

FRAGILE COMMUNITY: TRAUMA, TRUTH, TRANSFORMATION AND THE
SOCIAL CONSTRUCTION OF SUFFERING AMONG LATIN AMERICANS AND
THE STAFF OF A UNITED STATES TORTURE TREATMENT CENTER

by

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This dissertation focuses on Latin American survivors of political violence and the staff members involved with one of the few torture treatment centers in the US. Relying primarily on life histories and semi-structured interviews, my research focuses on the social construction of suffering (Kleinman et al. 1997) created by the staff and participants over the course of three different eras of the center. While the clients of this center lead lives that are tremendously impacted by the violent histories of their home countries, they do so while living in a country where this history is almost completely invisible. As exiles, they are removed from the arena of collective memory reflected in debates in postwar transitional Latin American societies about the meaning of the past,

the reasons for their suffering, and the need for historical truth. Consequently, I examine the torture treatment center as one arena where this history and the suffering of survivors is acknowledged. As such, I argue that the staff serves as a critical social network—indeed, perhaps the only one—that influences the individual interpretations, narratives, and actions of survivors about the meaning of trauma, the importance of the past, and how one best heals from violence. First, I illustrate how the biographies of staff shape their involvement with the center and the meaning the center has for them, which, in turn, leads to both the promise and predicaments of their work for social change. Second, this research illustrates the diverse forms that trauma can take and argues for a connection among structural, transitional, and political violence. Third, I explore how the meaning attributed to trauma and the past shapes notions held by the center’s staff and participants regarding how one best heals from trauma. Throughout the exploration of these themes, my work identifies the presence of certain discourses and the absence of others—the frictions and fragments occurring in engagements between social service networks and those they serve (Tsing 2005)—that reflect the possibilities for and limitations of individual healing and collective change and that make this center a “fragile community.”

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CHAPTER I

INTRODUCTION

My dissertation project focuses on Latin American survivors of political violence and the staff members involved with one of the few torture treatment centers in the US. Relying primarily on life histories and semi-structured interviews, this project is centrally concerned with subjective meanings and interpretations—in other words, the social construction—of memory and the past, suffering and trauma, and of healing and transformation throughout three eras of the organization’s history. The central inquiry connecting all of these arenas is that of “memory as the process of giving meaning to the past” (Jelin 2003:21): How people—both staff and participants—interpret trauma combined with how they understand the past shapes their ideas and actions about how healing and change should happen. While the clients of this center lead lives that are tremendously impacted by the violent histories of their home countries, they do so while living in a country where this history is almost completely invisible. As exiles, they are removed from the arena of collective memory reflected in debates in postwar transitional Latin American societies about the meaning of the past, the reasons for their suffering, and the need for historical truth. Consequently, I examine the torture treatment center as one arena where this history and the suffering of survivors is acknowledged. As such, I argue that the staff serves as a critical social network—indeed, perhaps the only one—that influences the individual interpretations, narratives, and actions of survivors about the meaning of trauma, the importance of the past, and how one best heals from violence.

Throughout the exploration of these themes, my work identifies the presence of certain discourses and the absence of others—the frictions and fragments occurring in engagements between social service networks and those they serve (Tsing 2005)—that reflect the possibilities for and limitations of individual healing and collective change and that make this center a “fragile community” for its participants.

Project Evolution

El Centro de la Solidaridad,¹ (The Solidarity Center) one of a handful of US treatment centers for survivors of torture, came into being as the result of one woman’s awareness of the impact her country was having in the lives of others and her conviction that each person carries with them the personal responsibility to say “no” to torture. Initially, *El Centro* focused on bringing one person or one family from Latin America to live in the safety of a residential setting for a year, receiving whatever psychological and physical therapy they needed to recover from political violence. Often, people were extricated when their lives were in immediate danger. The center was born in an unlikely setting—a mid-sized West Coast city that had very few Latino residents in the early 1990s—during an era just past the height of violence in Central America and in the midst of a plethora of solidarity activities being carried out by concerned US citizens (Golden and McConnell 1986; Loescher and Scanlan 1986; Nepstad 2004).

I first became acquainted with this center in 1997, recently returned from my first trip to Guatemala where I had been studying Spanish and investigating research possibilities for my master’s degree. *El Centro* was located in an unassuming house on a

¹ All the names of the organization in its various forms and the names of all individuals are pseudonyms.

residential street. “The casa,” as everyone called it, was very easy to miss even though it existed in a West Coast city that was overwhelmingly European American. However, many people did find their way to its doorstep, almost on a “need to know,” word-of-mouth kind of basis. Although many of us, including myself, do not remember how we originally came to find out about the center, the common prerequisite seemed to be an interest in Latin America and a desire to volunteer and make some kind of difference in the local community. I had no idea in 1997 that I would remain involved with this organization—and its evolution—at various levels of intensity over the course of ten years, and that this involvement would culminate in a research project for my dissertation.

At the beginning of my involvement in 1997, *El Centro* was run very much according to founder Beverly McKenzie’s original vision as a sanctuary in which survivors could live without fear and receive an array of holistic health services donated by various community providers. Volunteers formed the foundation of *El Centro* for two reasons. First, in addition to serving survivors, “Bev” (as she prefers to be called) wanted her center to also educate the wider community in which the center was located. Volunteers went through a training that included becoming educated about torture in general, Central American violence in particular, and the role their own country played in destroying the lives of others, thus amplifying the impact of this small center to many areas of the larger community. Second, in their willingness to educate themselves about the existence of torture and to hold out a hand to those who had survived it, volunteers symbolized hope to survivors. Volunteers demonstrated on a tangible, daily basis that not

just one, but many people, cared about the suffering and survival of Latin Americans affected by torture. Casa volunteers drove participants to appointments, tutored them in English, taught them how to ride the bus, helped children with their schoolwork and navigating the US school system, taught residents to drive, cooked with them, giggled with survivors about romances, and took survivors on outings to the mountains and the ocean. Professional volunteers donated physical therapy, provided free psychotherapy so that many people could speak out loud about their traumas for the first time, and provided surgeries that vastly improved the life quality of tortured individuals.

I was most directly involved with *El Centro* during this era of its existence. A timid knock on the front door might be met with any number of responses, including none because there was too much commotion inside, or maybe people were out in the large backyard pondering how to tackle the task of preparing the garden for planting. Usually, though, someone would hear the door, open it with a smile and say, “pase, por favor” (“come in, please”). And usually, I would follow on their heels which almost always led me past the two small front bedrooms serving as offices for the staff, to the kitchen beyond—the prime hang out spot. Although the house had two very large bedrooms upstairs and a huge living room next to the kitchen, the kitchen is where most of us spent most of our time. Someone was always cooking something—delicious *caldos de res* (beef stews), *frijoles negros* (black beans), and *huevos revueltos* (scrambled eggs) were staples. In addition to cooking activities, the large dining room table nearby provided the preferred surface for tutoring little Guatemalan boys in fourth grade math, for explaining the troublesome pronunciation of English words, or for just sharing

thoughts, ideas, and—very important—*chisme* (gossip) in front of the large sliding doors offering a view of the back deck and yard. The large living room primarily served as a place for the kids to bounce off the walls and for small parties when volunteers, staff, and participants would celebrate a birthday or holiday with food, music, and singing. The house was simply decorated with political posters, maps, artwork and a ragtag assembly of second hand furniture. Although there was nothing fancy about the material possessions at *El Centro*, the things, the people, and the energy of the place definitely created the feeling of a home.

When I returned to the center in 2001, the casa looked the same, but felt different. Latino staff members from Mexico, El Salvador, and Chile came and went, including Tomás Baeza, an indigenous Mapuche man from Chile who was the center's first Latino director. More volunteers filtered in and out. The most significant change, however, was that in addition to the original residential program, the center had expanded its mission to search out survivors of political violence who were among the growing Latino population now present in the city.² Consequently, staff of the casa reached out to a psychiatric program for refugees located in a large university hospital hours away in order to receive the financial and clinical support they felt necessary to serve the growing numbers of survivors in their midst. In addition to individual counseling appointments with the psychiatrist of Western State Science University (WSSU) that were now occurring in the upstairs of the house, every Wednesday "*el círculo social*" (the social circle) was initiated

² Census figures document more than 4,000 Latino persons living in the area in 1990, while more than 10,000 lived in the area in 2000—more than double the amount of ten years earlier (US Census Bureau 2000).

and run by the Chilean psychologist, Graciela Franklin, who originally began her relationship with *El Centro* as a volunteer. Any person participating in the program was invited to drop in and discuss concerns and share experiences with other participants who came from any one of ten different Latin American countries. A youth program—started by an El Salvadoran woman who also began working at the organization as a volunteer—was also occurring at the *Casa*. Sara Castillo began this group to work with Latino youth—many of whom were family members of the adults participating in the community outreach program—in order for them to have a place of their own. Her goal was to develop youth leadership skills and to have the youth contribute to supporting the programs and needs of the *Casa* in a way that would increase both the autonomy of individual youth and the autonomy of *El Centro* as an organization where Latinos were not only the recipients of services, but were also increasingly taking on roles of offering services and making decisions about the direction of the agency. *El Centro* newsletters were now written in Spanish and English, with many articles authored by clients and members of the youth group. Social gatherings became larger at the house. The center also began to organize increasingly large events open to the wider community, complete with human rights speakers, survivor stories, musicians playing Latin American music, and great food. These events served both to raise consciousness about torture and as fundraisers for the organization.

Within the context of increasing Latino immigration that increased the need to serve survivors among their midst, post 9/11 immigration politics that made getting visas for families to come to the residential program increasingly difficult, and the shifting

interests of international funding agencies that no longer saw Latin America as a hotspot of violence, *El Centro* evolved in many ways that had little to do with Bev Mckenzie's original vision. The tranquil sanctuary of the small close-knit group of staff, volunteers, and one family had become a beehive of ideas and activities. What originally felt more like a family atmosphere had expanded to become a community.

During a later period when I was not involved with the center, increasing problems among the various staff and programs began to surface. In 2005, twelve years after its founding and shortly after the departure of Tomás Baeza, bitter disagreements erupted and the program closed its doors. Two key staff members went on to continue their program in other locations. Sara Castillo moved the youth group across town and expanded its name and mission. Now called "*Solidaridad Multicultural*," ("Multicultural Solidarity") the same core group of youth expanded to focus on educating themselves, other Latinos, and larger community about immigrant rights as human rights. Graciela Franklin and the community outreach program supported by the larger university hospital moved across town to offices in the largest Latino umbrella organization in town. The name of the intercultural psychiatric program became "*Siempre en Solidaridad*" ("Always in Solidarity"). It would be difficult for me to overstate the amount of pain produced by the break-up of *El Centro de la Solidaridad*. If life in the casa felt like a family, the split—as Graciela Franklin later told me—felt like a divorce. Feelings were hurt, people were betrayed, and the two organizations fought over the pieces of what the organization had once been. So, when neither would agree to let the other have the name,

both groups made sure that the word *solidaridad*—a piece of the history—stayed in the new name they each created for themselves.

I was grateful not to be a part of the sad ending of the organization because my happy memories of the casa and respect for each of the wonderful staff members I had known over the years could remain intact. So for this and other reasons, when Graciela eventually contacted me with an idea for a research project involving a group of the *Siempre en Solidaridad* clients who were attempting to form their own non-profit organization, I hesitated. I agreed with Graciela that this was an important story to tell, a story about the kind of individual healing and community building that can occur among people who have suffered every kind of loss and yet still work to rebuild their lives. She also saw this as a story about participants moving from dependency to self-sufficiency as they created a group by and for themselves. However, in addition to worrying about the implications of working with one side of the agency fallout, I also felt that after focusing my Masters research on political violence, I was not sure that I could return to such a painful topic and do it justice *again*. It took me quite some time during my Masters work to realize how much I was affected by the stories I heard and read and wrote about and presented, and to learn that there was such a thing as secondary PTSD, and that I had it.

In addition to these more personally-oriented reasons, I also, to be honest, originally saw only limited theoretical potential in writing about a local clinic that served a very small population of people. So I pushed this project aside and wrote unsuccessful research grants for a convoluted project that I was not deeply invested in and for which I did not really have a clear idea of how to carry out. As I began to face increasing pressure

to start some kind of project that would finally lead to the completion of my degree, I decided to contact Graciela and investigate further. At this meeting in the Fall of 2006, I began to realize the potential of the project by considering how I could discuss the non-profit participants were forming within a larger context that considered the staff and clients of *Siempre en Solidaridad* as a whole. I began to envision the possibilities of putting survivors of political violence—from ten different countries with different legal statuses and with various class, gender, and cultural identities—at the center of a dissertation that my original title indicated would be about “suffering, survival, and solidarity.” As the *actual* title of this dissertation indicates, my research evolved to become about “trauma, truth, and transformation.” What may appear to be a simple shift in alliterative preference in fact describes a world of difference in my methodological and theoretical approaches to this project. I originally thought I had a neat little research package that would focus on the specifics of political violence people had endured, the strategies they used to survive these acts of violence, and how solidarity with other clients and the staff of this center played a role in healing the suffering of these Latin American individuals. I imagined receiving fairly straightforward accounts of damages done and the successes and limitations of overcoming this damage.

But I can only describe what happened after I actually started interviewing as my project both unraveling and exploding out. My research “unraveled” in the sense that what I saw initially as a nice, tight little theoretical ball of yarn turned into a great big complicated, tangled pile once I started talking with people. The assumptions I had made upon entering the research—and assumptions are something all researchers must begin

with to a certain extent at the start of any research project—began to be apparent to me almost immediately. Theoretically, the richness of the interviews—the depth and breadth of the topics these stories told me about the world we live in—is evidence of just how much we really can learn by focusing our attention on the local when we trace specific sites to larger structures and issues. The project “exploded out” in the sense that before I began interviewing, I believed my project would be interesting, but I thought of it somewhat as a compromise professionally in terms of its methodological limitations and theoretical significance. What I came to realize, however, was that my study was most definitely not less significant because it was primarily based on “just” interviews that concerned “only” a small group of survivors and staff at a tiny torture treatment center. In fact, my interviews with survivors and staff took me on an epistemological and methodological journey that made me grow tremendously as a scholar. I discuss this journey further in Chapter II, “Epistemology, Methodology, and Methods.”

Trauma, Truth, Transformation, and Social Suffering

My original concept of “suffering” in relation to this project paralleled how political violence is more typically defined: torture, disappearances, massacres, and the everyday fear of living in a war zone. When I initiated this project, I expected to hear stories of suffering only from the participants at the center. However, an oral history approach to interviewing created the opportunity for me to realize that I needed to expand my notion of suffering and to expand those affected by it to include the staff of *El Centro*. In other words, I had to stop thinking of suffering as a an object with fixed contours that I had already defined for those involved with the agency and start thinking of suffering and

trauma as a constructed process with many layers of meaning. As a result of my interviews, I came to see the layers of trauma³ in terms of what Kleinman et al. (1997:ix) refer to as the topic of “social suffering,” which brings together:

an assemblage of human problems that have their origins and consequences in the devastating injuries that social force can inflict on human experience. Social suffering results from what political, economic, and institutional power does to people and, reciprocally, from how these forms of power themselves influence responses to social problems....That grouping of human problems also defeats categorization of such issues as principally psychological or medical and, therefore, individual. Instead, it points to the often close linkage of personal problems with societal problems. It reveals too the interpersonal grounds of suffering: in other words, that suffering is a social experience.

The first major shift that occurred as a result of these realizations was to challenge myself to move from thinking about suffering only in terms of political violence—as extraordinary events happening to individuals—to defining suffering in more general terms as trauma and seeing trauma not as an aberration, but as a likely event inherent to and integrated in structural processes common to international divisions and hierarchies, national imaginings, the machinery of modernization, and the “flows” and “scapes” of globalization (Appadurai 1996). I shifted from looking at trauma as an effect of larger events, an unfortunate by-product, to asking how larger structures *produce* trauma in systematic ways. The ideology of the cold war combined with the material benefits to world superpowers that supply the vast majority of arms to poorer countries combine to create a political economy of militarization that make political violence within countries and between countries a likely and predictable outcome rather than an extreme or

³ Young (1997:246) explains the term “trauma” as originally referring to physical wounds or the cure of wounds that cause pain and suffering which was then “extended, *via analogy*, to include cognitive emotional states that cause psychological and existential pain and suffering.”

surprising occurrence (Enloe 1989; Nordstrom and Robben 1995; Sluka 2000). How the nation is ideologically defined in terms of who belongs to it and who does not, along with patterned material inequalities along the lines of class, race, and gender create a national political economy that *legitimizes* a spectrum of violence against certain groups of people (Aretxaga 1997; Cockburn 2004; Giles and Hyndman 2004; Nagengast 1994; Stavenhagen 1992; Stephen 1999). Finally, processes like modernity and, more recently, globalization produce violence: “as the apex of societal values, national interest comes to define liberal modernity....Torture and social suffering exist, then, not because of the absence of modernity, but because of modernity’s very tenets and technologies and tactic of bureaucratic order for asserting national interest” (Kleinman et al. 1997:xxii-xxiii). In terms of globalization, scholars Giles and Hyndman (2004) assert that inconsistent immigration policies, structural adjustment programs, and the increasing phenomenon of ethnic nationalism are only a few of the many ideological and material effects of global economic integration and regional interdependence that are often linked to conditions of war.

Political violence in the more narrowly defined sense is certainly part of the story of *El Centro*. At the casa, clients included a Guatemalan indigenous man who had been beaten nearly to death by members of the military, a Guatemalan indigenous woman who had been raped as a message to her activist mother, a Guatemalan *mestiza* woman who was kidnapped and tortured by the military as a favor for her husband—a military man—who was having an affair and thought of his wife as an inconvenience to be rid of, and a Panamanian teenager who was paralyzed when she jumped from her family’s fifth floor

apartment during the United States invasion of Panama. At *Siempre en Solidaridad*, some of the clients include a Colombian couple who was threatened by the FARC⁴ because they refused to pay them the “obligatory tax” that would ensure they were left alone, and a Guatemalan couple who were being threatened in 2002 because their fathers were each accused of being members of the guerrilla and murdered in the 1980s. These lives were incontrovertibly shaped by political violence. What I am arguing against is the common portrayal in the public and within academia of this type of violence as irrational, surprising, or extreme, when in fact my research—along with the work of other scholars—demonstrates that political violence is structured and produced in systematic and systemic ways by the world in which we live.

As I examined the social construction of trauma and suffering at the agency, I also began questioning the distinctions made between political violence and structural violence and instead began to search for the linkages and the overlap between the two. The life history approach created the opening for participants to discuss multiple forms of traumas in their lives and what became painfully evident to me in interview after interview was the prevalence of *structural* violence in the majority of the stories I heard and the ways that political and structural violence ebb and flow into each other. Stated briefly, this type of violence is defined as frozen into structures and culturally legitimized....“Structural violence’ usually alerts us to look at the ways strong states and

⁴ *Fuerzas Armadas Revolucionarias de Colombia* (The Armed Revolutionary Forces of Colombia): A self-proclaimed Marxist-Leninist revolutionary guerrilla organization designated as “terrorist” by the Colombian government.

economic actors can achieve their will over weaker countries, classes, groups, and individuals without recourse to weapons” (Cockburn 2004:31). As Farmer points out,

Structural violence is violence exerted systematically—that is, indirectly—by everyone who belongs to a certain social order: hence the discomfort these ideas provoke in a moral economy still geared to pinning praise or blame on individual actors. In short, the concept of structural violence is intended to inform the study of the social machinery of oppression. [2004:307]

The concept of structural violence is apparent in Foucault’s (1979) notion of the disciplinary power embedded in social and material structures taken for granted by Western society as normal, natural, and reasonable, Gramsci’s (1971) definition of hegemony as the violence, force, and power sublimated in social institutions and the ideologies of the ruling class that come to be taken for granted by the subordinate classes, and Bourdieu’s (1977) concept of how structures of violence can be reproduced in a society through an internalization of a habitus of violence where systematic forms of oppression—such as racism, sexism, and classism—structure social interaction in coercive ways, which, in turn, reproduce the divisions on which those same practices are based.

Many *Siempre en Solidaridad* participant interviews focused primarily if not exclusively on trauma resulting from structural violence. I did not expect this. I heard detailed stories of child abuse, partner abuse, and a grinding poverty that affected almost every aspect of people’s lives. In Guatemala, poverty and racism combined to play a role in creating guerrilla movements and in the decision of which communities were targeted by national militaries. These wars, in turn, create transitional societies in Latin America today that are rampant with drugs, gangs, lynchings, “delinquency” and “common crime”

(Godoy 2006; Moser and Mellwaine 2001; Sanford 2008). Destroyed infrastructures, decimated social services, huge debt burdens, dehumanized people, fragmented families and out-of-work soldiers and guerrilla members all contribute to a huge amount of violence in transitional societies. In fact, many of the agency's participants are here not because of war, but because of the aftermath of war. One man's son was kidnapped and murdered by gangs in post-war El Salvador. One woman left Guatemala because her boyfriend was a member of a gang and began threatening her life after she left him due to his abusive behavior, which included rape.

My research confirms the work of other scholars that political violence and structural violence are connected and equally important phenomena to consider. Kleinman et al. (1997:x) include both political and structural violence in their explanation of social suffering as occurring along a spectrum ranging from genocide to the “soft knife” of routine processes of ordinary oppression.” Cockburn (2004:43) asserts that gender can be used as a tool that “links violence at different points on a scale reaching from the personal to the international; battering and marital rape, honor killings, dowry burnings in peacetime and military rape, forced prostitution, and sexualized torture in war: No wonder women often say, ‘War? Don’t speak to me of war. My daily life is battlefield enough.’” Medical anthropologists Paul Farmer (1997) and Nancy Scheper-Hughes (1992, 1997) persuasively argue that the violence of everyday life demands more attention from both scholars and the public. Farmer (1997:262) states that in Haiti “suffering is certainly a recurrent and expected condition....where everyday life has felt like war” and that the stories of Haitians

illustrate some of the mechanisms through which large-scale social forces crystallize into the sharp, hard surfaces of individual suffering. Such suffering is structured by historically given (and often economically driven) processes and forces....For many, including most of my patients and informants, life choices are structured by racism, sexism, political violence and grinding poverty.

[Farmer 1997:263]

Scheper-Hughes, in discussing her work on infant death in Brazil and on homeless and delinquent teens being murdered by state forces in both Brazil and South Africa states:

It is this human capacity to reduce other humans to non-persons, to things, that has motivated much of my anthropological work on the structures, meanings and practices of 'everyday violence'. It is essential that we recognize in our species and in ourselves a genocidal capacity and that we exercise a defensive hyper-vigilance and hyper-sensitivity to less dramatic though far more common acts of violence. [1997:472]

In the separation of violence into two distinct categories, one thing we seem to lose is the recognition and representation of people affected by structural violence. Burstow (2003:1296) critiques the definition of trauma contained in the DSM-IV as tying trauma to a physically dangerous and unusual occurrence or event, when in fact "oppressed people are routinely worn down by the insidious trauma of living day after day in a sexist, racist, classist, homophobic, and ableist society." Victims of "extraordinary" (political) violence are often made much more visible than victims of "ordinary" (structural) violence: "While certain kinds of suffering are readily observable—and the subject of countless films, novels, and poems—structural violence all too often defeats those who would describe it" (Farmer 1997:272). Farmer asserts that the "exoticization" of suffering means that we are more moved by some types of suffering than others and that the "sheer weight" of structural suffering makes it more difficult to render (1992:272). Kleinman and Kleinman (1997:9) state that "our epoch's

dominating sense that complex problems can be neither understood nor fixed works with the massive globalization of images of suffering to produce moral fatigue, exhaustion of empathy, and political despair.” Careful ethnographical work on violence needs to work against these tendencies by underscoring the connections between different forms of violence, and by illustrating that political violence is structured and that structural violence is political. To achieve this, local understandings need to be embedded in the larger scale historical system of which the field sites are a part; the context of global suffering must serve as a framework for the interpretation of the suffering of individuals.

These questions are not merely of academic interest: the representation of trauma often defines who is a legitimate victim which often defines who needs and deserve help, which in turn affects who receives refugee status or political asylum and who does and does not have access to services from treatment centers like *El Centro*. My interviews demonstrate some interesting shifts in this regard. When the agency first began, one person—Bev McKenzie—had an overwhelming influence in defining the center as serving people affected by torture and war from Latin America. Consequently, all of the people served by the organization in the early days were very clearly survivors of torture and violence.

Over the years, the staff of the organization increased in numbers, the staff became more diverse, and the number of Latinos living in the larger community almost tripled (US Census Bureau 2000). All of these factors contributed to a complexity—sometimes contradictory and sometimes complementary—about what the center was and who it should serve. Rather than the single narrative present in the early years of the

center, interviews of staff members present during the transition to create a community outreach program in addition to the residential program, and later in the *Siempre en Solidaridad* program born out of the death of *El Centro de la Solidaridad*, contain a multiplicity of narratives on the center: solidarity, activism, human rights work, clinical work, immigration work, and social work are some of the multiple priorities that were designated as important by different people. Consequently, although members of the center continued to espouse the ideology that they served victims of *political* violence, in reality what happened and what continues to happen is that although all clients must have some connection to political violence, many of the clients participating are also affected by *structural* violence. In essence, there is a tension between the espoused ideology of serving survivors of torture and war trauma and the reality that the center serves many people who are victims of structural trauma as well.

Understanding suffering as a social experience means that collective modes of experience shape individual perceptions and expressions of suffering, that understandings of trauma shape actions and beliefs about who needs to be served and in what ways, and that meaning making in regard to suffering is framed by larger political, economic, and social structures. Given this, my research explores how discourses are created about different kinds of violence at *El Centro*, how different interpretations of trauma affect the understandings and actions of staff and participants, and how all of this occurs in the context of local, national, and international realities. I touch on this theme in Chapters III and IV, but explore it in depth in Chapter V, as I place *Siempre en Solidaridad* staff interviews and participant interviews in dialogue with each other.

In addition to questioning the definition of suffering, a second major realization that occurred as a result of recording life histories was that not only participants but also staff have suffered trauma in their lives—including living through various wars, rape, homophobia, homelessness, and exile—and that these traumas fundamentally shape their work at *El Centro*. In addition to aspects of staff identity—such as nation, gender, class—past trauma affects present staff perceptions of participant trauma and the role the agency should play in healing this trauma, the strengths and weaknesses of the work of the center over time, and the dissolution of the organization. In other words, staff stories of involvement with *El Centro* are also stories of what they have managed to heal or not to heal, still playing themselves out in their work there. Staff identities and histories are also intertwined with the national and the global, all of which shape their perceptions of and actions at *El Centro*. I develop these themes in Chapters III and IV.

In sum, the social construction of suffering is a process I emphasize throughout this dissertation to collapse dichotomies such as the social versus individual levels of analysis, health versus social problems, representation versus experience, and suffering versus intervention. As Kleinman et al. (1997:x) assert, “standard dichotomies are in fact barriers to understanding how the forms of human suffering can be at the same time collective and individual, how the modes of experiencing pain and trauma can be both local and global.” I use the themes of truth, trauma, and transformation as tools to analyze the process of interpreting and responding to suffering in each era of the center. In Chapter II, I discuss the process of interviewing survivors of trauma. In Chapter III, I argue that staff biographies reveal that a search for “truth” and the experience of trauma

shape their motivations for becoming involved with the center and the meaning of trauma work. In Chapter IV, I discuss how these motivations and meanings shape ideas about healing and the promise and predicaments of trauma work in the first two eras of *El Centro de la Solidaridad*. The focus of Chapter V is an analysis of *Siempre en Solidaridad*, including the presence and representation of various forms of trauma at the clinic, how the staff responds to these, and a discussion of memory in exile.

Broader Context and Theoretical Intersections

The purpose of this study is multifaceted, professional and personal. As a Masters student in International Studies, I made four trips to the small Central American country of Guatemala. During my research on the exhumations of mass grave sites from the genocidal conflict that peaked in the 1980s, I witnessed firsthand the effects of a history of colonization, imperialism, US foreign policy, structural economic inequalities, and daily discrimination by the ladino minority against the indigenous Mayan majority. I saw Mayan ceremonies requesting permission to disturb the dead before graves were excavated by one of three teams working in Guatemala, a mother's profound grief at a ceremony where the remains of 122 victims from the Quiché region of Guatemala were returned to their families, and the silent defiance of these same families as they walked with the coffins of their dead held high on the main streets of town so that everyone could see the truth that represented the larger reality of over 200,000 people killed and 440 villages wiped off the face of the map of the Guatemalan countryside during this decades-long conflict. This research culminated in my Master's thesis, entitled *Indigenous*

Cultural Survival in Postwar Guatemala: Historical Truth, Memory, Identity, and the Role of the Exhumation Process (Hill 2000).

Between trips to Guatemala and breaks from graduate school, I became involved with *El Centro de la Solidaridad*. Sixty families from ten different countries currently participate with this agency and over half of them are undocumented. As such, they are an extremely vulnerable, invisible population that most outsiders might simply assume are “Mexican,” “illegal,” and here in search of jobs. Fifty-five percent of these individuals are Guatemalan, and through my work with this agency, I began questioning why people escaping situations of mass brutality such as the literal and figurative remains of the one I witnessed in Guatemala were forced to continue to live in fear in my home country.

My education included a growing feeling of outrage as I became aware of the contradictions and hypocrisy regarding “refugees and America’s half-open door policy” (Loescher and Scanlan 1986). Determining who will be allowed to enter this nation as a refugee is a process involving much more than humanitarian factors and human rights: US foreign policy, economic interests, and the racialized identities of potential refugees all play their parts in who receives official refugee status in this country (Coutin 2000; Hamilton and Stoltz Chinchilla 2001; Ong 1996). In the case of Latin Americans, no single factor affected who was admitted and who was not more than the Cold War: “Since 1945, well over 90 percent of those admitted to the United States have fled communist countries” (Loescher and Scanlan 1986:xviii). Refugees from countries such as Cuba and Indochina were admitted by the tens of thousands, while only 2.6 percent of

Salvadorans and 1.8 percent of Guatemalan asylum applications were granted from 1983-1990, during the height of the violence in that region (García 2006:90). The Reagan administration was particularly resistant to granting refugee status to people from Central America “on the grounds that the violence in El Salvador, Nicaragua, and Guatemala was not sufficiently intense or widespread to warrant such an action” (García 2006:89-90). While hundreds of thousands of people were being mass slaughtered and individually “disappeared” in this region, the administrations of both Reagan and G.H.W. Bush asserted that Central Americans were primarily arriving in the US in search of better jobs. However, some “felt that the true reason behind the denial of asylum was more cynical; the American government would be exposed as hypocritical for accepting refugees that were being persecuted by dictatorships supported by US tax dollars” (Nepstad 2004:5).

United States foreign policy in Latin America contributed to the deaths of over 300,000 people during the 1960s through the 1980s (Vilas 1995). As an indicator of the extent of the trauma occurring in this region during this era, an entirely new category of people was created: the disappeared (*los desaparecidos*) for those suffering the all-too-common experience of being kidnapped by state forces and never seen again. While the height of this violence occurred during the 1970s and 1980s, US foreign policy continues to affect this region daily on economic, political, and cultural levels, including the current crisis occurring in Colombia. Many individuals have documented the wars in Latin America (Falla 1994; Jonas 1991; Menchú 1984; Montejo 1987; Partnoy 1986; Tula 1994), the role of the United States in these conflicts (Chomsky 1985; Danner 1994; Simon 1987), the role of the Latin American State in murdering its own citizens

(Feitlowitz 1998; Nagengast 1994; Robben 2005; Schirmer 1998; Stavenhagen 1992), and the legacies of these wars economically, socially, and politically (Carmack 1988; Green 1999; Taylor 1997; Warren 1993b; Wilson 1995). Consequently, my dissertation does not provide an exhaustive review of wars and their aftermath in Latin America.

Rather, I examine the history of various conflicts only as they intersect with the narratives of survivors of violence and the people involved with *El Centro*. The stories of these individuals illuminate and humanize the experience of war and its effects.

Furthermore, in contrast to the fine work that exists documenting the aftermath of war for those still residing in the countries that persecuted them, my research analyzes the effects of violence on those who fled their countries and now live elsewhere.

Latin American survivors of state violence living on the West Coast of the United States are one part of the larger picture of the global situation of refugees. According to the United States Committee for Refugees (USCR), 35.5 million people were forced to leave their homes due to organized violence in 2003 (Ingleby 2005:2). While most (23.6 million) remained within their borders, becoming “internally displaced persons,” 11.9 million crossed borders and became refugees⁵ (Ingleby 2005:2). Conflicts *within* nations “are by far the most prevalent type of organized violence in the modern world” and, as such, are the largest contributor to the existence of refugees (Ingleby 2005:2). Torture⁶ is

⁵ According to the United Nations High Commission for Refugees (UNHCR), a refugee is a person “who owing to a well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable, or owing to such fear, unwilling to avail himself to the protection of that country” (UNHCR 2009).

⁶ The United Nations Convention Against Torture, 1984, defines torture as “any act 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

frequently employed by the State in internal conflicts. While in the 1970s “only” thirty-five countries used torture against their citizens, torture was used by over half of the world’s governments in 1988 (Sluka 2000). Torture and other forms of political violence do not occur in a vacuum. Sluka (2000) asserts that violent systematic repression is never an isolated phenomenon and that state terror in the third world is linked at both instrumental and structural levels to militarism—including the arms trade, military assistance, and military training supplied by first world countries. This system, he continues, is reinforced through the mutual economic, political, and military interests of both first and third world elites. Due to the position of power and influence wielded by the US in the international context, he asserts that “the global rise in state terror has been mainly or fundamentally the result of US foreign policy” (Sluka 2000:8). As the role model and leading example “emulated by every other nation involved in state terror around the world,” the US “represents the hegemonic culture of terrorism” (Sluka 2000:9). Chomsky and Herman (1988) also argue that the global rise in state terror is concentrated among nations within the US sphere of influence, pointing out that in the 1970s all ten of the Latin American countries that used torture were client states of the US.

While the US is a major contributor to the culture of violence that produces the world’s refugees, its government and many of its citizens do not want to deal with its aftermath: Currently, only three percent of the world’s refugees seek shelter in the US,

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 (Center for Victims of Torture 2000).

Canada, Australia, and New Zealand (Ingleby 2005:3). European countries, another block of powerful and fairly wealthy nations, only take in seven percent, while the majority of the world's refugee burden is shouldered by countries in the Middle East (37 percent), Africa (27 percent), and Southern and Central Asia (16 percent) (Ingleby 2005:3).

Although the 1951 Geneva Convention on Refugees attempted to regulate the right to asylum worldwide, "differences in the extent to which its provisions have been adopted and in the way they have been implemented have led to wide variations in the accessibility of different countries for those seeking asylum" (Ingleby 2005:3). The disproportionate inability of Latin Americans to win asylum status in the US is a result of the priorities and politics of national immigration policy, and the majority of clients involved with the organization reflect this larger national reality. My research explores the issue of who is defined as worthy of the status of refugee in this country, and asks what happens to those who are not granted official refugee status. What special circumstances do they face? How does the lack of refugee status impact their identities and access to material resources? How does it influence their coping strategies?

In the exploration of these questions, I assert the need to create a new category for the many people living in the shadows of the failures of US immigration policy: undocumented refugees. The term "undocumented refugee" refers to that part of the undocumented population in the United States who fled war, political violence, and situations of torture, but who have no official refugee status. Their experience is different from the majority of the undocumented whose primary motivation for coming and

staying in the United States is economic.⁷ Immigration is currently a topic of widespread concern both within the wider US society and within the realm of social science where globalization has become an issue of primary theoretical importance. However, most academic research currently focuses on either undocumented immigrants (Chavez 1992, 1994, 1997; Hagan 1994; Hamilton and Stoltz Chinchilla 2001; Rouse 1992) or on refugees who have official status (Maalki 1995; Ong 1996; Proudfoot 1990). My project is thus relevant to wider societal and academic concerns, but it seeks to illuminate these issues by placing the experiences of undocumented refugees at the center of my analysis. My research with undocumented refugees focuses on a population for which we have very little information. As these refugees go unnoticed or become incorporated into other categories such as immigrants, the uniqueness of their needs, losses, and victories become invisible to both researchers and the larger public. As Kuoch et al. (1992:xi-xii) note, “We have watched before as refugees become the problem, not the victim of the problem. Too many times we have seen survivors of genocide, victims of persecution and casualties of war become economic migrants, displaced persons and illegal aliens. As they are re-labeled, we also forget their trauma.” What can we learn about US society from the presence of these undocumented refugees? What stories does their existence here tell us about US foreign policy and US immigration policy?

I add to the literature of other scholars who view citizenship as a socially constructed process that is historically, geographically, and socially contingent. Who is

⁷ Although “migrant” or “immigrant” is the commonly accepted term for people entering this country due to economic motivations, I would also argue that structural inequalities create such extreme situations of poverty in many places that people who are basically forced to cross borders in order to survive constitute a category that should more accurately be referred to as “economic refugees.”

acceptable to the nation depends on how bodies are classed, gendered, and raced, which, in turn, varies over time and place (Giles and Hyndman 2004; Portes and Rumbaut 1990). Goldring (2001) explores the gender and geography of citizenship in Mexican and US transnational spaces. Ong (1996) demonstrates that the ways Cambodians and Chinese are raced and classed differently in the US means that the Chinese have the cultural capital necessary to be seen as belonging to the nation, while the Cambodians do not. De Genova and Ramos-Zayas (2003) look at racialization and the politics of citizenship between Puerto Ricans and Mexicans living in Chicago, and De Genova (2005) and Chavez (1997) interrogate the relationship between US nationalism and the legal and societal responses to Latino immigrants. Coutin (2003) examines the courtroom deportation proceedings for El Salvadoran immigrants as imbued with white middle-class notions about what constitutes a “good” citizen. Hagan (1994) documents the process of navigating citizenship for indigenous Mayan Guatemalans living in Houston.

A second major strand of this research focuses on those who became aware of and opposed US foreign and immigration policies: individuals who became the volunteers and paid staff of *El Centro*. In the public and academic spheres, most literature focuses on anti-immigrant sentiment in the US (Chavez 1994; Perea 1997). But there are also people who are supportive of immigrants, including some who actively work to incorporate them into US society. What understandings can we gain about the politics of identity, race, and nation by moving our gaze from those who oppose immigrants to those who support them? How do these individuals begin to question and challenge the dominant rhetoric of US foreign and immigrant policy? Scholars such as Ruth

Frankenberg remind us that it is not only the identity and experience of the oppressed that are affected within a context of inequality: “any system of differentiation shapes those upon whom it bestows privilege as well as those it oppresses” (Frankenberg 1993:53).

Nepstad (2004) focuses on the biographies of Central American solidarity activists as part of a larger attempt to put human beings at the center of the analysis of collective action and social movements. In doing so, she emphasizes the roles that perceptions, emotions, and spirituality play in the shaping of meaning and agency that lead people to become involved in collective action. Her work represents a reaction to what she feels is the invisibility of human beings in much of the literature on social movements and collective action that emphasizes structure and focuses on the larger political and economic conditions influencing whether people involve themselves in movements for change. Rather, she asserts, “we need to pay greater attention to activists’ emotions and moral sensibilities while emphasizing how biography shapes their agency [because] at the heart of any movement are people of conviction and action” (Nepstad 2004:16).

My research will contribute to understandings in the larger field of collective action and social movements by responding to Nepstad’s call for more human-centered approaches. I use an oral life history approach that privileges the central role of people in giving meaning to history. As such, I attempt to emphasize “the importance of understanding the way in which history is transformed in individual cognition, how public events intervene into private life, and how perceptions of the world influence action” (della Porta 1992:173).

This research also contributes to theory on social movements and collective action by providing a beginning ethnography of one of the few torture centers located in the United States. Currently, few examples of academic work focus on torture centers: how they are funded, their goals and strategies, challenges and successes and their relationships to larger movements for social change—such as the solidarity movement and challenges to US immigration policies. Additionally, in recognizing that individuals are both located within fields of power and embody fields of power, I wish to interrogate the politics of identity involved in this kind of work: How are issues of race, class, and gender reflected in solidarity work? As I examine the strengths and weaknesses of all eras of the organization, I respond to Ortner's (1995) reminder that we need to pay attention to the contradictory impulses of social movements, historicizing and contextualizing rather than romanticizing them. Through the oral histories of activists, I utilize a rich ethnographic approach with the goal of counteracting tendencies to idealize opposition movements (Ortner 1995).

I took on this project because I agreed that this was an important story to tell, but also because of my own interests. I completed my master's work on the exhumation process in Guatemala. Examining the lives of people who fled their countries and ended up living here—in my own country—seemed like a natural evolution of my earlier work. I thought that through this project, I could explore larger themes that interested me from my master's work that I was not able to fully develop but continued to think about, particularly the role of collective memory and historical truth. Kay Warren (1993a) asserts that not only is it important to examine what happens during times of war, but also

what happens after the conflict has ended. Although some authors do examine the role of memory and truth in the aftermath of violence within the country where the conflict occurred, my work has the potential to contribute to the understanding of what memory and truth mean to those who now live somewhere else.

CHAPTER II

EPISTEMOLOGY, METHODOLOGY, AND METHODS

In my introduction, I explained the reasons behind this dissertation, “the what and the why” of my work. For me, the form of that word “how” is two-fold: how did I come to this project—what was my path in getting here—and how does one go about the very delicate process of doing research with people who have experienced trauma? A second reason this chapter is important is because through the dissertation process, I fell in love with research and methodology. These were previously the *only* things I disliked about being an academic. Consequently, I believe that telling the story of how fear and loathing changed to fascination and enjoyment is an essential story to tell because it is such a critical part of my evolution as an academic and it is really the last part of the puzzle falling into place as far as me knowing that this is the work I want to do for the rest of my life. And that I can do it well.

In many ways, this dissertation is the culmination of an extensive academic career that has come full circle. I received my undergraduate degree in psychology twenty years ago and am now working with survivors of violence who are receiving psychiatric therapy. I began volunteering at *El Centro* ten years ago, never expecting I would return to do my dissertation project on the people involved with this center. The topics of memory and the effects of the past—themes that I touched upon but to which I felt I did not do justice in my Masters thesis—have returned to haunt me and to demand their proper development in this dissertation. Finally, epistemology, methodology, and

methods—the topics of this chapter—were something I barely began to address as I did my Masters research in Guatemala. Unexpectedly, working towards some resolution of the dilemma regarding how I could connect the kind of academic I wanted to become with the paths that would get me there as a researcher became one of the most critical and important processes of my dissertation research. Unexpectedly, my dissertation research became as much about learning how to carry out and enjoy the process of research as it was about the actual theoretical content of my project.

Research methodology and theoretical content are linked in every project (or they should be), but these linkages became especially critical for this project for several reasons: I worked with an extremely vulnerable group of trauma survivors, many of whom are undocumented; I asked people to delve into intense topics that are potentially very painful to discuss, and; much of this research concerns intangibles, such as memory and the past. Initially, I viewed each of these factors as a burden that would limit the possibilities of this project. Ultimately, my attempt to answer the questions of how to get at this kind of content in general and how to do so without causing further harm in particular led me on a fascinating journey that forced me to grow a great deal as a scholar, especially in terms of grappling with the theory and practice of methods. Consequently, I find myself writing a chapter on methodology that I did not expect to write. In this chapter, I discuss both the background I brought to this research and how the evolving nature of my research project challenged me to grow professionally.

Scholarly Evolution

I had a jump start on my ability to listen to stories. I was born in small town Northwestern Indiana. My dad was the only person of his generation on either side of my family to get a college degree and as part of the seemingly requisite desire for “upward mobility,” we were also the only ones on either side of my extended family to move away from that reality. In fact, we moved quite a bit—from the Chicago suburbs, to urban Kentucky, to small-town central Pennsylvania. However, unlike many other kids that I knew who grew up with a more suburban nuclear family lifestyle in the 1970s and 1980s, we maintained close contact with my extended Indiana family. Most of my favorite childhood memories are of summer camping trips with my cousins and having “Santa” come to my grandparent’s house every Christmas. Each visit always meant listening to a great deal of stories. Stories on my mom’s side of the family usually involved all nine cousins, six aunts and uncles, and two grandparents packed into a tiny house, with the adults sitting around card tables and playing the card game “euchre” and us kids running around like crazy underfoot. As we played, I was always aware of my older relations telling their stories, usually with the sole purpose of teasing someone. The story would build until whoever was the victim at the time would be exposed for the fool they had been as the plot came to a climax that ended in outbursts of laughter. The stories and the laughter came hard and fast, and are so strong in my memory that I can hear the distinct laughter of each one of my maternal relatives in my ears as I sit here and write this today.

On my dad’s side, the storytelling was a more serious matter. The setting was usually the kitchen table with just me, my grandma, and my grandpa. My grandpa always

took center stage and the main role of my grandma was to listen, occasionally call him to task and correct him when he got a little too far-fetched, defend herself from his versions of who he said she was and what he said she had done, and to try to monitor his intake of his beverage of choice—Manhattans—which was usually a thankless and unsuccessful valiant effort on her part. My grandfather was a World War II Navy Veteran and this experience—of what I would now label as trauma—was simultaneously the thing that he was most proud of and the thing that most damaged him. I heard many war stories growing up, some of them ending in incoherent words and emotions that I never saw my grandpa display outside of these settings. But there were also cherished stories of his childhood on the farm and love stories about meeting my grandma and trying to win her over.

On both sides of my family, my role in storytelling situations was as a listener, a bystander to my family's history. Although I begged to be allowed to join the adults at the card table on my mom's side, I was always shooed away, and although I loved listening to my grandfather on my dad's side, I was rarely asked for my comments or opinions on his view of his life and the world. I was just the audience required for the storytelling to occur. However, these experiences taught me a great deal—how to be a quiet yet engaged listener, to know my place in the larger scheme of things, that storytelling comes from places of pain and places of joy, and the role that memory plays in the creation of identity and belonging and history. I learned as a young child to cherish stories, and this lesson has never left me. These experiences are the roots of this research.

A second key experience in relation to my dissertation work occurred twenty years later during my Masters degree in International Studies. As a student in this discipline, I met a professor who forced me to totally deconstruct and rebuild my experiences, my life, and the world as I know it. Dr. Rob Proudfoot was a large, barrel-chested native Haudnosaunee man from New York whom I met in the spring of my first year in graduate school. I worked with him for eleven years until his death in 2006. Working with Dr. Proudfoot changed the person I was on many profound levels that were both personal and professional. He was a catalyst for a process that consumed me during my Masters degree. I came to challenge everything about my identity as I fiercely interrogated what my race, my gender, my sexuality, my nationality, my class, and my physical ability had to do with who I am and my relation to the world. I discussed this extensively in my Master's thesis (Hill 2000), so suffice it to say here that it was both an excruciating and a rewarding process where I learned a great deal about the kind of person I wanted to be in the world and about the kind of teacher I wanted to be in the classroom. What I want to address here is how it affected my experience with research at that time.

As a Masters student doing research in Guatemala, I loved being "in the field." I loved immersing myself in another country and language. I loved the discos and meeting other travelers. I loved the contradictions of living in a small "traditional" indigenous community with a "traditional" indigenous family who had more television channels than I ever had, and a Mayan mother who has traveled to more countries than I ever will. I loved sharing surprising similarities across what seemed on the surface to be

insurmountable differences between myself and many of the Guatemalans I met: a wickedly dry sense of what I can best name as “survivalist” humor, the flow of small town life, parenting challenges, and a desire for social change.

But I struggled fiercely with my identity as a researcher. One reason for this was a reflection of the growing obsession I had with interrogating my personal power and privilege as a white middle class US scholar in Guatemala and also the power connection between academia, research, and colonialism in general. My work with Dr. Proudfoot and the impact of critiques formed by indigenous scholars like Vine Deloria in the United States (1969) and Maori scholar Linda Smith thirty years later (1999) left me in a state of near paralysis. I wanted to prove that I was not *that* kind of researcher, but I was not quite sure how to go about doing that. So instead, I did everything I could to show that I was aware of the colonizing legacy and imperialist agenda of much academic research, and to distance myself from *those* kinds of researchers. When two indigenous men at the human rights organization where I was working asked me to create a project that would teach people in Mayan communities about their history with the hope that this would give local people a sense of pride about their indigenous identities, I politely declined because I thought it would be too presumptuous for me, as an outsider, to teach Mayas about their own history and culture. I showed the book of a well-regarded anthropologist to the family I lived with because it was about their town and they themselves were among its photographs. Then I proceeded to share with them the anthropologist’s criticisms of their faith, something that caused them pain because they trusted and liked this anthropologist,

but something that allowed me to elevate myself as someone who would never betray them in that way.

Because my philosophical obsession with the deconstruction of power made me an ambivalent researcher at best, my development as a professional in the field was severely handicapped. In many ways, I avoided Research (with a capital R) as much as possible, thus impeding my knowledge and practice of methods that I might actually be able to claim and make my own. One quintessential example of my avoidance in Guatemala involves being so mortified about taking time away from busy Guatemalan activists—with nothing to offer them in return—that I worked at CALDH¹ for four months before I timidly requested interviews from three of the people I had worked with on a daily basis. This was two weeks before my departure date. They, of course, thought my obvious hesitancy was extremely humorous because they had been waiting for some time for me to ask them for interviews and it would have been fine long before I got around to groveling for one. And, in the typical Guatemalan dry humor fashion, my embarrassment was a source of hilarity for them. I did one other interview with an indigenous woman who had been my Spanish language teacher on a previous trip to Guatemala—again, someone very well known to me. However, my MA research was based almost entirely on participant observation—the least intrusive method I could find—and an ability to have conversations and listen to conversations which I then wrote about extensively from memory immediately afterwards. Overall, I made up my mind that formal interviewing was not for me and was something I was not much interested in

¹ *Centro de Acción Legal en Derechos Humanos* (Center for Human Rights Legal Action)

as a research method. However, I was wrong. Like the themes of trauma, truth-telling, memory, and transformation, the methodology of interviewing would come back to haunt me at the doctoral level.

If my Masters education was all about tearing the world apart and locating myself in it, then my PhD program has been about putting the pieces back together. The latter would not have been possible without the former, and I am grateful to my previous experiences for paving the way to what has been a less agonizing learning experience that has not been filled with so much crippling self-doubt. I do still scrutinize my work constantly and I am still fascinated with the deconstruction of power, but I do so with a little more grace and a little less ripping and tearing and gnashing of teeth. I feel a little less awkward as I stop fixating on the kind of professional I do not want to be and focus more on who I can be—how I can integrate my professional and personal selves in ways that I feel I can live with. In many ways, this dissertation has served as an exploration and an affirmation of my identity as a researcher and writer—the pieces of my identity as an academic that I previously felt were missing. I explore how this came to happen in the following sections.

Epistemology, Methodology, and Methods

I came out of my Masters research in International Studies and my PhD coursework in Cultural Anthropology with an unwavering commitment to make power the centerpiece of any research project I would undertake. What I mean more specifically is that a central concern for my research is *always* to work to make people who are marginalized and dehumanized more visible and understood. The experiences I brought

to my dissertation research also meant that I had a strong sense of my positionality and the politics of doing research. The foundation provided by feminist scholarship, the work of US scholars of color, and the research and writing of anthropologists who acknowledged and struggled to improve upon our discipline's colonialist and imperialist history all informed my work, the kind of scholar I envisioned myself becoming, and the tools that I brought to my dissertation research. I discussed these at length in my Masters thesis (Hill 2000). Here I would just like to briefly state the most important ideas and tools that I gained from each one.

From US feminists and scholars of color, I learned to think deeply about identity as a complicated and constantly changing process (Anzaldúa 1987; Frankenberg 1993; Tatum 1997). Intersectionality, the idea that we each carry a multifaceted identity that changes depending on the context we find ourselves in, is an idea that continues to inform my work (Baca Zinn and Thornton Dill 1996; Hesse-Biber 2007; Hill Collins 1990; Jordan 1985; Sacks 1978). A focus on difference and heterogeneity has helped me to always look for the contradictions and exceptions in whatever work I do. Feminist theorizing also played a key role in my understanding of how the everyday connects with larger structures of power, an idea exemplified by the now cliché phrase “the personal is political.” Feminist and critical theory also contributed to my understanding of how individuals are both constrained by and resist oppression (Mohanty 1991). An acute understanding of the ways oppression operates in the US has been an analytical tool that I use to understand how oppression operates in other locations. These scholars played a critical role in moving me towards understanding that people outside of the university

have their own knowledge and theories. Finally, voices that demanded that academics be responsible and accessible to marginalized communities in the way we do and write about research have shaped my attempts at research and writing in profound ways.

From cultural anthropology, I learned to respect a discipline that could acknowledge the mistakes of its past and work to correct them. I responded to the potential of ethnography as a methodological tool allowing us to focus on and portray the holism and “thick description” of cultures. I am committed to the anthropological endeavor of making the “familiar strange and the strange familiar” because I believe in the importance of making the lives and perspectives of different groups of people understandable to others and to get cultural insiders to become aware of and critically assess their own cultural practices. The work of anthropologists who struggle to convey the fine balance between portraying the patterns evident in human life without erasing the differences also informs my work. Finally, a course on feminist ethnography served as my introduction to the idea of what is referred to by the various names of participatory action research, activist research, participatory research, and service learning. Important components of activist research include a concern with increasing our understanding of the root causes of oppression and inequality, carrying out the research—from conception of the project to dissemination of results—in direct cooperation with an organized collective of people who are subject to these conditions, and using the results to formulate strategies for transforming these conditions and achieving the power necessary to make these strategies effective (Benmayor 1991; Hale 2008; Herr and Anderson 2005; Lawless 1992; Lykes and Coquillon 2007). As such, “the practice of activist research

asks us to identify our deepest ethical-political convictions and to let them drive the formulation of our research objectives” (Hale 2001:14).

The epistemological approach to this project is framed by a perspective that lies somewhere between two paradigms that Creswell (2003) labels as the paradigm of socially constructed knowledge and the paradigm of advocacy/participatory knowledge. These paradigms reflect my interests as a researcher and the requirements of this project because both of these paradigms place the perspectives of the research participants at the center of the analysis. Constructivism involves assumptions that individuals seek to understand the world in which they live, that they develop subjective meanings about their experiences, and that these meanings are varied and multiple. Consequently, the researcher strives to collect and portray a complexity of views rather than narrow the range of meanings to a few categories or ideas: “The goal of research, then, is to rely as much as possible on the participants’ views of the situation being studied” (Creswell 2003:8). The advocacy/participatory knowledge stance argues that constructivism does not go far enough in advocating for an action agenda in regards to marginalized peoples. Inquiry needs to be intertwined with politics and political agenda. Historically, advocates of this approach have drawn on the works of Marx, Adorno, Marcuse, Habermas, and Freire (Creswell 2003). Specific issues can include empowerment, inequality, oppression domination, suppression and alienation. Participants may help in design and analysis of research. Advocacy may mean providing a voice, raising consciousness, or advancing an agenda for change to improve the lives of participants. This paradigm includes different

theoretical perspectives such as feminist theory, racialized discourses, critical theory, queer theory, and disability inquiry (Creswell 2003).

As I briefly explained in Chapter I, when I began my research, my expectations about “the what” and “the how” of my research were very different than what they later became. I was invited to do this research by Graciela Franklin, who understandably wanted to emphasize the positive nature of the creation of a private non-profit on the part of the participants of *Siempre en Solidaridad* (SES). I was also excited about the potential to describe this “success story.” I originally viewed my role to be that of documentation: connecting what people had overcome in their pasts, their steps to a more promising future, and the role that SES played in this. As such, I anticipated doing three or four staff interviews and about ten client interviews with a focus on only the organization of *Siempre en Solidaridad*. However, as I began to interview, to interact, and to reflect upon what I was learning there, I began to see that I had vastly underestimated the complexity of my project and that there was a great deal more potential for significance and potential for conflicts than I had realized. In short, my project became more interesting over time, but it also became messier.

The nature of my project demanded that I explore methods I had previously felt uncomfortable with (interviewing), that I improve upon methods I had used in the past (participant observation and fieldnote writing), and that I learn new methodology and methods (oral history and grounded theory). As my original theoretical assumptions were challenged by the information I was collecting, I responded with shifts in methodology and methods that, in turn, affected the information I was able to gather. First, Grounded

Theory provided me with a detailed set of procedures that shaped my approach to data collection and analysis on many levels. Second, participant observation led me to question everyone's assumptions about what was happening at SA, including my own. I could balance what I was hearing in interviews with what I was seeing as I participated in a variety of activities at the center, including social events, clinic days, group therapy meetings. I taught a summer English class and observed staff presentations about the agency given at various events. Third, writing reflexively became a source of data and a critical tool for analyzing and navigating a whole new set of dilemmas produced by the questions I came to ask in this research. I discuss these in greater detail below. Finally, the unsatisfying process of my initial interviews prompted a search for a different method and led me to the Columbia Oral History Institute. Additionally, themes that emerged out of these first interviews made me realize that I needed to think more about the meaning of the past, rather than focus primarily on the events of the past as I had originally planned. As the various struggles emerging from people's narratives began to take shape, I was compelled to expand my research out to include new topics of inquiry in the interviews and to include the staff and participants of the original organization, without whom this story would not be complete. In total, by the end of my research, I completed forty-eight interviews with thirty-four people (fifteen staff and nineteen clients, twenty women and fourteen men) from eight different countries (Chile, Mexico, El Salvador, Guatemala, Honduras, Colombia, Peru, and the United States) for a total of fifty-seven hours of interviews.

Grounded Theory

Grounded theory methods were developed by sociologists Barney Glaser and Anselm Strauss in the 1960s when they collaborated to study dying and death among seriously ill patients in hospitals (Glaser and Strauss 1965, 1967). However, my understanding and adaptation of this method is informed most by the more recent work and writing of sociologist Kathleen Charmaz (1990, 1991, 1999, 2005, 2006, 2007). Simply stated, she defines grounded theory methods as “systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories ‘grounded’ in the data themselves. The guidelines offer a set of general principles and heuristic devices rather than formulaic rules” (Charmaz 2006:2). Clarke (2007) describes grounded theory not as a description of a kind of theory, but rather a way of generating theory as the researcher immediately begins to move back and forth between empirical data and more abstract ways of thinking about the data. She points out that what is unique about grounded theory is this emphasis on analysis beginning as soon as data exists to analyze and that this dialectical process continues throughout the entire research and writing experience.

Charmaz (2006) identifies two other ideas important to grounded theory: the process of theoretical sampling, saturation, and sorting and the process of creating theory from a grounded perspective. In regards to the first, because we analyze data from the beginning stages of our research, the research can identify areas that need further study and is encouraged to return to the field to pursue emerging areas of inquiry in an attempt to more completely address as many different properties of the major categories as

possible. This certainly happened to an extent in my own research process. As I realized the themes that were emerging from my initial interviews, I modified my interview process, questions, and participants. My initial interviews were oriented towards *Siempre en Solidaridad* as a successful source of community for marginalized survivors of political violence. However, as I heard the concerns and experiences of these initial research participants and as I analyzed my observations at SES, I realized the importance of the past in shaping what I was hearing and seeing, the importance of the clinic in shaping interpretations of the past, and that participants had different levels of investment in the community oriented around the agency. Consequently, I broadened my interviews to look at the past more generally, to allow for different forms of trauma to be discussed, and to include more staff and participants on the fringes at the agency. In this way, theoretical sampling encouraged me to look for more of the full spectrum and variation within a process or category that I identified as important and focused my further data collection to refine these key categories (Charmaz 2006; Clarke 2007).

My research approach is closely related to what Charmaz (2006:130) describes as “constructivist grounded theory” which emphasizes the creation of theory in response to the attempts to understand how and why research participants construct meaning and actions in specific situations. A phenomenon involved in the study becomes the central arena of investigation and the researcher tries to get as much inside the experience of the participants as possible, while realizing that she can never fully replicate this experience. The central phenomenon of this study is the meaning-making in regards to the past, and I create theory around the interaction between interpretations and actions of various

individuals about the past and how the past influences later interpretations and actions. A logical extension of constructivist grounded theory involves learning how, when, and to what extent the studied experience is embedded in larger and, often, hidden positions, networks, situations, and relationships: “differences and distinctions between people become visible as well as the hierarchies of power, communication and opportunity that maintain and perpetuate such differences and distinctions” (Charmaz 2006:130-131). In my project, connecting individual interpretations of the past to gender, educational level, political involvement, nationality, legal status, and the influence of SES are all ways that I attempt to anchor the particular in larger contexts and positionalities. As Charmaz (2006:131) describes, grounded theorists take a reflexive stance toward research process and products as they consider *how* their theories evolve: “The acts involved in theorizing foster seeing possibilities, establishing connections, and asking questions. Grounded theory methods give you theoretical openings that avoid importing and imposing packaged images and automatic answers....When you theorize, you reach down to fundamentals, up to abstractions, and probe into experience.”

Participant Observation

Participant observation—the foundational method of ethnographic research in cultural anthropology—was important to this research in two major ways. I was working with a vulnerable research population about topics that are very sensitive to discuss. Although I was somewhat trusted by center clients because some of the staff members knew me from my volunteer days at *El Centro*, my relationships with participants evolved as I was seen in various settings at *Siempre en Solidaridad*. I went to twenty

“clinic days” at the center. A clinic day occurs every other Monday and is the only time the psychiatrist is actually at the center because they are scheduled for appointments with clients all day long. I attended Wednesday evening drop-in group therapy on thirty occasions. I taught a basic level English class once a week for two months for SES participants. And, I went to social events that were organized for Mother’s Day, Human Rights Day, a garden project day, a summer and a winter celebration party, and two going away parties for staff members.

In addition to building rapport, participating in these various activities both raised some questions about contradictions between what I was hearing in interviews and what I was seeing in action at the center, and contributed new information about topics that were often too sensitive for people to discuss in interviews or information that I did not realize would be important and did not ask about in my interviews. For example, I almost gave up on my idea of the category of the “undocumented refugee” as being relevant to the lives of SES clients because people rarely talked with me in interviews about the challenges and fears they faced here in the US. They often did not refer to their legal status and I did not directly ask about it. However, in weekly group therapy meetings, this category surfaced as a critical variable that impacted people’s identity and sense of safety here in the United States and was evident in conversations about immigration politics, access to health care, vulnerability in situations of domestic violence and worker’s rights, concerns about being stopped by the police while driving, and the desperation caused by the separation from aging parents or children who were left behind in one’s home country. Gender was also infrequently explicitly mentioned in interviews with staff and

clients, but came up indirectly in comments and observations that I collected through participant observation: gender affects the form of trauma experienced by people (many women are dealing with sexualized violence), the perception and treatment of that trauma (a male doctor told me he thought ten percent of the women at SES had been raped while a female staff person told me almost one hundred percent of the women had shared stories of sexualized violence with her), healing from trauma (one man told me he only needed to see the doctor two times, while his wife still needs to see the psychiatrist seven years later), who works at the clinic (both psychiatrists are men, while all of the female staff persons are women), and who has the leadership positions among the SES participants (all board members of the association created by the participants are male).

Reflexive Writing

During my Masters research in Guatemala, my field notes consisted almost entirely of two things: a description of what I was doing and a description of my personal and professional struggles with the research process. Unfortunately, what I left out were my ideas and insights about what my project could become. For some reason, I thought I could not start writing my theoretical musings down until I came back to the United States and completed the literature review of other people's theories. When I returned, I realized too late that keeping my analysis, interpretation, and writing of ideas to a minimum while in the field meant that I was now basically starting from scratch as I struggled to remember and recreate what I had thought about while I was doing my research. So I began this research wanting to avoid the repetition of that experience, and this desire grew as I read scholars in Grounded Theory (Charmaz 2005, 2006; Clarke

2007), feminism (Naples 2007; Richardson and St. Pierre 2005), and participatory action research (Herr and Anderson 2005). Although I wanted to be more careful to write down my ideas as they came to me in this research only in order to remember them, these scholars took me further in my thinking about the importance of writing while doing research in a number of realms, all of which are connected by the assertion that reflective writing serves as a *methodological* technique.

As I explored multiple books on methodology, I came to understand and agree with the assertion that we actually *think through writing*, meaning we come to new ideas and conclusions through the process of writing (Creswell 2003; Charmaz 2005). Richardson and St. Pierre (2005:970) assert that writing serves as a method of data collection because in the process of writing, we come up with thoughts and observations that “might have escaped entirely if [we] had not written.” Perhaps this should seem obvious. I know from writing papers for classes and from writing a Masters thesis that I come out of the act of writing knowing my material better than when I began. But there is also a (perfectionist) part of me—and I believe this is true for many other people as well—that believes I already need to have my ideas fairly well-formed before I ever sit down to write. I did not realize that I could use my field notes as a first attempt to articulate, no matter how imperfectly, my beginning understandings of my research in writing. And that lost part of what could have become a *process* of many steps towards my final write-up meant that I put incredible pressure on myself to produce something profound and magnificent in my first formal attempt at writing. This, in turn, led to a great deal of overwhelming dread and procrastination.

I still struggle with my perfectionist tendencies, but I progressed a great deal in this research. What that means is that although I often came home exhausted and burnt out from interviews or from being at the center for nine hours, I would still force myself to sit down and write—that day or the next—about what happened and what I thought about it. And although I sometimes began the writing process resentful and feeling like I did not have much to say, my fingers would start flying, my synapses would begin firing, and I would look up at the clock and an hour or two had passed and I had several pages filled with events, observations, questions, and connections. In this way, writing to think serves as a tool for data analysis:

by using writing to think [...] I wrote my way into particular spaces I could not have occupied by sorting data with a computer program or analytic induction....*Thought happened in the writing*. As I wrote, I watched thought after thought appear on the computer screen—ideas, theories, I had not thought before I wrote them. Sometimes I wrote something so marvelous it startled me. *I doubt I could have thought such a thought by thinking alone* [...] And it is thinking of writing this way that breaks down the distinction in conventional qualitative inquiry between data collection and data analysis....Both happen at once.

[Richardson and St. Pierre 2005: 970]

In addition to serving as a tool for data collection and analysis, reflective writing was a tool I used to work through some of the dilemmas of my research that were produced by noticing the contradictions among the interviews with staff and participants of SES, and between what was said in interviews and what I actually saw happening during participant observation at the center. The reflexive writing process created the space for me to think through my choices about how to handle these contradictions. My fieldnotes reveal various stages of how I grappled with these issue, including surprise that I was not seeing some of the things that I expected to see happening at *Siempre en*

Solidaridad (such as a focus on discussing and understanding the past), surprise that I was seeing some things that I did not expect to see (the daily kind of social work and support that staff offer clients in regards to housing, jobs, translations), and my judgments about what I was seeing and not seeing. Through my writing, I was able to make a choice that I believe ultimately strengthens my project and its usefulness for the SES staff: rather than avoid the contradictions that I was seeing, I would place making sense of these contradictions at the center of my analysis. So for example, instead of ignoring what appeared to me to be a lack of participation on the part of the agency's clients, I started asking which clients were really involved with the center and which were more on the margins and why? Instead of making a judgment that *Siempre en Solidaridad* was not a source of community as some staff told me it was, I asked *how* does it function as a community, for whom, when, and what are the limitations of it as a community and why? Instead of judging the clinic's strategies of healing, I began to ask why do they use these strategies? Why might they not focus on the past? What individual histories and structural constraints influence their decisions about how to heal people from trauma? As a former staff member of *El Centro* reminded me when I expressed confusion over what I was seeing at *Siempre en Solidaridad*, "It's not your job to know all of the answers. It's your job to ask the right questions." Indeed, stepping back and asking "why" became critical to my ability to balance my respect for and relationships with the multiple actors involved in the organization over time, while not avoiding some of the hard questions that ultimately contributed to the quality of my research. Reflection became critical to the

balancing act of maintaining good research relationships, while also addressing the difficult issues that were being produced by this work.

Naples (2007) argues that our efforts to deal with power dilemmas in fieldwork contributes to the development of a strong reflexive ethnographic practice that keeps us aware of our positionality as researchers, as well as how our research participants are differently positioned. Although we cannot always resolve ethnographic dilemmas, a commitment to reflexive writing means that the “context and form of the dilemmas can be brought to the surface and become part of the ethnographic story” (Naples 2007:26). Participatory action and feminist researchers argue that the attempt to understand these dilemmas should also be carried out in dialogue with research participants. And indeed, the informal comments and questions I made in conversations with staff and participants brought out that they had some of these same questions and concerns. For example, many of the staff and participants who originally told me that SES served as a community for all participants eventually acknowledged that they were actually frustrated with the level of participation on the part of many clients of the center. Finally, if the differences in perspective between the researcher and the research participants cannot be resolved, reflexive writing can help articulate why these differences might exist. Moss (2007:609) states that we can avoid the pitfall of acting like we, as researchers, know better than our subjects by “historically and culturally situating their explanations as a way of rethinking differences without lapsing into hierarchy.” Similarly, Lawless (1992) argues that rather than completely privileging one perspective over the other (the researcher or the research participants) as being the right interpretation, differences of interpretation can be

reflexively written into the final product and actually provide an interesting opportunity for examining *why* different people might believe different things. Finally, Smith (2007) states that although people know the realities of their own lives, good ethnographic work can help them become aware of and articulate how institutions of ruling (education, the medical system, the legal system, government and business, for example) and translocal relations organize their everyday worlds.

Pain and Witnessing: Oral History and Interviewing Survivors of Trauma

I became an oral history “convert” after attending the Oral History Institute at Columbia University in June. I decided to attend the Institute both as a result of my commitment to explore new methods and methodologies and because I was unsatisfied with the content and the process of my initial interviews. I began interviewing two months before I attended the Institute. The interviews had a semi-structured format with questions focusing on the individual’s life in the home country, the journey here, the realities of life in the United States, and the role of *Siempre en Solidaridad*. I felt like the interviews were disjointed and choppy. There was a distinct lack of fluidity and responses to my questions were often hesitant, which led me to believe that what I was asking them about was either unclear, unimportant, unsafe, or some combination of the three. So although attending the Institute was helpful in developing the theoretical content of my research, it was *critical* to the approach and process of carrying out my research. Oral history dramatically improved my research and also changed who I am as a scholar.

At the Institute, there were many scholars who have worked in war zones and with countries struggling with post war issues of reconciliation and justice. Their ideas

and advice directly connected to my own work dealing with Latin Americans who have fled war zones or the violence of post-war transitional societies. My theoretical ideas about my project were advanced and strengthened through their lectures and comments on my project, particularly in regards to the arguments I will make in my dissertation about the connections between structural and political violence.

Most importantly, my methodology was vastly improved as I became convinced about the importance of using a life history approach in my research. The vast majority of my research is based on interviews with survivors of political violence and the staff that works with them at a local torture treatment center. The life history approach was much more open-ended and gave individuals a chance to discuss many facets of their lives, instead of only focusing on who they were as a “survivor.” As they elaborated on the aspects of their lives that were most important to them, this yielded much richer and more holistic and organic responses that had several implications for my research. First, by asking staff members about their lives, I realized that many of them had also been the victim of some kind of trauma. Second, the participants in the program spoke more openly about all facets of their lives when approached with a more open-ended life history methodology. I realized many of them would like to be seen as whole people who have had both good and bad experiences in their lives and they resist being categorized only as survivors of violence. They do not want their lives reduced to or defined only by negative experiences. Third, I learned how earlier life experiences frame how people respond to and deal with later experiences of trauma and attempts at healing. Each of these issues has become a pivotal part of my dissertation and would have remained

invisible to me if I had not attended the Columbia Institute. Finally, oral history stresses the importance of a longer narrative shaped more by the interviewee than the interviewer. Consequently, subjects who may often feel disempowered have more control in the oral history method because they exercise more choice in what they emphasize and what they avoid than is possible in structured or semi-structured interviewing (Fiene 1993; Richie 1996). I felt this was an important consideration when dealing with people who have experienced trauma.

Shortly after I was given permission and support by the staff and participants to proceed with my project, a few events happened that affected—and I think ultimately improved—my research. Several losses occurred in my own life in a short period of time that sensitized me to the experience of trauma: the death of a teacher who had been a mentor and close friend, the disintegration of a long-term relationship, and my mother's diagnosis of dementia at the young age of fifty-nine. As a result of these experiences, I was living with pain very close to the surface of my being. I was emotionally raw and vulnerable most of the time. I did not have my usual defense mechanisms in place. Although I never shared the specifics of my own story with anyone I interviewed, what I was going through affected everything about my research. I was in therapy while I was working with a clinical therapy program. I was dealing with the loss of my mother's memory while I was exploring the meaning of memory to staff and participants at *El Centro* and SES. I was coming to terms with the meaning of trauma in my own life while I explored its significance in the lives of others. My intellectual and experiential knowledge of the topic came together with my emotions over what happened in my own

life in a way that profoundly impacted the quality of my interviews. My emotional vulnerability came out in how I listened, how I allowed stories to seep in and affect me.

Interviewing people who have lived through trauma is very hard to describe to anyone outside of the two people who participated in the process at the time. However, because interviews about trauma are the foundation of this research, I think it is important to convey some sense of the complexity of this research method. When I think about my experience interviewing, I do not think first about intellectual concepts or theories. I feel emotions. Two ideas keep returning to my head as a way to describe what interviewing *felt* like in general. The first is a title of an article written by Elizabeth Jelin (1998) that I read years ago on the role of collective memory after war in Guatemala: “The Minefields of Memory.” Although I do not remember many of the specifics from this article, that title haunts me because the interviewing process often felt like I might imagine walking through a minefield would feel: I needed to be excruciatingly careful, damage could be done to someone at any moment, and damage could be caused by things I could not see.

The second idea is a more recent popular culture reference and involves the idea of the pensieve used by author JK Rowling in the sixth installment of her series of *Harry Potter* books (2005). The pensieve is a stone receptacle used to store memories that are extracted from people by wizards or witches. The master wizard Dumbledore takes Harry into the pensieve on several occasions to show him events from the past that explain what is happening today. Although this connection may seem rather silly on the surface, I cannot escape it because similar to my own research, as Harry returns to the past, he relives the events and experiences the emotions with the people present in the scene,

although he can never be more than a witness to what is occurring. This is remarkably similar to how I felt during the interview process.

This experience is also articulated in more academic terms by Mary Marshall Clark (2005), an oral historian, in an article where she interviews Dori Laub, a Jewish Holocaust survivor and co-creator of the Yale University Fortunoff Video Archive for Holocaust Testimonies. Clark describes this type of interviewing in terms of a dynamic between testimony and witnessing:

testimony depends on a joint act of imagination in which the experience of horror can be shared, and therefore perhaps divided up. Arriving first at the scene does not require an ambulance or the role of rescue. It requires the act of presence, of *at-one-ment* with the other. The first witness must enact the willingness to return to and be still in the moment of trauma and to enter the silence of absence with the other. [Clark 2005:277-278]

I am convinced that the fact that my own personal pain lay so close to the surface of my being during these interviews made me a more intuitive witness which made them more willing to return to the scene(s) of their trauma. My own connection with damage meant that I was more able to travel with the people I spoke with, to accompany them, to meet them at the destinations where they were willing or able to arrive. When the interviews were happening, we were not really in whatever physical space that our bodies were in. We were transported somewhere else through the act of telling. For me, the “somewhere else” has included a frustrated child who cannot understand that she cannot leave the house to play because people are being shot down in the street, an orphaned boy who longs for the love of his mother who died when he was six, the rabbit-like panic of a woman being surrounded by a Mexican gang as she tries to make her way north from Guatemala, the pain of being homeless both as a young girl in Guatemala and upon

arrival as an adult woman in the US, and a father's short, staccato beat of pain and helplessness over the loss of his kidnapped son.

Each story traveled different places in different ways and I responded accordingly. I remember one interview with a young El Salvadoran woman whose older brother had been kidnapped and killed by gangs *after* the war was over. I went into the interview knowing this fact because I had already interviewed her father. However, I never asked people to specifically speak about the violence in their lives and I did not know if she would bring up this event or not. I had already done one semi-structured interview with her that focused more on her relationship with the center. In this second interview, I asked her to tell me her life history as she wanted to tell it. This simple request resulted in one of the most intense interviews I experienced. I saw a completely different side of a person I had known for months. She described a life full of the contradictions of daily militarization and normalcy all happening at the same time: trips to the beach, not being permitted to play outside the house because of shootings, Disneyland vacations, her dad being tear gassed at the funeral of Archbishop Romero, secret boyfriends, the loss of electricity for weeks on end because of bombings by the guerrilla, playing sports, being called a communist because she attended a school run by Jesuit priests.

At a certain point more than halfway through the interview, I could feel the emotion in the room shift. I became acutely aware that Elena was approaching the moment when her brother was kidnapped. Before she could reach this moment, I went back in time and arrived at the site of trauma so that I could then gently lead her there.

There is no other way for me to explain this. Reasoning and logic had nothing to do with what I did. Emotion and instinct had everything to do with it. At some point I became aware of where she was headed and I went there first and tried to lead her there in small steps because this is what I thought she needed. She needed to not feel rushed. She needed little distractions along the way to give her breaks from the intensity of the telling. To accomplish these things, I asked small questions when I felt she needed them. Elena marks the beginning of telling me about her brother's death with an abrupt transition from the things she was enjoying about her adolescence to the comment that she never thought she would have to live in another country:

Elena: I never thought that I would have to live in another country. I never thought that I was going to leave El Salvador. I always thought that I was going to live my whole life there. And I was at the university studying communications and journalism. And I wanted—I was fine there and I felt really good. I really liked the university, I liked my classes, and I had friends there.

Tami: And you still lived with your parents?

Elena Yes, I still lived with my parents, because that's normal there—until the children marry and then they leave. And so, I had my friends at the university and I had a boyfriend, and I felt really great there. And well, it was a shock, a real strong shock when it happened, the act that brought us to live outside the country. It was something that I never could have thought could happen to my family, and (pause)....

Tami: So it happened without warning?

Elena: Yes, yes. Yes, I never thought....still, still if it—I try not to think about it, but it's as if time stopped, as if somehow ... I don't know, as if at any moment everything will return to how it was if I believe it can. And ... as if my life after the age of twenty-one, as if there was some kind of pause and as if at any moment, everything will return to the way it was, or my family will go back to the way they were, everyone will be there. I don't know, all of a sudden (pause)....it's really hard for me to think about this and (pause)....

Tami: And afterwards, everything changed?

Elena: Yes, everything changed, and well (pause)....

Tami: What was his name?

Elena: His name was Jorge.

Tami: Jorge.

Elena: Yes, my big brother. Yes, he was kidnapped and they killed him, too (sighs). And I felt afraid because I thought that they were going to kidnap me, too. When he, when he—when they killed him, I wanted to get out of the city, I didn't want to be there. I was really afraid. I didn't want to be in the house and I wanted to leave the city because I thought they were going to kidnap me.

Tami: Did they say that?

Elena: Not exactly, but I thought that they had all of my brother's information, so then they had all of the information about our family and—

Tami: But they were strangers?

Elena: Yes, so (pause)....

Tami: So you wanted to leave the city but you couldn't?

Elena: No, no we couldn't, so I had to deal with that and wait. The process took two or three months, but to me it felt like two or three years. And later, I felt better when we could leave; it was relief for me because I thought they were going to kidnap me. So then we arrived in the United States.

Many things in this passage mark her hesitancy to discuss this loss: the pauses in the telling, how she cannot name her brother until I ask, and how only after his naming can she directly confront the loss that until that point she only talked around. My questions and comments come in the spaces where I feel she needs accompaniment of different forms. As she begins this narrative of loss, I can feel the tension building and I attempt to defuse it a little by asking if she still lived with her parents. When she pauses after introducing that “it” was a shock, I ask her a question in the form of just repeating what she's already said (“So it happened without warning?”), leading her back to where she was in the telling. When she pauses after saying that “everything changed,” I gently urge her to finally name her brother and thus name the loss. Similarly, in the Clark article, Laub states that in interviews he has done “There can be sadness, and I know a loss is being covered over. [There are] places in narrative that don't come out on their own, that need my intervention, places I need to be before the witness gets there, to receive their testimony” (Clark 2005:277).

For each person I interviewed, the kind of accompaniment I provided was different in response to them and their act of telling. In an interview with a woman from Guatemala named Estela, I actually asked her to *stop* telling me about a traumatic event that she had suffered while crossing Mexico to get to the United States. She was clearly overwhelmed with pain and my instinct was that it was simply too much for her. She was undoubtedly assaulted and robbed by a group of men, and also more than likely gang-raped. As she struggled to go on with the telling, I told her that I could imagine what happened, she didn't need to tell me, and I moved us to another place in her narrative:

Estela: So I decided to leave Guatemala to come here. The trip was going fine, we got through Guatemala, everything went well. But in the country of Mexico...it was there where, where...Oh! It was awful for me because in one part of Mexico they assaulted us. There were about fifteen men, like fifteen men ... and there were eight of us women traveling together with a few men. In the morning, still in the dark, we were leaving. And ... all those other men had guns and ...we were eight women and only two men with us. When we saw what was happening, the men with us yelled, "Run!" But already we couldn't because the other men had us surrounded, all of us women.... They told us, "Give us your things!" We said, "No!" But, oh, we had to and they took everything that we had: money, jewelry, everything that we had. Then they said to us, "Take off your clothes!" "No! No," we said. We didn't want to, you know, because we were women. And, this, this... (crying). I'm sorry....

Tami: I understand. I've heard that the trip through Mexico is really hard.

Estela: Mhm-hmm

Tami: And were you walking the whole way?

Estela: Most of the way.

Tami: Wow.

Estela: Yes, and then...(crying)...

Tami: You don't have to talk about this. I can imagine what happened.

My point here is that as a witness to testimony, to lose connection to emotion would mean that I would be less likely to be able to interpret their needs in my role as someone accompanying them in their narrative. My emotional connection to the person I was with was more prevalent and more critical than any intellectual knowledge I had of their

situation in particular and the topic of political violence in general. And this emotional connection was made more possible through my own personal pain.

Rather than use the concept of witnessing, Wilson and Thomas (2004) would refer to my ability to make connections through my own pain as “empathy.” Working in the field of psychoanalysis, they stress the importance of the concept of empathy in the therapeutic setting, particularly when dealing with survivors of trauma. They describe empathy as paying attention to many things at once, the psychological capacity to identify and understand another’s psychological state of being, and “the capacity to think and feel oneself into the inner life of another person” (Wilson and Thomas 2004:17). They assert that the therapist cannot fully understand another’s experience of trauma without “drawing on their own experiences with pain, uncertainty, anxiety, suffering and memories of profoundly upsetting life experiences in an attempt to understand the client’s inner struggles with psychic trauma and how it has altered their world and their reality” (Wilson and Thomas 2004:17). Before treatment can begin, the therapist needs to understand the experience of the traumatized person as completely as possible; it is the tool of empathy which allows the therapist to accomplish this.

This certainly resonates with my own experience interviewing. Knowing when to push people, when to backtrack, and when to avoid topics entirely was based on my “feel” (or empathy) for the person and the interview process; there was no set script or formulaic one right way for me to go about interviewing survivors and staff when my primary goal in each interview was not to cause further damage in any way. Of course I

had certain general areas that I tried to cover in each interview, but the lack of a heavily structured interview also created the space for unpredictable things to happen.

Sometimes this meant that my “subjects,” rather than acting as passive participants in the process, constructed the interview to achieve their own agendas. In one of the first interviews I did, Lidia Lopez, an indigenous Guatemalan woman, “hijacked” my interview. I ask her what year she was born. She briefly replies to this and then goes straight into what is really interesting her: establishing her legal status in the United States. She talks at length about her legal process and her problems with her documentation. Then, without another question from me, she skips in her history from her date of birth to the date she arrives in the US and proceeds to tell her life story from that point on. Although we did do a second interview where I asked her more questions about her past in Guatemala, the first interview clearly reflected her preoccupations and her agenda. Additionally, she reflects on the power of storytelling within the first interview, commenting to me that she shared her story on the news when she was living in the “casa,” and because of that, the program received international funds which allowed it to remain open. She also told me several times that she would like to turn her story into a book and that she feels she has the “*capaz*” (ability) to do that. Clearly, she is the active agent in relation to her story.

In another interview situation, the man I was speaking with “took over” the interview through *how* he chose to tell his story rather than *what* he chose to talk about. Jesus is from El Salvador and is a committed evangelical. After I asked the first question, he began his reply with his head down, as if in prayer. I tried to ask another question,

which I could tell he perceived as an intrusion from his tone of voice, brief response and body language. I knew to ask no further questions, and he continued giving me his “testimony” about his life as if it were a confession with no more interruptions from me over the course of almost an hour. When he finished, he signaled this by raising his head and again establishing eye contact with me and smiling. His body language and his tone were completely different. At this point, I was free to ask questions. Again he, rather than I, controlled the process. My role as determined by him was clearly initially as a bystander to his testimony. Only afterwards was I allowed to become a participant in the interview.

In contrast, one of the last interviews I did with a young indigenous woman from Guatemala required a great deal of support on my part. She was fairly hesitant in telling her story and I *needed* to be an active questioner. As important, perhaps, was that I constantly affirmed her agency as she told me her story, which I believe influenced the fact that she became increasingly expansive in her answers as the interview progressed; as she saw my interest and encouragement, she began to feel more like she had a story worth telling. So, for example, I expressed amazement at the fact that she planned her escape from abject poverty and an extremely abusive father at the age of fourteen. Despite never having been out of her small rural town and only speaking her indigenous language, she took a bus to a city six hours away where she knew no one. Once there, she looked for someone who was from her own ethnic group and spoke her language by indentifying a young woman who wore *traje*² similar to her own. This woman gave

² Indigenous clothing worn mostly by women that varies according to ethnic group and geographic region.

Isabel a place to stay and connected her with her first job in the city. I also attempted to equalize the power difference between by us as much as I could. When she related stories about her travels in many parts of the US, I responded, “Wow! You have been more places in this country than I have,” to which she reacted with a shy but obviously pleased giggle. These little things made a difference in the quality of this interview, and, I feel, in how Isabel felt when she left the interview. I do not intend to be so patronizing as to say that I “gave” her a sense of pride; rather, seeing her accomplishments reflected in the eyes of someone else—and someone with the cultural capital that a white US citizen has—definitely contributed to her realization that her actions were extraordinary.

Each of the three interviews discussed above deal with the interactions between a flexible interview process and the creation of a sometimes surprising variety in the overall structure of the interview and the roles taken by both the researched and the researcher. A fourth interview illuminates this issue in two different ways. I did two lengthy interviews with Sara Castillo, a woman in her forties from El Salvador who is a survivor of violence, a former staff member at *El Centro de Solidaridad*, and currently leads the Solidaridad Multicultural program, in addition to holding a Masters degree in Social Work. In our first interview, I let Sara know that she could speak to me in either English or Spanish. She speaks both well, but I knew from prior interactions with her that she usually prefers to speak in Spanish. So I was surprised, but did not comment, when she chose to do two hours of interviewing in her second language of English. Near the beginning of our second interview (also in English), she herself initiated a reflection on why she was choosing to speak in English:

Sara: one thing that I was notice, [was that] if you allowed me to ... talking about this stuff in English is easier.

Tami: Yeah, I guessed that.

Sara: Yeah ... but then ... there's certain stuff that I can't explain it in English. I have to switch to Spanish to talk about those things. So ... that's another thing, that if I talk in Spanish, it's more, it's hotter, you know. But if I'm saying it in English, I guess, the emotions get lost in translation or something. I don't know.

Tami: I wondered about that.

Sara: Yeah

Tami: Yeah, because almost the ... entire interview was in English, there were maybe five words in Spanish.

Sara: I was thinking ... about that and what it makes me think about it is that you clearly give me the choice to speak of either language, and I was like, "wow," 'cause you know every time I have a chance to speak in Spanish, I choose Spanish, but for some reason, this time I didn't.

Again, agency is expressed through Sara's decision to use the language that will protect her from the "heat" of the difficult emotions of the hard stories she needs to tell. In addition to the example of strategic language choice, this interview also contains an example of how researchers not only talk to and about our research participants, they also "talk back" (hooks 1989). As we form interpretations and opinions about them and their behavior, we should never forget that they do the same to us. The second time we meet, Sara shares her initial (and fairly accurate) impressions of me:

Sara: Yeah, well I remember the first time I met you. You were driving your jeep, and ... you looked pretty *tough* and ... like a woman that have hard time trusting. I don't remember thinking too much or making too much of you, but I do remember thinking those two things.

This second interview with Sara also articulated for me the importance of expressing empathy for the experiences of another person *without* appearing absolutely overwhelmed by the horrors of what many of the stories contained. Throughout my interviews, I sensed the need to express that I was affected by what I was being told, yet I also needed to maintain some sense of composure, even though there were times when I

honestly just wanted to fall apart during an interview and other times when I wanted to run from the room when I sensed we were arriving at the point of some form of trauma. Without being explicitly told, I came to realize what Sara affirmed for me through her own experiences with telling her story: A listener who is *overly* affected by a story ceases to be a witness to pain and instead turns into a burden in the form of someone that the teller then feels they need to protect from the truth:

You know, there was this one time that one of the participant made this comment to me, and the comment was that when they have told ... part of their story to Kathy [another staff member], that Kathy have told them, "this is too much for me to handle." And that they felt that they couldn't talk after that, after she making that comment because, in this case, this person felt responsible, and decided to protect Kathy. I don't know what happened for them to say that, but that's significant, you know? Because it has happened to me too: the very few times that I have chosen the wrong time and the wrong place and the wrong person to say some of my stories....people sometimes don't say anything, but you can see they're being uncomfortable in their own skin as you say your story. So then I'm like, "Okayyyy....let's take a detour, more superficial shit, because the truth cannot be handled."

I want to close this section with a discussion of some of the shortcomings of my interviewing process. As a person who was dealing with interviewing in any substantial way for the first time, I certainly do not want to create the mistaken impression that I was a master at the art of interviewing and I also learned a great deal from the challenges I faced and the mistakes that I made. For example, my effort to be empathetic and vulnerable to the pain of others also meant I was affected by my research in some fairly severe ways: "Empathetic attunement is a vehicle of entry into the trauma client's inner world. Immersion into this inner world of traumatization can be fear provoking, overwhelmingly distressful, and anxiety producing and can lead to altered views on humanity, morality, justice and the goodness of life" (Wilson and Thomas 2004:34).

At least by this point in my academic career, I was aware of the phenomenon of secondary PTSD, and that helped, but it did not prevent it from happening. The day before Thanksgiving I scheduled two interviews, each of which turned out to be *very* intense. During the second interview, as a man was relating to me multiple tragedies he had experienced, I found myself feeling bored and impatient. I could not understand why I was feeling this way when he was talking about such awful things. As he continued with his story, I felt the panicked need to flee from the room, as if I could not tolerate one more second. Luckily, this was the interview with the El Salvadoran man who was in confessional mode and did not want any interference from me, so I was able to just barely keep my panic and agitation to myself until it was over. Later that night as I was visiting with friends, when anyone casually asked me how I was, I repeatedly responded with, “Just great! I’ve been listening to torture stories all day: Men getting burned with cigarette butts during police interrogations, men who became orphans and felt no one ever loved them, men who turned to drugs and killed other people in the army because they felt there was no other place for them. I’m just great!” As I purged the poison I had absorbed while listening to what people can do to other people, my inappropriate outbursts were met with shocked silences.

As this anecdote demonstrates, I often found it difficult to move with any kind of grace from the world I had been submerged in during interviews that usually dealt with constant struggle and sometimes with extreme violence and despair to the more “normal” everyday world I returned to after the fifteen minute trip from wherever I did the interview to my house or to the university. I had occasional nightmares, often revolving

around the feeling of being trapped. I went through periods of feeling alone and depressed. My experiences doing research were understandably hard for other people to relate to. Once when I tried to tell a friend about the bone-weary exhaustion I was feeling after a three-hour interview, he replied, “What’s the big deal? You’re just talking with them, right? You’re just sitting there. What’s so hard about that?” For the most part, I kept my interviewing experiences to myself.

I also cannot deny that as much as I tried to accompany people and tried to focus on whatever they were willing to share, sometimes part of my brain also thought about how I would or would not be able to use what they were telling me in my dissertation. I cannot say I *never* got impatient during an interview with what I perceived as people going off on tangents, or not talking about what I really wanted them to talk about, and just basically not giving me exactly what I wanted and how I wanted it. Fortunately, I think I managed to hide these feelings and keep a patient face. And in the end, when I would look over the parts of the interviews where I thought I was getting “nothing,” I realized that *every* story always told me something, whether it be about something the person was avoiding, or about a way of connecting events and ideas that made no sense to me at the time, but later revealed something about how that person saw the world. I also realized that much of the time they *were* telling me something that directly related to my research ideas, I simply did not recognize it at the time.

My goal of not doing any harm meant that sometimes people would not share parts of their stories with me that I was very curious about and that I thought would contribute to my research in important ways. One woman from Argentina told me that

although she was happy to discuss the role of the center in her life, there was no way she was going to discuss the reasons they came here; I could ask her husband about what had happened to them in the past in their country if I wanted to know that. My ambivalence about pursuing interviews with people who were hesitant to do them also meant I did not get to interview several people whose stories I really wanted to include. One woman just straight up told me no when I asked, but the more frequent method of refusal was one of indirectly putting me off, or of scheduling an interview and then not showing up for it. This was another arena where I struggled—successfully, I think—to contain my frustration and disappointment. Although it was difficult for me at times, it was *critical* that I not lay any kind of extra emotional burden or judgment on people who were already dealing with so much.

Furthermore, although my goal was for interviews to be at the least not damaging and at the most healing for a person, I had to accept that I could influence the outcome of interviews for people, but I could not control it. Sometimes I felt interviews were healing for people. One woman with whom I had little previous contact—and whose interview began in a very halting manner but gathered steam and became an amazing story of her triumph over domestic abuse—jumped up and spontaneously hugged me when the interview ended. Elena, whose story of the kidnapping and death of her brother I wrote about earlier in this chapter, explicitly thanked me after our last interview, telling me that our talks had been a chance for her to journey inside herself. But sometimes I also felt interviews were draining for people. After driving an hour for an interview with a woman I had known for years, I hesitated about starting it because her husband was out of town

and she was in the house alone with her two young children. When they both fell asleep at the same time, I pushed for the interview and she agreed. As the time was nearing when I had to leave, she reached a very emotional point in her narrative that I did not see coming. Although I tried to stay long enough to normalize her emotions before I left, I worried for days that I had pushed when I should not have, and that we both came out of the interview feeling drained and upset. After other interviews, I sometimes had no idea how a person felt and I had to learn to sit with that uncertainty.

Every interview I received was simultaneously a gift that inspires me and a burden that weighs on me. I hope that I have been able to convey some sense of that reality in this section. In the next chapter, I turn to focus on the histories of the staff members of *El Centro de la Solidaridad*.

CHAPTER III
TRUTH, TRAUMA, AND TRANSFORMATION: THE MOTIVATIONS AND
MEANINGS OF TRAUMA WORK

The story of one center for treatment of survivors of political violence from Latin America actually contains many stories lying beneath the surface. Although I began my research with the idea that I would almost exclusively focus on the participants of *El Centro*, I only needed to do a few interviews with the staff members of the center to realize the potential of their stories to enrich this work. Why? First, while the participants' lives tell us a great deal about political and structural violence, the effects of torture and trauma, and the struggle to make a new life in exile, the staff members offer us other important lessons regarding why people are moved to do trauma work and social activism, debates around healing trauma, and the promise and predicaments of this work. In brief, my work provides an ethnographic window into the international and national torture treatment movement and trauma work. Although these centers have been in existence for over twenty years, they remain almost completely invisible in the public national landscape, perhaps because their existence raises many questions about what the US government does in other places. Furthermore, although treatment centers are discussed by activists and a great deal about trauma work is published by practitioners such as psychiatrists, psychologists, and social workers, very little has been said by anthropologists about treatment centers for refugees and survivors. I argue that trauma

work should be studied because it is intimately connected to issues of globalization and transnationalism, the past and memory, political and structural violence, refugee studies, immigration politics, organizational studies, and the social construction of suffering—all issues that anthropologists can and do study.

Second, the staff and center shape the context of reception for the survivors that arrive there. As exiles and as immigrants who have not been designated as “official” refugees in the US, and who, in fact, have various legal statuses in the US, their suffering is even more invisible in the public realm. Kleinman (1988, 1997), who develops the concept of “social suffering,” Ong (2003) who refers to “the symbolics of suffering,” and Bloom (1997), among others, argue that suffering is socially constructed: collective modes of experience shape individual interpretations of suffering and social relationships and interactions often play a central role in the experience of illness. Similarly, Jelin (2003:11) argues that memory is also a social construction, stating that social frameworks give meaning to individual memory and that a more apt way of thinking about memory is as a reconstruction, rather than a recollection: “The social is always present, even in the most ‘individual’ moments.” As survivors struggle to find framework that assist them in making sense of their pasts in the context of a new country, I examine the torture treatment center as one social field where this history and the suffering of survivors is acknowledged. I argue that the staff serves as a critical social network—indeed, perhaps the only one—that influences the individual interpretations, narratives, and actions of survivors about the meaning of trauma, the importance of the past, and how one best heals from violence.

Third, as the center's mission evolved and became increasingly multifaceted, their client population shifted from individuals coming to the US on a visa for a limited stay to survivors with a variety of legal statuses who were already living in and planning to remain in the United States. Consequently, the staff of *El Centro* began to play not only a significant role in mediating the experience of suffering, but also a broader and equally vital role as a critical resource for Latino immigrants attempting to navigate the legal, social, political, and economic realities of their new country—a topic I explore in greater depth in Chapter V. Suffice it to say for now, however, that a discussion of the experiences of the Solidarity Center's staff provides key insights into the subjectivities of those who serve as the mediators between Latino newcomers and the nation states efforts to define and mold its citizens. Ong (2003:16) refers to both Rabinow's idea of the "middling modernizers" and Nikolas Rose's term "experts of subjectivity" in connection to her assertion that the individual local authorities and mediators in micropolitics are professionals—doctors, teachers, and social workers—"who translate the problematic of government into everyday operations." *El Centro* staff members serve as a unique case study of "middling modernizers" both because US staff members implicitly or explicitly convey in their interviews an attempt to create an identity in opposition to at least some of the US governments policies and practices and also because many staff members are themselves immigrants and survivors of trauma. This is different than research that focuses on the disciplining attempts made by agents that have no explicitly stated oppositional identity, such as the service providers in Ong's (1996, 2003) research on

Southeast Asians and the field of “refugee medicine” and the court officials in Coutin’s (2000) study of El Salvadorans and deportation hearings in the US.

In other words, I examine how the development of alternative political subjectivities—ones that question the dominant narrative of the nation-state or ones that were developed in the same countries producing the center’s clients—shape the center as a buffer between these clients and the surveillance and discipline of the state. I argue that life histories of the staff become critical to the attempt to understand how state efforts to manage newcomers are both internalized and rejected, deployed and resisted by *El Centro*’s staff. Thus, in certain ways *El Centro* is similar to more mainstream institutions studied by other researchers in that it repeats the hierarchies and hegemonies involved in state power and control, but in other ways the staff of the center contest these. Examining the successes and limitations of the staff in walking this tightrope demonstrates the successes and failures of democratic modernity to dominate “through the mundane administration and surveillance of individual bodies and the social body, adjusting them to normalizing values and hierarchies” (Ong 2003:91). This, in turn, supports Foucault’s (1979) contention that state is not a unitary center of power and thus the process of governmentality is an uneven one, and Aretxaga’s more recent assertion that we need to “rethink the notion of the state in a new light as a contradictory ensemble of practices and processes” (2003:395).

A Brief History of the Center

El Centro de la Solidaridad (The Solidarity Center) came into existence in 1993 in a small West coast city as the result of primarily one woman's determination. Bev McKenzie, a retired management consultant, envisioned an "island of security" where survivors of torture from Latin America could escape fear and persecution and receive whatever traditional and alternative therapeutic services they might need—including massage, psychotherapy, physical therapy, surgeries, and acupuncture. Located in a two-story house on a tree-lined street in a residential neighborhood, the program brought one person or family at a time for a year-long stay from one of several countries, usually in the Central American region that, in the 1990s, was nearing the end of intense periods of war and conflict. According to Bev's vision, *El Centro* was meant to belong to the local community, transforming both the people who worked there and the Latin Americans who came there through the power of the creation of personal connections. These personal connections, according to Bev, would raise awareness among US citizens about torture and political violence and would help heal survivors as they learned to rebuild trust with their new North American allies.

International and national landscapes existing at the time of the creation of *El Centro* in 1993 were important in two ways that I will briefly mention here. First, there was a growing awareness of and response to torture around the world, as reflected by the passage of various international and national laws and the formalization of the torture rehabilitation movement into the International Rehabilitation Council for Torture Victims (IRCT). Second, the wars in Central America were coming to a close, and by the time *El*

Centro was created, there was already a growing international recognition of the human rights abuses committed in the region, recognition that provided the fuel for Central American Solidarity and Sanctuary Movements within the US. Within Central American countries, human rights organizations that would later refer clients to *El Centro* emerged out of the spaces provided by the smallest of political openings. Bev McKenzie drew on her connections to torture treatment centers, Solidarity and Sanctuary Movements, and Central American human rights groups in different ways, but all three were important to the creation and early phase of *El Centro*. Torture treatment centers provided Bev with a model for her center that she then modified in what she saw as critical ways. One of the more established centers also provided her staff with training. The Solidarity and Sanctuary Movements of the 1980s were what opened Bev's eyes to the violence occurring in Central America with the support of the US government. The philosophy and strategy of these related movements underlies much of her own thinking and practices connected to *El Centro*. Also, it was during solidarity trips to Central America that she formed relationships with organizations that would later refer clients to her center.

In 1999, *El Centro* entered a second era in its existence that was marked by the fact that the city surrounding the center had undergone a dramatic increase in the general Latino population, which had more than doubled in ten years (US Census Bureau 2000). This shift was significant in two major ways. First, the center's staff became more culturally diverse when several Latinos joined the organization in key positions, including the hiring of a Chilean indigenous Mapuche man as the program director and a

Mexican woman, an El Salvadoran woman, and a woman from Chile in various staff positions. Second, the increasing population of Latinos meant that Bev McKenzie's original vision of *El Centro* existing as an "island of safety" for those brought here from Latin America was no longer a broad enough mission given the changing local reality: As staff members soon realized, survivors of violence were no longer only to be found among those brought here as part of the residential program, they were already here, living in the community, and intending to make their lives here.

Shifts on an international and national level also marked this time period. Conflicts such as the Bosnian War, the genocide in Rwanda, and the turmoil in Sudan meant that Latin America was no longer considered a hot spot, resulting in decreased funding from international agencies like the United Nations for work that focused on the plight of Latin American people. As Lara, a staff member during this era, told me:

... the violence in Latin America wasn't getting that much press at the time except for maybe the Zapatistas.... So what I'm saying is it became harder and harder to make a case for *El Centro* to get money, when so many other areas of the world were a lot more ... fresh in people's memories and the violence was a lot more current and there was a lot more of it....

The events of 9/11 also happened during this era and created significant shifts in national attitudes, practices, and policies regarding immigration and resulting in an increase in anti-immigrant sentiment.

All of these factors contributed to the perception of a more complicated landscape that *El Centro* needed to navigate during this time period. This perceived increased complexity, in turn, gave rise to a more complex program. First, *El Centro* attempted to meet the need of survivors of violence already living in the community with the initiation

of an outreach counseling program. The desire to fund and staff this program led to an alliance with a large health and sciences university located two hours from *El Centro*. Second, a staff member initiated a program for the children of families involved with *El Centro*, with the dual goals of developing youth leadership in the Latino community and working on the issue of immigrant rights in the post 9/11 anti-immigrant US environment.

As I discuss in more detail throughout the remainder of this chapter, there was a fairly unified vision and narrative regarding the mission of the center and the means to best serve clients during the first era of the program's existence, a narrative that centered on the vision of the founder, Bev McKenzie. The staff during this era was white and middle class and most discussed being drawn to the center out of moral and political convictions resulting from learning about the effects of US foreign intervention. However, in the second era, I argue that the increased complexity of *El Centro*—the increasingly diverse staff, more diverse forms of client trauma, and a more complicated political landscape—resulted in multiple narratives and visions about the purpose of the center, the personal meaning of the work to staff members, and how healing should best be accomplished. These multiple narratives, in turn, led to conflict and eventually the breakup of *El Centro de la Solidaridad* in 2005, twelve years after the program began.

The Motivations and Meanings of Trauma Work and Beliefs about Healing

It is perhaps not surprising that memory structures how survivors deal with traumatic experiences. However, through my oral history interview approach, I realized

that the past and memory *also* shape the involvement of the people who treat trauma survivors. Furthermore, I realized that how staff identities were structurally organized along the axes of privilege and oppression (race, class, gender, nationality) framed their biographical experiences. In other words, the positionality of staff influenced their life experiences, which again, in turn, influenced both *why* staff began working for the center and *how* they felt the work should be done. In this chapter, I make use of Stephen's (2007) notion of "transborder" to talk about the identities and the biographies of individuals who work with Latin American trauma survivors with the goal of addressing larger concerns about what motivates people to work for social change and the promise and predicament—or, to use Tsing's (2005) terms, the friction and fragments—of this kind of activism.

In answering these questions, I attempt to resist the tendency to romanticize oppositional movements while also demonstrating the deep commitments that people had to this work. In many ways, my analysis and interpretation of staff interviews has been the most challenging part of this research because I want to do justice to the richness of the many perceptions, reasons, beliefs, practices, and emotions behind the scenes at *El Centro*, while also asking the questions that need to be asked. Ortner (1995:185-186) states, "The answer to a reified and romanticized subject must be an actor understood as more fully and culturally constructed from top to bottom. The breaks and splits and incoherencies of consciousness, no less than the integrations and coherencies, are equally products of cultural and historical formation." In my attempt to represent actors that are more fully historically and culturally constructed, I turned to a more biographical, life

history approach. The life history approach revealed deep and complex reasons and events that brought people to work at *El Centro*.

Using a life history approach is also a way to respond to the work of others who argue that there currently is a lack of biographical techniques in the analysis of social change work and actors. Nepstad (2004) argues that research on social movements and collective action focuses too much on the rational and logical, often using a cost/benefit analysis and emphasizing models, diagrams, structures, and systems. As a result, we often lose the human aspect of protest: why do people become involved and stay involved? To answer questions such as these, according to Nepstad, we need to include emotional and spiritual reasons, as well as cognitive reasons. While my work resonates with that of Nepstad, I found that not only does biography inform people's motivations to work for social change, but it also informs *how* people then do this work. This realization became a critical part of my analysis: life histories shaped the meaning of working at *El Centro* in different ways, which shaped beliefs about how the work should be done, which, in turn, contributed to both the promise and predicaments of attempting to heal survivors of political violence that I discuss in Chapter IV.

della Porta (1992) also argues for the role of the biographical in the analysis of activism as one of the most effective means to capture the relationships between structure and agency in the lives of individuals; ideology, memory and narrative ability affect life history accounts in ways that allow the researcher to portray the interplay between action (what a person does) and frame (how they are seeing reality/structure). Using biographical approaches, we can ask how ideologies justify actions and help build value

systems, and interview excerpts can be used to “demonstrate that life histories offer useful material in showing ... the interplay between reality and its perception in the creation of meanings and motivations—that is, the ‘social construction of reality’” (della Porta 1992:180). In addition to looking at how individuals construct meaning (agency), biographical techniques allow us to explore historical periods and social positioning (structures) that both constrain and offer opportunities for agency (della Porta 1992). For example, individuals who become aware of structures and “learn the rules of the game” can then choose to conform, challenge, or subvert the rules. The main point here is that memories of movements are social; as individuals retrace their personal histories with organizations, “They identify themselves within a group or groups and create narratives about how the group began and sometimes about how it ended. They articulate collective experience and through it create social meaning that constitutes now, as it always did, political discourse” (Morgen 2002:xii).

White US Citizens, Transborder Experiences, and the Construction of “The Truth”

What motivated individuals to become involved in the center during this first phase of its existence? How did white middle-class folks living in an overwhelmingly European American city in a country where their government seemed determined to mystify, ignore, or even support government violence in Latin America come to concern themselves with social change in regards to this issue? In other words, how does the development of alternative political subjectivities—ones that question the dominant narrative of the nation-state—happen? During an era when the power of the state is

taking new forms (Aretxaga 2003), how are the political beliefs of its subjects fashioned? What causes people to rethink, question, challenge, and resist nationalist discourses?

In her recent book, *Transborder Lives* (2007), Lynn Stephen develops the concept of “transborder” to explain the complicated nuances of reality for indigenous Oaxacans whose “ability to construct space, time, and social relations in more than one place simultaneously is part of the daily framing of life” (2007:5). Like most scholars of the border (Anzaldúa 1987) and of transnational processes, Stephen focuses her analysis on those with the least cultural capital—in this case, indigenous Oaxacans living in Mexico, California, and Oregon. What my work demonstrates is that the more privileged—in this case, white middle class staff workers at *El Centro*—can also be transformed by movement across borders. In particular, I argue that travel—to different places and for different reasons—served as the primary motivation for the later social activism of staff members. The physical crossing of geographic borders allowed these individuals to cross borders in their political subjectivity as well; as they traveled, their interactions with people and their firsthand witnessing of events caused them to question national discourses on various political realities and create an alternative construction of “the truth.” As such, my research contributes to and supports the work of scholars such as Ruth Frankenberg (1993) and Beverly Tatum (1997) who assert that structures of power shape the subjectivities of both the privileged and the oppressed.

Bev McKenzie, the founder of *El Centro de la Solidaridad*, sat me down in the living room of her apartment and told me her story in her blunt, no-nonsense manner. In my interviews with other staff members, Bev is remembered as having a very specific

vision of *El Centro* that everyone was expected to adhere to while she was actively involved with the center, beginning with its initiation in 1993 and lasting until she retired from the center after a stroke in 1996. European-American and almost eighty years old at the time of this interview, she still has a very strong opinion about what *El Centro* was supposed to be and do, as well as opinions about how it changed and its eventual demise. She also continues to work in the arena of social concerns, although her current focus is on supporting people dealing with substance abuse issues, including the creation of her own book on the topic written in both English and Spanish. I think that it is accurate to say that *El Centro de la Solidaridad* was primarily (if not exclusively) the initial creation of this one woman. When Bev decided that she wanted—or perhaps more accurately, that she felt compelled—to start a torture treatment center, she personally recruited the staff, the board, and the professionals who would donate their time and services.

Many of the staff, including Bev, were surprised by my interest in their broader life histories. Although Bev attempted to downplay the importance of her life story and her own agency in the creation of the Solidarity Center, Bev's discussion of her work at the center inevitably intertwines with moments in her life history that moved her to do this work and that framed why she felt the work was important and how it should be done. Thus, while Bev limits what she "officially" designates as her life history to about the first two minutes of an almost two hour interview, the rest of her interview reveals several key life moments and ideological themes that informed Bev's activism in general, and her vision for the center in particular. All life narratives are driven to some extent by a search for meaning (Jelin 2003; Ochs and Capps 1996; Portelli 1997). With activists,

this search frequently entails a strong tendency to look for justifications for their behavior that are in line with their political and ideological beliefs (della Porta 1992; Nepstad 2004). Consequently, as Bev explains the origins of *El Centro*, she cannot avoid delving into making meaning out of her actions, which also involves delving into her life history. Oral history provides a holistic and organic approach towards understanding people and social movements, as activists—sometimes consciously, sometimes unconsciously—trace the processes by which attitudes are transformed into action and by which rationales for action are created:

life histories produce better knowledge concerning that series of phenomena which lie ‘in the margins’ between private and public, real and imaginary, subjective and objective. They permit understanding not only of individual psychology, but also of group phenomena... Where other techniques offer static images, life histories are better suited to describe processes.

[della Porta 1992:187]

The “foundational story” of *El Centro* is a critical story to tell; as Sandra Morgen (2002:14), in her work on the US Women’s Health Movement, argues, “foundational stories drive a movement’s evolving self-consciousness”:

These stories signal the moment of rupture between tacit acceptance of things as they are and resistance, mobilization toward the new. They explain and inspire. They aim to create a sense of shared history and to make possible a sense of shared identity. They commemorate moments, individual, ideas, and actions, but they flow toward a larger story, a story of change. Foundational stories are told in social movements for the same reasons that families and nations tell stories about themselves—to construct a history with roots to a present that is shared and hopes for a future in which individuals have a common stake.

As Bev explained to me, a student trip to Holland after World War II opened her eyes to the fact that torture happened, that governments were not always truthful about the roles they played in other countries, and that citizens needed to inform themselves about the

histories of their countries. As students from many countries discussed the rebuilding of Germany after the war, one of the Dutch students began asking the Germans about their role during the war:

one of the Dutch ... started asking the Germans, "Why didn't you say no?" [They replied] "We were afraid, we were afraid"... about five different people gave different reasons for being afraid. And finally one fellow stood up, he couldn't take it any longer. He jumped to his feet ... and he said, "I'm missing two fingers, they had to be amputated because I was tortured by cigarettes.... we were hiding Jews and they wanted to find out who else was doing that." And ... then he started to cry. And he said, "I also saw my mother and my sister raped.... We were afraid ... we were afraid, too, but we said 'No!'" Those words have ... echoed in my mind ever since: Say no.

... The other thing that happened on my way back [from the conference was that] this one young English woman I knew, she said, "you ... Yanks are the cock of the walk now. We used to be. But you're not gonna be up there as long as we were." And I said, "What do you mean?" And she said, "Well," she said, "We Brits forgot our history. You Yanks have never learned yours." Those are the two things that rang in my ears ever since. That's all you have to know about me.

Although Bev marks the end of her official history two minutes into the interview with the last sentence above, international travel and finding out "the truth" of her country's history and intervention in other places are factors that repeatedly affect her life's course. A second example of this occurs about thirty years later. Bev told me that she went on to become a successful management consultant in Denver, Colorado. However, she never forgot her earlier experience in Holland, which she explicitly connects in our interview with her later concern about her government's actions in Latin America: "When I lived in Denver, I was pretty successful I was a management consultant and ... I had some fortune 500 companies, so I did well. And I was concerned about—well I told you about what had happened to me earlier in my life—and I was

concerned about what our government might be doing in Latin America. So I went down on my first trip with Witness for Peace.”¹ As a result of this trip, Bev made a complete change in her lifestyle, divesting her funds from the companies in which she was invested, turning over her office building to a rape awareness clinic, and immediately returning to Nicaragua to build houses, water systems, and schools in communities that had been bombed. During this time period, Bev also provided accompaniment to members of the Guatemalan Human Rights Commission and was a human rights observer during the Escupulas II process in Guatemala.²

A final event that Bev discusses as greatly affecting her occurred during her trips accompanying Guatemalans when she met a young US nun working in Guatemala. Sister Diana Ortiz arrived in Guatemala in 1987 and taught children in the Western highlands. While on a religious retreat, she was kidnapped by two armed men and taken to the capital of Guatemala City where she was tortured, including being repeatedly raped and burned with cigarette butts. After escaping from a car during traffic, she immediately left the country and returned to the US. Bev saw Diana Ortiz several years later at the

¹ The purpose of Witness for Peace is to provide accompaniment to those whose lives are in danger, to transform US citizens by taking them on short trips to various nations and showing them the “human face” of US policies, and to make the larger US public aware of our government’s actions in other places through grassroots education and large-scale media outreach (Witness for Peace 2008).

² The Esquipulas Peace Agreement, named for the town in Guatemala where the initial meetings took place, was an initiative to settle the military conflicts that plagued Central America for many years, and in some cases, for decades. In May 1986, a summit meeting, “Esquipulas I,” took place, attended by the five Central American presidents. The “Esquipulas II Accord” was signed in Guatemala City by the five presidents on August 7, 1987, and defined a number of measures to promote national reconciliation: an end to hostilities, democratization, free elections, the termination of all assistance to irregular forces, negotiations on arms controls, and assistance to refugees (Conciliation Resources 2008).

Washington DC office of the Guatemalan Human Rights Commission and barely recognized her as the spunky young nun she had met in Guatemala. This personal connection with someone who had suffered torture in Guatemala was another catalyst for Bev, who had “wanted to do something about torture already.”

What becomes obvious in Bev’s narrative is that the primary factor moving her from political awareness to action is the fact that *through* travel, she found out the truth about her country. Travel allowed her to put a human face on the consequences of US foreign policy. The ability to see and hear firsthand the effects of her nation on the lives of others meant that Bev did not then view her response to tragedy and injustice as optional. Rather, her response to her awareness about the effects of her nation on the lives of others is framed as a moral one, a responsibility that one must then shoulder.

Bev McKenzie’s life experiences clearly shaped her decision to start *El Centro de la Solidaridad*, how she defined its mission and goals, and how she went about creating the center after moving to the West coast in 1988: “I had a dream, and my dream ... was if we can find an island of security—[the survivors] don’t have to worry about the police, being sent back, they don’t have to worry about money, they don’t have to worry about anything.... that was my dream and I wanted to be the first to set a model.... a model for the rest of the *world*, if you will.” In making this dream a reality, Bev relied on the personal connections and direct actions that had shaped her own awareness and involvement in Latin American issues. Her vision of the center revolved around two facets that she believed would create this “island of security” and that would make this program unique from many other centers that existed at that time in the US: it would be a

long-term residential program where survivors could escape for an entire year from the pressure, worries, guilt and possible death they faced in their own countries and the program would be run almost totally on volunteer labor.

The rationale underlying the first of these two components was that people cannot heal unless they feel safe, and to feel safe, they need, as Bev told me, “an oasis in the world to let them heal.” Bev argued that most other US torture treatment centers operating at this time were run out of offices where clients came for scheduled therapy appointments and perhaps additional drop-in referral services. In contrast, she stated, “I just do not believe you can get real closure and real healing on a once a week or once every two week [basis].” Although she respected these organizations and mentioned that *El Centro* personnel were trained initially by some of the staff from older and more established centers, Bev clearly saw the long-term, holistic approach of the center she proposed as a critical difference.

The rationale behind Bev’s passionate (and some staff would say unrealistically stubborn) commitment to using volunteers is also rooted in Bev’s life experiences: the importance of accompaniment and witnessing for both the survivor and for the witness. One reason for using volunteers was clearly to educate as many local US citizens as possible about the effects of their country’s policies and actions in other countries. In essence, Bev wanted to educate others based on the same model that had educated her: direct exposure to—or “witnessing”—the human face of US foreign policy. In turn, witnessing and accompaniment provided the foundation for what Bev felt created an environment of safety, trust, and compassion that was at the core of the center’s ability to

heal survivors of political violence. Ultimately, both witnessing and accompaniment revolve around the importance of personal connection, again a recurring theme from Bev's own life experiences.

Bev's vision for her center is clearly framed by larger national and international movements. The philosophy and methodology of the Solidarity and Sanctuary Movements repeatedly surface in Bev's own notions about what her center should look like and how it should operate. Conversely, Bev constructs her center somewhat in opposition to the other influential movement, the International Torture Treatment Movement. The Solidarity Movement was created in protest of the US government's role in Central America and in resistance to what was viewed as unjust and inhumane US immigration and asylum policies, particularly during the Reagan years. The catalysts for the movement included the active efforts of Salvadorans in the US and in El Salvador to create awareness of wartime atrocities and gain the support of empathetic US citizens (Godoy 2006), the deaths of four US nuns in El Salvador in December 1980, and, soon after, the death of Archbishop Oscar Romero (Nepstad 2004). The movement was connected to communities of faith in the US and had to find a way to respond to the difficulty of making wars—happening in geographically distant countries and which were either invisible (Guatemala) or misrepresented (El Salvador and Nicaragua) in the US media—relevant and visible to North Americans (García 2006; Nepstad 2004). The focus of the Solidarity Movement was primarily to make visible or to correct the misrepresentations of these countries in mainstream US discourse by arranging trips to

Central America where US citizens witnessed for themselves the daily reality of war and poverty in which the majority of people lived.

In Nepstad's book (2004) *Convictions of the Soul*, many soon-to-be solidarity activists recount their feelings of anger, betrayal, shame, and guilt over how the US government had portrayed Central America versus the reality they experienced as they worked on a daily basis at the side of people struggling for survival. As the interviews between Nepstad (2004) and the activists demonstrate, a key component of the Solidarity Movement was to connect these emotional reactions with an intellectual understanding of the larger context causing this suffering, a moral responsibility to act, and specific ways for individuals to channel all this into making concrete change. Furthermore, these trips "armed" individuals with personal stories and firsthand accounts of events in Central America that gave them a great deal of credibility when they returned home to the US and shared their stories with others (Nepstad 2004). In sum, solidarity work meant that US citizens experienced many negative emotions from seeing moral norms violated and from becoming aware of their own country's deception and intervention, but "meaning was also found in seeing people work to materialize their moral vision of social justice" and inspiration occurred as a result of directly experiencing that one's efforts could make a tangible difference in the world. (Nepstad 2004:126). The parallels between Bev's model and her border crossing experiences as part of the broader Solidarity Movement repeatedly surface in Bev's narrative: Bev's realizations that her government was not telling the truth, her anger and betrayal, her moral conviction that one must say no to

torture, and her belief that individual citizens could make a difference in US policy are strikingly similar to the themes found in the interviews done by Nepstad (2004).

US citizens involved in the Sanctuary Movement did not necessarily travel abroad like members of the Solidarity Movement, but rather, they were impacted by the testimony of refugees who came to the United States and “embodied the human consequences of US policies and were living reminders that the suffering and violence were likely to persist as long as US support for the military regimes in Guatemala and El Salvador continued” (Nepstad 2004:134). One activist affirms, ““It was those kinds of experiences that really cemented my conviction, hearing those stories on a very personal level and having faces that will never be erased from my memory. There is no substitute for that. So at that point, it was, okay, I need to respond to this in a bigger way” (Nepstad 2004:134-135). Clearly, Bev’s idea about making *El Centro* a community center served by volunteers mirrors the Sanctuary Movement technique of putting a human face on war, and the ethical responsibility of US citizens to educate themselves about US foreign policy and to *respond with action* to the suffering of Central American people.

The International Torture Treatment Movement also shapes Bev’s philosophies, but in this case, she envisions her center as unique, or different from other centers existing at the time. Jaronson (1998:16) defines the torture rehabilitation movement as a “worldwide effort by health care professional and others to care for survivors of governmental torture.” Centers focus on the treatment of victims, conducting research, providing training, and raising awareness about torture with the ultimate goal of influencing world opinion to stop governments from using torture (Jaronson 1998).

Although the centers share this in common, they vary a great deal in regards to the clients they serve (countries of origin, legal status, and type of trauma survivor), the treatment setting (ranging from more institutionalized setting such as hospitals to more residential settings like *El Centro*), and the resources they have available to provide treatment (Jaronson 1998).

Although torture has occurred throughout human history and the first human rights declaration was issued in 1789, the use of torture in World War II was an enormous catalyst for increased global awareness regarding the issue, and provoked professionals and activists to more thoroughly examine the use of torture and its effects (Eitinger and Weisaeth 1998; Jaronson and Popkin 1998). The 1970s post US civil rights movements and Vietnam War period was the next period of major advances in defining human rights and increasing interest in trauma treatment, but little progress had been made in regards to understanding the effects of torture and the best treatment methods for survivors (Eitinger and Weisaeth 1998; Jaronson and Popkin 1998). In the 1980s, Denmark established the first treatment center for victims of torture in Copenhagen, which served as a role model for the establishment of the first centers in Canada (Toronto) and the United States (Minneapolis) (Eitinger and Weisaeth 1998; Jaronson 1998). Post-traumatic stress disorder (PTSD) also became recognized and labeled as a cluster of symptoms that were prevalent among trauma survivors (Allodi 1998). In 1989 the United Nations Convention against Torture made it possible for victims to receive redress, compensation, and rehabilitation from the state (Jaronson 1998). However, only in the 1990s did the literature on torture become markedly more extensive and diffuse

(Allodi 1998). In 1994, 112 countries were using torture, and the ninety-nine rehabilitation centers in forty-nine different countries that were treating torture survivors formalized themselves into the International Rehabilitation Council for Torture Victims (IRCT), which is still in existence today (Jaronson 1998). By this time, *El Centro* had become one of these centers. A year later, in 1995, there were 182 centers internationally, with eighty-seven located in the northern hemisphere and ninety-five located in the southern hemisphere (Jaronson 1998).

In her interview, Bev told me she envisioned her center as “a model for the rest of the world.” Clearly she envisioned her center as different from the other centers in existence. The path to healing as she described it to me was more based on a solidarity activist model than on a clinical model: participants were healed through the creation of safety and trust that was facilitated by the witnessing and accompaniment of caring citizens of the US. Bev explicitly told me that although psychotherapy played a role in healing, treatment really needed to deal with the “the whole person.” And when I asked her about all the daily little things The Solidarity Center tried to do in an attempt to heal people, she clarified:

Oh boy, *none* of it was little. Concentrated therapy of *all* kinds, of all kinds that were needed.... you know, ... this one gal ... was gonna have a baby, and Barb was her counselor. So ... we had a party for her, a baby shower ... psychologists don't [usually] go to baby showers [but Barbara came to the shower]. [Another time] ... we had a mass ... for this one woman who [years before in her home country] had to go out and find the parts of her son's dead body in the fields.... It was the end of her stay and her counselor was sitting next to her, her therapist, handing her [a] hankie. And it was that kind of thing, that, that.... It *worked*. You know, we had a lot to learn, but they understood that. But the fact that we wanted to do this for them is what helped.

Bev clearly states that “the fact that we wanted to do this for them is what helped.” Through her examples, we can see that what *El Centro* staff and volunteers “wanted to do” in order to help survivors of torture was to be there for them in every situation and occasion when it was needed. Healing, in her mind, was not accomplished by brief and infrequent office visits. In her narrative then, a dichotomy is created between the activist stance of the Solidarity Movement and the more clinical approach of the Torture Treatment Movement. This tension is important because although staff members during the first era of the center’s existence were more oriented towards the activist orientation, a spectrum of stances becomes apparent in the second era of the Solidarity Center and contributed to the conflict leading to the demise of the organization.

Karen, Phil, and Barb were each personally recruited by Bev to become involved with the center and remained active long after Bev had a stroke and retired in 1998. All three are European American and part of the same generational cohort that became young adults during the 1960s and 1970s. In the interviews, each person traced a biographical timeline in which travel and activism became intertwined.

Phil, a thin, graying man, was at first hesitant to be interviewed both because of lingering pain over the breakup of the center and out of a desire to avoid telling the stories of staff that he felt should not be told. After some reassurances on my part, he nervously led me into the home office of a residence located only a few blocks from the casa that housed *El Centro de la Solidaridad*. He began his story with his childhood, which involved travel to the Philippines and Mexico as a result of his father’s job. These travel experiences, his knowledge of the Spanish language, and the civil rights movement

in the 1960s led him to become involved with the United Farm Workers (UFW) boycott and the Solidarity Movement. Like Bev, he also traveled to Central America:

I came out of a situation of activism and also support for human rights. My vision is that ... you go with the United Nations Declaration of Human Rights and that's how the world should be run.... and I saw [*El Centro*] as part of that. Also, I mean in an immediate sense, I knew what had happened.... I was an accompanist with the first group of refugees who'd returned to Guatemala from Mexico [after the end of the Guatemalan Civil War], so I know a lot about that history. And I know a lot about what happened in Nicaragua, too, because I was involved with Witness for Peace So I viewed it as I had a responsibility to help ... deal with the aftermath of the US intervention in Central America and all of the ridiculously bad things they'd done there.

There are many parallels between Phil's and Bev's experiences—a concern with human rights, the knowledge of US intervention in Central America that was gained through first hand witnessing and accompaniment, a feeling of responsibility for what the US government did in other places, and an involvement in local activism—so it is no surprise that Bev recruited Phil to be on the board of *El Centro*, a position he retained with only one break from 1993 until 2005 when the organization broke up. Phil's description of the organization and his role as a board member when he first started was that “it was more of an organization really run by Bev, doing pretty much ... what she wanted, which was cool. And the board was more along to get it done, at least that's how I perceived things.”

Barb, a volunteer psychotherapist, was drawn to work at *El Centro* based on her experience as a Peace Corps volunteer in Chile from 1967-1969, which she called “one of the defining experiences” of her life for two reasons. First, Allende's election and overthrow occurred soon after she left and she told me, “I had a lot of feeling about being down there, white-washing America's public face when we subsequently learned that the

CIA had been trying to undermine what was soon to become a popularly elected president.” Second, she said that she has always felt that she

owed a debt to the Spanish-speaking people of ... this world for what I learned in the Spanish speaking culture—much more about how to *be*, not ... just do. Living in community is big. And it’s hard for me to understand that ... there are sections, sectors of this country that work so hard to send illegal immigrants back across the border when they have so much to teach us, which is really ... very, very positive about being, not just doing, and about living in community, and it’s quite a ... beautiful way of being. So ... that’s some of what I learned in the Peace Corps and why I felt I had a debt, I’ve always felt I had a debt.

In this quote, Barbara connects her later experience with *El Centro* to the “debt” she incurred while in Chile, for both “bad” reasons (discovering that her government was manipulating the government of Chile) and “good” reasons (discovering the beauty of a culture that knows how to “be” and is communally oriented).

The “debt” Barbara felt towards Spanish-speaking people led her to graduate school, first in social work where she worked with Latino migrant farm workers living outside Philadelphia. She later moved to the West coast, had a family, and completed a doctoral degree in psychology. In the 1980s, she became active in the Sanctuary Movement as a member of the Quaker religion. Through this involvement, she met Bev McKenzie, who later asked her to become a volunteer psychologist for her new program to assist Latin American torture survivors.

Karen, another volunteer therapist for the *El Centro* program, also traced her involvement to travel. Karen’s father’s job for a movie production company meant that her family relocated to Cuba and Karen lived there from 1950 until 1960, from age five to age fifteen. Significantly, Karen was in Cuba during the Batista dictatorship, when the

Cuban Revolution occurred, and when Fidel Castro came to power on January 1, 1959.

Within minutes of my question about what brought her to activism, she explicitly connected her later work at *El Centro*—a center that treated torture victims—with hearing about torture, tyranny, and murder as a girl in Cuba:

I grew up in Havana, Cuba.... So I, at an age of say ten to ... fourteen, was aware in ... the ether of Havana about torture and about ... murder and about tyranny. And after Castro came in, it all came out, about the torture [that had occurred under Batista]. And ... "*La Bohemia*" was a ... very famous magazine at the time and we would look at these pictures of torture—weapons and instruments, I guess you'd call them. And ... then this litany that we would hear on television of what ... Batista's government had done.... And then you know, we would actually see the pictures of people being executed.

Karen felt a huge allegiance and passion for the Cuban revolution, both of which were betrayed when her family was forced by the Castro administration to leave the country. This betrayal affected Karen's politics back in the States, and shaped her experience with the revolutionary 1960s in a much different way than was discussed by Phil and Barbara:

And the funny thing is ... I had been all for the Revolution when I was fourteen, and singing Revolutionary songs and all for it. And just totally naïve: I thought, "Oh, you know, my father worked for Twentieth Century Fox, it's like, we're okay. This is all about the United Fruit Company and the sugar plantations and all the other big companies. They're not going to do anything to movies, they love movies (laughs)." And, of course, everything was confiscated and we had to leave. And ... that year [that they were forced to return to the US], 1960, I think, was the election between Kennedy and Nixon and I was a *rabid* supporter of Nixon because, (laughs) because communism ... was going to ... spread like a terrible disease in the United States. And I knew what it was like for *my* life ... my life was ruined by communism. I lost my friends and I had to come to this country, which I didn't like. I wanted to be in Cuba....

Karen's experiences with betrayal on the part of a communist government that she passionately believed in resulted in the complete switch to an extreme anti-communist

stance in the US, followed by a disillusionment and disenchantment with politics altogether: “I also saw ... American revolutionaries doing stupid things like calling skinny-dipping in the reservoir a political act. And, you know, [chanting] ‘Mao, Mao, Mao Tse-Tung’ as they went to the reservoir to go skinny-dipping and I went, “You know, I lived somewhere where people died for speaking that. And this is bullshit.” So, politics was just, ‘I can’t deal with this.’”

Like Barbara, Karen became a social worker and because of her bilingual skills, she worked in Latino neighborhoods in Boston and in San Francisco, “right in the trenches of poverty. And clearly my politics changed *radically*.” Karen’s intense exposure to inequality in the US led her to involve herself again with social and political issues and when she was later recruited by Bev to become a volunteer therapist for *El Centro*, she agreed.

As the center moved into the second era of its existence, two psychiatrists—both white, middle-class men—who worked for the science university that was now collaborating with *El Centro* began offering their services to the center’s new outreach clients. As with the other white staff, their experiences crossing borders led them to question dominant US political narratives. Both of these men served in the Vietnam War. Dr. Kline, in his seventies at the time of this interview, was already a physician at the time of his military service, and after the war, he devoted his entire career—some forty years—to providing psychiatric services to refugee populations from all over the world. When I asked him why, he replied, “Guilt! About what America did ... I was a good guy too, I was a civilian. But what we did [in Vietnam] and how we did it. I saw so many

dead people that you just feel like you got to do something. [It's] like a moral responsibility and it never went away.”

Dr. Redmann was just beginning what he thought would become a lifetime career in the military when he served in Vietnam. However, his experiences there changed all that:

being in intelligence, I got actually a pretty good look at the inside of things there and ... it *mainly* had to do with feeling like ... I had been lied to and that not only I had been lied to, but the American public had been lied to, ... And I really felt that I had kind of somewhat naively and in an idealistic part of my life taken on this notion of, “okay, I’m going to do what’s good for the country and ‘be the best officer I can be.’” And then it just didn’t seem like it was all that relevant anymore when it was kind of in the midst of lies and duplicity.... So I was trying to figure out what I wanted to do when I got out of the military and it was pretty clear [that] ... this exposure [changed] my life direction it was enough for me to decide to... look at ... my life and just see if there was a different direction for me to go....

After his discharge, the “different direction” Dr. Redmann chose was psychiatry, and he studied at the same science university where Dr. Kline worked. While Dr. Kline focused on refugees, Dr. Redmann used his training to work with war veterans and the poor until he also, at the request of Dr. Kline, began seeing torture survivors at *El Centro* in 2003.

The common thread of these narratives is that travel was critical to the ability of white middle class US citizens to construct their own version of truth based on their firsthand knowledge of war, torture, and the effects of US foreign policy in other countries. As Tsing makes clear, her idea of “friction” does not refer only to a lack of motion, a resistance, but it can also set actions—and people—into motion. Here I employ Tsing’s (2005) notion of friction to argue that travel in its various forms produced a dissonance between what US citizens were told by their government and what they

personally witnessed in a way that set these individuals into motion: The alternative version of truth they constructed *morally obligated* these individuals to act—or, more accurately, counteract what they saw as morally reprehensible policies on the part of their own government. This was not a fleeting or superficial commitment on their part: *all* of the European American staff went on to devote their lives to working with different groups of people affected by war and torture. In this way, their identity also became transbordered or, alternatively, what Ruth Behar (1995:21) refers to as “traitorous identities”: as allies, they questioned their own privilege and crossed the lines of race, class, gender, and nationality on a daily basis to collaborate with Latin American survivors of political violence.

I do not, however, intend to portray the meaning of this work for white staff members as completely altruistic or selfless. In return for their efforts at questioning the US government and their own privilege, members of the staff were able to claim for themselves identities that were implicitly constructed as more moral, or at least somewhat cleansed, of the immorality of their government, as well as identities that were constructed as enriched by their knowledge of and experience with people of other cultures. As bell hooks argues in relation to white youth, many people desire to “move beyond whiteness. Critical of white imperialism and ‘into’ difference, they desire cultural spaces where boundaries can be transgressed, where new and alternative relations can be formed” (1992:36).

The first of these alternative constructions—the anti-imperialist US citizen—is obvious at the end of one of Phil’s interview segments when he states that he felt he had a

responsibility to deal with the aftermath of the US intervention in Central America “and all of the ridiculously bad things *they’d* done there.” By using “they” instead of “we,” Phil locates himself outside of the group he views as responsible for what happened in Central America. Similarly, Dr. Kline, clarifies that he was a “good guy” during the war in Vietnam. In regards to the second alternative construction of identity—the culturally appreciative and aware white person—Barb comments that she learned “how to be and not just do” from Spanish speaking people. In another part of our interview, Phil commented on the multicultural appeal of the center for him personally: “[*El Centro*] at its peak ... was ... the most fun organization I’d ever dealt with.... at its peak, it was ... a really broad-based community organization, a very multi-cultural—a legitimately multi-cultural organization.... It became a really ... Latino based, but white-supported community group with all kinds of people working in it.” Another staff member openly acknowledged and questioned her cultural exotification of Tomás, the indigenous Mapuche director of the center during its second era of existence:

He’s not only Latino but indigenous, I mean I think more about his being indigenous than being Latino.... and he *walked* it, you know? He was a weaver, he talked about his grandmother.... I mean, he had magic.... How dazzling Tomás was had to do with my [reaction of], “ooh wow, exotic”.... There’s [his] humility, but there’s also like (pauses), he’s *different*, you know? So I want to know about that ...

There is nothing wrong with the desire to create an alternative identity to the hegemonic construction of whiteness that exists in the US. In fact, the search for alternatives is what leads to the “traitorous” challenges to the status quo that I discuss above. However, as I discuss in the next chapter, the power dynamics of an all-white staff “serving” Latino

survivors of political violence can and did, at times, produce a paternalistic atmosphere that felt more like charity than solidarity, and created situations where the “other” was culturally essentialized in ways that often went unquestioned. As hooks (1992:21) states, “The commodification of Otherness has been so successful because it is offered as a new delight, more intense, more satisfying than normal ways of doing and feeling. Within commodity culture, ethnicity becomes spice, seasoning that can liven up the dull dish that is mainstream white culture.”

Latino Staff, Transborder Identities, and the Lines of Trauma

In addition to the two doctors discussed above, four Latino staff members joined the staff of *El Centro* during the second era of its existence. In contrast to white staff narratives marked by the questioning of dominant US discourses on foreign policy, the narratives of Latino staff members were marked by lines of trauma: political violence, sexual violence, racism, homophobia, and poverty were prevalent biographical themes. As Stephen describes in relation to indigenous Oaxacans, the identities of Latino staff were clearly transborder in that they are marked by the crossing of ethnic, cultural, and gender boundaries in their home countries. All of the staff frame these crossings as traumatic experiences, and establish a connection between their personal traumas and their decisions to come to the US. It is also clear in their narratives that these experiences shape their desires to become involved with *El Centro*, the value that the center had for them as a place to do meaningful work, a place of belonging in a predominantly white community, and a place where their healing happened alongside the clients that they

served. Consequently, when conflict began to occur, it was perceived by Latino staff members as a personal rejection and a betrayal that quickly escalated into injuries that remain unhealed today.

Lara, a fair-skinned, middle upper class Mexican woman now in her thirties and fluent in both English and Spanish, worked at *El Centro* from 2001-2003. Although she left the center before it closed in order to attend graduate school, she was very involved in the drama leading up to the program's demise. Lara, eager to be interviewed, was a quick thinker and speaker. We did three interviews for a total of seven hours—one in her office and two in her kitchen.

In her narrative, Lara describes her childhood and adolescence as mapped out on a terrain of power marked by class, race, and gender. In her family, she told me, “there’s people from all socio-economic levels ... and all colors, too.... There’s very fair and very dark people in my family and there’s probably this tremendous indigenous, maybe even African, mix and so there’s all this weird ... racism and classism that runs through the family itself.” Her narrative was driven by her educational experiences. As a young girl, she was sent to elite Mexican schools where she was the “poor” one and then she went home to spend her vacations on her grandparents’ *rancho* where she was a comparatively wealthy child who played with kids who “had no shoes.” While she moved in both of these worlds, she never felt like she belonged in either one, a feeling that is often expressed by those living with “border identities” (Anzaldúa 1987): “my sister and I had this weird thing of living between the very rich who were not like us and then living in

the countryside [during] our vacations, with people who were a lot poorer than us and feeling like, at least speaking for myself, that I didn't belong anywhere...."

In high school, she was selected to study overseas in England where, as one of the few students of color, she again felt like a member of "the underclass":

I went to Britain for two years on scholarship to an international school that was "supposed to be all about creating world peace," which is bullshit ... the school [was really about] a lot of educationally privileged kids from all over the world, mostly from Europe. There were a lot of Europeans and ... maybe one person from each Latin American country, one person from ... half of the African countries, or something like that. And even though it had these great aspirations, it was a repetition of the hierarchy that rules in the world: everything that was cool was what was European and what was white, and so as a Latin American, you know, I became part of the underclass there as well. And so it was a very unconscious place where nobody ever talked about oppression.... I mean it was ridiculous! (laughs)

During her time there, she was also raped by another student, an experience about which the school administration encouraged her to remain silent:

And what happened there, and I'm going to talk about this just because it's relevant, is that while I was a student there, I was raped by this guy, and ... I couldn't tell my family. And it was just like the whole thing ... [was] horrible in every way. I was profoundly traumatized and still there was all of this academic pressure on me to perform.... and I couldn't tell anyone and the school, again, it was a repetition of these power structures that happen everywhere else.... I was told not to talk about it. I asked to go to a therapist for some help somewhere and they sent me to this male, Freudian psychoanalyst (laughs) ... British, of course, with no fucking clue about class or race or culture, nothing, and he just sat there.... And I was in such a vulnerable place.... So basically it was just like this dirty secret and ... I was kind of devastated inside....

In the next segment of the interview, Lara tied her inability to tell her family about her rape in England to forms of trauma that each of her parents suffered. She told me that her father's mother died when he was five and that her father's father was forced into exile three years later after the democratically-elected Guatemalan President Jacobo

Árbenz was ousted in a coup d'état organized by the CIA. Her father was “shuffled around” to various relatives “who didn’t want him and really couldn’t afford to feed him.... and when my grandfather came back, he remarried and his new wife didn’t like them or want them around either.... [and] my father has never ... overcome that and he is a very, very abusive, very angry man.” Consequently, although she told me her father had many positive qualities (“He’s an intellectual, he’s really smart.... I had this intellectually rich life that I am profoundly grateful for”), she felt her father’s childhood trauma caused him to have “an emotional IQ of zero, to be precise,” which subsequently “set the stage ... for me.... by the time I experienced all this stuff in Britain, it was like, ‘Can I talk to my parents about this? No, of course not.’” Lara told me she also felt she could not tell her mother what had happened because of her mother’s experience growing up with an alcoholic father and as a victim of incest:

I mean I blamed myself for the rape because I was drunk. It was the first time in my life, I was completely passed out drunk.... My maternal grandfather was an alcoholic and ... my parents ... despised drugs and alcohol and cigarettes and so ... I blamed myself on that account. And then, you know, at home we never talked about sex like, *ever*, and of course much, much later I found out that my mother experienced incest her whole childhood ... so no wonder she couldn’t even, you know, address basic things at home with us and no wonder she picked a partner who was an abusive guy ...

It was at this point in the interview—as I listened to how both structural and political violence influenced Lara’s family which then influenced Lara’s experience of trauma—that the idea of “lines of trauma” became to clear me. I began to wonder about the extent to which trauma played a role in the future directions of Lara’s life, including her later

work at *El Centro*, as well as the role trauma played in the lives of other staff members from the center.

After her return from Europe, Lara eventually began attending the Universidad Autónoma de Mexico (UNAM), one of the largest Latin American universities and famous for its activism and class politics. Lara's class identity *again* shifted: instead of being the poor student that she had been in all of her other economic settings, she was now perceived as "the rich one": "what was funny is that all my life I felt like the poor one in school and then I was at the UNAM and I was the rich one, you know, and either way it felt icky (laughs). I didn't want to be different in that way and a lot of people kept their distance from me because of that ... I was [seen as] a *fresa* [snob] at the UNAM ... " In her narrative, this experience immediately precedes what becomes her "escape story" from her country and the ways she felt "trapped" and "stifled" by the class divisions there:

I mean, in Mexico it just felt so *stifling*.... the class divisions are *so* painful for me and always have been and I felt like trapped by them,... I felt like okay if the people at UNAM think I'm a *fresa* then I have no freedom. I have to be that, you know?.... And then I met Scott, my ex-husband, who was American.... he had been traveling [in Mexico] regularly for years and he was friends with one of my friends and she introduced us and I didn't exactly fall in love. It was weird. It was more like "okay, I'm going to jump on this wagon because it's moving and I want to leave"....

As she explained to me, after she arrived in the United States, she began experiencing the trauma symptoms she had repressed while living in Mexico. Once in the US, she felt she had the ability to utilize different techniques, such as psychotherapy, yoga, and a growing

spiritual practice to heal herself. She viewed her recovery as self-directed and empowering.

Sara, an El Salvadoran woman in her forties, began as a volunteer at *El Centro* in 1999 and went on to become a staff member and the initiator of the youth leadership program. Sara has salt and pepper hair, intense eyes, and a no-nonsense manner. I remember seeing her at the casa and feeling simultaneously intrigued and intimidated by her. Another side of Sara becomes apparent in her interactions with children, for whom she is like some kind of magnet; kids love her and she loves kids. Sara was open to being interviewed by me, but she made sure to question me first on what I wanted to know and why; she was not about to blindly agree to being subjected to the anthropological gaze. After two long intensive sessions that lasted for a total of five hours, I could understand why some parts of her story would be hard to discuss. However, Sara shared a great deal with me, more than I expected. Between tapings, she told me that she had never told anyone this much of her story. As she explained to me, once she decided she could trust me, there were no holds barred. In fact, she said she almost seeks out telling her story now, because she finds the process healing if she can tell it to the right person. I certainly arrived at my home inspired but exhausted after each of our interviews, a feeling I commented on in my fieldnotes:

It feels like I viscerally take on the stories people tell me—they soak into my body, at least for the remainder of the day on a fairly intense level and then I feel like there are bits and pieces that stay with me after that. It's that witnessing phenomenon.... When I think about each of the interviews I have done, I am back in that place, feeling the emotions, the ambience that were there in that room with that person. The memories are very visceral and distinct—nothing fuzzy about them.

In the landscape of Sara's narrative, violence is more prevalent than it was in Lara's. Sara lived in El Salvador during the war, and this certainly is part of her story of trauma. But what she emphasized even more, somewhat surprisingly to me, were the events that unfolded in her own personal battleground. Some of what I am calling "personal violence" is structurally related. She grew up in poverty and because of that her family was separated for a period of time in El Salvador, and she lived in poverty after her arrival in the United States and experienced multiple periods of homelessness. She suffered sexual harassment in the United States and homophobia in both countries because she is a lesbian, something Sara says she realized at age nine.

Despite these multiple realms of oppression, or perhaps because of them, Sara stresses agency throughout her narrative in multiple ways: she refers to many of her experiences as her "little adventures," and often casts them as learning experiences: she discusses her resourcefulness in deserting the El Salvadoran military, traveling through Mexico and crossing the US border undocumented and in getting political asylum in the US; she describes how successful she was in her romantic endeavors, and; she managed to cobble together an education by attending community colleges in multiple places and eventually earning a Master's degree in social work. She also stresses her agency through a varied work history that includes working in a donut shop, as a telephone operator, in a Mexican fast food restaurant, as a go-go dancer in a lesbian club, and as a social worker. In fact, her occupational history appears to be the vehicle for carrying her narrative, the line that connects the dots from one experience to the next. In Lara's narrative,

educational experiences serve as that vehicle, a fact that I believe reflects the different class backgrounds of these two women.

Given this tension—between violence that Sara could not control and the places she looks for and exerts agency—it is not surprising that Sara’s life is filled with contradictory experiences. Within minutes of beginning her life history, Sara shared memories of feeling both loved and rejected during her childhood:

My life in El Salvador was really, really wonderful... I come from a very small family. We got separated because of poverty, so I grew up with my grandma. I have an older brother who grew up with my mom. And so even though we ... live a life full of needs, I was filled with love by my grandma, and encouragement... So because of that I can say that it was ... a really good life. My, some of my issues when I was younger was ... this crazy idea that the reason why my brother and I were separated ... was because my mom didn’t love me, or loved him more. So as a teenager I struggled a lot with that, on top of ... discovering my own sexual identity. And as a Catholic, I struggled with that too. So I have a very conflictive teenage [experience] (pauses)... So I become really rebellious, I run away from home a lot of times, and my mom [was] always able to find me and bring me back, with a lot of anger and humiliation towards me, and ... blaming... so it was ... very rough.... my teenage [years were] really conflictive because of all of those personal issues. So ... there’s a lot of trauma, you know, in many, many, many forms.

In regards to her sexual orientation, Sara told me that she became aware she was different at age nine, which caused her to seek out literature in order to learn about “what’s wrong with me—why I like females and not males.” When I asked her how her family found out about her lesbianism, she replied, “Well, actually they caught me with a girl in my room and that’s how they find out. And let me tell you, that’s one of the most horrible days in my life, because my mom was so enraged that she beat me like there was no other day. Yeah, so from that point on, my mom become, you know, more punitive and very mean to me.”

Sara's struggle to understand her identity later led to a desire to become a psychologist, a decision that conflicted with her mother's more pragmatic career path: "She wanted me to become a secretary and that was it." The family strife Sara experienced caused her to run away from home multiple times until her mom finally gave up and let her leave at the age of sixteen. Sara marks this point in time as when "I start living my life. I stay in different friends' houses, or different girlfriends.... And I continue to go to school and graduate" with training in accounting, math, and physics.

She then began her studies in psychology at a major national university. Here, her narrative takes another turn, moving from finally beginning to live her life to "one period in my life that ... I can't remember now how I did get there. But I just was done with life, I wanted to die. And so I attempted a couple of times and did not succeed ... my ways were not working out, right? And so I decided, 'Oh, I know what I need to do. I will enroll in the army and I will get killed.'" Sara enrolled in the police academy which she told me was militarized as a result of the war and became almost synonymous with the army.

Sara described her initial experiences at the military academy as "not altogether bad or good, because I discovered certain things that made me feel different." One of these things was a literal discovery of her voice. Sara told me that her confidence "was on the floor" when she arrived at the academy and because of this, she always spoke so quietly that no one could even understand her. She was punished daily for this by an officer "who send me to a dirt floor building and make me scream my name ... for like an hour or something, just so my voice will become louder. And doing a lot of physical

punishment, you know, squats and pushups because of the same thing.” At the end of her training, she was surprised to discover that she didn’t die, and she graduated. Her death wish ended when one of her pregnant *compañeras* did succeed in killing herself:

So, that—when I saw that ... I decided, “crap, I didn’t die. I don’t wanna be here. If I’m not gonna die I want out of here.” And so after I finished the academy ... my choice was to [work in one of] two different groups ... [either] ... a squad that goes in the field to look for mines ... [or] ... an intelligence group, which means torture people. So I didn’t want to do any of those. And I thought to myself, “screw this, I need to get outta here.”

Sara did not want to participate in torturing people, so she chose mine duty and has pieces of metal in her body to show for it. One day, as she and another person were eating lunch, her *compañera* got up to get another tortilla and stepped on a mine: “and you can imagine, seeing that, I totally freaked out, so I was taken to the hospital having a breakdown ... and that was my excuse to get out.” Sara requested a leave of absence which was granted. During that time, she fled to Guatemala because she “did not want to be part of anything that had to do with the military.” She worked “here and there” in Guatemala, saving up money for a month so she could make the trip north. When I asked her about her journey to the US, she replied:

When I enter México, you know, the *federales* wanted to take everything out of me and so I, but see I’m very resourceful, Tami, so ... after I enter México [somebody asked] ... me “where you from?” When I told him that I was from El Salvador, this person told me, “you speak like someone from Veracruz.” And from that point on, I was from Veracruz. And you know, I learn everything I could about Veracruz [so I could] convince the *federales* that I was a *Mexicana* from Veracruz. So I didn’t have too much trouble taking the buses ... and sometimes rides in trucks.... And I stay in el DF [*Distrito Federal*, Mexico City] for awhile, and ... I contacted a North American woman ... that I ... met a few years before when she was in El Salvador ... and we had correspond for all this time. She was an anthropology student.... [who had] gone to El Salvador ... and we become friends.... And ... so I told her, “hey, guess what I’m in México and

I'm heading your way, but I need help." So she was very kind and she send me money to take a plane to Tijuana.... she helped me, she paid the *coyote* for my ... *para pasar la frontera* [for the border crossing].

Sara went to Pasadena because her friend lived there. She was employed within two days of her arrival doing domestic work in exchange for room and board, "that's how I started my time here [in the US]: totally shocked about my recent experience in El Salvador and feeling terrible about leaving my family and my friends and my *girlfriends*, and all that stuff." She stayed with this family for six months, obtaining her driver's license in the process and learning some English. When the son of the family married, the parents needed the room for him and his new spouse, so Sara was let go. In the next family she worked for, Sara mentions the first incident of sexual harassment she experienced:

And with that family, something happened: the husband in the family start making passes at me and one time he was drunk and tried to seduce me, and I kick his ass instead. So they end up calling the police on me and the wife was all hurt because she thought that I was a bitch, you know, trying to steal her husband and in my head, I was like "lady, if you only *know*." And so, I got out of that situation abruptly.... and technically I become homeless at that time.

During this time period, Sara had three jobs and was "dating women that were not out, so I have brothers and fathers after me, wanting to beat me up because I was with their sister or daughter." In addition to homophobic violence and sexual harassment, Sara was also became the victim of random street violence as she tried to make her way from one of her jobs to the other:

So one time I had three jobs, you know? I used to get up really early and work at a donut place. I can tell you all the names of donuts, [but] I cannot eat one anymore.... I had that job from ... 5:30 in the morning until eleven.... and then after that I would go to this factory and sew pieces of clothing. And that woman

also give me a chance to stay in the factory after it was closed, so I ... had like a cardboard bed to sleep in and she will let me into the house to take showers and to use the bathroom. And then at evening I used to work for the *Pollo Loco*, roasting chickens. I remember I used to get all burned ... so that was ... rough, too. I didn't have a car so my form of transportation was a bicycle and this factory that I mentioned was ... near Pasadena and ... there was a lot of drugs and prostitution.... So on my way back from work, a couple times, I was jumped. The first time I got hurt big time. The second time, I was able to defend myself a little bit more. By the third time, I became more familiar with how to work a chain and beat the shit out of them. And, you know, and I'm not saying this with pride. It was actually very scary and it was ... not good, not good at all. So those are sort of my adventures.

Although the daily struggle for survival is evident in the poverty, multiple jobs, and various forms of survival that Sara suffers, so is her agency and the kind of resourcefulness that new immigrants employ every day to make it in this country. Sara told me this and many other stories with a kind of glimmer in her eye as she converted the adversities she faced into her “adventures.”

Eventually, Sara decided to leave the Los Angeles area and move to San Francisco, a decision that was motivated by another act of violence:

I have to leave Los Angeles area because ... the brother of the girlfriend at that time wanted to kill me. He chase me in a car one day and I was able to escape that. Another time he find out where I live in a garage and break the door and ... I was in bed and wake up to being beat up by this guy.... So I, the *same* day, I put all the things that I can fit in a car. By then I used to have my first car ... and I pulled out the map and I decided, without knowing anything, I decided “I'll go to San Francisco.” Actually the only reason why I decide San Francisco is because I wanted to see the Golden Gate (laughs). That was *it*, you know. And so I started driving.... So that was *another* adventure.

She found a place on Mission Street with a friend from El Salvador she reconnected with in Los Angeles, and immediately began looking for places that could help them and

found CRECE, the Central American Refugee Committee.³ She received food boxes and was referred to a job working with the San Francisco Youth Conservation Corps. During this time, Sara earned her GED and CRECE helped her process her political asylum case. However, in another shift from stability to instability, Sara's "luck ran off for a while" when she and her friend got into a fight over a woman, hurt each other, and her friend ended up in jail while Sara ended up on the streets. She also lost her job during this time. As a result, Sara became part of the homeless community living in Golden Gate Park:

So I was in the Golden Gate Park, living with that community for a little bit more than two months.... And that was a really neat experience. I met the most incredible people in my life.... I met this black male who was a doctor and drugs, you know, ruin his career.... I met another guy ... his wife ruin him during the divorce, and he end up on the streets. Yeah, so very compelling stories, you know? And they were really protective of me... people always thought that I was younger because of my size. So that was really cool, finding all of these people that protected me throughout my adventures in life. And so ... at night ... everybody will tell stories about what happen to them.... And we run away from the police every time they coming to chase us out of there, and just to try to protect each other. There were like different groups [of homeless people] and some groups will come and steal the food or the socks [from other groups]. It was terrible, they were stealing all the socks! And, you know, I used to go to the laundromat and pick up socks because it was cold at night, it was really cold, and so ... I fight over socks a lot! (laughs)

When I asked Sara if she felt safer in San Francisco than she had in Los Angeles, she responded affirmatively because even though there was still drama and poverty and homelessness in her life, she no longer felt that she had to hide her sexuality: "Yeah, it actually did [feel safer] ... because there was one less thing that I needed to hide about

³ "CRECE is a grassroots self-help organization which empowers and assists the Latino immigrant community. CRECE provides constructive activities for youth, emergency food for families at risk of hunger, ESL classes, employment assistance, and health programs" (Central American Refugee Committee 2008).

myself.... in San Francisco ... I start just being out with my sexuality and walk around holding hands and, you know, just be affectionate.” Then she added—with that glimmer in her eye—“And my next job was really cool, you ready for this?” The next job was as a go-go dancer for a lesbian club in the Castro district:

I [made] so much money, Tami.... I used to go home with over a hundred dollars in my pocket.... it was really easy to make that decision because of the setting and the culture. I was elevated, so people couldn't touch me, and the block of hours was pretty short, nothing pretty intense. There were no commitments, there were no force to buy alcohol or to engage clients in that and there was no prostitution involved either. So, you know, it was really easy. And what motivated me to keep doing that was the first night that I walk out with 187 bucks in my pocket—for *two* hours.

While working as a dancer, Sara also became employed as a telephone operator. She enjoyed this job as well because it allowed her to meet women from all over the world and “start flirting with them on the phone.” This was another period of stability in her life that allowed her to “get back financially.” Sara also remembers this time period as one where she returned to activism and became a volunteer with an HIV project and a volunteer translator for a mental health department:

Sara: So, I start doing that again, and finding that more than being helpful to the other, this whole thing was helping me.

Tami: How did it help you too?

Sara: (pauses, sighs) I think that ... it's very powerful when you feel despair, hopeless, depression, all those things, when you turn it around and help people, it teach you about your own humanity and ... ways that you are able to touch other people's life and how others respond to you. And that helped me, you know, that have pulled me out of depression several times, and from hopelessness and ... despair and just pure cynicism, you know? And so that's how I see my work now.... It's not that I'm helping people, it's that people are helping me and maybe in the process I help a little, I don't know. But yeah, so I get in touch with that world again...

She also met her current long-term partner during this time and when Sara lost her job at AT&T because the company closed down, she and her partner decided to move again. They arrived in the city where the center was located in 1997 and Sara told me that “the moment that I walk in this town, I start looking around for what ... the community need.” In the following segment, Sara explicitly connects her own experiences as a misunderstood young person with her desire to work with other young people:

I did some work as a case manager for Latino homeless youth.... Then, my life, it started to make *sense*, you know? It started to make sense, because all those experience that I had in the past, I was able to connect to these young people and to tell them a little bit, pieces of my story, and to show them that if you want to do something for your life, really there's nothing to stop you.... So you have the power to make a good decision or a bad decision.... it was pretty amazing. It was like this revelation and I decided then that my purpose in life was to work with young people. And I've been doing that ever since...

Graciela, a soft-spoken, gentle, Chilean middle-class woman in her forties, began working at the Solidarity Center as a volunteer in 1998, became a paid staff member there, and currently continues to work as a Qualified Mental Health Practitioner (QMHP) for *Siempre en la Solidaridad*, one of the organizations born out of the breakup of the center. Unlike the other staff members, our four interviews were conducted almost entirely in Spanish. Graciela grew up during the Pinochet dictatorship in her country. Similar to the other Latina staff members that I interviewed, Graciela's life history was marked by trauma and borders. However, unlike the other two women who discuss multiple sources of trauma and identity boundaries, Graciela exclusively focuses her trauma memories on the repression, as well as explicitly stating several times that growing up during the dictatorship meant she felt she was always living a life “*en un*

límite,” a life circumscribed by the boundaries of what one could and could not do during the dictatorship:

And there were so many restrictions ... I was not allowed to leave my house after five in the afternoon because there was a curfew. And I remember that one time I left my house, and I was only five years old, because I wanted to play with my friend who lived across the street. And I have this image of this soldier with a gun pointing at me, aiming at me, and screaming and shouting that I needed to get inside my house. I think is the first and one of the most intense memories of my life (laughing). And then I remember my mom as well, coming out of the house with a face of fear, and grabbing me and carrying me back inside the house. And I was left feeling so affected, because of my innocent desire of wanting to play when in that moment, one did not play.... And I was five years old, and everything was so intense, no? But these are the earliest memories of my life. And I did not really have the capacity to process them, but I understood that we were living like a family on the edge [*en un límite*].

For Graciela then, boundaries and borders also enter into her story of trauma, but not in terms of the identity politics experienced by the other Latina staff members. Rather, Graciela uses “*el límite*” as a geographic metaphor that represents a fencing in of her young existence, something she underscores several times as incomprehensible and surreal with her constant refrain of being young, of being “only five years old,” and of being innocent, or naive. Indirectly, then, it seems that Graciela feels that her experience of growing up “*en un límite*” caused a loss of innocence that no child should experience at so young of an age.

Graciela remembers her young life primarily in terms of everyday stresses and awful choices that had to be made—not being allowed to go outside to play, her parents worrying about whether to leave the country, and the disappearance and exile of people close to her—and explicitly connects these experiences with her later work: “That was kind of a constant thing in my life, and I ended being a psychologist and working with

survivors of political violence, and I think that is connected to that.” She also relates what she told me was her strongest memory of political violence with a later desire to work for human rights:

I remember that my best friend’s father was detained [in prison].... And during recess, she refused to play anymore because she was so sad.... So I remember then that I also did not want to play anymore during recess because I felt that I needed to be with her, no? Like I needed to support her. And so there we were, both of us sitting all of the time watching the other kids playing. And it was crazy, because we were just kids (crying). And I think since that time, I knew I wanted to work in human rights.

The notion of limits, or boundaries, also indirectly relates to the line between life and death; if one does not want to risk death, one must operate within the limits designated by the dictatorship. Graciela makes this meaning of “the borderline” more explicit when she discusses being a college student during a time when the universities in Chile were completely militarized:

This was in 1985.... And the repression was so intense.... The director of the university, was a military officer who had never even graduated from any university ... they were putting the military in all of the head positions of universities in Chile. And so they controlled the professors and they controlled the students, no? Soldiers would enter the university, and they would enter with dogs. They treated the university as if they were in a combat zone, but their “enemies” were students and civilians. And this period was hard, very hard, like being on the border between life and death, interesting because you are young and on the edge [*como en el límite de la vida o de la muerte, interesante, porque eras joven y estas en el límite*]. There is a lot of social violence, a lot of intense violence. During this time, various relatives of my friends were assassinated because they belonged to the Communist Party. And so, death was always very close....

A final memory that Graciela shared with me about her childhood was one of hope: she found out about the pressure the international human rights movement was exerting to stop the violence in Chile:

And I think that the first time I heard the word ‘solidarity,’ I was about ten years old, and I thought, ‘ah, I love this word! ... And I felt like, this word, it makes so much sense, no?’ And we were also already hearing about “human rights” and the Declaration of Human Rights, and I heard of Amnesty International ... this was in 1978, I think. And so at this age, I realized that there was an international movement and I felt that when I grew up, I wanted to work in human rights.

Graciela went on to study psychology and counsel people who were affected by the violence in Chile. Eventually, she met her future husband, a US citizen who was traveling in her country and moved to the US to be with him.

In every case, the life histories of Latina workers are marked by traumatic border crossings. These experiences, in turn, shape the desire to become involved with *El Centro*, the meaning it has, and the beliefs about the goals of the center and the means to achieve them. For each of these women, their description of the discovery of *El Centro de la Solidaridad* is about finding a place of belonging in their new country and in a community where Latinos are only a very small percentage of the population. Graciela told me about calling the center for the first time and the impact of hearing Spanish spoken by the person who answered the phone. Lara also told me about her initial contact with *El Centro* and how it reminded her of home and offered a place where she could fully express who she was:

[A friend of mine told me], “Hey, [*El Centro*] is hiring,” and I was like “what’s [*El Centro*]?” and she ... invited me to their yearly fundraiser ... and so I went ... and it was cool.... they would always do a big dinner ... and there was music and folk dance and all that stuff. And I went there and ... the dancing and the music made me cry and I was like so nostalgic for home and everything and I was like “this is really cool.”.... also ... the house was beautiful, we had made it beautiful.... I mean, we had all this, like, ethnic stuff hanging around and you could wear any clothes you wanted. I could be a hippie and a Latina at the same time. That was totally okay. I, it was the first time I was not just like the token

Latina working for a bigger agency, you know, there were more Latinos there. We spoke in Spanish all the time.

In their narratives, it also becomes very clear that this sense of belonging contributed to the healing of the trauma experienced by these three women. As Sara explained to me:

Well, what brought me to [*El Centro*] was, you know, this town is too white for me, girl.... So I immediately start looking for where my people is! I can't believe ... it's been nine days and I haven't seen anybody [Latino]—what the heck? And then I find out about [*El Centro*] And you know what was healing for me, was that I truly became ... integrated into [*El Centro*], you know? ... And just, (long pause) I don't have ... my family here, so for me, [*El Centro*], I saw my aunts and my grandmas and my mom and my brother and my nephews in those kids and those people.... it was something that helped carry me on and through all these years and it was a big deal (crying).

Sara went on to explicitly connect her childhood trauma with her desire to work with youth:

Seeing people that, you know, how they let me inside their life, it's *amazing* to me.... Hearing their stories ... Definitely, those are the reason why I do this job, and then, my commitment to young people because of my own experience, because I felt misunderstood, I felt judged. Not having [support] is what make me do the work that I do with young people, because I know how amazing they are and ... that really what I needed is somebody to remind me, "you have the power to do things differently if you want to" or "you have the power to turn a very negative experience in something good," And so, here comes my, you know, getting to [*El Centro*] and say, "hey, I wanna volunteer with you." You know, it was *perfect*. It was perfect there because they were helping people from Central America, just like me, and they were needing some tasks that they were familiar to me, such as being a tutor or ... or going to places with people and translate for them. So it was really easy for me and once *again*, I needed that in order to feel good ... [knowing that] I was being part of the solution, not the problem.

The center served as a source for healing Lara, Sara, and Graciela in other ways as well, which they described to me both explicitly and implicitly. As Lara began working with trauma survivors at the center and in another job at an organization serving sexual assault survivors, she became more aware of the role of systems of oppression in

her life—the racism and classism she witnessed in Mexico, the sexism she connected to her rape, and the political violence that affected her father:

So when I started learning about oppression ... I finally had this “ah-hah” moment of “That is what’s wrong in Mexico and that’s why I grew up being so confused my whole life because there’s this class shit, and there’s this race and gender stuff that happens.” ... and then I was working in a ... position of leadership with a lot of people who were also survivors and ... all of these jobs have felt like I had to complete my own healing by going back and helping other people. And I knew, I mean I just knew that no school had given me the license to do this except just my own life experience and that’s always been really clear.... So that kind of all you know clicked a lot when I was working there.... I got a lot out of feeling like I was contributing to some kind of solution.... this population [at *El Centro*] ... they were like the example of all the oppressions and all the things that are wrong with the world come together ... so it felt like I was doing something really good...

As the above quote makes clear, Lara felt that as she worked to heal the trauma caused by systemic oppression, she simultaneously worked to heal herself because she saw her life as impacted by these same oppressive forces. Lara’s growing awareness of structural inequality is the key to her own healing, and thus central to her beliefs about how others should be healed. Like all people who work with trauma survivors, she understands that the purpose of torture and the effect of trauma are to break down every aspect of the victim’s world, including their concept of self, their ability to trust and care for others, and their vision of the world as basically a safe place:

The methods of torture are designed to break the person’s will and to cause the individual to ‘lose’ or ‘betray’ him or herself. These methods are manipulated and combined in an effort to crush people physically and psychologically, to force them into dependency (helplessness), and to instill fear. The intended result is to destroy people’s capacity for self-defense, identity, and control over their own lives, so that they are released, broken, into the community as a warning to others.... The purpose of torture is thus to control the population and to eliminate all actual, potential or perceived dissent. It accomplishes its purpose by exploiting and perverting all aspects of human life. Torture is therefore the strategic destruction of the human being: the

physical, emotional, social and spiritual self. The torturer, as agent of the state, uses every aspect, every value, and every relationship as a weapon. [Chester 1992:213]

Because trust and personal connections are destroyed by trauma, recreating human relationships is one of the first and most important steps taken in the healing process (Bloom 1997; Brave Heart 2001; Duran 2006; Herman 1997): “One of the major consequences of interpersonal trauma is a sense of disconnection; for this reason, the repair of trust and connection is critical to recovery” (Bryant-Davis 2005:45). However, treatment providers emphasize different avenues to achieving “the repair of trust and connection.” In Lara’s opinion, people cannot feel safe if the structures of power that operate in every arena, including the center, are not being surfaced and confronted. This belief became apparent in her critique of staff members at *El Centro* who she felt were either unaware or unwilling to confront the power differences among participants that led to “micro-aggressions”:

The oppressions have not been addressed [at the center]. I mean, in order for, say, an indigenous woman, survivor of multiple forms of violence to feel safe, she needs to know she’s not going to be attacked ... for *all* of her conditions, right? And that’s ... never been the case in group situations [at the center].... we see all these micro-aggressions, you know, from the whiter people implying they’re smarter, they know better than the more brown people, or ... the people with more education ... kind of lording it over the people who have less education.

The importance of agency in Sara’s biography was also reflected in her approach to working with young people: Sara implemented more of a popular education model in her youth group, stressing the empowerment of the young adults with whom she worked, and facilitating the development of their decision-making and leadership skills. Although many staff discussed the importance of safety for healing, Sara goes a bit further in discussing the importance of power:

I knew that... the terror stripped the person from their own bodies, from their family, from their community ... when you're in terror, you lose your perspective, you can't concentrate, you cannot make decisions, you doubt yourself So your power goes somewhere outside your body and your mind. And so a way to support the healing process is to shift that ... dynamic of power—from feeling powerless to feeling empowered, or powerful.... So that's the idea I used for [the youth leadership group].... And the contribution was that they were gonna take an active part in [*El Centro*]. So this will be a group that, instead of receiving services, which is, you know, "ok, I'm in power 'cause I'm treating you," instead of that, they come with the power to help [the organization] accomplish things. And in my head that was the shift of power that ... will facilitate them to recognize this community as theirs.... Because that's the way it should be.... If there's an issue affecting a group of people, it's the group of people who *best* know how to deal with that situation, how to change it, or how to avoid it, or how to—*whatever* it is that they want to be accomplished. And ... I like it because it take us away from this paternalistic bullshit that I'm so tired of, you know?

One concrete example of the youth group's work to "shift the power" was their involvement in organizing, planning, and carrying out some of the community social events for the center; previously, the staff was almost exclusively responsible for these. A second example was the production of an *El Centro* newsletter written in Spanish. Although the organization had consistently put out a newsletter throughout its history, these were in English and it is obvious through the content and language that their intended audience was the local community of supporters or potential supporters of the program. These continued to be produced during Sara's employment, but she created a second newsletter with articles written by the youth group members in Spanish. The language and content of the stories were obviously more oriented towards the program's participants. In these ways, Sara's message about the meaning of *El Centro* was that yes, it was a program for Latin American survivors, but it was also being run—at least in part—*by* the participants.

Graciela described the initial meaning of *El Centro* for her in terms of a place of belonging, somewhere she could speak Spanish and reconnect with the Latino community. However, the program also later provided the means for her to regain her professional identity as a counselor to survivors of violence, something that was initially lost when she moved to the US. In her biography, becoming a therapist working in the arena of human rights is her way of acting to heal trauma—both hers and that of other people. Another important component of her life narrative is her emphasis on solidarity, told both in the stories about her friend and the international human rights movement. Consequently, it is no surprise then that solidarity and unity are the paths to healing that Graciela prioritizes; for her the center frequently acts as

the first place where [participants] have a relationship of solidarity: where someone is really saying to them, “I’m sorry that you were forced to leave your home, that you lost your family, that you feel so much pain inside,” as if the person [the listener] was taking hold of their pain and listening without fear. It’s as if they feel that you are willing to listen to whatever they need to say, and it doesn’t matter if they are talking about horrific things that seem so intense and so incredible. You are just calmly saying, “You’re fine, you’re fine, with me you can continue. Tell me.”

And also, in the [therapy group with other participants] and the social activities, they can come and meet other people and feel that there is a universal discourse of this pain that they share with the others, that it does not affect only one person, but also that what happened to them happened in Argentina, in Perú, in Guatemala, in El Salvador, in Chile, that there is a common history.

In her narrative, it becomes clear that Graciela—in almost direct opposition to Lara—emphasizes harmony and sees the surfacing of difference and conflict as disruptive to the healing process and a threat to the creation of community at *El Centro*.

Through the discussion of what the center represented to these three women, we can see how the paths to their transformation become intertwined with that of the participants. As Stephen (2007) describes in relation to indigenous Oaxacans, the identity of each woman is transborder in that it is marked by the crossing of various boundaries of identity, including ethnic, gender, class, sexual orientation, and national boundaries. Because these women came from different experiences and identities, their lives were marked by trauma and borders in different ways, meaning that they each emphasized a different path towards healing: Lara emphasized awareness and the surfacing of conflict and oppression, Sara prioritized agency and participation, and Graciela felt that unity, solidarity, and harmony were most important. As trauma survivors themselves, each woman had personal and deeply held convictions about how healing should occur.

The differences among staff in the second era contrast with the seeming unity of the all-white staff of the first era who shared common political experiences and a history that included the privilege and choice to travel. In the next chapter, I explore how staff experiences and subjectivities shape the promise and predicaments of trauma work during each era of *El Centro de la Solidaridad*.

CHAPTER IV

“UNQUIET LIAISONS”: THE PROMISE AND PREDICAMENT OF WORK FOR SOCIAL CHANGE AT *EL CENTRO DE LA SOLIDARIDAD*

The promise and predicaments of torture treatment work at *El Centro* are shaped by the biographies of the people who worked there. The literature on torture treatment work presents some discussion of the challenges faced and mistakes made by those working in this field (Bloom 1997) and the debate among service providers about the most effective healing approaches (Jaronson 1998). However, unlike my research, these scholars rarely connect the role of biography with the challenges involved in the work. *El Centro* is also a localized example of the larger Solidarity and Torture Treatment social movements. Consequently, examining its successes and failures can teach us something about the promise and predicaments of torture treatment work in particular and of social movements in general. *El Centro* also provides an important example that political activism, although always imperfect, still makes a difference.

The Shifting Narratives of Healing at *El Centro de la Solidaridad*

During the first era of *El Centro de la Solidaridad*, the staff and volunteers were almost exclusively white and middle class. One result of these similar backgrounds and motivations is that *El Centro* had only one strong narrative about the identity of the organization, and very little conflict about how its goals should be achieved. Based on the impact of what Bev had learned about torture and on a philosophy clearly connected to

the Sanctuary Movement, Bev's dream was to provide "an island of safety" for its participants. Perhaps the most important accomplishment of the center is that it undeniably did save lives by removing people from situations where they were in immediate danger. This island of safety was built, according to Bev's model, upon personal connections with staff and volunteers and on a willingness of the organization to provide whatever services a person needed—from the most daily level of accompaniment whenever and wherever, to the more infrequent and sensational donation of expensive surgeries. Phil called the *El Centro* approach to providing services during this era "holistic." Barbara demonstrates she shared and understood the *El Centro* approach at this time: "whatever [services] they needed, we got. It was all important.... physical therapists gave their time, physicians gave their time, social workers gave their time, ... psychologists gave their time, volunteers *galore* drove them all over the place, and also loved them. Just, you know, made community for them." The range of services provided by the center—and especially the inclusion of alternative therapy and everyday accompaniment—is something all staff from this era discussed with pride. Staff members also felt they were able to see the positive effects of their methods. As Barbara explained, *El Centro* provided the space for people whose selves and communities had been damaged to "learn they could love and be loved again," which, in essence, returned some component of their lives and identity to them:

there may be permanent physical ... or psychological damage, but the spirit is indomitable. And they did ... get better.... no one's ever going to take this [traumatic] experience away from them, but they wanted to be able to live, to be happy sometimes, to be in community, to love, to be loved, to be loveable. You know? And they could achieve that. It [*El Centro*] doesn't take away that awful experience (pauses), but it gave them back their lives, some component of it.

In addition, the construction of the agency's identity as an activist, rather than a clinical one, was viewed as advantageous in many ways. Furthermore, Bev's notion that the organization should involve the local community and draw upon volunteers was also seen as a unique strength. As Lara explained,

Now ... [*El Centro*] was like *trying* to work outside the system to a certain extent, and we did not abide by boundaries the way other agencies did, so we burned out more often but we also broke through some barriers. We had more authentic relationships with the clients, you could say.... in these other agencies, I mean, when they shut down at five, it was closed at five.... we tried to do too much for people, but no other agency tried to do that much and in a way it was *justified* to do that much for these folks. The thing is, nobody else wanted to do it because they were operating on money and they couldn't afford it and they thought it was financial suicide to try to do some of these things. But we did it with volunteers.

There is also little doubt that for many of the staff and volunteers, working with survivors at *El Centro* was one of the most meaningful experiences of their lives. What these experiences meant to the people I interviewed always related back to their life histories and motivations for doing the work. For Barbara and Karen, both of whom shared Bev's sense of a moral, ethical, and at times, spiritual commitment to this work, the rewards of doing it were phrased accordingly as a "blessing," an "honor," a "privilege" and a witnessing of "redemption." Karen described her therapeutic work with survivors to me: "And I, I met some amazing [people]!.... you see that there is redemption, that people are so brave and that's how I felt ... where you get, as a therapist, to be deeply humbled by the courage.... So that's a blessing ... being in the presence of [that]." Or as another staff member, Jaime, described to me, she felt she also received benefits from living in the community atmosphere produced by the center: "really the greatest satisfaction was working with the participants. It was the personal contact, it was

... the children. It was feeling familial. It was learning their recipes and just spending time together and cooking for them and ... my family and their family and how we all kind of lived and worked together. And feeling like I was helping these women. That felt really good.”

Not surprisingly, the very same elements that produced the positive aspects of *El Centro* during the first era also produced some of the negative aspects. Trying to meet all of the needs of clients with the coordination of volunteer providers was often exhausting for the small staff that existed at the time. The lack of boundaries, while providing flexibility and creativity in the treatment of survivors, also produced a lack of structure and rules that was often confusing for both staff and participants. The activist orientation of the center and the moral obligation to say no to torture meant that people were accepted at the center almost unconditionally, including those who were a danger to themselves and others. The low pay and long hours mandated by trying to be everything to everyone meant that staff often suffered from burnout. As Jaime, a former director of *El Centro*, explained:

I was always available, you know? It was sort of like, twenty-four hours on call, twenty-four hours a day.... I always felt the responsibility. I always felt that ... there was something weighing on me, or something was waiting for me, or that I ... had to check in. It was like being a parent.... I was the one who spoke English here and I was the one who knew how things work here, and so they had to come to me whenever they needed anything.

But perhaps the greatest problem that I want to focus on here is the inequality that was produced at times by an all-white staff serving Latino survivors of violence. The bottom line here is that Bev’s dream of creating a refuge and “an island of security,” while successful and inspirational in many ways, also created power differences inherent

to some extent in a situation where white middle-class staff and volunteers “helped” Latin Americans in a land far from their homes, in a society often very different from theirs, in a language that they did not speak. The fact that participants operated within the parameters of a situation that they had little power to define could, at times, lead to feelings of dependency, insecurity, and frustration. Jamie stated:

I think they must have felt very ... in limbo. They were living in a home that was not their home. They were being offered things ... I mean just nothing was theirs.... and how could you possibly say no, you know? How could you possibly say, “I don’t like this” when ... people are giving it to you for free and out of the goodness of their hearts? And so that must have been difficult for them ... to deal with ... what everybody else’s idea [was about] what they needed, when maybe they needed something really different.

The Sanctuary Movement, upon which Bev based her model, was also composed of primarily white middle-class members and had strikingly similar problems:

For instance, refugees were not able to articulate to a host community their feeling that the congregation was unwittingly over-responding to refugee needs, thus depriving them of a vital sense of independence and initiative. Without refugee feedback, rendered even more difficult by a lack of parishioners fluent in Spanish, what might have been loving community concern, if tempered, became unintentional paternalism. [Golden and McConnell 1986:55]

Karen also commented on the problem of racial difference, but she broadened the scope of the issue to include the entire community surrounding the center:

What I found problematic ... is that you’re taking severely traumatized people out of their culture, plopping them in [the United States] where, where people speak English, you know? And also ... not that there’s rampant racism [in the community], but it’s not like [Los Angeles] where [they don’t stick out]. I mean, they walked out of the house and [other people reacted] like, “Woah, who are *they*?” (Laughs) So that there was something quite bizarre about it ...

This unequal power dynamic also resulted, at times, in feelings of voyeurism. The experiences of staff and clients were constructed almost in opposition to each other in ways that meant the service provider was never seen as a victim of suffering and the

client was primarily seen as that. Consequently, as Jamie told me, volunteers at *El Centro* often became involved out of a feeling of guilt and a need to connect with suffering:

You know, I want to just say that ... [what] ... motivates a lot of people to do things, is guilt.... That they feel guilty ... that their government is doing such terrible things in the world and they also feel guilty that their lives, that they don't know what suffering is, you know? And that, they feel like they need to connect with the people in the world who ... have suffered and ... understand them and be understood by them.

The desire for a connection to suffering that Jamie articulates originates in the knowledge that there is suffering in the world, while one lives a life where they feel untouched by that suffering. The desire for connection to suffering has the potential to be transformative when it serves as the impetus or the foundation of people's commitment to work across difference and in solidarity with the oppressed. The decision to witness the suffering of another, to not turn away from pain and injustice, also has the potential to heal the survivor by making his or her life and experience visible and acknowledged. Mary Marshall Clark (2005:281), an oral historian, states that through the act of speaking about and listening to stories of trauma, the listener and the speaker transmit memory in ways that create communities of knowledge that combat indifference: "These acts of listening to others' accounts of trauma or suffering give us the grounds upon which to establish ourselves as members of communities of knowledge, even when the community is constituted by virtue of shared suffering.... We combat indifference by virtue of this commitment to presence, knowledge, and to shared pain." Schaffer and Smith (2004:14) argue that the sharing of stories within local communities can create versions of history that struggle against the official or normative master narratives that "contradict,

complicate, and undermine the grand modernist narratives of nation, progress and enlightenment.”

But sometimes, depending on the person and situation, the desire for this connection originates in a more questionable location. As Clark (2005) comments, technology today means that we are all exposed to information from everywhere all of the time. We cannot claim ignorance of the horrors that occur in the contemporary world, but the speed and scope of media often means we are overwhelmed and numbed, leading to a feeling of indifference that makes us “bystanders in history ... able to rationalize indifference in ourselves by succumbing to a climate of alienation in our culture” (Clark 2005:267). Schaffer and Smith (2004:13) also assert that in a postmodern world marked by fragmentation of every kind, “personal responsibility and helplessness seem crushing” and suffering seems to come from every direction. Consequently, “Western audiences” may seek out a connection to suffering to “feed their need to believe in the achievable goals of justice and freedom ... and to believe in the efficacy of collective action against the overwhelming factors of fragmentation” (Schaffer and Smith 2004:13). People may also turn to narratives of trauma and suffering “to feed their needs to ‘feel’ something, anything, any sensation...” (Schaffer and Smith 2004:14). Similarly, bell hooks notes that “In the United States, where our senses are daily assaulted and bombarded to such an extent that emotional numbness sets in, it may take being ‘on the edge’ for individuals to feel intensely” (1992:36). What I am attempting to say here is that sometimes the desire to know and to connect with suffering and trauma can come from a place that starts to feel voyeuristic, a place where one becomes uncertain if the desire to work with survivors

of trauma is motivated out of a concern for the other or more out of a concern for the self.

Jamie discusses negotiating these tensions:

Jamie: ... there was always a balancing act between, (pauses) kind of like protecting the participants a little bit, like their privacy, their autonomy, [but then] the organization ran on volunteers. So in a way when people came to volunteer, it was like they wanted access to these people. And I remember ... being protective of the participants, like ... sometimes I wasn't sure if ... what we were doing was for the participants or for the volunteers, you know? Like for the volunteers need to volunteer, or their guilt, or their ... wanting access or contact or communication with somebody who's been traumatized.

Tami: There's something that's almost voyeuristic about it, I think.

Jamie: Yeah, well they [the participants] were kind of like movie stars a little bit. You know, like they were the ones we were all working around.... they were the *objects* of ... our attention. They were the reason we were all there.... So it was sort of a balancing thing. And the house also—it was a *house*, but it was also a place where people came, and so that must have been difficult for the people living there, you know? That was their home and yet it was a public space.

Jamie clearly states here her own confusion about who the program was most serving: volunteers and staff or the participants. She also points out that sometimes she felt that the participants were the “objects” of the activist gaze, and how she had to balance the desire of the volunteers to “have access” to the participants and the participants’ need for some privacy and autonomy inside a house that was, somewhat confusingly at times, both a public (a community agency) and a private (the home of residents) space.

Sara, the El Salvadoran woman, also commented on another arena where she felt the center was voyeuristic. Although she became involved in the center during the second era when the power dynamics were shifting to a more Latino Staff, many of the board members were still white, and many of the tactics used by the center during the first era remained in place during the second, such as profiling survivors of torture in fundraising letters. Sara disapproved of some of the center’s fundraising methods, which were

“very effective, but in my opinion, used to expose the pain of the people.” When I asked her more about this, she responded that the strategy was

to find the worst war story ... of a participant and put it on a letter, so people can go “oh, *pobrecitos*, [poor little things] here’s my money,” you know? ... it’s just taking advantage of the person’s suffering, you know?... I mean ... that would be my last option, okay? To go to a person and say “hey, you know, can we use your story to get money?” That would be my last resource. But if I have to go that route, I would probably ... work with this person for months and ask like a million times, “are you sure this is ok with you? Here’s what they are gonna write on the letter. Do you like it this way, should we take off some stuff, do you want to change the wording of this?” ... more control of what they were doing but that’s not what was happening.

Sara also articulated a critique in regards to race and power that involved the importance of Latino representation at all levels of the agency:

I told [the board], “look who is at this table, [and then] look who we serve. To me this table should be full of them, and not too many of you”.... What I would like is to see a board made of the participants.... Who cares the business are done in Spanish, that’s their first language, it’s understandable ... And maybe some white people wanted to be part of that and they don’t understand Spanish, “too bad dude! Go out and learn if you want to be part of [this]” ‘cause things are done the way people feel comfortable here!

In the first era then, the most significant problems reflected the differences between the identities and experiences of the staff and the clients. In the second era, as the staff becomes increasingly diverse, the focus of tension becomes the dynamics among the staff itself and between the staff and the board.

As I mentioned earlier, in the second era of the center, the staff, participants, and programs became more diverse. In attempting to address the needs of more people and of people living and remaining in the US, the center added a clinical counseling component and a youth leadership program to its residential program. Of the staff members I have discussed, Dr. Kline, Dr. Redmann, and Graciela were associated with the clinical

program, which also connected clients with free legal help in attaining political asylum. Phil, Karen, Barbara, and Lara were more associated with the residential program, while Sara was associated with the youth leadership program. The major strengths of the program in this era expressed to me by staff members included the ability to assist many more people than previously and the increasingly multicultural identity of the center. Sara also commented that she felt positively about the broad scope of services *El Centro* was able to offer during the second era:

I thought that the philosophy was brilliant, you know. I couldn't think of a more perfect way— this idea of the holistic approach and ... integrating the social and the psychological and psychiatric meds management, and creating like a base family for these families coming into the house.... [It was] very different to other programs that I knew or heard of where ... services were fragmented: it was only this or only that, but not the whole package.

Sara's critique of fragmented services resonates with the critique of other practitioners who state that the "phenomenon of suffering as an experiential domain of everyday social life has been splintered into measurable attributes" (Kleinman, Das, and Lock 1997:xxv). Consequently programs exist in health, social justice, welfare, development that deal separately with each issue, and "these attributes are then managed by bureaucratic institutions and expert cultures that reify the fragmentation while casting a veil of misrecognition over the domain as a whole" (Kleinman, Das, and Lock 1997:xxv). Instead, they argue, we need to return to "the primacy of phenomenological domain of suffering in a broad social context" (Kleinman, Das, and Lock 1997:xxv). Instead of fragmentation, we need a broader frame that "integrates these and yet other human problems—a frame that names a large domain of the sources, forms, and consequences of social life" (Kleinman, Das, and Lock 1997:xxv). *El Centro de la Solidaridad* certainly

represented one organization that innovatively attempted to integrate many services under one roof and tried to frame suffering in the broader social context recommended by professionals in the field of social suffering.

Finally, Lara commented to me that in this era, the center was a “friendly, open place that was kind of ours, you know, that belonged to the Latino community in some way”:

so it was more than providing a place for people to rehabilitate themselves and we *knew* that a lot of people came there for social contact, that whenever we did parties or picnics or whenever there was food and music involved in anything, people were a lot more involved. And they didn’t see it as “the place I go because I’m sick and I need to heal.” A lot of them saw it as “this is my place and I get to add to it,” to enjoy it. A lot of people brought food of their own. Or I remember very clearly we had a Colombian client who would just come over and work in the garden and clean things up just because she wanted to ... she took some ownership of the space and she wanted to contribute to it. But overall I think what many staff, volunteers, and clients wanted it to be was more like a community space—a friendly, safe, nurturing, community space ... although, I mean, the mission was “helping survivors.”

One of the most important roles the center played in healing then, was in providing the setting where community connections could take place. For people who looked different than most people in the larger community, for people who were not documented, and for people who were well-aware of the larger national anti-immigration discourse, *El Centro*—much as it did in the previous era—still provided a place of safety for the rebuilding of relationships and community that were lost through political violence and the experience of immigration.

As in the first era, many of the center’s promising aspects were simultaneously sources for the predicaments of the second era. While the addition of two new programs impacted more people and provided a wider range of services, it also caused a great deal

of conflict in regards to the daily pragmatics of running three programs, as well as philosophical debates about how the clients could best be served. The relationship with Western State Science University (WSSU) was one based on tensions, pros and cons. A desire for stable funding, a desire for the legitimacy gained by a connection with a more established and well-known treatment program, and a desire to expand services were mentioned above as some of the perceived advantages. These were weighed against some of the worries about an alliance with WSSU: a loss of control and ownership over the program which had been based on a more holistic model of treatment that included a range of therapeutic approaches.

Many of the concerns that people had about an alliance with WSSU proved justified, and although there are many memories of this era as full of growth and excitement, these seem almost overshadowed in the narratives by the pain and division that occurred, and by the ultimate split of the organization. Karen, Phil, and Barbara all discussed this era in terms that referred to a tension or a “discomfort” that primarily existed between the staff of the residential program and the WSSU staff, and was framed as stemming from a difference in healing philosophies.

All of the tensions that were specifically described to me seem to relate to a more general kind of identity crisis suffered by the organization after the clinical program became involved. *El Centro* had existed for years at this point, had a staff in place for the residential program, and had a mission that focused on holistic treatment services provided for free from community members. In essence, the organization at this point in time was primarily an *activist* organization. Dr. Kline, a psychiatrist and head of the

treatment program at WSSU, had been working with torture survivors from all over the world for decades by the time he began working with the center, and his program had its own model, one motivated out of compassion and concern for survivors, but one with an identity that was primarily based on professional training and a *clinical* approach. When he began working with the center, two former volunteers—one of whom was Graciela Franklin, the Chilean psychologist—were trained and certified to become Qualified Mental Health Professionals (QMHP) and added as part-time paid staff for WSSU. Consequently, two different staffs with two different philosophies were operating under the same roof at this time.¹ As Barbara explained:

Well, you know, you just had apples and oranges. You had a very professional, dedicated psychiatrist [who was] used to running his own show. And you had staff ... already in place with the residential program [who] saw what he came in to do as an extension—the group work and community building and medication, evaluations, and monitoring—as an extension of the existing program. And then of course, so who was in charge? Was it the psychiatrist or was it the staff ... already in place? So ... there was tension.

The problems WSSU had with the activist orientation of *El Centro* involved a perceived lack of structure and guidelines. Graciela told me “When we began our work [in the clinical program], it was really different than the work the agency had been doing. Before, the work of the agency was really unstructured.” In particular, the clinical staff was extremely uncomfortable with the residential program—the heart of the original program. As Phil explained to me:

¹ Although the youth leadership program also began operating in the house at this time, the program was run by one volunteer (not a paid staff member) and also had an activist orientation based on the popular education model. As such, this program did not clash with the original mission of *El Centro* and was not really discussed as part of the problem leading to the split of the house, aside from the fact that it added to the general confusion of three programs existing in one house. Consequently, I do not focus on this program here. As the tensions increased and people began taking sides, the leader of this program, who also had become a paid staff member by this time, and the youth with whom she worked, did get drawn into the conflict with some painful consequences.

I mean, in retrospect we [had] barely gotten our act together in terms of who we really should bring [into the residential program] by the time [*El Centro*] broke up.... there was [a] woman from Guate[mala] we had who was suicidal. And that really almost drove Kline out of his mind. He thought we were *crazy* for having people like that here, which we probably were. It was like, very, very, very, *very* difficult, and it fried the staff out completely.

Conversely, many of the staff aligned with the residential program viewed the approach of the psychiatric program as utilizing only one approach to healing: a psychiatric model that, from their perspective, limited agency and choice in the treatment of trauma and medicalized problems that were social and political in nature. Lara told me, “I think for me the hardest biggest price ... of creating the outreach program ... was that the principles that [*El Centro*] was born with were chucked out the window, because all of the sudden here was this psychiatric program.” When I asked her to describe what she saw as the approach of the agency before the collaboration with WSSU, she explained:

Well, I know for a fact that some people were given massage therapy and acupuncture. I know that these various therapists would work with them in talk therapy ... and then there’s that child therapist who would do play therapy.... some people asked for shamanic healings, or for ritual ceremonies, or for *limpias* [ritual cleansings] and they got them ... so, but anyway the point was to let the survivor choose, to give them some options and let them choose.

The importance of choice underscored Lara’s beliefs that trauma survivors need to be in control of their own healing. Psychiatrist Sandra Bloom also argues that “The medical model puts the power into the hands of the medical authority, and patients are discouraged from questioning this authority. The corollary of this is that medical providers are supposed to fix what is wrong” (1997:107). Karen, the psychotherapist with the program, felt that medication could play a role in healing, but she had her doubts about the approach Dr. Kline used as treatment:

I remember I went up [to WSSU before the decision was made to form the partnership with them] ... to see what they were doing. And I was allowed to sit as a therapist with Kline while he did a psychiatric interview.... And he was very friendly. They [the clients] liked him. [But] it was *all* about medication, and [the appointment] was maybe fifteen minutes.... And there was, what I felt was a medical model and a kind of patronizing.... However ... this man, Kline has been working with survivors of torture for over twenty years and has helped them, and I saw that they love him. That I knew. He was the doctor and it ... wasn't our paradigm, but [we decided that it was] okay.

Phil also described the debate about healing methods at *El Centro*:

The other tension was around the psychiatric model and survivor model. And their [model] was ... perceived as being culturally competent [or] we wouldn't have done it [worked with WSSU] otherwise.... Kline had a lot of experience working with ... all kinds of refugees ... but they have a more medical, straight psychiatry and drug therapy basis, which [*El Centro*] had certain issues with. We had ... more holistic community-based alternative therapies ...

Lara felt more strongly about the use of medications, stating they should only be used as a last resort and that she believed—and many other scholars and practitioners in the field of trauma studies agreed—that drugs actually inhibit the emotional, mental, and physical capacity to recover from trauma:

So what do you need [to heal]? You need safety. You need for the trauma to have ended.... And then you need to handle your physiological effects, including any danger and any damage to your body.... So the problem ... with psychiatric treatment is that it interrupts the physiological responses of the body which are not abnormal, they're normal. They interrupt those and they don't give you any of the other stuff.... For me medication, psychiatric medication, is ... very much a last resort and should be avoided as much as possible ... because it doesn't solve anything and it doesn't address trauma.... I mean it addresses a symptom, but it doesn't address the source, and it actually interferes with the mechanisms that could potentially create some sustained healing.

These tensions reflect those found in the international torture treatment movement as a whole. Like the center staff, caregivers associated with the international rehabilitation movement come from many different backgrounds, including doctors,

lawyers, religious leaders, politicians, human rights advocates, and torture survivors (Jaronson and Popkin 1998). The diversity of service provider backgrounds means there is a diversity of beliefs about how best to treat survivors of torture. Some of the debates about healing have to do with specific treatment approaches (use of medications, behavioral approaches, cognitive approaches, and use of alternative approaches like massage and acupuncture). Other debates about healing are more philosophically grounded: holistic approaches versus more fragmented approaches, individualized approaches versus more group-oriented healing techniques, perspectives on trauma as a medicalized phenomenon versus trauma as primarily a sociopolitical problem (Bloom 1997; Burstow 2003; Jaronson and Popkin 1998; Naples 2003). For example, feminist therapist Bonnie Burstow (2003:1296) sees trauma as a direct result of oppression: “The point is oppressed people are routinely worn down by the insidious trauma involved in living day after day in a sexist, racist, classist, homophobic, and ableist society...” In fact, Burstow refers to Dorothy Smith’s (1990) concept of “regimes of ruling” when discussing institutional psychiatry:

Having invented the concepts of ‘mental disorder’ and broken it down into distinct diagnostic categories, psychiatrists impose the categories on vulnerable others, while studying those others and calling the result ‘knowledge’ On the basis of these concepts, they have the right to incarcerate and impose substances on people.... Mental disorders...in other words, are a function of the power of psychiatry, mediated by the psychiatric text... [2003:1300]

What my research adds to these debates is that identities influence life experiences, which influence the motivations and meaning of this work, and ultimately shape people’s positions about how the treatment of trauma survivors should be accomplished. The tensions experienced by the center in the second era have their origins

in people's biographies, a connection that only became obvious to me from listening to broader life histories. Dr. Kline's realization about US foreign policy occurred when he was a doctor in Vietnam, and he clearly frames his response to this realization in terms of a professional, *clinical* identity. He told me that "you have to be a ... pretty mature clinician to do [this work] ... and [to] not get either too emotionally involved or too distant from it." A clinical identity—with a stress on community and solidarity—was also emphasized by Graciela, who was deeply moved by the international human rights movements while growing up during a dictatorship in Chile. Lara, because of her personal experience with systems of oppression, emphasized the need for education, choice, and self-directed healing. Sara, who dealt with multiple forms of structural and political violence in El Salvador, emphasized power and representation as the path to healing. Barb and Karen—both psychotherapists with an activist background—could see the benefits of both clinical and activist approaches. Additionally, none of the white staff members mentioned any kind of traumatic experiences, whereas every single Latina staff member had a life history saturated with trauma. Consequently, while the first era of *El Centro* was framed almost exclusively by a white, middle class activist orientation that was rooted in the experiences of travel, in the second era, increasing tensions mirrored the increasing diversity of staff identities and biographies, including differences in nationality, class, gender, sexual orientation, culture, and—importantly—past personal experiences with trauma. These tensions produced an "unquiet liaison," as Barb called it, between proponents of activism and proponents of a more clinical approach. I examine the explosion and fallout of this tenuous collaboration below.

The Disintegration of a Fragile Community

In interviews, Tomás was given a great deal of the credit for the growth of *El Centro* during this era and, perhaps because of this, he was also often viewed as the only one with the power to hold the casa—with the three different programs operating together under the same roof—together:

The other factor, which brought down the old [*Centro*] and the union that existed therein at that time, was that Tomás was *everything* at [the organization]. He was the director, who knew how to relate to his staff, who knew how to relate to the clients, who knew how to relate to the community, and ... at some level held it together, you know? [He] managed to maintain a relationship with the clinical [program], which I think had a lot of respect in it—between him and the powers that be. So when he left, those skills were not dispersed around and amongst various people. And [*El Centro*] actually crumbled within *months* after he left.... I'm, I'm *real* clear about that. [Barb]

According to reports from multiple people, when the clinical program joined the center, there was very little in the way of a written agreement between the two groups; rather, the alliance was worked through over time informally as issues arose in the context of a mutually respectful relationship between the two program directors, Tomás Baeza and Dr. Kline. However, the lack of formal agreement among *all* of the staff about how the two programs would co-exist caused tensions to simmer below the surface amongst the all-female staff below each male director and when Tomás left—first for a long vacation in Chile and then when he left the program and country for good—these tensions erupted. Some of these tensions related to the difference in treatment philosophies, and some of them were more pragmatic: How were the funds obtained through the alliance with Western State Science University and the Torture Victims Relief Act to be distributed between the programs? How would space be allocated in the house? Additionally,

although WSSU paid for two part-time staff members to coordinate the clinical aspects of the community outreach program, there was one main office for the center and one pool of volunteers, meaning that in some senses, the burden of adding more clients through the community outreach program was one that the pre-existing staff of the residential program also had to shoulder without any additional pay or resources. How would the extra work of coordinating the increasing number of volunteers necessary to work with the increasing numbers of clients be managed? Who would do all of the extra work of organizing activities for many more people?

When conflicts increased among the staff, Karen was asked to mediate staff meetings that were meant to ease some of the increasing tension in the house:

what happened (laughs) was that we had this big staff and we would have these meetings and it was like diving off a board in the deep end. I mean, I had no idea what was going to happen ... because there were so many big feelings, and so many personalities. And ... as long as Tomás was there, there was ... a little bit of an anchor ... Tomás's charisma and kind of mercurial capacity to move around and, you know, dazzle people kind of kept them [together].... And then ... the staff got closer and closer and got more and more social.... the boundaries got *completely* out of control.... There was eventually a sense of betrayal, a sense of wanting revenge, and resentment that was on a very emotional level. So, and Tomás was part of that picture. And then he left and then there was so much damage that had been done.... And so there was no ... ability to communicate with these people who were really leaders [of each program].... there wasn't a strong enough overarching structure and idealism to keep everybody together and try to work it out.... And things started really coming unhinged at that point.... it was part of the big rift where suddenly there ... was the upstairs [where the clinical program was primarily located] and the downstairs [where the residential staff had their offices].

Several things become apparent in this quote. First, Karen views Tomás both as “the anchor” holding people in place and “part of the picture” of the resentments and feelings of betrayal that eventually caused a rift among the staff. Second, she views the staff

becoming very close as a precursor to the staff being ripped apart. This lack of boundaries is another place where we can see a more professional mentality come into conflict with an activist mentality, a point Karen elaborated on in our interview, “I was awed by some of the activists. And I also thought they were going off half-cocked half the time ... and not getting all of the information.... I hate to be reductionist about it, but ... there were some *very* intense people on the staff. And as an activist, activists tend to have that passion.” Third, we can see how the conflict took on spatial dimensions that resulted in “an upstairs and a downstairs,” meaning that at that point, the programs were effectively split. In a later comment, Karen also builds on the idea of Tomás as “the anchor” at the center in a way that also references some of the gendered components of the rift:

and then when Tomás went on vacation (pauses), it was like all hell broke loose. And I wondered too about a gender thing. That it was, you know, Tomás was “The Man.” And I say that like “*The Man*” (laughs): there were all these women around and when he left, there was nothing, there was no buffer. There was ... intense feelings and very ... big personalities.

Phil told me that he believed that, ultimately, all these tensions led to the split because “different people wanted different things out of [*El Centro*],”

And at that point it was like, “well, why are we working together?” I just, I tried my best to make ... the divide happen in a way that was as amiable as possible and that wasn’t as destructive as it could have been. And that was probably the best I could do. It was very traumatic for *me*, really. I still have not recovered ... I haven’t done much activism since.... But ... I just said at a certain point, ... “These people are not going to be able to deal with each other. Just forget it.”

Relationships among staff at the center indeed rapidly deteriorated after the permanent departure of Tomas. Additionally, Graciela and Sara both felt the participants of the program were retraumatized during the final months of conflict and forced to choose

sides among the staff. The struggle became increasingly personal and increasingly painful. When the center finally closed its doors in 2005, all programs were asked to leave the house by the board of directors.

Although most staff seem to point to the activist-clinical tension and the departure of Tomas as the reasons for the split of the center, I argue that the different subjectivities of staff members was a critical factor in demise of the center. When the center transitioned from being a predominantly white middle class activist organization to a more multicultural organization offering multiple services, the more complex issue of differing staff identities and experiences became subsumed under the clinical-activist tension. Never at any moment in time during all these huge changes in the personnel and mission of the center was there a discussion among the center staff of their personal histories, which meant that there was little empathy or understanding for how people's personal histories shaped their perspectives on healing, or how their different positionalities shaped their interactions with each other. What happened instead was a great deal of hurt feelings and bitterness as their differences were brought to the surface in the debate over the clinical model represented by WSSU. In the interviews, staff repeatedly refer to WSSU as the epicenter of the storm, while I argue that the clinical program emerged as the focal point that crystallized their different ideas about who they were, what trauma work should mean, and how it should be done.

Of course, it is not surprising there were different kinds of people with different beliefs at the center. And, it is not surprising that there was conflict. All organizations and work environments struggle to create positive relationships among their workers and this

challenge is only exacerbated in organizations that attempt to change the status quo. As Morgen states about her examination of the promise and predicaments of the US Women's Health Movement, "Contention is inevitable in organizations that aim to change the way people think and act" (2002:xi). She also insists on the importance of examining conflict because scholarly work on this topic can illuminate social change efforts and theory. Similarly, Benmayor, in her action research project that examined the impact of literacy and popular education on a Puerto Rican community in New York, comments on the importance of examining how "culturally sensitive programs for social change" can be put into place, and how "class, national, racial, and gender identities serve or short circuit the empowerment process" (1991:159).

Certainly, diversity was not the problem at the center, nor was the conflict among staff members. In fact, diversity and healthy debates about the philosophies and methodologies of the center could have strengthened the center and added to its growth, rather than its destruction. These factors, although they presented challenges, did not cause the breakup. It was the silence around difference. It was the avoidance of conflict. Sandra Bloom, a leading practitioner in the field of Trauma Studies, discusses her own struggle to create a more humane model for the treatment of trauma survivors in her book entitled *Creating Sanctuary* (1997). A critical component in her model is that staff must surface and resolve conflict on a regular basis so that it does not fester below the surface and poison the creation of healing atmosphere for survivors. This clearly did not happen at *El Centro*. For example, Lara felt that staff differences were not being addressed, and because of the ways secrecy injured Lara at different times in her life, she saw herself as

an unpopular advocate for trying to expose the conflict among staff members at the agency:

You know, in a way ... I walked into this trap because when I started working at [*El Centro*], that's part of what was going on.... Conflict [among the staff] was not being addressed.... Like nobody was talking about the real things that were happening and does that mean that it was a nurturing space and that people were taking care of each other? No, it doesn't.... And, of course, because I kind of walked into this dynamic ... being too innocent and too whatever, hard-headed, blind, I contradicted it and nobody liked that. Everybody wanted it just peaceful, just the way it was before.

As I listened to the incredible stories of one staff person after another, I considered the irony of a staff that listened so intently and unconditionally to the center's clients, but knew so little about each other. And I thought about the traumas that existed like ghosts in the room, unspoken and unshared, among the staff who were serving trauma survivors. Staff biographies explain much of the emotional impetus driving individuals to do this kind of work; people certainly weren't working at *El Centro* for the [lack of] pay. Because the staff never shared their stories with each other, the connections between biographies and beliefs—connections that I strongly feel would have moved the staff to work together with more patience and compassion—were lost. As Tsing (2005) argues, difference can also slow things down or disrupt. In this case, the friction of too many unacknowledged differences produced by different kinds of transbordered staff identities caused the center to become such a fragile community that it imploded.

The impact of the center's dissolution varied for staff members. It was so profound in Phil's case that it has since caused him to avoid activism, which had been a part of his life and identity since the 1960s. Other staff members expressed some degree of sadness and disappointment over the breakup, but the three Latina women were the

most devastated by the conflict at and closure of *El Centro de la Solidaridad*. Again, I argue that how staff members experienced the split relates back to their identities and biographies. As I discussed in the previous chapter, these three women saw the center as a location for personal healing and a site of belonging. Consequently, when the conflict and the closure occurred, they experienced a form of retraumatization that mirrored a sense of the original traumas they had experienced in their home countries, and a feeling of rejection—of being thrown out from a community of belonging—that they expressed to me in terms of a deep and lasting betrayal.

Lara, a person who never quite felt like she belonged in any of the worlds she moved in while living in Mexico, also felt excluded from the alliances that were formed at the center. She expressed this in different ways during her interviews. She felt betrayed by what she perceived as the program's shift in direction to more of a medical model when WSSU became involved. She felt she was seen as a "hardass" by other staff members because she was "one of the people with better boundaries" and she tried to enforce these boundaries with others. She mentioned not being invited to staff gatherings. She also believed that many of the female staff "had a weird caretaking relationship" with Tomás and that they would attempt to cover for his shortcomings as a director, telling me that she "was the only who was not white and was not his friend.... I could see through some things that other people couldn't. I didn't have the same kind of loyalties to him that other people had and I became very frustrated with it." Although Lara initially hoped that *El Centro* would serve as a community of belonging for her, she marks herself as

being different from other staff members in all of these realms, indicating that she never felt fully accepted at the agency.

Sara also saw the center as a community for her in a city where she previously could not find “her people.” As the conflict escalated, Sara went to the board with her suggestions about the changes that needed to be made to ensure a future for the center. Somehow, she told me, her recommendations were perceived as an attempt to oust the clinical program from the house, and communicated to the participants as such.

I don't know what ... information [was presented] to them, okay? But the information that came back to me, was that I was kicking WSSU out of the house ... and how dare I was doing that. And this came out from the participants, okay? So I told them, “listen, that's not what I was trying to do,” but I would not tell them what I was trying to do. Because to me, they ... didn't need to know the whole thing, because I considered that they come into [*El Centro*] to find services so they can feel safe, so they can feel supported. And ... the role that they end up taking was a mediator between WSSU and [the staff of the residential program].... but with this very set idea that what I was trying to do ... “is to kick [WSSU] out of the house.” So that's what hurts about ... this whole thing.

Sara explicitly states her pain over feeling that the participants were retraumatized by being brought into the conflict: “people were in the process of recovering.... And I saw how this impact them and send them back again to that ... whole trauma thing.” Implicit in her statements, however, is that Sara was also hurt by the rejection of people that she envisioned as her family in her new country. In her interview, this rejection was portrayed—in content and emotion—as very similar to how she described feeling repeatedly rejected by her biological family members in El Salvador.

For Graciela, the closure of the center represented a devastating blow to her ideals about solidarity, a betrayal that she frames in terms of a re-experiencing of trauma and exile:

The most painful, intense thing, for me, I think, was that ... I thought this was a program that was functioning harmoniously, with difficulties like all non-profit organizations that have very few resources.... and furthermore, we were working with trauma victims, which always causes reactions among the team [staff]. But then, there was the feeling of not being recognized for our work by the members of the board and by the other staff members of [*El Centro*]. I felt this as a betrayal, such a strong betrayal, you know what I mean? And this caused us [on the clinical staff] a great deal of pain. I remember that it was so traumatic, so intense, to feel like they were telling us we had to get out of there. And so I relived this as an experience of exile—like once again they are asking you to leave in exile ... when they had offered you this space as a protected and safe space for the families. And it was disconcerting, I felt like I was in shock, I couldn't believe it. I think it was really sad.

Finally, both Sara and Graciela expressed a great deal of pain over the idea that the center would no longer exist to welcome and serve Latino members of the community because it had such personal meaning for them as a place of belonging. The belief that the loss of the center represented a loss of community was revealed in what I am referring to as the final battles over memory that occurred before the center closed its doors. Both staff members told me about arguments regarding the ownership of material objects (office equipment, wall art, client files) and symbolic aspects (the name of the organization) of the casa—as well as a struggle for the loyalty of the casa's participants—because both women were planning on continuing their programs in other locations. Sara described the end of the center as “pitiful”:

Then after that, there was this big, whole thing about the “no, this is mine,” [about] pitiful stuff: chairs, tables, paintings, and stuff like that, that “Tomás give this to us,” ... but they were trying to take all the history of [*El Centro*]. And so I say, “you take whatever is in that room [their office upstairs] but whatever is down here, stay here because this organization will continue.” And that piece, there is a selfishness involved, and it's this idea that [*El Centro* continues to] exist. I mean, I don't want [*El Centro*] to disappear because if [*El Centro*] disappear, what else is out there for people?

In regards to the name of *El Centro*, Sara recalls being indignant about the fact that not only was she accused of forcing WSSU out of the house, but that they also wanted to keep the name of the program for themselves when they left: “And I’m like ‘but you are WSSU, you’re *not* [*El Centro*]. How in the hell you gonna be calling yourself [*El Centro de la Solidaridad*] when you’re not? What are we gonna be called?’ ... that was the pitiful stuff that happened.” A compromise was finally reached that meant neither of the new programs could use the old name of the center. However, in the creation of each new name, part of the history of the center was preserved. Sara’s program moved across town into a school that had been turned into offices for community agencies. Her youth leadership program transitioned into a broader immigrant rights group that still emphasizes the empowerment of young Latinos and now calls itself “*Solidaridad Multicultural*” (“Multicultural Solidarity”). The clinical program became housed in a large Latino organization and named itself “*Siempre en Solidaridad*” (“Always in Solidarity”). Graciela affirmed that the clients of WSSU were extremely hurt when they found out that they “would no longer have access to the name of the program,” but that they were the ones to choose this new name. Graciela viewed their choice as a way to repair or mend the damage that had been done “because they could bring something of the history with them, no?” Additionally, after the retraumatization of the clients caused by the closure of the center, Graciela told me she felt it was important that the new program offer the same kinds of services as the old program, “out of the new center, make the house again, right? Find a place to plant a garden, find a place to celebrate Christmas ... and we’ve found that.” All of these examples illustrate the intense meaning

the center held for the people involved with it, the struggle over who would “own” the past, and the desire to remember and recreate the center in the future of both of these programs.

In all three of the Latina staff narratives, the extent of the pain—even today, three years later—remains obvious in the way each woman circles back to the conflict repeatedly throughout her narrative, bringing us back to that theme sometimes even when my questions or where we were in the discussion at that point had little obvious relation to it. The extent of this betrayal is also evident in the tense relationships that still exist among these three women—all of whom still serve the Latino community in this same city today.

Many feminist scholars working in the arena of social change “contest the usefulness of identity as the source of assumed connection and common ground in the formation of political alliances” (Scott 1998:403). A great deal of feminist theory demonstrates the concept variously referred to as border identities, positionality, intersectionality, standpoint, or the complexity of identity (Anzaldúa 1987; Baca Zinn and Thornton Dill 1996; Collins 1990; Naples 2003; Sacks 1989; Tatum 1997): the notion that individuals do not fall neatly into any unitary category of identity, but rather that our identities are shaped by the “intersection of different identities and experiences in a world structured by domination and subordination” (Scott 1997:401). For example, I am a woman, but I am also white; therefore although I belong to an oppressed group based on my gender, I am a member of a dominant group based on my racial identity. Consequently, we cannot make universal, essentialist assumptions about any category of

people based on race, class, gender, etc., because each person is simultaneously a member of several categories and these categories can shift, depending on the situation. For example, in her essay “A Trip to the Bahamas,” June Jordan, a black middle-class US professor, demonstrates how structures of power and oppression shape her interactions and identity differently as she travels from the US to the Bahamas and back again (Jordan 1985).

For these reasons, alliances formed on the basis of identity politics are fragile ones. Instead, scholars suggest alliances need to be based on political alliances that are built from the foundations of a shared vision for change. In this way, the potential is created for “collaborations across divisive boundaries” (Mohanty 1991:4). Mohanty refers to the usefulness of the idea of an “imagined community of third world oppositional struggles”

because it leads us away from essentialist notions of third world feminist struggles, suggesting political rather than biological or cultural bases for alliance. Thus, it is no color or sex which constructs the ground for these struggles. Rather, it is the way we think about race, class, and gender—the political links we choose to make among and between struggles. [1991:4]

Similarly, Jordan argues that “race, gender, and class absolutely collapse ... whenever you try to use them as automatic concepts as connection” (1985:46). Instead, she proposes the idea of “partnerships for change,” defined as alliances that are built on shared political commitments rather than static, essentialized notions of identity. As Scott observes, “these theorists recognize that when collective identity and action are rooted in political vision rather than in an assumed alliance based simply on racial-ethnic or other essentialized identities, the possibilities for action expand” (1998:403).

In her research on alliances and betrayal in the racial politics of feminist organizations, Ellen Scott (1998) argues that this kind of theory has not really made its way back to actual sites of feminist grassroots organizing. Women of color frequently expect alliance on the basis of race and subsequently feel betrayed when conflict occurs with other women of color. White women, conversely do not discuss their alliances with other white women as racial, and thus do not have the same feeling of disappointment and betrayal as women of color when conflict occurs with other white women.

How can we use these theoretical frameworks to understand the impact of the conflict and closure of *El Centro de la Solidaridad* for various staff members? Like the two feminist organizations researched by Scott (1998), *El Centro* serves as a local, grassroots organization where we can examine how solidarity theory, trauma theory, and social change theory is enacted on the ground. The alliance built at the center clearly represents more of the *political* alliance advocated by feminist researchers, where people from different racial, gender, and class backgrounds worked together to respond to the political issue of torture and trauma. Yet, I still refer to *El Centro* as a “fragile community,” and I argue that betrayal was a lasting effect for the Latina staff members of the center. Why?

What seemed to happen at the organization is that although it was organized around a political issue—helping survivors of violence—assumptions were made that all staff members were working towards a common goal, when, in fact, a wide range of unacknowledged and unspoken narratives existed during the second era of the center. This was due in part to the diverse structural positions and politics of identity among the

staff, but also to the diverse trauma and truth experiences that motivated people to work at the center and which shaped the different meanings and investments this work had for people. In short, it is not enough to form an alliance built on shared visions of future political change, without also creating an intentional dialogue about how each individual's past shapes these visions. Benmayor, in her action research project with Puerto Ricans, also says that communities working for change need to be formed with a focus on the dynamics of struggle: Although the individuals involved in the literacy and popular education project had a "variety of identities and interests, sometimes complementary, sometimes conflicting," community was created as each woman shared her life history with the other program participants, which built a sense of common circumstances and common struggle (1991:16). This did not happen at *El Centro* where common interests and solidarity seemed to be assumed, rather than intentionally discussed and built from the ground up.

Like the women of color working in women's grassroots organizations in Scott's (1998) article, a feeling of betrayal was only expressed by the Latina staff members. However, I argue that in the case of *El Centro*, these feelings of betrayal *primarily* originated more in what the center represented to each of these women—a place of belonging for people who left their home countries and a place of healing for women who had experienced a great deal of trauma in their lives—than a betrayal that occurred because of the assumption of alliances among female Latina staff. However, the fact that these three women continue to have the most tenuous relationships today of any of the staff members, seems to indicate that some greater expectation of the other women also

existed, perhaps because as Latinas, they were viewed more as members of the Latino community of belonging to which they all desired to belong, or perhaps because of expectations of alliance based on gender in a program where the two people in leadership positions were men.

In conclusion, the idea of suffering as a social experience means that the healing of traumatized people is affected by the community around them (Bloom 1997; Kleinman et al. 1997a). In this chapter, I have demonstrated how the methodologies and the philosophies at *El Centro de la Solidaridad* were shaped by the biographies of staff members, which in turn shaped the promise and predicaments of work for social change. In the next chapter, I continue to develop this theme as I turn to examine the interactions between the staff and participants of *Siempre en Solidaridad*, one of the two organizations born out of the demise of *El Centro*. I argue that the frictions and fragments occurring in engagements between social service networks and those they serve (Tsing 2005)—continue to affect the possibilities for and limitations of individual healing and collective change.

CHAPTER V
THE SOCIAL CONSTRUCTION OF SUFFERING AT
SIEMPRE EN LA SOLIDARIDAD

The focus of this dissertation is to provide an ethnographic example of social suffering, one that facilitates the connection between theory about trauma, memory, and social change to the philosophies and actions circulating in a specific local site that serves Latin American survivors of trauma. In the last two chapters, I demonstrated the links among identity, biography, meaning, and motivation for staff members involved with the Solidarity Center, as well as how all of these factors contributed to the promise and predicaments of trauma work and work for social change during the first and second era of the center's existence. In this chapter, I focus on *Siempre en Solidaridad* (SES)—the clinical program associated with Western State Science University that continued after the demise of *El Centro de la Solidaridad*. As I discuss the work of *Siempre en Solidaridad*, I add participant voices to staff interviews in an attempt to show how one group informs the other in the social construction of suffering. I continue to work with the three themes of trauma, truth, and transformation, using them as tools that together contribute to the creation of the social meanings of suffering at SES. I examine how “trauma” is defined, produced, and assigned importance. I use “truth” to refer to ideas about the past, individual and collective memory, and historical truth. The notion of

“transformation” refers to the various ways the center and individuals try to heal from traumatic experiences. This chapter contributes to the literature in three major ways.

First, the participants in SES program are survivors with a variety of legal statuses living and planning to remain in the United States. Consequently, the staff of SES plays a significant role not only in mediating the experience of suffering, but also as a critical resource for Latino immigrants attempting to navigate the legal, social, political, and economic realities of their new country. Ong (2003:16) refers to both Rabinow’s idea of the “middling modernizers” and Nikolas Rose’s term “experts of subjectivity” in connection to her assertion that the individual local authorities and mediators in micropolitics are professionals—doctors, teachers, and social workers—“who translate the problematic of government into everyday operations.” I demonstrate that SES staff members serve as a unique case study of “middling modernizers,” both because US staff members implicitly or explicitly convey in their interviews an attempt to create an identity in opposition to at least some of the US governments policies and practices and also because many staff members are themselves immigrants and survivors of trauma (see Chapter III). This is different than much of the current research that focuses on agents that have no explicitly stated oppositional identity, such as the service providers in Ong’s (1996, 2003) research who work with Southeast Asians refugees and the court officials in Coutin’s (2000) study of El Salvadorans and deportation hearings in the US. I examine if and how the development of alternative political subjectivities—ones that question the dominant narrative of the nation-state or ones that were developed in the

same countries producing the center's clients—shape the center as a buffer between these clients and the surveillance and discipline of the state.

Second, many SES participants are undocumented refugees—they have experienced some form of trauma but have neither requested nor received official recognition from the US government in the form of political asylum for this trauma. In this chapter, I argue that the status of undocumented refugees produces myriad effects not experienced by officially recognized refugees. Because they do not receive the services that official refugees receive (financial assistance, language classes, job training), they are simultaneously less subjected to the disciplinary discourses to which many refugees are exposed (Fadiman 1997; Ong 1996, 2003), and also have even less of a safety net if and when they need help. In contrast to refugees who can *openly* access multiple government agencies, and other institutional settings such as churches, schools, work places and health services, SES clients either do not access these places, or they access them from a more vulnerable position of being at risk for discovery and deportation. Consequently, I argue that *Siempre en Solidaridad* serves as the primary—if not only—resource for participants as they attempt to recover, survive, and adjust to life in the United States, meaning that the center has the potential to wield a great deal more influence over its participants than would be possible if individuals could freely access a myriad of services. I also demonstrate that the undocumented status of many of the program's participants shapes the center's approaches to healing as the staff attempt to respond to the multiple needs of their clients.

Third, although research exists that discusses the postwar memories of violence among people still living in their home countries (Bacic Herzfeld et al. 1997; Jelin 2002; Kaiser 2005; Paredes 2006) and research exists that documents the continuing problems of postwar transitional societies in Latin America (Baker Cristales 2008; Godoy 2005, 2006; Moser and Mellwaine 2001; Pérez 2003; Sanford 2008; Wolseth 2008), my research links these issues in respect to people living in exile. Many of the participants associated with *Siempre en Solidaridad* mention forms of transitional violence¹ as their reason for leaving their countries and coming to the US: What does this tell us? What new forms of violence, if any, do transitional societies produce? Finally, how do people deal with memory and trauma in exile?

When I began my interviews at *Siempre en Solidaridad*, I expected that the importance of memory would be a prominent theme in narratives on healing for both staff and participants. These expectations were shaped by the literature I reviewed and by my experience doing research in Guatemala. With few exceptions, the literature on trauma and the literature on memory assumes causal links among remembering past trauma, sharing past trauma with others, and the ability to recover from past trauma. In Guatemala, the existence of exhumation teams, truth commissions, and truth commission reports seems to indicate a desire to understand and increase awareness about the history of violence in Guatemala. In contrast, I encountered a great deal of ambivalence and silence about the past at *Siempre en Solidaridad*. Resolving the contradiction between

¹ I use the term “transitional violence” to refer to forms of violence occurring in postwar, “transitional” societies. I do not mean it to infer that these forms of violence are transitional in the sense that they are temporary.

what I expected and what I found became a driving force in much of my research: Do the circumstances of SES participants—as undocumented refugees living in exile—mean that the past plays a more ambivalent role for them? Does the heterogeneity among participants mean that the clinic lacks an environment where people feel safe enough to share their stories? Although the process of creating collective memory and historical truth contributes to national reconciliation, can we assume the past should be equally important to individual reconciliation? What are the parallels and what are the differences between national and individual processes of remembering, reconciling, and reintegrating a traumatic past? In other words, is the prevalence of silence about the past at *Siempre en Solidaridad* problematic, or is there a reason for it, or both?

Snapshot of *Siempre en Solidaridad*

In 2005, *Siempre en Solidaridad* moved across town from the casa and began renting offices from *Latinos Unidos* (Latinos United). With the move, the clinical program lost the feel of a residential casa; *Latinos Unidos* houses several programs—including a work program, English classes, and drug and alcohol counseling in Spanish—in a large, plain cement rectangular office building located in a predominantly Latino neighborhood. However, the clinic gained a supportive Latino umbrella administration and the potential for increased visibility and networking within the larger Latino community. In two large connected office rooms, the clinic has a waiting room with seats, a basket of toys, bulletin boards filled with pictures of clients and staff, and informational posters and pamphlets, and the clinic headquarters where Elena answers the

phones, handles emails and helps clients with intakes, referrals, photocopying, and translating as needed. Two additional separate rooms serve as counseling spaces and staff offices. Although the feel of the space definitely resembles more of the office clinic environment that Bev McKenzie was working to avoid in her original vision for *El Centro de la Solidaridad*, the clinic staff members do their best to recreate the sense of community that the old casa had. They have a garden plot rented for a small fee from the city's urban farm area, and they still have activities—such as Mother's Day events and Thanksgiving dinners. Every other Monday is "Clinic Day," with clients coming and going all day for their scheduled appointments with the psychiatrist who only comes to the office on this day. Wednesday evenings are the "group drop-in" sessions, usually run by Graciela, where any client can stop in to connect with other members of SES, share the events of their week, and discuss any problems or concerns they might have.

Dr. Kline, Dr. Redmann, and Graciela—discussed in Chapters III and IV—all moved from the casa to this clinic site. In addition, SES added three other members to its staff. Lucy, a young European American woman, who was a former volunteer at *El Centro de la Solidaridad* and, like Graciela, became a Qualified Mental Health Practitioner (QMHP). Elena, a young Salvadoran woman who had previously been involved in the youth leadership group run by Sara at the casa, who now worked as the SES office support person. Finally, prior to Elena, Amy, a young white woman who was also a former volunteer at *El Centro*, was the office support person. Currently, the center has eighty-five clients total, the majority of them Guatemalan (fifty-five percent), male (fifty-four percent) and undocumented (seventy-four percent). Other client countries

include Chile (one person), the US (one person), Nicaragua (one person), Uruguay (one person), Argentina (three people), Honduras (four people), Colombia (five people), Mexico (seven people), El Salvador (eight people), and Perú (eight people). Staff people told me that about one-third of the clients participate actively at the center, with many other families arriving very sporadically (perhaps once a year), usually when a traumatic event is retriggered or when they are in need of referrals and other forms of social support. Additionally, a small group of SES participants—all male—have organized to form their own non-governmental organization, *La Asociación Siempre en Solidaridad*. The association was formed immediately after the breakup of the casa, and was meant to give the participants some feeling of control by having their own organization that would continue no matter what happened to the clinical program. Over time, its goals have evolved to include offering feedback to the staff of SES about their services and how the program is run, and, more recently, to initiate income-earning projects for the clients of SES. I turn now to the voices and issues of *Siempre en Solidaridad*.

Trauma Representations, Realities, and Responses: The “Double Discourse” at SES

Like *El Centro de la Solidaridad*, *Siempre en Solidaridad* has its challenges and its strengths. After moving out of the casa, SES no longer had to worry about justifying its clinical or medical approach to others at *El Centro* who advocated for a more activist approach. Consequently, the program has taken on a more openly clinical identity—albeit a “culturally sensitive” clinic—since it reopened in its new location, associating itself

directly with the International Torture Treatment Movement, Oregon mental health norms, and the mission of WSSU:

Our agency and [WSSU] belong to the ... International Rehabilitation Center for Victims of Torture—RCT. And the goal of this group is to educate the community and offer services to victims of torture ... all over the world.... And so we also follow these regulations. We are in contact with them and we also work under the mental health guidelines for the state of Oregon. And we are here in Latinos United ... because our goal is to be a culturally appropriate center where the people can come and feel comfortable and not be afraid. [Graciela]

However, all of the staff and many of the participants continue to carry the history of the first two eras of the *El Centro* program, and openly express how much they miss the atmosphere of the casa and that they strive to recreate the feel of the previous center. This presents a challenge because the clinic lacks the volunteer network and community support that existed at *El Centro*. Additionally, as a satellite clinic of WSSU, SES is almost exclusively dependent on their UN grant, which specifies providing treatment to survivors of political violence and torture, as defined by the UN. Meanwhile, people are arriving at the clinic with increasingly diverse forms of trauma, which the staff recognizes and to which they attempt to respond. Consequently, many tensions are pulling SES in different directions. In the next section, I focus on the origins of trauma for the clinic clients and how the staff represent and respond to the various needs of their clients. I later identify and discuss what I refer to as a “double discourse” that has become central to the way the center balances its norms and regulations with the realities of their clients, and the pros and cons of this double discourse for the staff and participants.

Violence and Trauma in Transitional Societies

Many, if not all, of the Latin American countries relevant to my discussion here have struggled to varying degrees with negotiating the process of moving from periods of war and conflict to more democratic eras. Truth commissions, exhumation work, debates about collective memory, and conflicts over impunity and accountability mark the landscapes of these transitional societies (Jelin 2003; Jelin and Kaufman 2002; Kaiser 2005). Violence also marks these landscapes and, as many people argue, this violence is a direct result of the unresolved inequalities and tensions that served as a catalyst for war, as well as the lack of accountability and meaningful change after the wars ended (Portes and Hoffman 2003). Graciela illustrates these struggles over memory and historical truth in relation to her own country of Chile:

I think, in Chile, the resolution [of the conflict] is a kind of fantasy ... because very few of the people responsible for the damage have been sought out. The Chilean government published a list of the victims of political violence ... and they put it all over the country. But they never published the name of the torturers, the people that executed the violence. And this seems unjust. Also, September eleventh was the day of the military coup and so the military made this a holiday because the dictator said this was a day to celebrate, right? And later, after democracy was returned, people said, "this is not a day to celebrate, but to remember the suffering." And so later there was so much conflict over this day—even thirty-four years after the military coup—there is still social conflict. Every eleventh of September, there are people who say, "In Chile there was violence and many deaths and the wound is still open." And then there are others—people on the right—who say, "We need another military government and a way to restore order to our country." It's still very divided. I don't feel like things are resolved, it's not resolved.

Transitional societies provide an interesting example of structural and political violence operating simultaneously in the same place. In her research on Guatemala, for example, Godoy (2006) constructs a fascinating argument that postwar public lynchings

are about much more than a militarized postwar society with democratic institutions that are too weak to handle crime. Rather, she asserts that lynchings are also about the increasing polarization of society in the grasp of global neoliberalism, stating that “lynchings reveal broader anxieties about change and disorder in deeply disempowered communities” where livelihoods are under assault from crime, but also from agrarian crises, unemployment, and a transnational economy in which most people have neither “voice nor vote” (Godoy 2006:35). Similarly, Paul Farmer argues that, in the case of Haiti, “dictatorships may be gone, [but] the transnational political and economic structures that maintained them are still in place and still inflicting their harm” (2004:311). Portes and Hoffman (2003) document that the neoliberal model has produced increasing inequalities in almost every single Latin American and Caribbean nation, and that it is these inequalities—and not just poverty alone—that are associated with the astronomical crime levels present in these societies. In 1995, Latin America as a whole had a homicide rate of twenty per 100,000 people, making it the most violent region in the world (Portes and Hoffman 2003:66):

The new ideology [of neoliberalism] preaches individual initiative and self-reliance in a context of generalized poverty and increasing inequality. Without access to employment and with fading compensatory programs by a distant state, it is not surprising that a minority of the poor have concluded that the only means of survival consists of appropriating resources through illegal means.

[Portes and Hoffman 2003:69]

The targeting of street children in various countries (Scheper-Hughes 1997) and the murders of women in Guatemala City (Sanford 2008) provide evidence for the continued use of ex-paramilitary groups, ex-soldiers, and ex-guerrilla to “cleanse”

transitional societies of the socially undesirable beings increasingly produced by the forces of late modernity to which Godoy refers. Some forms of transitional violence are more novel, such as lynchings (Godoy 2006) and “femicide” in Guatemala City (Sanford 2008). Still other forms of violence are not novel, but have significantly increased in the climate of dehumanization and fear prevalent in postwar societies, forms such as partner violence, gang violence, and homicide (Green 1999; Moser and Mellwaine 2001; Sandoval Girón 2005; Wolseth 2008). Much like Godoy’s point in the case of Guatemala, Wolseth (2008) argues that the insertion of Honduras into the global economy has created economic circumstances that contribute to increasing structural violence in the form of an epidemic of homicides among Honduran youth. He explicitly underscores the similarity between this form of structural violence and the former political violence that occurred in the country:

The disappearance of youths from social programming combines with the more familiar form of disappearance in Latin America and Honduras—the disappearance of the physical body through kidnapping and murder. The coincidence is striking: at a time when public funding for youths—specifically educational funding and job training—is disappearing from budgets, youths are disappearing from social relations through murder. [Wolseth 2008:316]

As I discussed in Chapter I, structural violence and political violence are linked, ebbing and flowing into one another. As these examples illustrate, transitional violence, a term that I use to refer to the forms of violence prevalent in societies transitioning from periods of political repression to more democratic eras, is born out of both political and structural violence *and* contains both political and structural violence. I am not certain that I would argue that my interviews with SES participants indicate that transitional

societies produce new forms of violence, but rather perhaps that political and structural violence becomes even more intertwined in these societies, and that the distinction between them, if one is so inclined to make a distinction, becomes even more blurred.

Violence and Trauma among SES Participants

The stories of the participants involved in *Siempre en Solidaridad* underscore both the connections among these forms of trauma and the difficulty of separating one trauma from another. I interviewed eighteen SES participants. I found that most people had experienced more than one form of trauma and that these traumas frequently overlapped each other. Thirteen traumatic events could be categorized as primarily structural violence (poverty, domestic violence, sexual assault), sixteen incidents as political violence (attacks by the army, attacks by the guerrilla, threats or beating endured because of membership in labor unions or political parties, family members affected by wartime experiences), and six incidents as transitional violence (sexual assault and beating by a gang member, kidnapping, threats, and murder by gangs, children of accused former guerrillas being threatened in a postwar context). Only three individuals focused solely on one category of trauma (political violence). Of these three people, one couple were business owners from Colombia who were targeted by the guerilla after they refused to pay the requested bribe; the man was kidnapped, tied up, a gun was held to his head for hours, and he was repeatedly told that they were going to pull the trigger. Another middle-class man from Perú discussed the constant terror of bombs exploding in his home city of Lima during the height of the conflict involving the *Sendero Luminoso*

(Shining Path). Gender intersects with traumatic experiences: ten of the eighteen people interviewed were women, and they account for a disproportionate amount of the trauma (twenty-one of the thirty-four events). These numbers support Giles and Hyndman's observation that "The body, household, nation, state and economy all represent sites at which violence can be invoked against people in highly gendered ways" (2004b:314). Consequently, women commonly experience torture, rape, abduction, forced prostitution, and domestic violence during periods of conflict (Kuooh et al. 1992), and women are an extremely vulnerable segment of the refugee population (Coe 1992). Additionally, as Cockburn (2004) makes clear, structural violence is also gendered and women are more likely to suffer the structural violence created by a combination of poverty and sexism as well.

I provide these categories to illustrate the contours of trauma suffered by some of the participants at SES, but as I suggest above, I believe these categories need to be problematized. Participants mentioned structural violence almost as much as political violence in their narratives—something that in and of itself may be surprising at a center purportedly treating only survivors of political violence. Even more obvious in many of the narratives, however, was the extent to which many participants emphasized structural violence or transitional violence almost to the exclusion of political violence, and the ways that different forms of violence blended together.

My interviews with Lidia, a forty year old indigenous Kanjobal Guatemalan woman, illustrate these points. When I asked her to tell me her life story, she began with her troubles in the US. She told me about her concerns regarding her legal status and

about being abandoned by the father of her child when he found out she was pregnant.

When we circled back to her life in Guatemala in her second interview, she told me about enduring poverty as a child:

And when I was seven years old, I remember we began to suffer from hunger ... we had never had meat to eat, but now we didn't even have tortillas because there was a freeze and the crops were ruined. Some people who had corn stored gave us food so that we didn't starve, and then a donation arrived and we had one tortilla to eat each day. Sometimes my mom went into the mountains to look for food, so we could have some kind of vegetable to eat.

However, years of hunger did not compare to what she began to suffer after she was pressured by her parents to get married at age fourteen:

When I got together with this man is when I began to suffer the worst misery. I suffered and suffered and suffered until I left him. Fourteen years I suffered. It was better to put up with hunger, endure the poverty I experienced with my parents ... because it's better to eat only one tortilla in peace than have plenty of food to eat, but live in terror. He threatened me with a gun, with a machete ... he made me bleed, he hit me.

After a final incident when her husband beat her so badly that Lidia almost died, she fled to a larger city and made plans to come to the United States. After explaining to me how SES had helped her on multiple levels and her appreciation for the role of the organization in her life, she told me that there was nothing else to say and she was done telling her story. I told her that I had one more question and asked her if she had been at all affected by the war in Guatemala. "Oh, yes!" she replied, and launched into a story of seeing her mother grabbed by the army and taken away (she eventually returned and did not become one of the many disappeared in Guatemala), of being on a bus that was almost set on fire as a young mother taking her child to the doctor, of her village being

bombed by airplanes, and of being raped by soldiers who lived in an army barracks near her house:

“When I wanted to get my corn ground, I had to walk by the barracks every day. I hated it. I was embarrassed and afraid. But finally, I fell into the hands of the soldiers there. What happened, happened. A month after what they did to me, the barracks were bombed and some of the soldiers died. And at that time I thought, “How nice that they died!” Because I didn’t like what they did to me, I didn’t like it, and I thought, “No, I am not going to forgive this.”

Violence runs through Lidia’s narrative: the structural uncertainty of her legal status in the US, the poverty she experienced as a child, the domestic violence she experienced a young woman, and the political violence she experienced as a child and an adult. These forms of violence also feed into each other: poverty was the reason she was pressured to marry, being indigenous and poor certainly increased one’s chances of being affected by political violence in Guatemala’s genocidal conflict where over ninety percent of the victims were Mayan, domestic violence was the reason she came to the US without papers. Finally, the structural violence of poverty and domestic violence is clearly more important than the political violence that she discusses only after I ask her about it and for much less time than she takes to discuss incidences of structural violence.² In fact, after sharing her story of political violence, she explicitly told me that “even with everything that happened [during the war], I was with my ex-husband when the worst things in my life happened to me.”

Another young indigenous Guatemalan woman told me that her childhood was hard because they were so poor (“We didn’t have electricity. We didn’t have water.”) that

² Lidia has shared her story of political violence openly in other public contexts, so I feel fairly certain that she was not avoiding telling this story because it was too painful or because she did not trust me.

she only went to school for three years before her family needed her to work in the fields. Worse than this, however, was the abuse she witnessed her mother endure and the violence she herself suffered at the hands of her father. She ran away from home at the age of thirteen even though she had never been outside of her own little town and even though she did not speak a word of Spanish. She went on to become a domestic worker in a city nearby, eventually moved to Guatemala City, saved her money, and made the trip to the US in 2005. She told me that she never wanted to return to her house and that her dad always told his children “if you leave this house, never return, because if you come back, I’ll kill you.”

Another Guatemalan woman never attended school because her family was so poor. She remembers traveling two days each way to the coffee plantations with her mother as a young girl, where she slept on a table with no mattress or covers. She got her first pair of shoes at age nine. She and her husband both remember the war in Guatemala, telling me that nearby villagers were massacred and that the army dumped corpses in the bathroom in their school building. Both of their fathers were disappeared when they were young and accused of being members of the guerrilla. They both recalled a childhood filled “with fear, with terror.” They only came to the US recently, however, when their families were threatened and harassed because of their long-dead fathers’ supposed association with the guerrillas. Again, there is an overlap of structural, political, and transitional violence in their stories.

Yet another Guatemalan woman’s father was killed when she was young, and when her mom died of cancer soon after, she and her siblings became orphans who had to

beg in the street for food. Three of these siblings later died as a result of their involvement in gangs in postwar Guatemala. When I told her I would give her a recording of her life story to keep, she asked me why she would want such a painful reminder. She told me that she arrived at the program in a state of fleeing from her past, and that she had such a huge hole in her heart, she was uncertain whether she should keep running or just die so that everything would stop.

Estela, the Guatemala woman who was gang raped as she was crossing Mexico to get to the US (see Chapter II), immediately framed her life as a struggle, beginning it by saying “My life has been very difficult. I began to work when I was eleven years old because my parents were very poor.” When asked about memories of his home country, Gabriel, a thirty year old Peruvian man, told me that ninety-five percent of his memories of Perú had nothing good about them. And Jesús, an El Salvadoran man in his thirties, circled back and forth in a narrative of pain caused by the death of his mother at a young age and his subsequent involvement in crime and the military because, as he told me repeatedly, no one cared about him:

I worked and worked, day and night, without shoes, without many clothes. Everyone called me an orphan. It’s really hard when no one cares about you. Sometimes I ate, and sometimes I didn’t. I started running around with older people. I started smoking and drinking and I learned to shoot a gun. I tried to get help from my brother, but he didn’t care about me. So I joined the army. One needs love and understanding. I didn’t have the love of my parents, I didn’t get advice. There was no one to tell me, “Son, don’t do this.” It’s not a source of pride to talk about what I’ve done. It makes me sad, but like I told you, that’s how it is in my country. If you don’t defend yourself, they kill you. You have to do things in order to survive, and that’s what I did, survive.

Domingo, a sixty-year old middle-class bureaucrat who worked at the US Embassy in El Salvador, lived through the entire conflict in his country: he was a member of a persecuted political party, he attended the funeral of Archbishop Romero after his assassination by government forces, and he lived in a climate of constant fear and uncertainty during the war. His class and profession, however, offered him some insulation from the conflict raging all around him, and this is apparent in the detached, detailed, and intellectualized manner in which he explained the systems of inequality and the war in El Salvador to me. The only change of tone, pace, and emotion in our four hours of interviewing occurred when he abruptly brought up the death of his son who was kidnapped and killed by gangs in postwar El Salvador—an incident of transitional society violence. I share some of the details of these stories to make the people behind the categories of trauma real, to illustrate how categories of violence are often connected. Because narrative reflects what the person feels is meaningful to tell, structural and transitional violence are a large part of the picture of trauma for participants at SES.

The issue of different forms of trauma adds another layer of complexity to a program that already deals with participants who differ from each other on the basis of age, class, culture, religion, gender, nationality, and legal status. Because the wars in Latin America “officially” ended some time ago, many of the new clients accepted by *El Centro de la Solidaridad* during the second era of its existence and, in increasing numbers by *Siempre en Solidaridad*, suffer from transitional and structural violence that is undoubtedly connected to, but different from, more narrow definitions of political

violence and torture used by funding agencies such as the United Nations. How does the center respond to these realities?

In the attempt to resolve this issue, the center seems to have adopted what I refer to as a “double discourse” both in how they represent their work to the public and in how they respond to the participants at the clinic. Officially, in the public arena, the center promotes itself *only* in terms of a treatment program for survivors of torture and political violence. At public events that I attended, including an International Human Rights Day event organized by the center, two conferences, and informational tables at various events to inform the public about the center, there was *no* discussion about any form of violence outside of political violence and no mention of other types of trauma survivors. In the pamphlets created and distributed by the center, the program is described as a “bilingual and bicultural mental health program for survivors of *political torture and trauma* [emphasis mine] from Central and South America.” However, unofficially, the staff clearly recognizes the links between structural and political violence in general, and between war and postwar violence in particular; every single SES staff member made some comment acknowledging overlapping forms of violence in the traumas their clients had suffered.

Often these forms of violence were also intertwined and overlapping in their narratives. Elena, the young Salvadoran staff member, told me that “the past is reflected in the present” and went on to recount a history of poverty and inequality in her country that has existed “since the beginning of the nation when the same four or five families became

the owners of all of the land.” She also sees the history of the war reflected in social problems today:

The history of the war ... continues affecting the country ... in part because of the deaths that happened during the war. Many families were left without parents or ... wives lost their husbands, or mines disabled people. So you see [the past] reflected in that way. And also in the sense that crime has increased ... because of soldiers and guerillas who all they know how to do is take up arms.... Because they were involved in the war, they say that many of them are now organized as bands of criminals. So in this sense too, one sees the past of the war reflected.

Lucy, one of the young white staff members, explained to me that older clients were often directly involved in political violence as a result of living through conflicts, whereas younger clients were more likely to be suffering indirectly (historical trauma) or to be affected by transitional forms of violence (gangs and robberies) and structural trauma (economically, “people can’t make it”):

Then the younger generation that we see coming in, their parents were involved in [political violence], and they [the children] remember some things about it, but they didn’t necessarily suffer the direct political violence. But they definitely suffered violence, or institutional violence, or maybe they suffered ... gang violence. There are still those kinds of problems—even you know with gang violence—obviously like the same issues [as with political violence] of being threatened and having to flee the country. But even more than that, I mean the natural pressures, economically, ... people ... just, they really can’t make it in their home country and they are afraid for the safety of their families just because of robberies, because of the way that the violence has just been naturalized there.

Staff members also discussed gendered violence in relation to political violence:

Lucy: Domestic violence is almost a given for the women we see....

Tami: And you would relate that to political violence?

Lucy: I do. I mean, personally, I would make that connection. I have seen quite a few women in the last year who have had partners who were either part of the guerilla ... or they were a part of the *ejercito* [military] and they suffered greatly because of that. Because ... their partners that were involved in that violence learned [violence]. They were, you know, like cutting them [the women] with

machetes ... they had lots of arms and weapons and were just violent people and all of that was taken out on the women, so definitely political.

I think there were two or three women that we had that were there for domestic violence but the domestic violence was tied into the fact that their husbands were ... severely traumatized from the war and therefore became oppressors in their actions in the home. And so therefore we could provide services for them because our grant was specific to political violence ... it's hard to differentiate the two.
[Amy]

Graciela told me that she became aware of the connection between militarization and domestic violence when she began doing family therapy as a psychology student in Chile:

And during those years in the university, we worked with a program that assisted victims of political violence and victims of family violence.... But we realized that underlying the family violence, people were talking about a relative that had been disappeared, or that someone had been detained, or someone had been tortured. So they were very, very related at that time—family violence and political violence.

Lucy told me that every female client she had talked with on any extensive basis shared a history that included sexual assault. Dr. Redmann also confirmed that several female clients had been assaulted by family members, others had been raped during wartime, and still another woman was raped while crossing Mexico on her journey to the United States.

The staff is also aware that their clients are often the victims of multiple and overlapping traumas, which Dr. Kline referred to as a “cascade of violence.” Several staff members shared the belief that multiple and diverse forms of trauma, in turn, mean that the clinic needs to emphasize constancy, consistency, and cultural sensitivity:

With increasing frequency, people arrive here with a combination of traumas. In addition to living through political violence, sometimes they've lived through

childhood abuse ... and then later some of them also live through domestic violence. It's like a combination of traumas, and this makes them more vulnerable, so they need continuity and constancy over time to heal.

[Graciela]

We provide continuity, we're here forever—that's the goal, so it's a safe base to live from. We're culturally sensitive because we have languages and people from their culture. We accept them and their gifts.... I think those nonspecific things of safety, continuity, [and] listening way override any specific technique. [Dr. Kline]

Well, I think that we *do* provide a touchstone for the participants, and a consistent one. [Dr. Redmann]

In addition to a variety of traumas, SES participants also arrive at the clinic with a variety of legal statuses. In fact, Dr. Redmann told me that he believes that most SES clients initially come to the clinic in the search for help with their legal status: "It's a *major* issue.... That's oftentimes for some people the reason they come, more so than whatever symptoms they may be having, because they hear that we can help them or link them to help around their immigration status." As the staff explained it to me, the undocumented status produces an additional form of trauma among their clients in several ways. Lack of papers produces a considerable amount of anxiety that can replicate the sensation of fear that clients experienced while living in their home countries. Lucy told me that clients explicitly connect the feeling associated with their undocumented status to how they felt living in a war zone:

Lucy: They say that it feels like when they were ... in Guatemala or when they were going through this trauma before because that's the kind of fear that they have. They are *so* afraid of running into an immigration official that they have nightmares about it ... and ... the kind of violence that's involved with it: separation from their family members, being sent back into another violent situation....

Tami: Do they talk about feeling watched here?

Lucy: [They talk about] being afraid to go to the store, being afraid to be on the street, being afraid to get a job in a certain place.

Similarly, Amy commented,

They never feel safe ... and being safe and recreating this safe haven for themselves ... is *huge* in their healing process. They have escaped [the immediate] harm [present in their home countries]. But, they are always on the run [here], because they can't really get a good job. They can't ... get an apartment in the best way possible. And they... can't drive anymore. They don't feel safe in anyway whatsoever. And, it's really not fair ... because the United States is not ... taking responsibility for [the] harm [they caused in Latin American countries], so therefore they [SES clients] don't get refugee status and they don't get asylum.... They're not getting taken care of at all ... when the government is refusing to take responsibility and therefore the people who were originally innocent in the first place are suffering even more.

Many trauma practitioners discuss the link between trauma and identity; traumatic events are associated with a break in a person's ability to narrate their life story and thus create a coherent sense of his or her identity (Ochs and Capps 1996). Graciela told me that this is made even more difficult when people must leave their countries and try to build a new life in a place that is foreign to them, and that all of this is *further* compounded when the individual does not have a legal status in the new country. As clients told me, an undocumented status often makes them feel like they have no place here and forces them to remain separated from loved ones in their home countries—such as young children or aging parents. A painful feeling of being in limbo is created—where clients express agonizing indecision over whether they should return to the violence and unemployment of their countries in order to be reunited with family members, or try to make a life here when they might lose it at any moment. Graciela told me, “[Legal status] affects them so much because they can't define their lives ... if they want to buy a car or a house, if they

want to go to school, if they want to create a feeling of stability in their lives here, they can't. They don't know if they will be here permanently or not. They're waiting.”

The fact that the clinic recognizes that legal status affects the mental health and general well-being of their clients also shapes their delivery of services. The clinic connects their clients to a legal agency specializing in asylum cases and uses a grant they obtained from the UN to pay for these services for their clients. The documentation of the client's story and their symptoms are given to the lawyers, and one of the female staff members accompanies the participant through all stages of the legal process: “I work with them, too, during the legal process, to show them that it is not easy and that the reactions that they have are typical for people dealing with the kind of anxiety and anguish produced by the fact that they feel like their lives are on a pendulum that could swing either way.”

The provision of these services is undoubtedly a key component of what SES does and critical to the healing of their clients. When I asked individuals what they would most like to immediately change about their lives if they could change anything at all, everyone who was undocumented replied immediately that they would most like to be documented. Having a legal status was viewed as the key to opening the door to a better job, the opportunity to study, and the ability to reunite with family members living in other countries. Legal status also means the ability to claim a new identity and one's rights. Lidia, the indigenous Guatemalan woman who survived the war and the abuse of her husband, found out that she had finally received political asylum right before our second interview. As she exclaimed to me, “when I got a hold of that paper, I felt like I

was now an American (laughing). I feel like I have this happiness in my heart, and I said, ‘now I have rights!’” Graciela also affirmed that the most important thing for most clients is to have a legal status, telling me that immigration should be a “basic right” for all people. Additionally, she said, legal status is healing: “It’s therapeutic when another country recognizes that you were a victim, and that this is a social crime, a crime against humanity when this happens. So then the person feels like they have rights.”

Healing and the Double Discourse

The clinic must respond to the shifting realities within the mandates and structures of their funding sources and Western mental health norms and regulations, while also keeping in mind the expectations established when the clinic existed at the casa. Consequently, in addition to the double discourse of the staff in regards to the *representation* of trauma, the staff *response* to trauma also involves a double discourse of “official” treatment and “unofficial” treatment. Unofficial treatment is often discussed as “extra” services, which the interviews and my observations actually reveal to be central and critical to how *Siempre en Solidaridad* contributes to the healing of their Latin American participants.

Most of the staff discuss the (official) psychiatric aspect of the program as the basis, foundation, or center, of clinic services, with the other services organized around this as the “non-traditional” or “additional” part of the program:

Well, it’s very much a kind of medication model at least in its foundation. It centers around psychiatrists and psychiatric assessment and then a treatment plan ... based on that assessment and then utilization of medications... and then what I would see as sort of the non-traditional model is ... that the community that can

be developed around the clinic is tremendously supportive to at least some individuals ... to have a community here when they are so far away from home is so critical to people and to have a kind of a focal point for that community to occur... So the outings that they have are one good example of that, the comfort level that the staff have with people just dropping in and saying hi and being very happy to hear whatever updates there might be from a participant, the Wednesday support group that they've got ... the support it offers and the consistency it offers, I think, is tremendously important. [Dr. Redmann]

Therapy appointments and the prescription of medications are services the male psychiatrists provide. The doctors come to the clinic one or two days a month and see each client for about fifteen minutes. Clients are asked to schedule their next appointment in one month or two months, depending on the perceived severity of their issues. All staff members assured me that taking medications was optional, although the doctors spent more time in the interviews addressing why medications are important and how they try to explain the benefits of medications to patients who are hesitant to accept them. Dr. Redmann explained to me:

many of them say ... that they don't like to take medicine, they'd prefer not to and only if they feel they absolutely have to take it will they take it.... It's not a part of their culture at all, *less* so than it is the culture here.... So I think they have not been exposed to taking medications ... particularly when you're not overtly ill.... And I think it's only when relief from a problem is linked to the medicine that they think "oh, well maybe it's worth a try," so I try to specifically tie it to trouble sleeping, for example, or nightmares, and those are two of the most troubling problems individuals deal with or complain of, so if they can take a medicine and it actually helps with that then they'll probably keep taking it, at least for awhile.

Two female members of the staff told me that although they were initially skeptical about medicating clients, they changed their minds after seeing firsthand the improvements in several participants who began taking medications.

My point here, however, is not to argue about the appropriateness of the use of the Western psychiatric medical model at SES, although many critiques do exist in the literature of this model (Bloom 1997; Burstow 2003; Kleinman et al. 1997; Ong 2003).³ My point is that as the staff struggle to fill in the gaps created by the differences among funding mandates, WSSU missions, the history of the clinic as part of *El Centro*, the multiple forms of client trauma, and the undocumented status of many participants, they prioritize the importance of the medical model. Their interviews and my observations, however, reveal that the “extra” services are just as important, if not more so. It is the *daily* kind of help and support—the safety net that SES provides—that plays a critical role in healing SES clients.

When I asked the female staff who provide the bulk of these daily services to describe a typical day or to tell me all of the services they had provided, the list included the following: helping clients understand and pay bills, referring and arranging

³ As an example of some of these critiques, Sandra Bloom argues that before the development of trauma theory, psychiatry had trouble connecting the microcosm of the patient to the larger social sphere in any significantly relevant way: "Psychiatric disorder was constituted of basic 'otherness' that bore little of any causal relationship to the outside world. Trauma theory has taught us that this perception is nonsense, that most psychiatric disorder is the culmination of 'normal reactions to abnormal situations,' situations largely created by the failure of our social systems..." (1997:11). Ong (2003:92), in reference to the treatment of Southeast Asian refugees in California, points out that "Democratic modernity dominates through the mundane administration and surveillance of individual bodies and the social body, adjusting them to normalizing values and hierarchies. Among the schemes of knowledge/power that regulate individual and social bodies, medicine is the prime mover, defining and promoting concepts, categories, and authoritative pronouncements on hygiene, health, sexuality, life and death." Kleinman and Kleinman (1997:10) note that trauma stories serve as currency, "the symbolic capital, with which they enter exchanges for physical resources and achieve the status of political refugee. Increasingly, those complicated stories, based in real events, yet reduced to a core cultural image of *victimization* (a postmodern hallmark), are used by health professionals to rewrite social experience in medical terms. The person who undergoes torture first becomes a victim, an image of innocence and passivity, someone who cannot represent himself, who must be represented. Then he becomes a patient, specifically a patient with a quintessential fin de siècle disorder (i.e., posttraumatic stress disorder)."

appointments to multiple agencies (medical appointments, community college classes, parenting classes), translating letters from children's schools, helping with tax forms, translating between clients and bosses, landlords or doctors, picking up food boxes to distribute to clients, arranging social activities and outings, making photocopies for clients, leading the Wednesday clinic groups, assisting the client throughout the process of applying for asylum—including accompanying them during the process, and being accessible at any time for drop-in appointments with clients. The detail and time devoted to discussing these activities makes clear that this is a very large part of what the clinic does. Also, the women staffers are always at the office, while the male psychiatrists only come to the office on clinic days. Despite this, the structures regulating the center cause the very same individuals providing this work—the female staff—to refer to this work as basically on the margins of what their focus is supposed to be:

one of our difficult things is [that] we want to focus on mental health, as [SES] being a mental health program, mental health services, but your recovery or your ability to feel safe and to have your basic needs met [is also important]. I mean that's why we go to the food bank every two weeks ... we have like all these other things going on at the same time.... [getting] people health services, we translate [for clients] ... all of that is just like *extra* work, but it's a lot of what we do. [Lucy]

The feeling of community is something that develops spontaneously, but it is also ... how can I say this, a feature or characteristic that is extra, an extra benefit of our services. And we have to clarify this many times. Many people don't understand that this is an extra benefit, not a service in and of itself. But we explain to them that this is a clinic and the principle objective is to offer mental health services, and that, yes, there are extra activities and benefits like the sense of community, and garden, and the Wednesday group, but these are extra services and benefits for the people who are receiving treatment.... [treatment] is our objective and mission and, well, the requirement of [WSSU]. [Elena]

The discourse used by the staff is mirrored in the participant interviews. As many authors argue, individual interpretations of suffering are heavily influenced by the attitudes and responses of the larger social group (Bloom 1997; Herman 1997). Kleinman (1988:6), in particular, states that illness reflects a broader biopsychosocial framework, “the symbolic network linking body, self, and society.”

Almost all participants refer to the appointments with the doctors and the medications as playing a role in their healing, and this is often mentioned first. For example, one client referred to the medication as “peace in pills.” However, in most of the interviews, more time and detail is devoted to the other services that SES offers. Lidia, whose story I recounted in some detail above, told me that SES helped her find a place to live, food to eat, driving lessons, and the lawyer that helped her win her asylum case: “They helped me a lot ...because all of the time they are thinking of us. I am telling you, it’s really great to have a program that cares about people.” Isabel was caught by the INS some time after she came to the US. She came to SES wanting help with her legal case because, as she told me, her greatest desire in life is to have papers and be able to work and her greatest fear in life is returning to Guatemala.

Another participant told me that she trusted no one outside of SES and would not remain in the area if it were not for the existence of the organization. She felt especially close to Lucy: “She always tried to support me, to motivate me, she made me laugh, and she talked with me about why life was so hard. Every Monday or Tuesday, she was here, always, and she would call me to see if I was going to come. She helped me like a friend.” Bernardo and Adriana, a Guatemalan couple, told me they also felt especially

close to Lucy because whenever they needed something, she would tell them not to worry, that she would help them, even putting aside her own work if necessary. Nicolas and Lorena, the Colombian couple threatened by the FARC, told me that all the services offered by SES had been important to them:

Really, whatever we need, we go there for help. They've helped me with translation and with my homework from the community college. We've had lawyers, medicine, and doctors... we know that whatever problem we might have, they would help us solve it.... They have a lot of interest in people. They ask after one's family ... they keep one's job in mind—if it's good or bad and if you might want to look for another one.... They helped us a lot. I think if SES had not been there, it would have been very, very difficult. We feel very protected, even though we have asylum and we're not here illegally. Without them, we would feel lonely, but with them I feel like whatever thing happens to me, I could call them and they will help, because they are like parents. [SES] is a community, a very special family. In this moment, it's everything to us.

How can we reconcile the existence of these two discourses? The clinic's association with WSSU and, by extension, with their regulations and funding stipulations clearly necessitate the presence of the official discourse regarding the use of psychiatry, medication, and survivors of (only) political violence. Members of the staff also genuinely feel that psychiatric approaches help in the healing of their patients. Additionally, references to “survivors of torture” clearly carry more moral weight in the public realm than the treatment of survivors of structural or transitional violence would. But in recognition of the realities of their patients, staff members create and act upon a second discourse—the unofficial services—that provide the daily support and assistance that serves as a safety net for people dealing with multiple traumas and the added vulnerability of an undocumented status.

Scholarship in the field of trauma supports that what the staff do “unofficially” is an essential component of healing trauma survivors in exile. Jaronson notes that social service needs are critical in Northern settings and that victims almost always need help with housing, finances, and asylum applications: “Unless the survivor has some of these needs met, the healing cannot proceed effectively” (1998:27). Allodi (1998) states that living in exile makes complications (not being able to get legal status, job problems, family problems, and financial problems) to the healing process more likely. In the Wednesday group meetings, every one of the issues mentioned by Allodi was raised by participants: a Guatemalan man working at a slaughterhouse constantly suffered injuries but was afraid to change jobs because he was undocumented; several adults were separated from their children who were still living in their home countries and they worried about them and felt a constant sense of guilt; parents in the US worried about the influence of US society on their children here; adults worried about the elderly parents left behind and felt a sense of helplessness because they could not return to visit them because of their documentation status; two women were physically and emotionally abused by their partners; people asked for advice about how to avoid being stopped by the police while they were driving. Several clients and staff mentioned to me that certain events also triggered relapses or presented challenges to healing, such as the war in Iraq, the shootings at Virginia Tech, and natural disasters in their home countries. These examples make clear that SES clients are dealing with multiple stressors and that the clinic provides one of the only places that they can turn to for guidance and support.

I argue that these extra services actually serve as the core of the clinic's claim to cultural awareness and sensitivity. Additionally, I want to underscore that it is the female staff members—who are paid the least and work the most at the clinic—who add the culturally aware component to WSSU's "bilingual, bicultural" psychiatric treatment program. The female staff are the only ones who speak Spanish, so they serve as interpreters between the clients and the doctors. The female staff members are present at the clinic in almost every way and every day to meet the needs of their clients in whatever way possible. Consequently, the clients come to envision these staff members as family, an assertion supported by the Colombian couple when they stated that staff members were like "our parents." Implied in the interview responses about what SES services were important to individual clients was the sense that only family cares enough about someone to be there no matter what, in every way possible, so the female staff are clearly acting as family members would. Because almost every participant told me that they value family more than anything else, the approach of female staffers resonates with one of the most important values of their clients, which makes this clinic culturally sensitive in a critical way.

Hegemonies and Counter-Hegemonies at SES

As Chester (1992) indicates, an understanding of cultural context can provide vital healing strategies. But perhaps more importantly, the clinic in general and the female staff members in particular, provide a buffer between their clients and their new society. They orient them to the norms of these societies while also questioning or

critiquing the fairness of these norms. They help them navigate the search for jobs, housing, health, legal, and education services. In her research on Southeast Asian refugees, Ong states, “For disadvantaged newcomers, citizenship is not a matter of acquiring multiple opportunities or identifying business opportunities, real estate deals, or top universities in global cities, but rather a matter of figuring out the rules for coping, navigating, and surviving the streets and other spaces of the American city” (2003:xiv).

As they act as aware and critical guides helping their clients to navigate US society, I argue that in many ways, SES serves as a counter-hegemonic social field for one of the most vulnerable groups in US society: traumatized, undocumented refugees. Staff members, some of them also Latino and also survivors of trauma, have clearly not internalized many of the hegemonic discourses of the US nation state. So, while they actively assist and help clients adjust to realities here, they also sometimes subtly and sometimes directly critique mainstream discourses regarding immigrants, worker rights, and gendered issues, to name but a few examples. As people wait for their doctor appointments or when they come to the Wednesday group meetings, they can freely discuss their concerns and ask questions about such topics as the police, political parties, and recent events in their home countries and in the US. Graciela described SES as “therapeutic,” not only in the clinical sense, but also as a social space where “participants and professionals ... recognize that there is violence, and that people are suffering the consequences of this.... I think that we also recognize that a united group can heal themselves, can create a therapeutic world, a better world.”

Through the provision of this context, SES demonstrates that not all citizenship-making processes reflect the disciplinary discourses of the state (Aretxaga 2003). Some challenge these discourses or at least make the intended recipients aware of them, thus lessening the likelihood that these discourses are unconsciously internalized. Thus, SES seems to provide an interesting contrast to the service providers in Ong's (2003) study. Southeast Asians who are given official refugee status are able to access the assistance of governmental agencies. Because of this, Ong argues that "In official and public domains—refugee camps, the welfare state, the court system, community hospitals, local churches, and civic organizations—refugees become subjects of norms, rules, and systems, but they also modify practices and agendas while nimbly deflecting control and interjecting critique" (2003:xvii). Ong identifies public arenas and agencies as sources of regulating discourses which refugees then occasionally modify and subvert. In some ways, undocumented Latin American refugees escape many of these disciplinary attempts because they are undocumented, and thus not openly able to access agencies and organizations that serve as "middling modernizers": the "experts who deploy knowledge/power in service of the mundane chores of producing and instilling the ubiquitous and invisible norms and forms of society" (Ong 2003:16). While the invisibility of undocumented refugees means that they have fewer safety nets and a great deal of fear about being apprehended, it also means that they are not subjected so directly to the disciplinary norms of US society.

There are also some problematic aspects to the existence of this double discourse. First, among clients and the public, the official discourse reinforces notions about what

kinds of trauma matter and the medicalization of a larger social issue. How the center frames trauma affects client interpretations of trauma and the existence of a double discourse sends mixed messages to SES participants. The internalization of these contradictory messages are revealed in interviews where clients mention the doctors and medications first, but then give more time and attention to the female staff and the “secondary services” that the clinic provides. Kleinman and Kleinman (1997:10) discuss how survivors of trauma can internalize the medicalization of their status:

Indeed, to receive even modest public assistance it may be necessary to undergo a sequential transformation from one who experiences, who suffers political terror to one who is a victim of political violence to one who is sick, who has a disease. Because of practical political and financial importance of such transformations, the violated themselves may want, and even seek out, the re-imaging of their condition so that they can obtain the moral as well as the financial benefits of being ill. We need to ask, however, what kind of cultural process underpins the transformation of a victim of violence to someone with a pathology? What does it mean to give those traumatized by political violence the social status of a patient? And in what way does the imagery of victimization as the pathology of an individual alter the experience—collective as well as individual—so that its lived meaning as moral and political memory, perhaps even resistance, is lost and is replaced by ‘guilt,’ ‘paranoia,’ and a ‘failure to cope.’”

The medicalization of their experiences is also reflected in the way many of them express how they were affected by violence in terms of medical, particularly PTSD, symptoms: nightmares, intrusive thoughts, and trouble sleeping. The medicalization of suffering may also contribute to the lack of *political* and *social* analyses of the causes and effects of political, structural, and transitional violence that is reflected in the inability of most participants to articulate the causes of their suffering, something I discuss in more detail in the next section about memory and exile.

Second, a fine line exists between providing a much needed safety net for SES participants and creating a feeling of dependency where clients begin to rely on the staff to meet their every need. Some clients, like the ones in the interview discussed earlier, can interpret the help of the staff to mean that they, the clients, are the children and the staff are the parents. The staff can also begin to feel obligated to respond to every request. For example, Lucy told me “Last summer this man died who wasn’t a participant, but he was a friend of ... a couple that I know really well, and I helped deal with all of the arrangements of his death and having his body sent back to Guatemala.... You know, those are things ... you get yourself into sometimes, even though you don’t really want to keep doing it.” When I commented to Amy that I was having a hard time finding anything the staff did not do for the participants, she replied, “Oh yeah, we did it all.”

The reliance on staff for help can also create an obstacle to the more equal dynamic of participants relying on each other for advice and support, which would in turn seem to foster a stronger sense of community. Every staff member espouses the *ideal* that one of the most important functions of SES is to serve as a context for the creation of a community where participants serve as positive examples for other participants. As Graciela explained

[The clinic] offers the space for them to tell their stories, but also to talk about the dreams that they have, their goals, to remember the past and say, “I live with what happened to me, but I also have goals. And the other participants show me that I can achieve those goals—that I can learn how to drive or learn English—because they have already done those things.

Similarly, Lucy said that one of the goals of the program is “to not only help people, but have the participants ... come back and be active themselves and help people out ... like

a circular process for them to be helping new people coming in ... because I think that's where the real help comes from, is from the people that have survived." Finally, Estela told me that community is created among the participants because "people have lived through situations that are more or less similar. Every case is different, but they at least come from similar places ... and connections are easily made."

However, in contrast to these assertions, most participants told me that they rarely interact with other clients, only coming to the clinic for their doctor appointments or to talk with staff members. The *reality*, then, is that client interviews reveal a heavy reliance on staff members as inspirational examples and as the people that participants *most* trusted at SES. One client told me she only liked to speak individually with the staff and not in a group setting because "It's too hard. There are some people that understand, but others who might make jokes, and I wouldn't like that." Another client who has US residency told me that "people without papers are more fearful.... They don't speak publicly. For example, when they need help from the clinic, they prefer to speak privately with [Lucy] or [Estela]." The Colombian couple gave me detailed examples of how Dr. Kline, Graciela, and Lucy had each assisted them, but when I asked them about relationships with other participants, they told me they had "very few" friendships with other clients. The reasons they cited for this included a lack of time to come to group events, a lack of desire to speak in groups on the part of the husband because of the torture he had experienced, and the opinion that country people and Colombian people were very different and did not have much to share:

people from the country ... their customs are very different. And we, we're from Colombia, and everybody has the same way of being who is from Colombia. Their customs and ways of being are very distinct from people who are from the city. So when we see each other, we say hello, but we're not really friends. They're very different cultures, not that one is better than the other, but they're different.

While the staff wants to believe that participants are creating community at SES, client dependence on individual staff members may actually be hindering the development of community.

Third, when staff members emphasize similarities among their clients—such as speaking Spanish, coming from Latin American countries, and surviving traumatic experiences—they overlook the differences that may provide obstacles to the development of a stronger sense of community. Graciela stressed these similarities when she told me

All of our clients speak Spanish, maybe not as a first language, but because they can all speak it, language serves as a point of connection. And they have all lived through an experience of trauma and violence. They are all new immigrants in this country, and they all struggle to adapt and establish stability here. They all have to ... figure out how the system works here. Those are all the things that unite them, so they can talk about these and get feedback and support from each other.

The emphasis on similarity as opposed to the surfacing of differences among clients repeats the pattern established during the second era of *El Centro*. When asked, staff can easily articulate client differences based on religion, class, gender, education, skin color, culture, and legal status—differences that clients themselves are clearly aware of as indicated by their interview comments. But these differences were not incorporated into any dialogue with participants in any group setting that I witnessed. This may lead to the

lack of safety expressed by some clients when they mention that they do not discuss their pasts with other clients because they are afraid that other clients will not understand, will gossip about them, or will make fun of them. Ochs and Capps (1996) argue that although the adherence to a dominant narrative can be community-building, it can also lead to oversimplification, stagnation, and the silencing of alternative narratives. Staff comments about the frustration, at times, with participation at the clinic in general and with the association formed by several of the participants in particular, seem to indicate that many SES clients exist on the margins of the center. The silencing of difference may be one reason for this.

Fourth, the double discourse repeats gender hierarchies in problematic ways because it is primarily the poorly paid female staff that are performing a great deal of the labor needed to fill in the gaps between funding specifications and trauma realities and between recreating the history and feel of the casa while in a more clinical space and with a more clinical mandate. In essence, they provide the bulk of the services that allow SES to refer to itself as a bilingual, bicultural treatment program while they are paid about fifteen dollars an hour to do so. When I asked Graciela to explain the difference to me between an appointment with the doctor and an appointment with her, she replied:

I think the reason for the doctor's appointment is that this is a psychiatric program that depends on the use of medicine ... and we have a grant that we get because of our association with a psychiatric program. And [the doctors] diagnose the depression or PTSD—whatever symptoms there are. And they evaluate if they [the clients] need medicine or changes to their medicine. Now with me, the difference is ... when people come, we dedicate more time to their emotional lives, like what is happening with them here [in the US]. And also, because we are communicating in the same language, Spanish, I think it's a little different. And I

think the two [approaches] complement each other—the medical approach that the doctor offers and then what I offer them.

As they struggle to provide a daily safety net for each client in need and to serve as a buffer between their clients and the antagonism of the larger society, it comes as no surprise that these women often feel unsupported, overworked, and burdened with what seems like an impossible amount of needs waiting to be met:

[we felt] a lack of support.... [WSSU] never really understood how much we wanted to give to those people. How much they deserved and how much we gave. And we were just exhausted.... There was never enough time ... sometimes you were lucky to get breaks for lunches. It was common for me to get paid for twenty hours of work and, you know, work forty. [Amy]

what I remember at the house [*El Centro*] was ... there was a volunteer coordinator, there was a program coordinator ... there were a few different staff members that were there pretty solidly. There was a director and *then* there was the mental health program. And now it's like we want all of these things, but there's only two of us working ... there's not as many resources, there's not as many community members that are involved with it. And I think both [Estela] and I try to give everyone a fair amount of time when they come and talk ... I usually just let people go, I don't cut them off ... like "oh I have to go now, I have to go eat lunch now" or something. I get frustrated with the lack of support for [Estela] and I. [Lucy]

Sometimes I feel super content, when there is a successful case, when someone receives asylum, I feel relieved. Other times I feel very stressed ... I see a *lot* of need. And this makes me feel stressed and impotent that I can't help in certain cases. I feel ... sadness and frustration and disillusionment when I see that there is so much necessity. So there are a lot of emotions, and sometimes it's really hard. And how this can make a person exhausted! I feel like I get tired so quickly.
[Estela]

I think we do what we can, and if we could do more, we would. There are very few resources for the Latino community and the people [who come to SES] also trust us. I would like it if we had more resources—more therapists and social workers and money for the program. And the most difficult thing, emotionally, is to work with survivors of torture when in this country, they are doing things that go against human rights: Guantanamo, the laws in favor of torturing ... that really hurts me. I feel that the work I do can only contribute so much to heal the damage

when there is an entire structure of power that is causing pain, that provokes so much damage. *That* is the most difficult thing. [Graciela]

Ong (2003) discusses the idea of “indentured immigrant servitude” in regards to Southeast Asian Refugees, referring to the notion of the double-bind they experience. As they carry their traumatic memories to a new country, they are subjected to forms of regulation meant to transform them into a “worthy” US citizen. One critical component to becoming a citizen involves a willingness to work in what are overwhelmingly low-paid, low-skill jobs, while at the same time they have very little political or legal access to contest and protect their worth as workers. From this place of vulnerability, the community health clinic serves as a “gateway” to accessing a variety of family and social strategies that can attenuate the acute vulnerability that refugees experience. Because the clients of SES are what I refer to as “undocumented refugees,” I argue that their vulnerability is even greater, an assertion that I see reflected in the burden of trying to meet so many needs as expressed in various ways by the female staff of the clinic.

Memory and the Past in Exile

In addition to the sometimes contradictory messages created by the existence of a double discourse at SES, I also became aware of contradictory messages about the importance of memory and the past at the agency. My initial assumption was that the past—talking about it, understanding it, sharing it—would be critical to healing at *Siempre en Solidaridad*. In contrast, many survivors told me that they do not like to talk about the past, and both survivors and staff indicated that the traumatic past is rarely discussed aside from initial appointments at SES where the client must share their story

of trauma—and that this story must involve political violence as it is usually defined—in order to qualify for clinic services. In this section, I attempt to resolve the contradiction between what I expected and what I found as I examine how the literature on memory plays out on the ground at SES as I explore the relationship between memory and healing at the agency.

My findings are situated within larger debates that exist among practitioners who treat trauma survivors. Different people emphasize different biological, psychological, and social approaches as best for healing (Gerrity et al. 2001; Jaronson and Popkin 1998; Kirmayer et al. 2007). Some believe strongly in medication, some believe most in psychotherapy, and some believe in the importance of connecting torture and trauma to politics, education, and advocacy. Many believe that a combination of these approaches is the most effective. Additionally, although all authors emphasize the importance of safety to any possibility of healing, they disagree about if and how much the past should be discussed, the importance of group processes in healing, and the need to help the survivor understand *why* the trauma occurred (the larger political, economic, and social context). However, many trauma practitioners emphatically insist that the past must be addressed for healing to occur:

Traumatic experience is fragmenting; a healing experience must be defragmenting or integrating. Different aspects of self must learn to live together in harmony. Memory must be recaptured and put into words so it can reenter the stream of time. Speech reconnects us to others but also reconnects us to ourselves. Memory, speech, cognition, and feeling must all be integrated into a narrative whole. Out of integration comes wholeness and out of wholeness comes meaning. Trauma creates existential dilemmas that are overwhelming and incomprehensible. We are a meaning-making animal. To achieve psychological safety, we must make sense out of what has happened to us or our reality is not bearable. [Bloom 1997:117]

The rationale behind this insistence is twofold. First, torture and trauma causes a rupture in the lifeline of an individual, causing a gap in memory and fragmenting of identity. Consequently, narrating the past is a tool that allows the individual to integrate the traumatic experience as only one part of a larger history, reclaim their identity as something other than a victim, and move towards creating a new narrative. Second, torture and trauma injures the individual's ability to trust others, causing a rupture between the individual and the larger society. If the past is shared with others who receive it with compassion and understanding, bonds of trust can be formed which facilitate the reconstruction of social relationships (Bloom 1997; Bryant-Davis 2005; Wilson and Thomas 2004).

Many people working at torture treatment centers in the US agree with this rationale. Patricia Herbst (1992:148) says that because the central tenet of torture is to make a person feel powerless, "Oral history is one of the methodologies used in the Kovler Center [in Chicago] to operationalize the philosophy of empowerment." As individuals tell their stories, they are in charge of the process and rediscover their own importance. Additionally, the therapist can spontaneously address issues that arise throughout the recounting of an individual's history. Finally, the therapist models compassion and acceptance while listening in a group center, and as others follow the lead of therapist, community can be built:

The oral history serves as a denunciation of their suffering and gives some positive meaning to their experiences as well as brings them together into a support network. Previously forgotten memories began to be uncovered as the traumatic experiences were relived within the context of the oral history. Trust,

acceptance, release of anger and the reforming of a supportive network developed through the use of this technique. [Herbst 1992:141]

Chester (1992), who works at the Center for Victims of Torture in Minneapolis, says that because torture tactics are strategic, healing tactics also need to be strategic. She argues that the use of support groups is especially “promising in countries of exile where traditional sources of support are unavailable” (Chester 1992:219). I would add that as participants grapple with the meaning of their pasts, support groups offer the potential to serve as an arena for the construction of collective memory and historical truth, a critical function in countries of exile where this opportunity is otherwise largely unavailable.

Academics⁴ who work in the arenas of war, violence, and trauma also have ideas about transformation and healing. These scholars also argue that an understanding of the past and the creation of a collective memory that incorporates multiple narratives about the past is *critical* for the nation to heal. As Susana Kaiser (2005) demonstrates with her work on “postmemories” (the memories of generations who did not directly experience the dictatorship in Argentina), nations are political constructs—imagined, contested, and shaped through political processes that can unite people into groups sharing identities and memories. The postwar period is a crucial time for the reconstruction of a common history and memory, an essential period for determining what is to be remembered and what is to be forgotten. Similar to trauma practitioner discourse which links the

⁴ Although I am making a distinction between academics and practitioners here, I do realize that they can and do often overlap: practitioners also have scholarly backgrounds and publish in academic journals and many academics do applied work. For my purposes here, I refer to “practitioners” as people who privilege this aspect of their professional identity, i.e. social workers, psychologists, and psychiatrists who work primarily in clinical, social service, and torture treatment center settings. When I refer to “academics,” I refer to people who are more associated with the university setting.

individual interpretation of illness and the possibility for healing with the response of a larger social group, assertions about memory in the academic realm link the individual with the larger society, arguing that collective interpretations influence the meaning one assigns to life events.

Jelin (2003:11) uses the term “social frameworks” to focus our attention “on the group matrix from within which individual recollections and silences are set.” She avoids the more commonly used term “collective memory” because she feels it can too easily be misunderstood as a reified entity that makes the dynamic struggles and contributions of individuals invisible. In short, Jelin’s focus is on the social construction of collective memory as a process incorporating the agency of individual actors and disputes and negotiations over the meaning of the past in various settings. For Jelin (2003), this process involves the notion of “memory work.” She argues that the space of memory is a political site: it can be a site of silence, repression, repetition or it can be a site of transformation. Human beings who actively labor on and with memories of the past are actively involved in the processes of symbolic transformation and the elaboration of meanings of the past. In working through painful memories and recollection, they learn to stop reliving them and acting them out. Holocaust scholar Dominick LaCapra (1999) also contrasts the role of memory as either representing an active “working through” or a passive “acting out” of traumatic experiences. Ochs and Capps discuss the role narrative plays in moving trauma survivors from acting out to working through:

Narrative activity is crucial to recognizing and integrating repressed and alienated selves. Posttraumatic stress disorder, for example, arises when an experience is too devastating to incorporate into one’s life story. Such experiences invade

present lives in the form of somatic sensation or fragmented memories, i.e. flashbacks, but are not narrativized into a coherent sequence of events and reactions associated with a past self....Many therapeutic interventions strive to develop a narrative that articulates the disassociated events and reconciles them with subsequent past, present, and future selves....The struggle for everyone is to cultivate both diversity and coherence among potential and actual selves.

[1996:30]

Testimonial literature constitutes a third genre representing the argument that the past is important and needs to be discussed. Many authors of *testimonios* are from Latin America and their work seems to presume the importance of “speaking truth to power” and developing a different history than the one reflected in master narratives (Warren 1998). Taylor (1997) asserts that *testimonios* represent anti-hegemonic and minority practices that are committed to representing people as agents of their own history. In relation to torture, Taylor (1997) argues that because torture uses the body to send a message to the collective, testimonial literature is a way of writing back to the oppressor, or in other words, taking back one’s power. Partnoy (1986) does not focus on the torture that she endured, but rather uses stories of everyday life in detention at “the little schoolhouse” to humanize victims and make real what was a surreal experience. Tula (1994) and Menchú (1983) represent a collective struggle through an individual experience in a way that is designed to raise awareness in and provoke a response from international audiences. Falla (1994), a Guatemalan priest and anthropologist, serves as a witness who records the stories of others who were slaughtered, thus making memory through the detailed documentation of massacres in Guatemala.

Underlying all three groups (academics, practitioners, and writers of testimony) seems to be the common presumption that if terror silences, healing requires giving voice

and that if trauma isolates, sharing experiences of trauma recreates social ties. If so many people argue that the past needs to be addressed, why is there so much silence about it at *Siempre en Solidaridad*? On a broad level, I argue that the issue of people in exile complicates these assumptions. SES participants who no longer live in their home countries are not part of the collective memory project of rebuilding postwar states. What role does memory serve them? What social frameworks are available to them for a dialogue about the interpretation and meaning of the past? Their stories exist in the gaps among most writing on the topic which involves practitioners or academics writing about populations that still live in their native countries. In contrast, what are the dynamics of memory and healing for those who have left their home countries and are attempting to make a new life elsewhere? What role does *Siempre en Solidaridad* play in this process?

From interviews and my own observations, I noted when and how the past is addressed at SES. As staff told me, the past must be discussed at the initial intake interview for a new client to ensure that they are eligible for the program, and according to staff and participant interviews, the past is usually the focus of the first interviews with the psychiatrist. However, after this, the discussion of the past is spotty. Everyone told me that later doctor appointments tend to focus on client concerns in the present: work concerns, concerns over family in the country of origin, and discussions about physical symptoms that interfere with the client's ability to function. In Wednesday groups, discussion also seemed to focus on the present, usually in relation to the same kinds of topics people told me they talked about with the doctors. In this setting, it was common for other participants to share advice or similar experiences after a concern or story was

voiced. Concerns related to being undocumented were also a frequent topic of discussion and immigrant rights was a theme reinforced by the staff and certain participants. When the past did come up in the Wednesday group, it was usually related to nostalgia—most often a specific longing for loved ones left behind, landscapes, and food. Some staff told me that women, overall, were more willing to talk about the past and some staff told me that where a person was in their healing process affected their willingness to talk about the past.

A great deal of ambivalence—on the part of the staff and the participants—was expressed about the importance of discussing the past, resulting in very little, if any, deep discussion of the past that I witnessed. My observations seemed to be validated when, in the course of interviewing participants, I realized how little they knew about other SES clients. One individual was surprised to learn that another participant that she knew by name and whom I had seen her chatting with on several occasions was from the same area in Guatemala as she was. In these interviews, I did ask clients to speak about the past, but in the context of a life history and making clear that they could choose to discuss or remain silent about any particular event. At the end of the life history, I also asked questions that attempted to get at understandings of the past, the importance of sharing one's past with others, the relationship between the past and healing, and the importance of memory in general, using the following questions: “Why did the problems [or war or violence, depending on how the person themselves referred to it] in your country happen?” “Who was responsible for what happened in your country?” “Does talking

about your experience with other people help you to feel better and why or why not?” “It is better to remember or to forget and why?”

What did I learn? Differences in the ease of constructing a narrative—in any format, not necessarily a linear one—seemed to indicate how the person had engaged with the process of reconstructing their past, of doing “memory work,” as Jelin (2003) refers to it. The overwhelming majority of participants were unwilling or unable to connect their individual experiences to a larger social frame. In other words, they did not connect their experiences to the suffering of others or to the larger national and international contexts that caused their suffering to occur. This occurred both implicitly throughout their narratives and explicitly when I asked them what they thought the reason was that violence occurred. When I asked her why the war began in Guatemala, Lidia told me, “I have no idea, but I think that some of my brothers know. I don’t know ... Because they fought, maybe because of politics, I don’t know.” Another Guatemalan client, Isabel, told me “I don’t know why so many bad things happen. The people they killed were innocent. The soldiers killed them. Everyone says that they just kill people. I don’t know why they kill.” An El Salvadoran woman told me that “some people” said the violence happened

because each group was trying to defend the country and because of that, they created conflict between them, between the two groups. And well, the truth is, I don’t know why they fought. But there were a lot of deaths. My dad was killed by the army, because they were saying ‘this guy is a guerrilla.’ So they came to our house and they killed him.

And the couple from Colombia told me

Colombia is in bad shape because of its politicians. They are to blame, not the guerrilla or the drug traffickers. The drug traffickers and the guerrilla were caused by bad government, understand? If this bad government did not exist, we would not have these kinds of problems. Politicians run things to benefit themselves. They are not leaders for the community, that's for sure. And if one of them tries to act as a real leader, they are disappeared, because it makes it difficult for the others.

Some degree of understanding or analysis is present in each one of the above segments.

But in interviews that lasted about two hours each, these represent the only mention of what the cause of the violence was, and often this occurred only when I specifically asked about the topic. The remainder of the interview is a description of violence, with no analysis attached. This is a stark contrast to interviews I did with three other people—a couple from Oaxaca and an indigenous woman from Guatemala, which I discuss more in detail below. In these interviews, an analysis of violence was integrated throughout the entire interview and was completely intertwined with the description of violence.

Additionally, it was more likely that clients could separate out incidents of political violence and identify them as sources of trauma than it was likely they could identify structural or transitional suffering which saturated every aspect of their life stories. In other words, some people were able to more clearly externalize political violence as something occurring outside of their control, whereas other forms of violence were more often to be internalized and go unquestioned. This seems to echo LaCapra's assertion (1999) that all forms of suffering are not the same. He argues that a feeling of loss is produced by political violence, while a feeling of absence is more common with structural violence. There were also narratives where the forms of violence bled together

to such an extent that they were impossible to separate. The more rare or unexpected a violent event was—such as the case of the middle-class man whose son was killed by a gang after the war in El Salvador was over, or the case of a Oaxacan couple who never expected that the Mexican government would use outright violence and torture in response to recent political protests—the more clearly the traumatic event marked a turning point in the narrative, a point that the speaker was able to mark and name as when their life changed. Conversely, when suffering happened on a frequent basis, narratives were often as chaotic as life was for that person: events were jumbled and often circled back upon themselves. In these interviews, the pain was often a tangible entity in the room—something I could taste and touch because it was so fresh, even when the event being discussed had happened in the distant past. In these interviews, it seemed difficult to dispute that little, if any, healing had been accomplished; that, in fact, what was being expressed was a repetition, rather than a working out, of trauma (Bloom 1997; Jelin 2003; LaCapra 1999).

I also found that different clients had different ways of dealing with their trauma, many of which were framed as methods that helped them to *avoid* thinking about the past, a strategy that may actually inhibit healing. Estela, the young Guatemalan woman whose boyfriend was a gang member, told me, “I don’t think a cure exists. It is always present, you never forget. Like they say in my country, ‘what you do to someone, you can forget easily, but what someone does to you, you never forget.’” For Estela, the past is always present. When I asked how this affects her, she replied, “I have nightmares, I get stressed out a lot, I get very depressed. Those are the reasons that I prefer to work, and

not to think. Because I get sick, I make myself sick when I think a lot about what's happened."

People also talked about medication as a way to escape from nightmares and intrusive thoughts. Lidia told me that she has taken pills for years because "they stop the nightmares so that I sleep better." Medications can certainly play a role in healing, giving rest to people who need it desperately, which may in turn facilitate their ability to confront and work through their traumatic memories. But I wonder about the continued reliance on pills and the accompanying absence of other forms of treatment that may help clients deal with trauma once they feel more stable. Allodi (1998) states that there are different stages of trauma and recovery, and that different healing approaches are warranted at each stage. So, for example, although medications might be helpful in the initial stages to help a client stabilize by getting rest and some control over their emotions, other treatment forms—such as psychotherapy that includes supportive listening, education about trauma causes and effects, and a discussion of the individual's coping and defense mechanisms—should subsequently be used to encourage the person to move forward with their healing (Allodi 1998).

When I specifically asked people if talking about the past or remembering the past helped them to heal, the vast majority replied negatively or qualified that they were only willing to talk about the past with certain people—usually individual staff members or close friends. Nicolás, the man from Colombia who was captured and tortured by members of the FARC said this when I asked him if it was better to remember or forget: "For me, forget. One hundred percent forget. But it's not easy. I don't want to return to

those moments [of torture], *ever*. If someone even says the word ‘Colombia’ to me, automatically I arrive at that moment with the guerrilla. So I want to forget. I have not been able to forget everything, but I try to forget.” Isabel from Guatemala also does not like to think about the past, telling me, “It’s better to forget about the past because it brings you sadness. Every time I think about how I lived in my village, I cry. I don’t like to discuss it. I am already forgetting it. I already don’t remember as much.”

Many clients told me that although they do not prefer to discuss the past, if they can find the right person, talking about the past is often accompanied by a feeling of relief or release, indicated by the frequent use of the term “*desahogar*” and a reference to trauma as a weight or burden that one carries inside:

There are many things that one wishes one could forget, but it is impossible. It is always inside you. But when you speak, you get it out, and you feel a lot better. I spoke with the doctor and I told him about things and I felt better once I let it out (*me siento bien al desahogarme*). Sometimes it feels like a weight that one carries inside, but there is no one to talk to because sometimes people listen and then they run around talking about you. Then it is better to just keep it in and that’s what I’ve done before, and it made me feel bad inside. [Jesus, El Salvador]

Lidia also had mixed feeling about talking about the past:

In part, one feels better when one talks, but it also brings a lot of pain. For example, right now I feel a little better talking about all of this, letting out what I have suffered, but I also have a headache from talking about what we have suffered. It’s like something is hurting my mind and that makes me feel like I want to forget these sad stories and memories forever. But I also feel like it’s important to talk about them.

SES staff member Lucy supported the notion that although many clients feel relief when they find the courage to discuss the past, they are often unwilling to do so: “I think some

people ... they come and they want to talk about [the past], they want to get it out, but most people keep it to themselves, as far as past trauma that they have been through.”

For other clients, discussing the past represented different things. Dora told me that although she did not feel talking about the past was healing for her, at SES she at least knew that people were there to listen to her when she needed it: “It doesn’t help me to heal, but at least I have someone to talk to, someone to tell that I am feeling bad—someone who will listen confidentially and not turn their back on me. I feel safe talking to people here. Outside of here, I don’t talk [about the past] with anyone.” When I asked her who she shared the past with at SES, she told me only with Lucy, the young white staff member. Estela told me that the only person she shared her past with was her best friend from Guatemala, who was also a client at SES. When I asked her why she did not talk with other people at SES, she told me, “I don’t know. It would be embarrassing [*me da pena*].”

These silences and ambivalences are not surprising. Ochs and Capps (1996) state that the silencing of narratives that deviate from the predominant story by which one lives is a central component of PTSD, depression, and anxiety—all of which are common diagnoses for and complaints of the participants at SES. Ambivalence about breaking this silence is common: survivors often learn silence as a survival mechanism, contributing to “a continual conflict between the need to avoid and forget and the need to remember and bear witness.” (Chester 1992:216). One of the characteristics of trauma is that the impact is so great it creates a gap in the ability to speak about the event: “There are no words and therefore there cannot be memories. Memory remains disarticulated, and only painful

traces, pathologies, and silences come to the surface.” (Jelin 2003:23). If survivors manage to break through this silence, a feeling of relief is often experienced; practitioners at torture treatment centers claim that putting words to trauma is healing, because “Language externalizes as nothing else can” (Herbst 1992:148).

These mixed responses of SES participants also make sense given that the atmosphere at SES is filled with silence and ambivalence about the past. As I discussed before, the past is not the focus of doctor visits or Wednesday group meetings. Additionally, every staff member described some degree of mixed feelings about the importance of discussing the past. Elena, the El Salvadoran staff member told me that she dealt with her own experience of violence by keeping it separate from the rest of her life, and that she often did things to distract herself from thinking about the past. When I asked Graciela if she thought the participants talked with each other about their pasts, she connected speaking about the past with a return of negative symptoms that warrants caution:

I think talking about the past is very difficult ... for a lot of reasons. I think that, for many of them, when they talk about the past, they start feeling fearful again, or they start having nightmares again. So they've learned that sometimes it's better not to talk about the past so frequently, except when it's necessary. I think that a feeling of fear still exists also, that if they talk about these things, they ... may not find someone who is willing to listen and understand. So they don't know if they should speak and with whom.

Psychiatrist Sandra Bloom (1997) affirms that discussing the past will most likely *initially* cause a worsening of symptoms. However, she argues that this is a critical step in healing. To really recover, according to Bloom, patients must put traumatic memories into words, and this will often cause them to relive the accompanying painful emotions.

The goal of the therapeutic setting should be to provide a place where they can relive these in an atmosphere of safety, where the staff can guide them through the experience by educating them beforehand about the normal stages of recovery, and support them as they take these difficult steps. Bloom states that patients progressed significantly more when the staff changed from seeing a worsening of symptoms as a sign of increased illness to reframing an increase in symptoms as progress in the healing process, “the natural outcome of coming to terms with a past reality” (Bloom 1997:161). Staff members working with Bloom were able to explain to patients that although trauma had occurred years earlier, it had only been experienced “by a nonverbal self, trapped in the past,” and that although this helped them to cope on some level, the price was fragmentation (Bloom 1997:161). Consequently, if they were to heal, the verbal self had to experience—for the first time—the traumatic event with the accompanying overwhelming emotions. In narrative form, the event becomes a true memory, “safely stored in the past, no longer able to nonverbally direct and control behavior” (Bloom 1997:161). There are also structural constraints to the staff’s ability to discuss the past with clients. The lack of pay and personnel mean that an already overburdened staff hardly has the time to do the kind of “memory work” discussed by Jelin (2003) and Bloom (1997).

Staff attitudes and the environment at SES are so important because the clinic is one of the only places for survivors in exile where they feel they can trust people and where the context of violence in Latin American countries is acknowledged and understood. Consequently, SES can potentially serve as a critical resource in the creation

of a larger social framework for the individual interpretation about the meaning of the past (Jelin 2003). The meaning the center seems to provide at this point is an ambivalent one, which is reflected in the ambivalence of the patients with whom I talked: “Silencing is a product of internal and interactional forces in that a person may suppress emotions and events but these processes are linked to external circumstances, including others’ expectations and evaluations” (Ochs and Capps 1996: 33). Chester asserts that “Torture, like other forms of violence, thrives in secrecy” (1992:216). At SES, structural violence and transitional violence are additional forms that exist, more or less, in silence. When violence is silenced, or only talked about on an individual level, Chester (1992) argues that a widespread public experience is, in effect, being privatized—something to which SES may be contributing.

Three of the people I interviewed talked about the past in ways that starkly contrasted with the majority of SES clients. A discussion of their experiences and perspectives can help us understand why this might be and work towards creating a more complete picture of memory in exile. Ana is a middle class woman from Honduras who moved to the US nineteen years ago with her husband after he was threatened because of his political affiliations. She told me she did not really understand the specifics of what happened because she only knew about things that were going on inside the house, “outside of the house, I knew nothing.” After some time in the US, Ana said that her husband began emotionally and verbally abusing her and that she found out he was sending money to a woman from Chile that he had met on the internet. She became extremely depressed. A friend told her about a Spanish-speaking support group run by a

local center for survivors of domestic abuse and she joined. She attributed her experience with this group with her being able to put a name to her experience, becoming educated about abuse, and feeling that she was not alone:

Ana: I learned that this [partner violence] had a name here. After I found this out, I went on to learn that other people had experienced this and to read the flyers and literature that explains the rules about what is abuse and what is not abuse, what is fine and what is bad. That's where I learned all of those things.

Tami: And how did you feel to find out that there was a name for what you experienced and that other women had lived through the same thing?

Ana: Well, the truth is that I felt like someone had removed a blindfold, like there was something I did not know and now I did. And I felt powerful, because my self-esteem was on the floor. I thought I wasn't worth anything, that I couldn't do anything. I thought that I was ugly and fat. I thought a lot of bad things about myself. And later, after I started to go there, I saw all of the good things about myself, and my self-esteem rose, and I felt like a queen! Like I had power.

Ana's ideas about sharing the past seem to originate in her experience with the women's center, rather than from the SES context. At SES, she told me, she does not feel much of a sense of community, which she attributed to her own marginal involvement with the center. Her association with the women's center seems to shape her ideas about sharing the past in ways that are very different from other SES clients who do not have the kind of framework that the women's support group provided Ana: She is a strong advocate for the need to speak about the past, telling me, "In treatment, it's really important, I hope that all people who come here [to SES] can express everything that they are carrying inside, so that they are cured. Because that is the only way that one can heal the soul, the heart ... is get everything out that causes you pain. Sometimes we keep this inside. We don't know that this is causing us damage." When I asked her if it was better to remember or forget the past, she told me, "I can never forget, but ... I no longer feel

that talking ... causes me pain. I don't feel it's damaging. And I feel I have overcome it [the abuse], that I have forgiven it, and left it behind, and it will not happen again.”

Ana discusses her education about trauma and sharing the past as a specific event that happened here in the US when she was already an adult. In contrast, a politicized awareness and a strong sense of community were evident in every aspect of my interviews with Esperanza—an indigenous Guatemalan woman—and Gaspar and Camila—a couple from Oaxaca, Mexico.

Esperanza grew up in a small indigenous town in the Quiché region. This area was heavily affected by the struggle between the army and the guerrilla in the 1970s and 1980s. Esperanza's life has revolved around violence and around community-based resistance to that violence. Her family was poor, and both of her parents were leaders in their church and her dad was one of the founding members of the *Comité de Unidad Campesina* (CUC—Committee for Peasant Unity), an organization formed to work on behalf of the poor and one that was heavily targeted and persecuted by the Guatemalan military. When she was nine, soldiers entered her house looking for her parents—who had fled when they heard them arriving—and for an uncle, who they caught after they broke down his door and dragged him off. He was never seen again. Esperanza's family then went into exile, moving from their small community to the outskirts of a large city, losing their home and all of their land in the process. One of Esperanza's sisters was raped by a soldier, which resulted in pregnancy and child, and another sister eventually joined the guerilla and was disappeared after being caught by the military. Her family never found out exactly how she died, nor were they ever able to locate her remains.

From a young age, Esperanza's father told her about the existence of "two worlds"—the rich and the poor, and the ladino and the indigenous. He was also aware of the role of other countries, like the US, in what was happening in Guatemala because of pamphlets disseminated by the CUC and liberation theologians. Her father was obsessed with the news, and she attributes her own fascination with politics to him: "My dad was always telling us, 'Read the news, read the papers, you'll learn a lot. A person who does not read the news doesn't know anything and can't have an opinion.'" Education and religion play equally dominant roles in Esperanza's sense of political awareness throughout her life. Esperanza's school was a religious one, and it affiliated itself with the CUC and the struggle of the poor. Esperanza remembered being taught a song as a small child in the school that was meant to "create political consciousness," the final line of which involved the young boys and girls joining with their elders and the CUC to combat hunger and the theft of their land. Esperanza became a catechist, which she says taught her a great deal of leadership skills.

In our interview, Esperanza often contrasted people who had a critical analysis of political events with those who did not, referring to the former as people who knew reality, or the truth ("*gente que sabe la realidad*"). As an adult, Esperanza gathered testimonies of political violence victims for the REMHI project (*Recuperación de la Memoria Histórica*—Recovery of Historical Memory), worked with one of the exhumation teams operating in postwar Guatemala, and became a filmmaker. Political consciousness and community are the driving forces behind Esperanza's existence: "My mission always involves people. That is where I feel alive. When I become disconnected

from people, I feel like I am suffocating. The community gives me life, makes me feel complete.”

When I asked her about the role of the past, Esperanza told me that understanding why something happened helps her live with it. She told me that it is always better to remember and connected remembering with its potential for education and political analysis:

I think it is always better to remember the past, because this can help illuminate our lives. The past lights the way so we can see where we're going and what we should do. In a way, I think it is something educational, even if it is a very dark past, we shouldn't forget it. If we forget the past, we also forget our stories and our histories. If I had not lived through the bad things in my life that I experienced, I might not have learned to have a critical analysis—to investigate, to ask, to learn. So, really, I might be more ignorant and I wouldn't understand a lot of the things that I can now say that I understand.

Similarly, when I asked Esperanza if people should discuss the past together, she connected discussing the past with education, “if we don't speak about the past, we are not educating, we are not helping growth—personal and community growth. In fact, we might even move backwards.”

Oral historian Alessandro Portelli (1997) discusses one of the roles of narrative as articulating the connection between biography and history and between the individual and the public. As such, narratives usually operate at three levels: the personal, the communal, and the institutional. The personal level involves private and family life, the life cycle, births, deaths, marriages, jobs, children, and the personal interaction with the other two levels. It is referenced with the use of the first person singular. The communal level refers to the community, the neighborhood, strikes, natural catastrophes, rituals, the

workplace, and collective participation at the institutional level. It is indicated by the use of the word “we.” The institutional level concerns politics and ideology, government, unions and the nation state, and is usually referred to with the use of the term “they.”

Esperanza’s narrative clearly addresses all three of these levels. I argue that this is indicative of her ability to connect her individual experiences and perspectives to a larger social framework, an ability that is made possible because of her political education and experience with social organizing and movements. Most of the literature that I have read—by both academics and practitioners—asserts that a connection between individual experience and a larger social framework must happen for individuals to make sense of traumatic experiences: “the need is for contextualizing the suffering, which requires externalizing the pain—locating its causes, identifying its origins; that is to say, seeing ... the connection between the traumatic event and the structures which order social life” (Aron 1992:183). This connection is apparent both in how Esperanza connects herself to larger communities throughout her narrative, in her explicit comments (“the community gives me life”), and in her constant use of the word “we” as opposed to “I.” This is distinct from many of the other narratives of SES participants which seem to focus on the personal level to the almost complete exclusion of the communal and institutional levels that might offer a framework to interpret the trauma they have experienced.

A larger social framework was also evident in my interviews with Gaspar and Camila. Gaspar and Camila grew up in the state of Oaxaca, an area known for its long history of organizing and resistance. They both grew up in families they described to me as stable, poor but not desperate, and with parents who were teachers and valued

education. The couple met at college, and Gaspar became an ornithologist while Camila went on to work with women's NGOs in Oaxaca. Although they described themselves as politically conscious and on the left, they did not become actively involved in politics until the teacher's strike in Oaxaca in 2006. After striking teachers were forcibly removed from the plaza of the capital city, large-scale protests began, including the reclamation of the city plaza by teachers and their supporters, control of local television and radio stations, the blockade of government offices, massive marches, and the formation of the APPO (The Popular Assemblies of the Peoples of Oaxaca)—a political body representing public school teachers, their supporters, and many other political and community organizations.

When Gaspar learned that some of his close friends were missing and feared captured or killed by the police, he left his house late at night to search for them with two other people. On a dark street, their car was stopped by the police and they were questioned, tortured, and taken into custody. Although the two individuals with him were released soon after their arrests, Gaspar was held in jail for almost three months before being unexpectedly and suddenly released. However, Gaspar was never officially cleared of all charges by the government and because he feared he could be arrested again at any time, he decided it was best for him and his family to come to the US on the tourist visas they already had. He and his wife had already been to the US several times, and they planned to return again one day, but not under "forced circumstances ... we are basically living in exile," he told me. While he was in jail, Camila became very involved with the APPO, and she felt extremely torn between supporting her husband's desire to leave

Mexico and leaving the movement, telling me, “When he got out, I knew they had been through some awful things ... I understood, in part, his fear and his paranoia, but another part of me was dedicated to the rest of the people ... when he got out, there were still 170 political prisoners and I felt a debt, I felt obligated to help.”

Like Esperanza, Gaspar and Camila repeatedly discuss their personal trauma in terms of the communal or the institutional. Gaspar told me, “I know that many Oaxacans are experiencing as a society what I went through personally, because we were all confronted with a painful reality, we all had many losses.... In my perspective, I was not the only one experiencing these things—we were all affected by these events.” When asked about healing, Gaspar links his inability to recover with the frustration he feels over the inability of social movements to make real changes in Mexico. He cites continued abuses there and around the world as evidence of the continuation of torture and corruption. He also connects his ability to heal with the realization that he and the APPO are part of “a process, and that the struggle will always continue. So when we are no longer here, more people will join, and the day they are no longer around, there will be more and more. This is what helps calm my frustration—that we have made ourselves into a huge movement and it will never stop as long as there are people who take advantage of others.” Unlike other SES clients, Gaspar clearly feels that medications play no role in his healing: “I think pain is like an alarm in your body, so if you’re feeling pain, you shouldn’t attack it. You need to see what is causing the pain.”

Camila became most depressed about their situation after they arrived in the US, a situation she connected to a painful collective memory of forced migration in Oaxaca. In

one of the few instances during the interview where Camila was almost in tears, she told me that both her grandfather and her father lived a life of migration, a pattern experienced by many Oaxacans. As a little girl, she was determined that this would not be her future, telling herself, “English doesn’t matter to me, nor does the United States. I want to learn Spanish. Why should I learn English?” In this example, Camila’s individual experience is given meaning by its connection to a larger group and history:

I think I became depressed from repeating the pattern that I never wanted to experience personally. I never wanted to be a migrant, because when I was a child, I was so frustrated by it. But after everything, here I am, a migrant just like they [her family members] were. I didn’t want to repeat what I am now repeating—not knowing the language, not being able to work. I didn’t want to become part of this group that is talked about in Mexico as Chicanos, immigrants, illegals, terrorists. I didn’t want to be part of this group. Not because I think they are worth less, but because I didn’t know if I was prepared to resist all that.

When I asked what helps people heal, Camila again connects herself to a larger social framework:

There needs to be justice. It would be a good thing for both the family and the person whose rights were violated if they knew that those responsible would be punished. Another thing is that people want to know that this will never happen again. For example, we want to be the last people to experience what we lived through, but when I see that the violation of human rights continues—here or in another part of the world—I am injured all over again each time that I see another person is going through something like that.

In essence, Camila’s healing depends on justice and the knowledge that others will not experience what she and her family experienced. This reflects a healing that must occur at the societal, rather than the individual, level.

Unlike many other SES participants, Camila unconditionally believes in the importance of remembering the past, even though there might be “tragic moments,”

because, “they happened, you didn’t invent them.... So there is no reason to forget them, but rather, perhaps to learn from them, to overcome them. Me, for example, I never want to forget any part of my life. I want to remember it forever.” When I asked Camila if it was important to share one’s past, she replied that human rights violations and injustice need to be shared so they can be stored “in the collective memory.” On an individual level, she feels that narrating the past “helps get out emotions that perhaps one could not process in the moment. It helps to cure you when you can talk about them more calmly and accept what happened and understand why you are now different than you were before.” Like Gaspar, Camila did not want to take medications because “these things [human rights violations] are not cured by medication.”

Should everyone be discussing the past at SES? This research seems to indicate that the answer to this question is, “it depends.” My interviews with Ana, Esperanza, Gaspar, and Camila indicate that education, political involvement, the connection to social movements, and community support relate to a valuation of the past and an ability to connect the individual to larger social frameworks that aid in the interpretation of trauma and healing. However, for people who had very little access to education in their home countries, who have experienced multiple traumas, and who have little social support, asking them to discuss their pasts may bring only the re-living of trauma without the re-interpretation involved in doing memory work. Furthermore, for people who arrive in the US with little or no understanding of the causes behind the violence of their countries, it is difficult for them to develop an analytical framework in a country where their presence and their experiences are invisible or stigmatized in a public arena that is

predominantly anti-immigrant. Finally, those who are undocumented are often struggling to make ends meet and want nothing more than to avoid detection and the risk of deportation. For these reasons, the worsening of symptoms that often accompanies the deep healing referred to by Bloom (1997) could have extremely negative consequences, such as the inability to work when one desperately needs to, or acting out in public when one needs to remain invisible.

My primary argument here is that memory in exile is shaped by particular circumstances that need to be taken into account when examining the role of memory and healing. In contrast, most of the literature seems to unequivocally assert that the role of remembering the past is critical to healing. Ideally, survivors should probably work through their pasts and share them with others; however, I argue that a framework of support and interpretation must be available for this to be true. For people living in exile, this is often difficult to find. Although SES strives to provide a supportive atmosphere for their clients, staff ambivalence about the past, a focus on a clinical identity, and the fact that they are already doing too much with too few resources are obstacles to developing a community approach that might facilitate a deeper understanding of trauma, historical truth, and transformation.

CHAPTER VI

CONCLUSIONS: SOCIAL SUFFERING AND FRAGILE COMMUNITY

This dissertation provides an ethnographic example of social suffering, one that facilitates the connection between theory about trauma, memory, and social change to the philosophies and actions circulating in a specific local site that serves Latin American survivors of trauma. Throughout each era of the center, I break down the concept of social suffering by examining staff ideas (Chapters III, IV, and V) and participant ideas (Chapter V) in regard to the three key concepts of trauma, truth, and transformation. Oral history played an integral role in this research in terms of both process and product: oral history served as a vehicle for the exploration of the biographies that shape people's ideas in regard to the social construction of suffering and as the content that I analyzed and interpreted throughout this dissertation.

In Chapter I, I laid the ground work for the dissertation, explaining how I became involved in this project and situating my work in regard to the literature on trauma, memory, refugees, political violence, social movements, and immigration policy and citizenship. I have argued that my work offers new insights in these areas because a majority of those the center served were “undocumented refugees” living in exile. In Chapter II, I explored the process of my research—tracing how my growth as a scholar impacted my interest in and ability to interview survivors of trauma.

In Chapter III, I used the biographies of staff members to trace the trajectory of their involvement with the center. White staff members shared the privilege of being able to travel,

an experience that led each of them to question what they were taught about their own government in different ways: some came to question the role of the US in Vietnam, others questioned the role of the US in Latin America, and all came to feel strongly about the issue of human rights. The quest for “truth” produced by the dissonance between what they were taught about their government and what they experienced through travel prompted a search for a more authentic identity, one that could be constructed as a “good” US citizen. Their involvement with El Centro facilitated this. Latin American staff members, I have argued, were motivated to become involved with the center during its second era because of their own experiences with trauma, experiences that prompted them to rely on the center as a place of belonging and transformation for themselves as well as for the clients they served.

In Chapters III and IV, I discussed how the center’s participants also became more diverse and brought new forms of trauma and new legal statuses to the center. In the first era of the center, the agency only invited one family at a time for treatment and that family returned to their country after one year. However, in the second era, the center began running three programs in the house that attempted to serve many more people, including those who already lived in the local community. Additionally, during the second era, most of the heavy periods of conflict in Latin America had ended, and clients began arriving who had experienced forms of trauma other than a direct experience with political violence.

These changes in administration and clientele created disagreement over how trauma should be defined, how the past should be handled, and how healing should best take place. Conflict over the social construction of suffering in the second era caused the demise of the center.

In Chapter V, I explored the dynamics between the staff and participants at Siempre en Solidaridad, one program that was created after the breakup of El Centro de Solidaridad. I demonstrated the relationship among different forms of trauma and showed how the staff attempts to meet the needs of a complex array of forms of suffering within the mandates of funding that narrowly defines survivors of trauma in terms of political violence. I argued that the development of a double discourse is the outcome of the staff's struggle to define their clinic, to define trauma, and to respond to the expectations created by the history of the former center. This double discourse means that the center is portrayed in the public as treating only survivors of political violence, in effect rendering other forms of trauma and suffering invisible. It also means that the more medicalized approach of the male psychiatrists is privileged as the "real work" of the center over the "extra" work that the female staff members consistently provide, and which makes this center bi-cultural and bi-lingual.

I also addressed the meaning of the past for people in exile in Chapter V. Jelin (2003) asserts that rather than thinking about "the past," we need to focus on meanings of the past, looking at how these change over time and the role of individual agents in transforming ideas about the past. Rather than essentialize or freeze the meaning of the past, we need to explore the past as a nuanced and changing process; what makes it change then becomes an interesting arena for investigation. As Jelin (2003:52) points out, memory needs to be historicized because it is affected by so many factors—such as changing political scenarios, social actors, and social sensibilities—all of which can transform the meaning of the past:

These complexities suggest that the historical dynamics of memory need to be problematized and studied. The social location of diverse social actors and their

sensibilities and dispositions, the particularities of the political arena that they inhabit, and the struggles over meaning in which they are involved are some of the elements that help us to make sense of these meanings in flux.

Much of the literature on memory—written by trauma practitioners and academics who focus more on the national level—convey contradictory messages about the meaning of the past.

Overall, trauma practitioners clearly feel that the ideal is for individuals to be able to connect their individual experiences to broader social frameworks in a supportive atmosphere. My research indicates that for trauma survivors living in exile, the benefit of talking about the past is complicated by poverty, a lack of education, few support networks, daily survival needs, the invisibility of immigrants and their histories in the US public arena, and the lack of recognition of the links among different forms of trauma. Given these challenges, it is not surprising that staff members who already attempt to be almost everything for everyone have ambivalent attitudes towards addressing the past at SES. However, memory is simultaneously individual and collective: individual memory is not transformed into meaningful experiences without the presence of cultural and group discourses, which are always collective, and individual experiences and memory become collective and have the power of creating community through the act of narrating and listening (Jelin 2003). Consequently, the absence of a significant focus on working through the past at SES has implications for individual healing and the creation of community at the clinic.

Because of how suffering was socially constructed, every era of the existence of this center for the treatment of torture victims could be referred to as a “fragile community”: in the first era, power differentials existed between an all-white staff and the one Latin American individual or family brought to the center; in the second era, silences about staff

motivations and participant differences caused a great deal of conflict; and at Siempre en la Solidaridad, a double discourse in the representation and response to trauma, as well as the ambiguity of the past, present obstacles to the creation of a more profound sense of community. I want to emphasize here, however, that the fact that the center has managed to offer any kind of community and safety net at all to Latin American trauma survivors—given an anti-immigrant national landscape made up of a public that is largely unaware of their country's role in the production of violence and trauma in Latin America, the George W. Bush administration's official attitude of tolerating the use of torture, an international community whose attention and funding has turned to more recent and intense areas of conflict, and the increasing inequality produced by the violent structures of neoliberalism—is a testament to the commitment of its staff members and the endurance of its participants.

At several difficult points during this project, I was forced to reflect on why I am continually drawn to such painful research topics. During my Masters work, I realized I felt compelled to focus on oppression in order to raise awareness about injustice in the world. Implicit in this goal is the idea that awareness will lead to action. Through this research, however, I began to realize that my oppression obsession has more intimate roots. I am driven to work on oppression because of my own personal connection to pain and suffering—the damaged parts of me propel me to attempt to connect with the damaged parts of others on a very emotional, non-rational level, in the attempt to answer the questions: What can pain teach us? Why is the representation of suffering so critical?

Ricardo Falla, a Jesuit priest and anthropologist whom I very much respect, states in an interview with anthropologist Beatriz Manz, "I consider anthropology to be all-

encompassing; that's what gives it its richness.... But I think that if we are going to construct a science to serve people, that is the dispossessed and the persecuted, then we have to look for the topics that are the most relevant to their suffering" (Manz 1995:266). Similarly, much of the most powerful scholarship on the part of women of color is driven by the need to make sense of pain. And the ability to do this, as I discussed earlier in this dissertation, hinges on one's willingness to be vulnerable:

Why remember the pain? Because I am sometimes awed, as in finding something terrifying, when I see how many of the people who are writing about domination and oppression are distanced from the pain, the woundedness, the ugliness. That it's so much of the time just a subject—a "discourse." ... I say remember the pain because I believe true resistance begins with people confronting pain, whether it's theirs or somebody else's, and wanting to do something to change it. And it's this pain that so much makes its mark in daily life. Pain as a catalyst for change, for working to change. [hooks 1990:215]

As hooks states, looking into pain can motivate one to work for change. Similarly, although traumatic experiences are damaging, they also have the potential to create strength and the desire for justice: "Common, albeit not invariable, strengths include the development of profound survival skills, an enhanced ability to understand other traumatized and oppressed individuals and groups, a passion for justice, a desire for a different kind of society, a certain critical realism, and what is particularly significant, a less distorted view of the world" (Burstow 2003:1310).

Rather than turning away from pain, then, I believe that careful scholarship needs to make suffering visible, especially the suffering of those who are less "ethnographically visible" (Farmer 2004), but research needs to be done in a way that offers a more nuanced position on trauma, memory, and healing because it is so easy to romanticize and simplify each one of these concepts. It is my hope that this work contributes to meeting that need.

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