what had been going on in the multiple places of confinement he, as a Kurdish activist, had been detained in Iraq. Least of all that he was raped at a local branch of Mukhabarat, the regime's infamous intelligence service.

About his time in prison, Munir stated that "I lost everything there, I lost my manhood". Derivatively, his imprisonment had on more than one occasion resulted in a row in which his wife would wonder about his lack of desire for conjugal intimacy. In this sense both his actual time in the prison and the way in which this moment in time continuously exert pressure on his conjugal relation has turned his imprisonment into a temporal marker of emasculation because of both the rape and the way in which his wife misconceives of him.

Munir is one of the many people I met while conducting <u>ethnographic</u> <u>fieldwork</u> among clients and health professionals in a Danish NGO <u>in</u> <u>2003-2004 and 2016-2018</u>.

Accepting the traumatic victim

For over 30 years this NGO has offered interdisciplinary rehabilitation for survivors of torture. As such, my fieldwork has unfolded within the heart of what Didier Fassin and Richard Rechtman argued is <u>The Empire</u> <u>of Trauma</u>, namely the global apparatus of psychiatric interventions, manuals and theories which have given way to the traumatic victim as being culturally and morally respectable.

Many in Denmark complain that out of approximately 160,000 refugees who have gained residency in Denmark too many fail to integrate that is, they do not learn Danish, they fail to contribute to the workforce, and generally do not display proper <u>"Danish" markers of belonging</u>, despite



the fact that belonging might be felt yet not always be tangible in <u>familiar cultural gestures</u>, such as performing the handshake irrespective of gender, consuming alcohol and sending small children in state nurseries rather than taking care of them at home.

What those critical of migration tend to forget, is that reinhabiting life after torture or any trauma – <u>one-third of all refugees in Denmark have</u> <u>experienced or witnessed an event of torture</u> – is one of the most fundamental difficulties faced by patients as well as by therapists.

Understanding why it is difficult is crucial, not only for current victims but also for their kin.

Torture is a fundamental inversion of the social world

Indeed, crafting a new social fabric in another country is often hampered because their social worlds have been torn to the extent that they might never be stitched again.

As the philosopher <u>Jean Améry writes</u>, torture is a fundamental inversion of the social world.

Building on personal experience of the extermination camps of the World War II, Améry teaches us that torture is <u>never only about the here</u> <u>and now</u> in which an individual is suffering at the hands of a perpetrator. Rather, torture is such a <u>profound tear in the fabric</u> that makes us human that it can distort even the <u>most fundamental elements of social existence</u> , including, not least, social relations with near as well as distant others.

Repercussions on kin and generations

Understanding the reverberations of Munir's experience of torture, we



are aided by anthropologist Shahla Talebi's rendering of violence and loss in the case of a female Iranian prisoner who committed suicide after she was released from prison under first the Shah and later the Islamic Republic. Talebi knows from her own experience the torture and excruciating circumstances of imprisonment because she was captured there for a decade herself [imprisoned in Tehran]. (www.jstor.org/stable/10.2979/j ... ge_scan_tab_contents) In he book Ghosts of Revolution she teaches us how life after torture might in fact never become inhabitable again, thus her fellow inmate's suicide: "The gravity of the losses that result from multiple forms of violence, including society's gendered expectations and judgements, prevents her from redefining her subjectivity under the current conditions of her life and beyond the loss."

Munir did not commit suicide. But we sense his struggle to redefine male subjectivity from being a Kurdish political activist to being a caring father and responsible husband. Despite his secret Munir has in his own words a strong and warm friendship with his wife, part of the story being the care he takes never to speak about his past experience of violence in front of his wife and their children. We see how his gestures of care toward his family are braided with his unrevealed memory and embodied sense of thwarted masculinity. Munir's experience of rape thereby surfaces not only in intimate moments with his wife but as much in his continuous effort to care for his wife and children.

Anthropologist Veena Das offers a way to understand Munir's experience of simultaneously care and defeat by asking us to <u>understand</u> <u>the conjoining forces of kinship, politics and pain</u> where torture is made to stand out as a singular event but which is actually always folded into the ordinary. It reveals itself in the social ties through kinship or with other communities of belonging.

Does treatment make a difference?



Underlining how difficult the process of healing might be for the survivor's sense of self, recent scientific studies have concluded that whereas specialized treatment might not make a notable difference for the individual survivor, it does if measured at the family level where the effects of treatment are seen in the upward socio-economic status of <u>the children of the survivors</u>.

Meanwhile, other studies estimate that torture-related trauma increases the risk of violence within a family, as such underlining Améry's insight that torture scars the social world fundamentally.

The clinical staff, among whom I do fieldwork, know these challenges intimately from years of professional practice. As such there is a schism in working to ameliorate the effects of torture while knowing that those very effects may only hardly be treated. As stated, the beneficiary effects might not even be tangible until the next generation. How is this schism worked through in and beyond therapy?

The wall

A senior psychotherapist recounted to me how she had just initiated a treatment plan with a client, who in turn had offered her a picture of what taking up therapy at the clinic meant to her: To be able to let go, break down, and simultaneously have the sensation that there was a wall behind her so that even if she fell there was something, and someone behind her to help her piece together not only herself but her relationships to her children too.

In therapy, she did not have to keep up appearances, did not have to communicate how and why she was not well. The therapists knew.

The woman's expression of the wall as a picture of therapy and the



therapist who receives this picture both acknowledge what kind of object the wall is. It is a picture showing us that the client and the therapist agree on what suffering means and on the fact that no one can prevent the afflicted of falling apart, they also accept that this failure is part of the attempt of stitching together a fractured social world. This eventually enables a process of healing, not necessarily for the torture survivor but for the next generation.

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Provided by The Conversation

Citation: How torture tears apart societies from within (2018, October 4) retrieved 17 April 2024 from <u>https://medicalxpress.com/news/2018-10-torture-societies.html</u>

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