

War's Betrayal

Amber Elizabeth Gray

"War is war."

These words, spoken by a former client during one of our sessions, don't speak or spell the reality or meaning of the phrase. What my client meant to convey, not only with words but also in his struggle to tell a story of horrific

also in his struggle to tell a story of horrific pain, abuse, conflict and suffering, and in his courage to forge a restorative pathway through the shard-like minefield of memories that his body had become for him, was that there is no other experience on earth like war.

Sitting together in my office, he described his service, his capture and his torture-related suffering in terms of the most blood -curdling memories of physical and emotional pain and the ongoing pain of disconnect from his own humanity (body, mind, heart and spirit, as he said) and his external world—family, community, place.

As often occurs in the restorative process with survivors of violence and war (civilian and combat), therapeutic techniques are secondary to the primary purpose of coming together in the context of human relationship—restoring meaning and one's sense of belonging. Which then begs the question—where do we belong? And how do we know the meaning of our own be-

longing, or of any of our life experiences, if not through our own physicality? Quite literally, it is through the placement of our bodies that we locate and find ourselves.

When I am teaching the "uninitiated" about somatic psychology, dance movement therapy, or Continuum Movement, I always say: "The human body is the site of all human experience, from the most mundane to the most sublime." When we are exposed to the extraordinary violence of war or the types of physical violation and abuse that can accompany war (like torture), we cannot even begin to think about addressing their impact on our humanity without full inclusion of the body.

A Sniper's Story

I worked with a professional sniper who had served, proudly, in his country, and was captured by opposing forces and held for three years. As part of his captivity and torture, he was forced at gunpoint to snipe entire villages of his own women and children.

Notice your response to that last sentence, right now. When I share this story verbally, many people gasp, recoil, or say, "How could he?!" My answer is: "I don't know." And if I were asked, "How could he not do it?" I would answer the same: "I don't know." What I do know is that I am not willing to judge this act, and in learning to bear witness to the often untenable choices war demands any of us -civilian or soldier—make, I have learned that for both therapist or healer and client or patient, the body's role in the action, in the traumatic experience, in the

response to histories, and in the healing or restoration, is core to the therapeutic process.

My client lived in never-ending conflict. He had fled the country where his wife and three children lived (they all had to flee their home because of what he had done), and he was seeking asylum in the US. There was a warrant out for his arrest (and death) in the intermediary country. He wanted nothing more than to go home, to the belonging of his family. He knew he could never return to the belonging of his land.

He had interpreted and processed and intellectualized his actions over and over again. He continued to commit small acts of violence against others in moments when he "snapped" because someone said something provocative or challenging.

We talked and talked because he was unwilling, and at times, unable to enter the container of these experiences in the space of his own body. I partnered with other therapists—EMDR, CBT—and made small progress in terms of his tendency to snap. But, he was still ridden with conflict, angst, and at times violent moments. His biggest issue was: What to do? Where to go? Should he remain in the US, trying for asylum—and perhaps never see his beloved family again (they being a reason he chose to remain alive, despite the cost to his conscience)—or

return to the place where his family resides, where his heart longed to be, risking death? This conflict tormented him emotionally and psychically, and physically. He had developed extremely dense musculature, and often described feeling "trapped in the hell" of his own body without movement or ability to breathe.

One day it escaped that he had an interest in yoga and had "dabbled." Being a one-time yoga teacher, I began to practice his favorite asana. He taught me; I taught him. The exchange—reciprocity—is essential to establishing any trust between two people. As yoga became a more integral part of our

work together, I began to invite him to notice sensations and internal bodily experiences in relationship to the asana, to his understanding of them, and to the meaning of them in his life. Strength. Accuracy. Truth. These were values he understood from our simplistic yoga practice, and these were values he cherished as a soldier, a sniper, a father, and a husband.

We revisited the memories—of family and home; of service to his country; of his annihilation of his own people—and the deep layers of embodied betrayal that are inherent to torture and some acts of war which can be at the root of the internalized and embodied conflicts of soldiers, torture survivors, and civilian survivors of war.

We cannot ignore the body. Any time I integrate any somatically based psychotherapy into individual or group sessions with veterans or civilian survivors, I learn how deep the violence can

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Photo by Lance Cpl. Michael Petersheim

be carried and how alone they can feel when their treatment ignores the very place that carries it.

Betrayal

Understanding betrayal is as core to working somatically as the body itself. One thing I have come to see in this work is that the most challenging cases are those in which the body becomes the betrayer. This is true for many survivors of torture because good torturers know how to re-wire the body and its endogenous rhythmicity in ways that betray our body's usual experiences (hunger, longing, desire, love, elimination) and the range of function and feeling we might otherwise take for granted. One can talk about betrayal conceptually, but to live and breathe it in one's own body undermines the meaning, belonging, and loving we all long for as humans.

Many service members and veterans who I have worked with speak of a betrayal and know its existence through the rages, the uncertainties, the fears, and the dark places their minds and souls go once

they come home to a society that continues the betrayal. We have no right as a society or as a country to ask young (or old) people to fight a war and then bring them home to collective expectations that they will "be the same." It's even worse for those who experienced betrayal in their service.

As a collective, we owe it to those returning from wars, and those we welcome to the US as refugees fleeing persecution from war and violence elsewhere, to really bring them home, which means supporting their bodies (flesh, mind, heart and soul) to carry the experiences they have endured and to apply the skills they have acquired practically and functionally in the context of non war. As the VA and other organizations contemplate how best to provide support to our returning troops, and grapple with the emphasis on evidenced-based therapies and experimentation with alternative therapies, it seems clear to me, from many years as a clinician working with survivors of war, that the concept of practice-based evidence must be considered. Simply put: When I am challenged with the question, "How evidenced-based are somatic therapies?" My response is, "The evidence *is the body*. Without it—we are nowhere."

Transitioning

As my client learned to notice and observe his internal landscape through our yoga practice, I taught him many simple structured methods from the somatic and creative arts framework I teach. Working with spine, breath, contemplative practice, and his sense of weight as a metaphor for his presence, I gradually encouraged him to re-associate with his feelings of remorse, grief and loss for his captivity, for the things he had to do to survive his captivity, and his deep longing to be home. In slowly coming home to his own body, he recognized that his need to be with those he loved was the strongest, and the conflict he had carried for years began to smooth its ragged edges. He was able to feel and express his emotions, often with less verbiage than he originally used to express the rampant ruminations, and thought and belief patterns that weighed on his mind; in doing so, he also experienced greater lightness and range of motion in his entire body. He described "finding the core of who I am, and respect for myself as a person."

As he was able to connect the actual lived experience of his own body with the weight of feelings he carried from the past,



and locate himself, through sensation, weight, breath and gesture, in present time and space, he began to cultivate the ability to take action regarding his future. He shared how he practiced many of the somatic methods we did together at home, and in so doing he found ground for his thoughts and feelings. He said, "As I grow stronger, I also become clearer; and as I get clearer, I feel myself stronger."

He came in for his regularly scheduled session one day, and as I started to speak he put his fingers over his lips and hushed me. He then handed me a plant—one he had purchased as part of his "home-play" from a session where we encountered tenderness—and he bowed. Bowing was a full-body gesture of respect he had often spoken of, and only once demonstrated in our previous session. He said he did it when he was in despair in captivity and asked forgiveness of his God; he did it when he spoke of his love for his wife and children; and he did it when he recalled his fellow soldiers with whom he had served. In dance movement therapy, gestures and postures, especially in relation to others, are a key informant of the internal experience of both resource and traumatic memory. Bowing for him was a full-body gesture of the deepest peace and comfort because it could only occur when he was present enough to respect another.

I tried to speak again, and he hushed me. He said, "Remember, words can get in the way. I am speaking to you with my body. I'm going home. Thank you."

He bowed, and left.

I never saw him again. I have no idea, and



never will, what happened when he returned to his family, but because of his courage and commitment to unraveling the deep betrayal, the deep conflict and trauma his body held, I know he made the correct choice.



Amber was on the faculty at the Colorado Center for Social Trauma from 1999-2001. She is a graduate of The Naropa University Somatic Psychology program, and has a Masters in Public Health from Columbia University. She has over twenty-five years experience in human service and working with displaced people, refugees, and survivors of human rights abuses, and over 13 years experience working with survivors of civilian and combat-related war trauma, torture, domestic violence and ritual abuse. Her expertise is in the development of individual and community-based culturally congruent treatment models for trauma recovery that reinforce individual and community and provided training for health and mental health professionals and paraprofessionals on such topics as working with traumatized refugee children, models for the cross-cultural application of psychotherapy, innovative approaches to trauma recovery that integrate local, individual and community resources and traditions, clinical issues in work with survivors of combat, war and political violence, and stress management and secondary trauma for individuals and organizations serving survivors. She has taken her work to Indonesia, Darfur, Haiti, Kosovo, India, Croatia, Norway, Mexico, Sweden, Australia, Denmark, Lebanon, and New Zealand. She is Past President of the Board of Directors for TASSC Internation-al, Refugee Mental Health Coordinator for the Department of Health in New Mexico, and Director of Restorative Resources Training and Consulting.

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