DIVISION OF SOCIAL AND TRANSCULTURAL PSYCHIATRY

## ADVANCED S

JUNE 1 & 2, 2006

Institute of Community & Family Psychiatry Sir Mortimer B. Davis Jewish General Hospital 4333 Côte Ste-Catherine Rd. Montreal, QC H3T 1B4

### **GUEST FACULTY**

Abdel Hamid Afana

Mahar Agusno

Morton Beiser

Gilles Bibeau

François Crépeau

Suman Fernando

Antoine Gailly

**Edvard Hauff** 

Mark J. D. Jordans

Victor Lopez

Pompeo Martelli

Matthew Porter

Nigel Rapport

Marian Shermarke

Derrick Silove

Donna E. Stewart

**Charles Watters** 

### McGILL FACULTY

Ellen Corin

Duncan Pedersen

Jaswant Guzder

Cécile Rousseau

Laurence J. Kirmayer

Recent years have seen profound changes in the situation of refugees and displaced peoples. While the number of people enduring forced migration has increased, receiving countries have become more restrictive. Anxieties about security and social integration have been used to justify more restrictive policies and harsh treatment of people seeking asylum.

This conference will examine mental health issues of asylum seekers, refugees and internally displaced peoples as well as the impact of human trafficking. Sessions will examine:

- the implications for mental health of international policies and practices on refugees and migration;
- the impact of different ideologies of citizenship, ethnocultural identity and modes of social integration on individual and collective well-being;
  - models of mental health services for refugees; and
- clinical strategies in working with refugees across the lifespan.

The conference will conclude with a discussion of the psychological, social and ethical meanings of exile and displacement.

There will be a poster session for participants who wish to present research studies or intervention programs.

> THIS CONFERENCE IS CME ACCREDITED FOR 18 STUDY CREDITS

## AND FORCED MIGRATION Human Rights and Mental Health Services

Thursday, June 1st

8h45-9h

**WELCOME & INTRODUCTION** 

Laurence J. Kirmayer

PROTECTING REFUGEES IN A "SECURITY ZONE": HUMAN RIGHTS AND THE ROLE OF MENTAL HEALTH PROFESSIONALS

Chair: L. J. Kirmayer

9h-9h30

THE WESTERN PARADOX:

HUMAN RIGHTS,

THE GENEVA CONVENTION AND THE QUEST FOR SECURITY

François Crépeau Université de Montréal

9h30-10h

THE AUSTRALIAN ASYLUM DEBACLE:

THE IMPACT OF DOCUMENTATION/ RESEARCH ON ADVOCACY

AND POLICY-CHANGE

Derrick Silove

University of New South Wales

10h-10h30

**BREAK** 

10h30-11h

"LOOK ME IN THE EYE": EMPATHY AND THE TRANSMISSION OF TRAUMA IN THE REFUGEE DETERMINATION PROCESS

Cécile Rousseau McGill University

11h-11h30

**HUMAN TRAFFICKING ACROSS** 

**BORDERS** 

Donna E. Stewart University of Toronto

11h30-12h30

PANEL DISCUSSION

François Crépeau, Cécile Rousseau, Derrick Silove, and Donna Stewart

12h30 -14h

LUNCH

FORCED MIGRATION AND MENTAL HEALTH

Chair: D. Pedersen

14h-14h30

AN ALTERNATIVE MODEL OF REFUGEE

MENTAL HEALTH:

EVIDENCE SUPPORTING A BIOPSYCHOSOCIAL MODEL

Matthew Porter

Mount Sinai School of Medicine, NY

14h30-15h

FORCED MIGRATION, LABOUR MARKET

INTEGRATION AND MENTAL HEALTH

Edvard Hauff University of Oslo

15h-15h30

IMMIGRANT AND REFUGEE

RESETTLEMENT: LESSONS LEARNED FROM THE SOUTHEAST ASIAN "BOAT PEOPLE'S" EXPERIENCES IN CANADA

Morton Beiser University of Toronto

15h30-16h

BREAK

16h-17h30

**VULNERABILITY AND RESILIENCE** 

AMONG REFUGEES AND INTERNALLY

**DISPLACED PEOPLES** 

PANEL DISCUSSION

Guatemala Victor Lopez
Indonesia Mahar Agusno
Nepal Mark Jordans
Palestine Abdel Hamid Afana
Peru Duncan Pedersen
Sri Lanka Suman Fernando

17h30-19h

RECEPTION IN HONOR OF DR. ALEXANDER LEIGHTON POSTER SESSION & ART EXHIBIT

19h-21h

FILM SCREENING & DISCUSSION:

Continuous Journey with Ali Kazimi (filmmaker)

Friday, June 2nd

MENTAL HEALTH PROMOTION AND SERVICES FOR REFUGEES

Chair: C. Rousseau

9h-9h30 EUROPEAN POLICY AND PRACTICE IN

REFUGEE MENTAL HEALTH

Charles Watters University of Kent, UK

9h30-10h THE IMPACT OF MODES OF SOCIAL

INTEGRATION ON INDIVIDUAL AND COLLECTIVE WELL-BEING

Antoine Gailly Center for Mental Health Brussels, Belgium

10h-10h30 WORKING TOGETHER FOR PUBLIC

**HEALTH** 

Pompeo Martelli

Center for Studies and Research on Public Health

Rome, Italy

10h30-11h BREAK

11h-11h30 PANEL DISUCSSION

Antoine Gailly, Pompeo Martelli, Cécile Rousseau, and Charles Watters

11h30-12h PANEL OF NGOS, SERVICE PLANNERS

AND PROVIDERS

ACCÉSSS Célia Rojas-Viger Clinique Santé Accueil Pierre Dongier RIVO John Docherty

12h-14h LUNCH

MEANINGS OF EXILE: RECONSTRUCTING THE DISPLACED SELF

Chair: L. J. Kirmayer

14h-14h30 **RECONSTRUCTING THE** 

DISPLACED SELF Marian Shermarke PRAIDA/ McGill University

14h30-15h HOLDING THE NARRATIVE OF EXILE:

STRATEGIES OF INTERVENTION

Jaswant Guzder McGill University

15h-15h30 IN PRAISE OF DISPLACEMENT:

THE LIFE-PROJECT OF THE GLOBAL GUEST Nigel Rapport

Nigel Rapport Concordia University

15h30-16h30 PANEL DISCUSSION

Gilles Bibeau, Ellen Corin, Jaswant Guzder, Nigel Rapport, and Marian Shermarke

16h30-17h CLOSING REMARKS

Laurence J. Kirmayer

## Abstracts

## The Western Paradox: Human Rights, the Geneva Convention and the Quest for Security

François Crépeau University of Montreal

ver the last two decades, Western States have reinforced security-related migration policies with a view to stemming migratory flows. These policies are directed indiscriminately against all irregular migrants, including refugees and asylum seekers. The extensive securitization of borders and the interdiction-interception measures threaten the basic premises of the 1951 Geneva Convention. There is an urgent need to reconcile the State sovereignty paradigm with the human rights paradigm.

## The Australian Asylum Debacle: The Impact of Documentation/ Research on Advocacy and Policychange

Derrick Silove University of New South Wales Australia

he recent history of refugee policy changes in Australia offers many lessons for mental health professionals working with displaced communities from diverse cultural backgrounds. Prior to the early 1990s, Australia was regarded as a refugee haven, a reputation earned by a long-standing policy of humane resettlement policies. Since then, the policy applying to off-shore and on-shore refugees (asylum seekers) has diverged substantially. Those accepted for permanent refugee status as part of a quota (off-shore refugees) continue to receive impressive resettlement services including access to high quality torture and trauma rehabilitation services.

In contrast, on-shore refugee applicants (asylum seekers) have faced deprivations and insecurities while pursuing their claims, with some being held in detention and those found to be genuine refugees being offered temporary protection visas. This paper will review available evidence about the adverse impact of these policies on the mental health of persons fleeing persecution. The theoretical implications of these observations to the understanding of traumatic stress reactions will be examined. In addition, the implications for offering interventions and services to a group who feel constantly threatened will be considered. Finally, some of the ethical dilemmas in undertaking research and advocacy amongst asylum seekers will be outlined.

### "Look Me in the Eye": Empathy and the Transmission of Trauma in the Refugee Determination Process

Cécile Rousseau & Patricia Foxen McGill University

Pefugee determination is an administrative procedure which is embedded in numerous and contradictory emotions because it is linked both to the representation of the "other" in our societies and to a life or death threat. This presentation will focus on the role of the emotions in the encounter between the judge and the refugee as perceived by them. For the judges, balancing between splitting and ambivalence, emotions are often considered as a source of knowledge of the truth or a way to ascertain the authenticity of the refugee experience. The refugees feel they are not being heard and that, beyond a risky instrumentalization of their emotions, there is no subjective encounter. The discussion will examine the influence of the political factors in the implicit directionality of gift and harm embedded in the notions of empathy and transmission of trauma.

## **Human Trafficking Across Borders**

Donna E. Stewart & Olga Gajic Veljanoski University of Toronto & University Health Network

early one million individuals are trafficked annually across borders as sex workers, mail order brides, domestic servants, or farm labourers. The United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, defines trafficking as the "recruitment, harbouring, transportation, provision or obtaining of a person for labour or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage or slavery". This document has been signed by 117 countries, including Canada. Canada is increasingly a country of transit and more recently, destination, but a national, comprehensive, humane approach to human trafficking is still lacking. This presentation will review Canadian policy and practice with respect to human trafficking over the last decade as the forces of globalization escalate. Trafficking is gendered in regard to power differentials, age and occupations. In general, poor young men are trafficked for cheap labour and poor girls and women are trafficked for the sex trade, but also sometimes as mail order brides or domestic labourers. The physical and mental health risks of trafficked persons will be discussed, with a focus on women. Some suggestions will be made about what a coordinated national response to trafficking should include.

### An Alternative Model of Refugee Mental Health: Evidence Supporting a Biopsychosocial Approach

Matthew Porter Mount Sinai School of Medicine, New York Nick Haslam University of Melbourne, Australia

Research on refugee mental health has largely proceeded from a life events research paradigm. That approach has provided much useful information about the stressor-psychopathology relationship. It has, however, been increasingly criticized as failing to capture aspects of the refugee experience that are crucial to understanding and predicting mental health outcomes. We conducted a meta-analysis of the extant body of published literature that quantitatively compared the mental health of refugees to that of non-refugees (N=59 studies) in order to examine the potential moderating role of enduring postdisplacement

conditions of the type that the life events paradigm has difficulty modeling. Our sample reflected primary data from 67,294 participants (22,221 refugees, 45,073 non-refugees) collected from 1959 through 2002 across five continents. Enduring postdisplacement conditions significantly moderated mental health outcomes. In sum, patterns within five decades of worldwide research on refugee mental health demonstrate that the sociopolitical context of the refugee experience—notably social, cultural, and economic conditions following displacement—is powerfully associated with refugees' mental health. A biopsychosocial model of refugee mental health is proposed as an alternative to the life events model in order to better describe these effects.

## Forced Migration, Labour Market Integration and Mental Health

Edvard Hauff University of Oslo

major challenge for refugees in resettlement countries his to gain employment or continue educational pursuits. This is important in order to establish a safe socio-economic base, but also to re-establish meaningful life projects. However, there are considerable barriers to labour market integration in European countries, and the unemployment rates among refugees are high. This is not only a problem for the migrants, but also for the whole societies, and is likely to accelerate the development of deep socio-cultural divisions in these societies. This presentation will discuss the relationship between labour market integration and mental health, using three clinical vignettes as the point of departure. Recent findings from the Oslo Health Study show associations between unemployment among immigrants and their experience of discrimination in the labour market and mental distress. This issue will also be discussed in the context of the theory of segmented labour markets. Efforts to improve labour market integration of refugees in Scandinavia will be presented and discussed in relation to possible preventive effects regarding mental distress.

### Immigrant and Refugee Resettlement: Lessons Learned from the Southeast Asian "Boat People's" Experiences in Canada

Morton Beiser University of Toronto

anada admits more than 200,000 immigrants every year. National policy emphasizes rigorous selection to ensure that Canada admits healthy immigrants. However, remarkably little policy is directed to ensuring that they stay healthy. This neglect is wrong-headed: keeping new settlers healthy is just, humane, and consistent with national self-interest. By identifying personal vulnerabilities, salient resettlement stressors that act alone or interact with predisposition in order to create mental health risk, and the personal and social resources that reduce risk and promote well-being, research can contribute to enlightened policy and practice. However, the paradigms that have dominated immigrant health research over the past 100 years — the "sick" and "healthy immigrant," respectively — have been inadequate. Part of the problem is that socio-political controversy has influenced the questions asked about immigrant health, and the manner of their investigation. An interaction model that takes into account both predisposition and socio-environmental factors provides the best explanatory framework for extant findings, and the best guide for future research. The Refugee Resettlement Project, a decade-long investigation of more than 1300 Southeast Asian refugees resettling in Canada, is presented as a case in point. Forging stronger links between research, policy and the delivery of services will help make resettlement a more humane process, and will help ensure that Canada benefits from the human capital that its newest settlers bring with them.

## **European Policy and Practice in Refugee Mental Health**

Charles Watters University of Kent, UK

he aims of this presentation are threefold. It will offer an overview of the findings of a European study into good practice in the mental health and social care of refugees addressing salient issues relating to strengths and deficiencies in service provision and the potential for transferring good practice from one country to another. Secondly, it will draw on a recent overview of mental health and social care practice with respect to unaccompanied asylum-seeking children highlighting in particular the impact of broader consid-

erations of asylum law and policy. Finally, the implications of these studies will be explored in the context of a proposed model for the examination of the interrelationship between socio-political factors and the mental health of refugees.

## The Impact of Modes of Social Integration on Individual and Collective Well Being

Antoine Gailly, Center for Mental Health Brussels, Belgium

n this presentation we discuss the modes of social integration of migrants and refugees as conceived by Belgian policy and as perceived by Belgian people. At the same time the impact of the modes of integration on the mental health and on the individual and collective well-being of Belgians, immigrants, and political refugees will be examined. In a second part of this presentation, the impact of the modes of social integration on the functioning of mental health services and its implications for developing strategies in providing culturally sensitive care will be discussed.

## **Working Together for Public Health**

Pompeo Martelli, Francesca De Luca & Rosaria Bruno Center for Studies and Research on Public Health Rome, Italy

taly's recent economic growth and strategic position in the Mediterranean Sea have made it a prime destination for immigrants and asylum seekers in Europe. Despite its well-developed health care system, statistics on foreign citizens' health are worrisome. In 1998, public health services were extended to illegal immigrants that now have the right to necessary urgent and non-urgent medical assistance even for a continued period. This presentation examines a two-year joint intervention project between the Center for Studies and Research on Public Health (Mental Health) Local Health Agency Roma E and the non-governmental organization Médecins Sans Frontières (Doctors Without Borders) in Rome. Medical assistance (consultation and clinical services) in public out-patients' departments was supported by socio-anthropological outreach programs toward immigrants, refugees and ethnocultural minority populations. In addition, training courses for health operators were provided to analyse epidemiological data resulting from the project, and to explore health workers' approaches to the different ways of expressing distress and illness, pregnancy and motherhood, that they encountered every day.

## **Reconstructing the Displaced Self**

Marian Shermarke PRAIDA McGill University

rauma damages the physical, emotional and psychological integrity of individuals and their families. It also often leaves the individual with the sentiment of being alone with the pain. Isolation, marginalization and exclusion in the host society increase the sentiment of loneliness that many refugees continue to feel even after they access a physically safe environment. For many refugees, to engage in the reconstruction of the self it is essential to have an environment that facilitates, encourages, supports, and promotes this process. Moreover, the reconstruction of the self requires self-cohesion to some extent. This presentation is a reflection on the conditions that can engage the refugee in the reconstruction of the self-process. This presentation attempts to illustrate the necessity of having optimal conditions and consistency in three spaces within the host society's environment in which refugees evolve: therapeutic space, institutional space, societal space. The lack of consistency within these spaces can reduce the chances of cohesion and lead the process of reconstruction towards further compartmentalization.

## Holding the Narrative of Exile: Strategies of Intervention

Jaswant Guzder McGill University

he intrapsychic strategies for survival of those in forced exile have many parallels to those used by actual refugees. A "refugee" identity may remain a longstanding psychological solution, with both external and intrapsychic contexts. Those who remain in "exile" as psychological refugees may need to remove themselves from their country of origin to survive traumatic intrusive memories and overwhelming mental states. Using video and case history narrative of such a patient, the presentation will focus on the patient's struggle to deal with catastrophic unresolved traumatic experience invoking holding, alienation, paranoia, rage and exile as themes. To facilitate coping strategies, increase parenting capacity, further repair of trauma and establish an entitlement to life, the therapeutic agendas indicated a need to have a narrative held in the therapeutic milieu. This process allowed the patient to differentiate herself from the memories and mental states associated with the trauma first experienced in her country of origin. Using the voice of the patient, the presentation will address therapeutic strategies and the intrapsychic and external realities that remained challenging in the therapy work.

## In Praise of Displacement: The Life-Project of the Global Guest

Nigel Rapport Concordia University, Montreal

The paper makes an argument concerning the "healthiness," personal and social, of attaching oneself to a sense of the movement of one's life, and to a life-project of pursuing the global mutuality of this possibility, rather than sentimentalizing fixed and exclusive attachments to land and place. "The locus of truth is always extra-territorial," George Steiner argues: there is no nation, no ethnic community, polis or church that is "not worth leaving," "no community of love, no family, no interest, caste, profession or social class not worth resigning from." Steiner continues:

"[C]ommunitarianism — the ideology of discrete national, ethnic or religious communities, homogeneous, tied by blood, sharing a common birthright of culture, tradition or land — entails the sleep of reason. Patriotism, overriding loyalty to community, entails an abstention from free thought and also from a disinterested pursuit of justice."

Jean-Jacques Rousseau provides Steiner with a name for a habitus he would set against communitarianism: "humanism." Humanism, says Rousseau, is "a theft committed on la patrie." Against recourse to "identity politics," a "politics of cultural recognition," as a mode of resistance to the world's intransigences this paper explores the "humanist" option of making a life-project out of one's global guesthood. It explores the imaginative possibilities of turning one's "hurtgeography" into a narrative aspect of one's identity.

Papers presented at the Advanced Study Institute for Social and Cultural Psychiatry 2006 will be collected in a special edition of the journal.



Poster presentations

Thursday, June 1st, 17h30-19h

## **Mental Disorders among Migrants in West-Siberia**

Caesar Korolenko & Tatiana Korolenko Novosibirsk Medical University Novosibirsk, Russia

he study concerns mental health problems among migrants from the former USSR Republics of Central Asia to Novosibirsk City and its region. 25 persons with mental disorders that developed in a period of 6 to 24 months after their arrival to their new place of living were observed. None of the migrants had any prior complaints relating to their mental state and they were not registered in their previous home psychiatric facilities. According to DSM-IV-TR the patients were diagnosed as suffering from: (1) adjustment disorder (21 persons) and (2) sleep terror disorder with hallucinations based on mythological beliefs (4 persons). Among the individuals with adjustment disorder with predominantly affective symptoms in the form of anxiety and depression, in seven cases pharmacological addiction developed. In patients with sleep paralysis, visual and tactile hallucinations reflected the mythological belief in the house-ghost who attacked them at night during the episode of the disorder. The data obtained display the necessity of the organization of psychiatric and psychological culture-bound approaches to the migrant population.

## **Child Refugees: The Story Telling Game**

Ninik Supartini Gadjah Mada University Yogyakarta, Indonesia

his paper will present common narratives produced by child refugees six years after experiencing traumatic events. In trauma healing, allowing survivors to vent out their

suppressed traumatic memories will help them to relive the events and gain the sense of control over their situation. Four subjects aged 13 to 15 were recruited to participate in the study. The Snakes & Ladders game was used to elicit their stories. Five types of stories were offered: happy, funny, sad, scary, and free. The game was conducted four times, two hours each. No time limit was set for participants to tell their account. The study found that all four subjects preferred telling a "sad" type of story. They either ignored their choice of telling the other types or inserted "sad" nuances in their assigned type of story to tell. Time spent ranged from five to 20 minutes for each participant.

## Gotong Royong: The Javanese Spirit in the Caring for Child Refugees of East Timor

Ninik Supartini & Mahar Agusno Gadjah Mada University Yogyakarta, Indonesia

hen the 1999 East Timor referendum was won by the Independence Group, nearly a hundred thousand civilians fled the country as IDPs/refugees and lived in camps in West Timor. Even after two years, these refugees did not get significant aid. Forty-six children aged 5 to 13 years were transported from the camps to Yogyakarta, Java, Indonesia. These children were "given" to the family of a retired Javanese government employee who used to serve in East Timor. This paper will describe how this family eventually accepted the responsibility and what cultural values they applied in the caring. It will also look into obstacles, alternatives, community participation, care givers' notion about their duty, and the children's own views on being raised in a different culture, and their hope for the future.

## Differentiating Between Panic Attacks and *Ataques De Nervios* in a Spanishspeaking Dominican and Puerto Rican Immigrant Population

Bryant Williams Columbia University

Ithough clinical scholars from an etic perspective insist that an ataque de nervio is a Spanish idiom for a panic attack implying that the underlying processes are identical, recent findings from several epidemiological studies indicate that they are distinct psychological phenomena with discernable precipitants and symptom presentations. Qualitative research reveals that the subjective experience of these two forms of psychological distress are also distinct. Failure to differentiate between panic attacks and ataques de

nervios can result in misdiagnosis and subsequently the application of an inappropriate treatment protocol. Adequate understanding of the distinction between panic attacks and ataques de nervios is becoming imperative as the number of immigrants of Hispanic origin is rapidly increasing. This poster presentation summarizes the research on the topic and outlines the differences between panic attacks and ataques de nervios. Case material from the author's clinical work with Spanish-speaking Dominican and Puerto Rican immigrants will be used to further illustrate the distinction. The presentation will make recommendations for how the findings of research in the area can be used to increase cultural competency in the treatment of this immigrant population.

## Selected Bibliography

Beiser, M. (1999). Strangers at the gate: The 'Boat People's' first ten years in Canada. Toronto, ON: University of Toronto Press.

Beiser, M. (2006). Longitudinal research to promote effective refugee resettlement. *Transcultural Psychiatry*, 43(1), 56-71.

Beiser, M., & Hyman, I. (1997). Refugee's time perspective and mental health. *American Journal of Psychiatry*, *154*(7), 996-1002.

Beiser, M., & Hyman, I. (1997). Southeast Asian refugees in Canada. In I. Al-Issa & M. Tousignant (Eds.), *Ethnicity, immigration, and psychopathology* (pp. 35-56). New York: Plenum Press.

Crépeau, F., & Nakache, D. (2006). Controlling irregular migration in Canada: Reconciling security concerns with human rights protection. *Shaping Canada's Future: Immigration and Refugee Policy Paper Series*, Montreal: Institute for Research on Public Policy. Available on line: http://www.irpp.org/fr/index.htm.

Kirmayer, L. J. (2002). The refugee's predicament. L'Évolution Psychiatrique, 67, 724-742.

Kirmayer, L. J. (2003). Failures of imagination: The refugee's narrative in psychiatry. *Anthropology & Medicine*, *10*(2), 167-185.

Porter, M., & Haslam, N. (2005). Predisplacement and postdisplacement factors associated with mental health of refugees and internally displaced persons: A meta-analysis. *Journal of the American Medicial Association*, 294(5), 602-612.

## REFUGEES AND FORCED MIGRATION

Rousseau, C., Crépeau, F., Foxen, P., & Houle, F. (2002). The complexity of determining refugeehood: A multidisciplinary analysis of the decision-making process of the Canadian Immigration and Refugee Board. *Journal of Refugee Studies*, *15*(1), 43-70.

Rousseau, C., & Drapeau, A. (2004). Premigration exposure to political violence among independent immigrants and its association with emotional distress. *Journal of Nervous & Mental Disease*, 192(12), 852-856.

Rousseau, C., Drapeau, A., Lacroix, L., Bagilishya, D., & Heusch, N. (2005). Evaluation of a classroom program of creative expression workshops for refugee and immigrant children. *Journal of Child Psychology & Psychiatry*, 46(2), 180-185.

Rousseau, C., Drapeau, A., & Rahimi, S. (2003). The complexity of trauma response: A 4-year follow-up of adolescent Cambodian refugees. *Child Abuse & Neglect*, *27*(11), 1277-1290.

Rousseau, C., Rufagari, M. C., Bagilishya, D., & Measham, T. (2004). Remaking family life: Strategies for re-establishing continuity among Congolese refugees during the family reunification process. *Social Science & Medicine*, *59*(5), 1095-1108.

Silove, D. (1999). The psychosocial effects of torture, mass human rights violations, and refugee trauma. *Journal of Nervous and Mental Disease*, 187(4), 200-207.

Silove, D., Steel, Z., & Watters, C. (2000). Policies of deterrence and the mental health of asylum seekers. *Journal of the American Medical Association*, 284(5), 604-611.

## REFUGES MIGRATION

Faculty

Abdel Hamid Afana, PhD, is the President of the International Rehabilitation Council for Torture Victims (IRCT), and Director of Training and Research Department at the Gaza Community Mental Health Programme. As a clinical psychologist, Dr. Afana believes that mental health and human rights are inseparable and that mental health professionals have a role in community development and building bridges for peace through health. These ideas are reflected in his clinical, community work and publications. He is the founder of a postgraduate diploma in Community Mental Health and Human Rights. Currently, he is doing postgraduate studies at McGill University, analyzing culture, context and coping among refugees and immigrants in different contexts. He is a member of national, regional and international organisations and professional bodies in fields related to health and human rights.

Mahar Agusno, MD, is Chairman of the Department of Psychiatry, Sardjito General Hospital, and Lecturer and Executive Secretary of the Psychiatry Study Program, Gadjah Mada University Medical School, Yogyakarta, Indonesia. He is also a member of the Center for Bioethics and Medical Humanities at the Gadjah Mada School of Medicine, and Chair of the Indonesian Psychiatrist Association, Yogyakarta. In 2002-2003, he was a fellow in the Department of Social Medicine, Harvard University. His past work includes projects on psychological trauma among children of expolitical prisoners, post-traumatic stress disorder (PTSD) among East Timorese children and healing, trauma and psychosis. His current research concerns attention deficit disorders and hyperactivity in the perspective of Javanese child rearing patterns.

Morton Beiser, MD, is Professor of Psychiatry at the University of Toronto, founding Director of the Toronto Centre of Excellence for Research on Immigration and Settlement (CERIS), and National Scientific Coordinator of the Reducing Health Disparities Initiative of the Canadian Institutes of Health Research. He has been Principal Investigator for epidemiological studies including the Refugee Resettlement Project, a 10-year investigation of the more than 1300 Southeast Asian "Boat People" in Canada; Immigrants and Tuberculosis, an investigation of factors accounting for the high risk for Tuberculosis among immigrants and refugees; Growing Up in Canada, a study of the children of the Southeast Asian refugees who took part in the Refugee Resettlement Project; Community in Distress, an investigation of the mental health of 1600 adult Tamils living in Toronto; and The New Canadian Children and Youth Study, a national, longitudinal investigation of the health and development of approximately 5,000 immigrant and refugee children in Montreal, Toronto, Winnipeg, Edmonton, Calgary, and Vancouver. From 1986 to 1988, Dr. Beiser chaired a federal government task force devoted to the mental health of immigrants in Canada, and was the principal author of the final report, After the Door Has Been Opened. He is also the author of Strangers at the Gate, University of Toronto Press 1999, and the co-editor of Immigration, Ethnicity and Health, University of Toronto Press.

**Gilles Bibeau**, PhD, is Professor in the Department of Anthropology, Université de Montréal, Canada. Between 1966 and 1979, he lived in Africa where he studied African medicine and religions with a special focus on their transformations within urban settings. Over the past two decades, his Canadian research activities have centered on four main

topics: ethnographic studies of mental health problems; the culture of drug addicts and shooting galleries; the adaptation process of immigrants; and the universe of young people. In parallel to his studies in Canada, he has worked in close association with Ellen Corin on the development of international comparative research (Brazil, Peru, Côte d'Ivoire, Mali, India, Italy, Romania) dealing with the ways people identify, explain and handle mental health problems. Currently he leads an international network named REDET (Social Determinants of Health) with collaborators from schools of public health in Brazil, Peru, Nicaragua, Costa Rica, and Canada.

**Ellen Corin**, PhD, is Associate Professor in the Departments of Anthropology and Psychiatry, McGill University and researcher at the Psychosocial Division of the Douglas Hospital Research Center. She is a practicing psychoanalyst and a member of the Canadian Psychoanalytic Society. She did fieldwork in Central Africa on traditional medicine and therapeutic spirit possession rituals. Her current research focuses on the cultural articulation of psychotic experience in India and in Montreal. Her work also questions and reframes the notion of "recovery" that is used as a key signifier for orienting and evaluating current practices in mental health.

François Crépeau, LLD, PhD, is Professor in the Faculty of International Law, Université de Montreal, Canada Research Chair in International Migration Law, and Scientific Director of the Centre for International studies. He was the founding Director of the Centre d'études sur le droit international et la mondialisation (CEDIM) at Université du Québec à Montréal (UQÀM). His current research includes studies on refugee law in an international context, the process of determination of refugee status, and the impact of globalization on vulnerable populations.

**Pierre Dongier**, MD, is Medical Director of the Clinique Santé Accueil, a medical clinic for refugee claimants in the Montreal area. He worked for 6 years on international cooperation projects in Africa (Guinea Bissau and Ivory Coast). He is a founding member of RIVO, an NGO working with survivors of organized violence.

Suman Fernando, MA, MD (Camb.), FRCPsych (UK), is an Honorary Senior Lecturer in Mental Health at the European Centre for the Study of Migration & Social Care at the University of Kent (UK) and Visiting Professor at London Metropolitan University, London (UK). He is a practising psychiatrist and has lectured and written widely on issues of racism and cultural diversity in mental health and social care, and is also involved in non-governmental organisations (NGOs) serving Black and Minority Ethnic (BME) groups in London (UK). Originally from Sri Lanka, which he visits regularly, he is researching mental health there, and is vice-patron of a mental health NGO. His latest book is Cultural Diversity, Mental Health and Psychiatry: The Struggle against Racism (Brunner-Routledge, 2003). His recent papers include Multicultural Mental Health Services: Projects for Minority Ethnic Groups in England (Transcultural Psychiatry, 2005) and Mental Health Services in Low-Income Countries (International Journal of Migration & Social Care, 2005).

Antoine Gailly, PhD, studied psychology and anthropology at the University of Leuven, Belgium. He is Director of the Center for Mental Health of the Region of Brussels Capital, Belgium where culturally responsive therapy is provided for children, adolescents, and adults with different ethnocultural backgrounds (immigrants, political refugees, asylum-seekers, and people without documents). The center also organizes training and supervision in culture responsive therapy. He has done research in Turkey and North Africa in the fields of medical anthropology, ethnicity, multicultural(ism) (personality), the anthropology of migration, and transcultural psychotherapy. He also participates in an international educational program for linkworkers and translators in mental health services. He is the president of the Dutch platform for Culture and Mental Health in Belgium and a member the Advisory Board for Mental Health for the Belgian government, and of different national and international networks and associations. He has published in national and international scientific journals and is the author or co-editor of several books.

**Jaswant Guzder**, MD, is Head of Child Psychiatry, Director of the Childhood Disorders Day Hospital and senior staff of the Cultural Consultation Service at the SMBD-Jewish General Hospital. She is an Associate Professor of Psychiatry, McGill University (Division of Child Psychiatry and Divi-

sion of Transcultural Psychiatry), Adjunct Professor with the McGill Faculty of Education, psychoanalyst, and supervisor for the Concordia University Masters program in Creative Art Therapies. Her research collaborations, teaching and publications have been on issues related to high-risk children, Asian families in therapy, and psychotherapy of migrants.

**Edvard Hauff**, MD, PhD, is a psychiatrist, Professor of Transcultural Psychiatry and Head of the Institute of Psychiatry, University of Oslo. He is also Director of Psychiatric Education, Ulleval University Hospital and has a part-time international psychotherapy practice. He serves on the Faculty of the Master Course in International Community Health at the University of Oslo. One of his main professional interests is the development of community mental health services and psychosocial rehabilitation in low-income countries. Since 1993, he has been involved in training psychiatrists and establishing mental health services in Cambodia, where he is also Honorary Professor at the University of Health Sciences. He has for many years conducted research, worked clinically and served as an international consultant in the field of forced migration and mental health. Other research interests are narrative medicine, psychiatric epidemiology, traumatic stress, and clinical follow-up studies. He has frequently served as a short-term consultant for the WHO, and is Vice-President [Europe] of the World Association for Psychosocial Rehabilitation (WAPR).

Mark J.D. Jordans holds an MA in Developmental Psychology. He is currently working as a technical advisor for HealthNet TPO in Amsterdam, with a special focus on implementing a 5-country project to provide and research school- and community-based psychosocial care for children in areas of armed conflict. He has lived in Nepal for seven years, where his work concentrated on the development of long-term training courses in psychosocial interventions, resulting in a specialized training institute. His interests and current research activities relate to the development, adaptation and implementation of comprehensive psychosocial care systems from a transcultural perspective.

**Laurence J. Kirmayer**, MD, is James McGill Professor and Director, Division of Social and Transcultural Psychiatry, Department of Psychiatry, McGill University. He is Editor-in-Chief of *Transcultural Psychiatry*, published by Sage (UK) and directs the Culture & Mental Health Research Unit at

the Department of Psychiatry, Sir Mortimer B. Davis-Jewish General Hospital in Montreal where he conducts research on mental health services for immigrants and refugees, the mental health of indigenous peoples, and the anthropology of psychiatry. He holds a Canadian Institutes of Health Research (CIHR) Senior Investigator Award for a research program entitled "The integration of culture in psychiatry," which includes studies on the relevance of the cultural formulation in psychiatric consultation and a cross-national comparative study of models of mental health care for multicultural societies. He also directs a CIHR-funded strategic training program in Culture and Mental Health Services Research.

Victor Lopez, MD, is a Guatemalan Psychiatrist who graduated from San Carlos University in Guatemala City. He completed two years of Postdoctoral Fellowship at the National Institute of Health in Bethesda, MD. His work experience includes research, teaching and clinical practice at different levels. His main interests are mood and anxiety disorders in victims of trauma, and migants' mental health issues.

Pompeo Martelli, MD, PhD, is Scientific Director of the Center for Studies and Research on Public Health, Local Health Agency Roma, and Director of the Mind's Museum. He has worked for 20 years in the Department of Mental Health, Local Health Agency Roma E, in the former Psychiatric Hospital S. Maria della Pietà of Rome, and he plays an active role on a public health project, in co-operation with Médecins Sans Frontières, to improve culturally sensitive and competent health services. Dr. Martelli is an ethnopsychologist and psychotherapist, a Lecturer in Medical Anthropology at the Faculty of Medicine-Institute of Psychiatry, Catholic University of Rome, a Lecturer in Psychology at the University of Rome La Sapienza. He edited the following Italian editions: The Mental Health of Indigenous People by Alex Cohen (WHO, Il Pensiero Scientifico Editore, Rome, 2002); Aboriginal Health and History, Power and Prejudice in Remote Australia by E. Hunter (Edizioni Kappa, Rome, 1999); Mental Health Promotion of Young People by L. Rowling, G. Martin, L. Walker (McGraw Hill, Rome 2004). He is a Fellow of the Italian Society of Medical Anthropology, of the Australian Transcultural Mental Health Network, and of the World Association for Psychosocial Rehabilitation.

Duncan Pedersen, MD, MPH, is Associate Scientific Director [International Programs] at the Douglas Hospital Research Center, and Associate Professor in the Department of Psychiatry, Faculty of Medicine, McGill University. He is also Scientific Director of the Montreal-based WHO Collaborating Centre for Research and Training in Mental Health. A physician with post-graduate studies in epidemiology and medical anthropology, he has extensive fieldwork research experience in Latin America-most importantly in the Andean countries, the Amazon region and Northeast Brazil-working amongst indigenous peoples and the urban poor. He is Senior Editor for the international journal Social Science & Medicine. His interests include cross-cultural, ethnographic and epidemiological research on social determinants of health, structural violence and mental health outcomes. He is also recipient of a MacArthur Foundation Research and Writing Grant award for his work in political violence and trauma in Peru. He is currently leading a comparative multi-site research initiative on stigma and the dynamics of structural discrimination and social exclusion in severe mental illness.

Matthew Porter, PhD, is a Postdoctoral Fellow at Mount Sinai School of Medicine in New York City. He originally became interested in stress, resilience and mental health in 1996 and 1997, while he was living and working as a UN Peacekeeper in a refugee community in the former Yugoslavia. He went on to earn a doctorate in clinical psychology from the New School for Social Research in 2005. There, he received the Alfred J. Marrow Award for his dissertation, which examined the moderating role of enduring sources of postdisplacement stress in refugee mental health and identified markers of psychological resilience in refugees. That project was later published in the Journal of the American Medical Association. In his current position, Matt continues his study of the relationship between stress, psychosocial variables and psychological resilience-now in cancer patients.

**Nigel Rapport**, MA (Cambridge), PhD (Manchester), is a social anthropologist. He holds the Canada Research Chair in Globalization, Citizenship and Justice at Concordia University of Montreal, where he is Founding Director of the Centre for Cosmopolitan Studies. He is also Professor at the Norwegian University of Science and Technology, Trondheim.

He has been elected a Fellow of the Royal Society of Edinburgh. He has undertaken four pieces of participant-observation fieldwork: among farmers and tourists in a rural English village (1980-1981); among the transient population of a Newfoundland city and suburb (1984-1985); among new immigrants in an Israeli development-town (1988-1989); and among health-care professionals and patients in a Scottish hospital (2000-2001). His research interests include social theory, phenomenology, identity and individuality, community, conversation analysis, and links between anthropology and literature and philosophy. His recent books include: The Trouble with Community: Anthropological Reflections on Movement, Identity and Collectivity (Pluto, 2002); 'I am Dynamite': An Alternative Anthropology of Power (Routledge, 2003); and (as editor) Democracy, Science and The Open Society: A European Legacy? (Transaction, 2006).

Celia Rojas-Viger, MD, PhD, is a visiting professor at the Healthcare Administration Programme and Anthropology Programme of the University of Montreal. She holds a doctorate in Anthropology, a Peruvian Doctorate in Medicine and a Masters Degree in Community Healthcare from the Department of Social and Preventive Medicine of the Université de Montréal, where she is currently working on a post-doctoral degree at the Interdisciplinary Research Centre on Family Violence and Violence Done to Women (CRI-VIFF). She developed expertise in mental health promotion while engaged in international development work. She became an acknowledged expert in the promotion of mental health while engaged in international development work in the working-class communities of Lima, Peru, from 1982 until 1987. During that period, she was a professor in the Faculty of Medicine of the Greater National University of San Marcos, and contributed to the development of the Community Healthcare Section. Her interest in socio-sanitary and cultural issues has driven her to work in workingclass neighbourhoods and also with immigrant populations. She has participated in both treatment and research at the Transcultural Clinic of Jean Talon Hospital, while continuing her studies on the impact of pre-migration and post-migration violence on Latin-Americans and in particular on Peruvians, and on the mediation of the body in the process of adaptation to the Montreal urban environment. The development of these themes, begun during her research at the Douglas Hospital, became the core of her doctoral thesis in

anthropology (2004), entitled *Body-Fact-History in the Globalization, Migration and Establishment in the Host Society Process: The Trajectory of Peruvian Immigrant Women in Montréal.* 

**Cécile Rousseau**, MD, MSc, is an Associate Professor of Psychiatry at McGill University and directs the Transcultural Child Psychiatry Research Team at the Montreal Children's Hospital. Her clinical work is with refugee and immigrant children, mainly in the area of trauma and psychosis, and she consults for health institutions and school boards. Her current research involves evaluation of programs for refugee children and adolescents in schools.

Marian Shermarke holds an MA in Economics and International Relations, an MSc in Law and Science in Intellectual Property, and an MSW. She currently works with refugees as a counsellor at PRAIDA/CSSS de la Montagne Cote des Neiges, Montreal. She is also a lecturer at the McGill School of Social Work on Refugee Policy & Practice and International Social Work. She is member of a number of NGOs in the fields of human rights advocacy and clinical intervention networks with refugees. Ms. Shermarke coaches workers dealing with immigrants and refugees in institutional and NGO settings on cross-cultural and mediation approaches.

Derrick Silove, MD, PhD, is Professor and Director, Centre for Population Mental Health Research, University of New South Wales and Sydney South West Area Health Service. He has had a longstanding interest in the mental health of refugees and postconflict populations. He has played a role in developing torture and trauma services in Australia and in establishing mental health services in postconflict countries. His team currently is undertaking research and/or service development in East Timor, Vietnam, and the Solomon Islands. He is an active researcher, teacher and clinician, with a special focus on the human rights issues associated with the mental health of asylum seekers. In particular, he and his team have focused on developing conceptual models that extend beyond narrow definitions of trauma and on researching the postmigration stresses, including detention, that impact on refugees living under conditions of ongoing insecurity.

Donna E. Stewart, MD, FRCPC, graduated as a gold medalist in medicine from Queen's University. After interning at Toronto General Hospital, she worked as a general practitioner in Northern Ontario. She then studied psychiatry in London (England), Los Angeles, and the University of Toronto, before completing her fellowship examinations in psychiatry for the Royal College of Physicians and Surgeons of Ontario. Dr. Stewart has practiced psychiatry for over 30 years, as a faculty member at the University of Toronto Faculty of Medicine and as a senior researcher, educator and administrator. Since 1993, she has been a Professor in Psychiatry with cross appointments in Obstetrics and Gynecology, Anesthesia, Surgery, Medicine, and Family and Community Medicine. In 1995, she became the Chair of Women's Health at the University Health Network and University of Toronto, and in 2004, she became a "University Professor" at the University of Toronto. She is currently President of the International Association of Women's Mental Health, and in January 2006, became the World Psychiatric Association's Co-Chair of the Review Committee Investigating International Abuses of Psychiatry. Dr. Stewart has presented at the United Nations Commission on the Status of Women in 2004 and 2005, (with some success) on the need for privileged Western countries to take the lead in protecting vulnerable victims against human trafficking.

Charles Watters, PhD, is Director of the European Centre for the Study of Migration and Social Care in the School of Social Policy, Sociology and Social Research at the University of Kent. His recent research includes a comparative study into the mental health and social care of refugees in four European countries for the European Refugee Fund of the European Commission, and a study of reception arrangements for unaccompanied asylum seekers in the UK. He is currently undertaking research under the ESRC Identities and Social Action Programme on the impact of the immigration process on children's identities. His international activities include Visiting Professor at the University of Brasilia, where he is developing a research programme on internal migration and mental health. His most recently published paper is Watters, C., and Ingleby, D. (2004). Locations of Care: Meeting the mental health and social care needs of refugees in Europe, International Journal of Law and Psychiatry. He is the editor of the International Journal of Migration, Health and Social Care.

# REFUGES AND FORCED MIGRATION Total Toformation

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## SCREENING AND DISCUSSION THURSDAY, JUNE 1<sup>ST</sup>, 19H-21H

CONTINUOUS JOURNEY is an inquiry into the largely ignored history of Canada's exclusion of the South Asians by a little known immigration policy called the Continuous Journey Regulation of 1908. As a direct result of this policy, in 1914, the Komagata Maru, a ship carrying 376 immigrants from British India, was turned away by Canada. Only a half-mile from Canadian shores, the Komagata Maru was surrounded by immigration boats and the passengers were

held incommunicado-virtual prisoners on the ship. Thus began a dramatic stand-off which would escalate over the course of two months, becoming one of the most infamous incidents in Canadian history.

During their two-month detention in the harbour, Canadian authorities drove the passengers to the brink of thirst and

starvation. The stand-off was broken with the intervention of Prime Minister Robert Borden who called in a Canadian battleship to underline his stance. On 21 July, over 200 fully armed local militia lined the shore while The Rainbow prepared for confrontation on the sea. All of Vancouver was out for the spectacle. A major confrontation was averted only through eleventh-hour negotiations, but in the end the Komagata Maru was provisiond for her return journey.

The consequences of the incident were dire: informants within the community were murdered and a key player for the Empire was assassinated. Upon its return to India, the Komagata Maru encountered hostile British authorities who fired on the passengers, suspecting them to be seditious. Over 40 people were killed or went missing. Some of the passengers escaped, including Gurdit Singh, who lived to tell

> the "true story" of the Komagata Maru. Several hundreds of Indians from Canada returned home to join an armed struggle against the British that would later be brutally crushed by the colonial authorities.

> The Komagata Maru's voyage and its aftermath exposed the Empire's myths

of equality, fair-play and British justice, and became a turning point in the freedom struggle in India. By examining the global context and repercussions of a Canadian event, Continuous Journey challenges us to reflect on contemporary events, and raises critical questions about how the past shapes the present.

Toronto, Canada. His films include Shooting Indians -A Journey with Jeffrey Thomas (1997), Passage form India (1997), Some Kind of Agreement (1998), Documenting Dissent (2001), and Runaway Grooms (2005). Continuous Journey won the Golden Conch Award at the Mumbai International Film Festival.



