NEW YORK, OCTOBER/NOVEMBER 2011. Standing around the perimeter of Zuccotti Park were people holding hand-lettered signs. Some stood silent; others spoke with people passing by. Signs included the political (“Too Big to Fail is Too Big to Allow”), the literary (Whitman’s “Do I contradict myself? Very well then, I contradict myself”) and the personal (“56-year old unemployed seamstress knitting for OWS”). Zuccotti Park was all at once a political demonstration, a Speakers’ Corner, a sit-in and a crowded miniature neighborhood. The “Good Neighbor Policy” (“...abusive and disrespectful language will not be tolerated”) represented one of many messages distinguishing OWS from its 1960’s predecessors.

When I identified myself as a psychologist at the Information Tent or the Medical Tent, there was always someone eager to discuss the community’s mental health concerns. Like the movement itself, the needs of the community were evolving day-to-day. Two weeks into the occupation, “Support Group” volunteers had signed up to patrol the park, check in with point people, and talk to those who seemed depressed, anxious, or panicky. This inclusive group welcomed both volunteers who did not fall into the “healer-victim” model of mental health service as well as traditionally trained professionals like me! Talk of setting up a “quiet tent” began and Trinity Church offered daytime quiet space.

MENTAL HEALTH

Not long after, a young nurse from the “Medical Group” told me that the problem of “schizophrenics, and addicts who have begun to show up” were #1 on his problem list. At a “Support Group” meeting, I witnessed a moving discussion about this problem. In attendance were occupiers, volunteers and representatives from NY City Departments for Homeless Services. The meeting was long, and the language respectful: One occupier described how “it is natural for the vulnerable of society to gravitate to our community” and urged all to find ways to help without forcing them to leave. Many of these young occupiers embraced “the 99%” in ways that were, to me, inspiring. (On one visit, I saw a number of presumably untrained folks speak compassionately with an agitated individual and calm him down.) A referral system was begun that night but the problem of those who didn’t want to accept such services remained.

Purposefully decentralized, the movement included at least 82 working groups. The “Empathy and Mediation” group offered a place to share emotional experience and discuss non-violent resistance. The “Security” group was essential in dealing with the considerable anxiety generated by incidences of sexual assault and harassment. Volunteers from PNS (Physicians for National Health) offered supervision to the “Medical” group and organized 99 doctors to administer “Flu Shots for the 99%.”

As we began to establish a forum for the volunteers to address the frustration/burn-out that was setting in, the encampment was forcibly ended. Organizing and meeting continues, but mental health work for the community is on hold — for now!

Sharon Kozberg, Ph.D. skozberg@aol.com

CONTINUED ON PAGE 3
President’s Column

I AM PLEASED to be writing my first President’s Column for the Section IX newsletter. I want to begin by recognizing the outstanding leadership of our outgoing president, Alice Shaw. I look forward to working with her and with our board during my tenure as president of the Section.

Our board was quite active during the fall. We added our name to those of the many mental health organizations in support of an Open Letter to the DSM5 Task Force and the American Psychiatric Association critical of aspects of the new DSM5. Concerns include the lowering of diagnostic thresholds for multiple disorder categories, the introduction of disorders that may lead to inappropriate medical treatment of vulnerable populations, and proposed changes to the definition of mental disorder that place more emphasis on biological theory than sociocultural variation. See the complete letter and list of all signatories at http://www.ipetitions.com/petition/dsm5/.

We organized a petition that collected signatures from Section IX members in support of Ethical APA’s demands that APA correct its failure to properly execute the 2008 membership referendum that, with specified exceptions, prohibits psychologists from working in detention settings that violate international conventions against torture. Approximately 80 members signed the petition, which was delivered to Frank Summers, President-elect of Division 39.

OCCUPY PSYCHOANALYSTS

This issue of The Psychoanalytic Activist includes articles about the Occupy movement, including first-hand reports and photographs by some Section IX members. As you know, the Occupy movement is a civil and nonviolent series of protests against social and economic inequality, corporate greed, the influence of corporate money and lobbyists on government, undeclared ongoing wars that deplete national budgets that could be dedicated to address our huge domestic needs, and elected officials who are more interested in their own re-elections than in representing the citizens who elected them. In our commitment to social responsibility, the Section board has followed the lead of other progressive professionals and artists to create a web site, Occupy Psychoanalysts (http://www.occupypsychoanalysts.com/). We invite those of you who have not yet signed the statement on the site to do so and to use and add to the number of links that provide information about the movement. We urge you to contribute to the site, which is still in a rudimentary state. Some of our colleagues have offered mental health services to Occupy activists, and colleagues in other countries have been active as well. For example, our British counterpart, Psychotherapists and Counsellors for Social Responsibility, has planned a series of events under the rubric Psychopolitics: Occupy the Madness, the venues of which are Tent City University, Occupy LSX, St Paul’s, London (see http://pcsr-uk.ning.com/). We are hoping that in the coming year, our Board can provide a direction for members who will be interested in organizing events to address the psychological impact of living in a society so deeply divided between the 99 and the one percent.

JOIN US!

We on the Section IX board are aware of how busy all of our lives are and how difficult it is to add yet more activities to already jammed schedules. However, those of us who have been active on the board and/or its committees have found this closer ongoing contact with like-minded colleagues has been a source of comfort, liveliness and fun — an antidote to life in an increasingly despairing and alienating world. We welcome you to become active in the life of our Section, and in this regard, I want to let you know that we have changed our bylaws to the following:

Members, Fellows and Affiliates of Division 39 who are interested in psychoanalysis in relation to social issues are eligible to join Section IX as members. The position of Section Representative to the Division Board must be in compliance with the Bylaws of Division 39, so that psychologists must be members of APA in order to run for Division representative.

I look forward to seeing you during the Division 39 meetings in April in glorious Santa Fe, New Mexico. Our Section activities are all on Saturday, April 21: our invited panel is from 10 a.m. to noon; our board meeting is from noon-2 p.m. (we urge you to attend as observers); and our reception is at 6 p.m. Please encourage your friends and colleagues to join our Section, as our engagement in addressing the social matrix of psychic conflict and pain could not be more relevant in today’s world.
I loved Occupy Wall Street the moment I read those three words on the CNN crawl. Hadn’t Michael Moore ended *Capitalism: A Love Story* by putting crime scene tape around Goldman Sachs? It seemed that someone had finally summoned the precise rubric needed to call our collective outrage to action.

I was itching to leave Philadelphia for Zuccotti Park when, on October 6th, Occupy Philly burst on the scene. We had one advantage over NYC: Our encampment was at City Hall — smack in the center of town. People came to check it out in part because they couldn’t avoid it. Many stayed for the teach-ins — from the history of the New Deal and civil rights to the non-violent strategies of Ghandi and Dr. King, and lectures on anarchism and socialism.

Newspapers ignored us for a few days, then realized they couldn’t. There was no doubt this was part of a democratic awakening. You know your movement is inclusive when homeless people and Warren Buffett agree: This movement is what the 99% need.

The strongest criticism of the Occupy movement has been about our “fuzzy demands” or “inconsistency of message.” As someone raised Catholic, I have to laugh. We have a majority party in Congress that loves Jesus but hates poor people. And *Occupy* is “inconsistent”?! We need an ongoing period of reflection, of course, but that’s a hard sell in a culture that invented the sound-bite and behavior therapy.

As the Lacanian psychoanalyst, Slavoj Zizek, said in a speech at Zuccotti park: The movement may be without specific demands, but it’s not without content.

Here are some small things we did at Occupy Philly before we were dispersed by police at the end of November:

- Held a massive campaign to support a Constitutional Amendment (recently introduced by Rep. Donna Edwards of Maryland) that will overturn “Citizens United” to outlaw corporate spending in elections.
- Joined “Move your Money Day” to take money out of the mega-banks and into small banks and credit unions. (This hurts them more than you would imagine.)
- Started “Occupy Vacant Lots,” which involves clearing lots in which we — rich, poor, homeless — can start collective gardening in spring.

Even if nothing more were to happen, the movement has already been a success by changing the national conversation. Almost no one but Senator Bernie Sanders was talking about how the 1% owns more than the bottom 99% before this movement broke out. Now one hears it everywhere. Will the candidates try to co-opt it? Let them. Let it become an ordinary thing for citizens to ask candidates: What have you done for the poor and homeless lately?

Anyone wondering how this all got started should check out the article by Mattathias Schwartz (“Pre-Occupied”) in the *New Yorker*, Nov. 28, 2011, p. 28. This is not to be confused with a later *New Yorker* article that was not as good.

Come to Philadelphia in July (date TBA) for a general meeting of all Occupy groups. We need more psychoanalysts!

MIC CHECK!!!
Deborah Anna Luepnitz, Ph.D.deborlue@mail.med.upenn.edu

CONTINUED ON PAGE 4
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NEW YORK, SEPTEMBER 2011. About a week or two after OWS began in Zuccotti Park, my wife and I decided to take the #1 train to lower Manhattan to see for ourselves what this group of “occupiers” was like and what they wanted. What we found was a small, enthusiastic band of diverse, mostly young, people with cardboard signs and strong voices speaking about the many injustices they and others are faced with.

For us it was like a time warp into the 50’s, 60’s and 70’s when we were involved in “movements” that made a difference. Now, 40-60 years later, we were feeling hopeless that there would ever be a time in the US when another historically important social justice movement would develop to address the suffering of many.

What we have seen since September has given us some small degree of hope. So, we tried to do something to help. We delivered food and clothing to the occupiers. We went to 3 events associated with the “occupation”. We walked in a Health Care march up Broadway. It was exhilarating to be part of a group of young and old health care professionals marching together in the streets of Manhattan chanting slogans that made sense to all of us.

We also attended one of the “general assemblies” at Washington Square Park where we were first exposed to the “open mic” process. Instead of listening to charismatic speakers from a distance, the experience of being in a group where we repeated what others said made us feel like participants rather than followers. It gave us a natural high. But the most inspiring OWS event for us was when we marched with hundreds of like-minded New Yorkers down Broadway from 96th Street to Columbus Circle (October 21). Part of the way we were joined by 92 year old Pete Seeger, who walked along with us with the help of his two canes and friends, all of us singing his peace songs from the 50s and 60s.

I am now devoting some of my time trying to take the OWS movement to my students, so they will see how important it is for them to “occupy” psychology, for their benefit and for those vulnerable people they will be serving. I want them to see that this is another road to ethical practice.

Bob Keisner, Robert.Keisner@liu.edu

OCTOBER 8, 2011, WASHINGTON, D.C.

On this, the holiest day of the Jewish calendar, I am participating in “October 2011,” Washington’s parallel to the Occupy movement. “October 2011” is a coalition of political groups, among them Code Pink and Veterans for Peace. Like a form of political tinnitus the chants that I and several hundred others are singing out over Washington ring in my head: “We are the 99%. You are the 99%.” “This is what democracy looks like.” “When Drones Fly Children Die.” This last accompanies our march to the National Air and Space Museum which is about to launch an exhibit of drones. A critical moment occurs as hundreds of us prepare to march on the museum. One of the organizers announces that anyone willing to be arrested should meet with her prior to our starting out. I wonder if I am willing to be arrested and determine that I am not. My justification is that I have an obligation to my patients; I am not willing to incur the time or expense that would be involved in making such a statement. It’s a choice, a difficult one.

Nina Thomas, Ph.D. doctornina@aol.com

To protest the Chamber of Commerce’s P.R. campaign falsely claiming they have jobs for Americans, 300 of us knock on the COC door and chant: “Where are the jobs?”

Stephen Portugues, 10/7/11, Occupy Washington, D.C.
Work Fit for a Psychoanalyst: Mental Health Evaluations of Political Refugees Seeking Asylum

By BARRY COHEN, PH.D.

SEVERAL YEARS AGO, I read a notice on my analytic institute’s listerv stating that the Human Rights Clinic of an organization called Doctors of the World (since re-named Healthright International) was seeking mental health professionals for the task of assessing people seeking political asylum in the United States. The individuals were identified as survivors of persecution and other human rights violations in their countries of origin. Mental health professionals were being recruited to conduct psychological evaluations in order to document the impact of the persecution and to prepare affidavits which could be presented as expert testimony for the immigration process.

NEEDING MORE

The notice arrived at a time when I was eager to add meaningful pro bono activity to my life. Years earlier I had made the transition from institution-based clinical work to a rewarding private practice. I had completed my analytic training and continued meaningful involvement at my institute. I had developed a full and fulfilling professional life planning and attending conferences, engaging in peer supervision groups, seeking opportunities for continuing my education and developing my clinical skills.

But for a number of years I had also been preoccupied with the task of generating income. I had reached the stage in my life where my needs (and desires), as well as those of my family, were growing, and I felt justified and entitled to increase my income, based on my (countless, if not endless) years of training, and a sense that I had developed a fair amount of skill in my profession.

Yet there was something uncomfortable and unsettling about the efforts to maximize my income. Although I maintained a sliding scale for my practice and charged patients a wide range of fees according to their ability to pay, I noticed that I would register a slightly different feeling (happier? more excited? more motivated?) when someone would refer me a full fee patient. Also, I observed an upward “creep” to the minimum fee that I would accept, and felt some shame at the thought that I might ultimately provide services to a population representing only a narrow band of the socioeconomic spectrum (maybe not solely the “one percent,” but certainly not 100 percent either).

A few years earlier, in response to these same qualms, I had searched for an international volunteer experience that would allow me to use my professional skills, and had considered Doctors Without Borders. However their requirement of a six month commitment was beyond the limits of what I could undertake. I settled on the layperson’s experience of home building for Habitat for Humanity in Guatemala, hoping that the mission would take me far outside of my comfort zone, satisfy my desire to provide services to an impoverished population, and to connect with a culture which bore little in common with that of the upper west side of Manhattan. I found the mundane physical labor surprisingly fulfilling, and the experience was significantly enhanced by the opportunity to get to know and work alongside the family whose home was being built. But at the same time I felt a certain degree of envy for two of my Habitat “teammates,” a physician and a nurse, who were able to use their medical skills to provide additional and valuable services to the families.

SERVING A TRAUMATIZED POPULATION

It was in this context, feeling a desire to use my professional skills in the interest of helping an under-served and traumatized population, that I sought training to conduct assessments for seekers of political asylum. I was eager for exposure to people from countries I had never visited, and knew that the contact would provide me with the opportunity to learn of a range of human experiences far beyond what I usually saw in my private practice. I was intrigued by the idea of providing an unambiguously tangible service which would have direct and measurable impact on the clients’ prospects for a political, and literal, sanctuary.

For their assessment, the applicants come to my office. They are usually accompanied by an interpreter, as relatively few of the asylum seekers I have seen speak English. My task is to establish rapport, obtain a relevant psycho-social history and elicit a historical narrative of their experiences in their native land. I assess the psychological impact of these experiences, identify the presence of any diagnosable psychiatric disorders, and make a reasonable judgment regarding the likelihood that the disorders were causally linked to their history of persecution. Finally, I assess the likely impact, if any, on the applicants’ psychological health if their application for asylum is denied and they are forced to return to their country of origin.

WITNESSING

The clients have come from Cameroon, Congo, Kosovo, Montenegro, the Ivory Coast, Pakistan, Guinea, Tibet and the Sudan. The interviews have been translated back and forth between English, French, Albanian, Darfurian Arabic and Tibetan. Applicants have described victimization due to their ethnicity, religion, political party, family relationships, refusal of conscription, and mistaken identity. Their narratives have included both personal accounts of persecution, and stories of witnessing the victimization of loved ones. They have told stories of harassment and threats, beatings, kidnapping, rapes, denial of medical treatment, imprisonment, shootings, and torture. At times they bear, and offer to reveal, physical scars. Their stories of flight from their countries of origin included harrowing tales of ventures into the unknown and uncertain, narrow escapes, multiple legs of a journey by every means of transportation imaginable, and the fortuitous help of friends, families, strangers and hired agents along the way. For most of the people I’ve met, their lives subsequent to their arrival in the U.S. have been characterized by subsistence living and the isolated experience of battling the psychological sequelae of their past traumas. Often they have suffered fear and uncertainty regarding loved ones left behind, and a terror about the prospect of being denied legal status in this country.

I have found the work to be professionally challenging and emotionally difficult.

CONTINUED ON PAGE 6
The Meaning of Race for Immigrants

By USHA TUMMALA-NARRA, PH.D.

I AM 1.5 GENERATION Indian American psychoanalytic psychologist. Having lived in Hyderabad, India until age 7, my childhood memories include being with extended family, warm climate, and large spaces to play, all against a backdrop of political tensions and violence among different Hindu castes, and between Hindus and Muslims. While living with political tensions was not new to my family, our experience of race after immigration, uniquely shaped by U.S. history and politics, was new for us. Adjusting to life here entailed, as it does for many immigrants, the experience of being socialized into the racial designations created by White, European Americans and perpetuated by broader American society. In this process of adjustment, I became a racial and ethnic minority.

In recent years, I have been increasingly concerned about what race means to immigrants in the U.S., and how even as the rhetoric about immigration has heated up, psychoanalysts seem to be notably absent from the discourse. As the Chair of the Multicultural Concerns Committee of Division 39, it’s been my experience that despite the work of our committee, discussions on race and immigration remain circumscribed among a minority of psychoanalysts and psychoanalytic psychologists. The realities of immigration, such as deportation, economic hardship, and xenophobic violence, are shaping the psychological lives of immigrants in contemporary U.S. society. The silence of the potentially helpful psychoanalytic community is a real loss.

Immigration entails a period of transition in which immigrants conceptualize race differently than how constructions of race are constructed by mainstream culture. In this case, race becomes second nature in the U.S., and separation of immigrants socialize into different worlds. Yet, their children feeling as though they are actually living in two different worlds. Different meanings attached to race contribute to immigrants and their children feeling as though they are actually living in two different worlds. Yet, from mainstream lens, these worlds remain invisible and undifferentiated.

ABSENCE OF DIALOGUE
Dialogue about race is difficult within both the clinical encounter and psychoanalysis. Dialogue about race is difficult within both the clinical encounter and psychoanalysis. I believe we may resign ourselves to accept racism as inevitable as a way to maintain privilege. Even in the aftermath of Katrina, when there was dialogue about race and social class, little was mentioned about ways to challenge how race is constructed. Thus race is simultaneously spoken about and not spoken about, leaving those of us who are racial/ethnic minorities doubting our own subjectivity and narrative, in favor of those put forth in mainstream society.

Psychoanalytically oriented clinicians and researchers can offer insights into these neglected areas. The challenges of race, immigration, and the experience of having multiple sociocultural identities as in the case of bicultural and multiracial individuals, involve concepts central to psychoanalytic studies, including power, shame, guilt, sense of goodness and badness, and interpersonal dynamics that both reify and transform stereotypes of the racial and cultural “other.” Psychoanalysis holds unique potential to reveal how the complexities of race intersect with immigration, but only through active participation and overcoming the disavowal of the social and political realities that shape immigrants’ lives.

REFERENCES
Evaluating Asylum Seekers

By BARBARA EISOLD, PH.D.

“THE MEN POURED into our house, screaming that they had come to ‘kill the [Tutsi] cockroaches.’ They carried a gun and machetes. They beat my parents and then they killed them. They shot my father and hacked my mother to pieces. They cut my sister’s arm and then pushed her to the ground. My brothers and I ran outside. They followed us and began to beat us with pieces of wood. We cried a lot. My brothers ran away. Then they knocked me down. Some of them, I don’t remember how many, took turns raping me. They stopped when a whistle blew, the sign for them to move on to more destruction. Before they left, one man said, ‘We should kill her.’ ‘She will die anyway,’ was the reply. They left me there to tend to myself. I was seven.”

I am hearing this story in my role as a pro bono examiner for Physicians for Human Rights. My client, a young woman whose life was recently threatened again, because of appearances she made before a locally organized court in Rwanda,1 protesting the murder of her family, has come to America seeking asylum. My task is to get her to describe, in one long interview, what happened to her. I have a definite agenda: after questioning her in detail, in a manner which makes it difficult for her to fake her symptoms, I shall write a report including a psychiatric diagnosis that will be submitted to a federally appointed immigration judge, in support of her application for asylum. How useful my report will be will depend not only on the clarity of my presentation, but on the skill of the attorney who is presenting her case and the disposition of her assigned judge. In most cases,2 federal immigration judges have complete discretion in deciding who will receive asylum. Some judges are very well informed, others are not.

I choose to do these evaluations for many reasons. As the United States entered World War II, I was living with my family in Washington, D.C. Because everyone’s father was involved in the war, we children learned early about prison camps. Our fear of these was intensified by newsreels, which we watched regularly when we went to see movies like Snow White. In the newsreels, Hitler spoke like a crazy man who had total control of high-stepping soldiers as they marched rigidly, in terrifying, mechanical order. On our block, there was a boy with cerebral palsy, named Ho, who walked that way. We were terrified of him. Whenever he walked down the block, we would scream, “Hitler is coming! Hitler is coming!” and run for shelter. At times the fear was so intense that some kids cried.

Later, in New York City, I had a teacher who had been in Auschwitz, a fact that everyone knew because her number was inscribed on her arm. No one discussed this. Instead, we invented a “prison” game, which we played every chance we got. The largest and most physically developed girl became “The General”; the rest of us were “prisoners.” As the General metered out punishments for unspecified infractions, once again our feelings were intense. We prisoners helped one another cope, but we knew that escape was out of the question.

THE EVALUATIONS

Perhaps it is because these childhood games made me feel surprisingly close to experiences of imprisonment and endangerment that I decided to do asylee assessments. Assessments are so goal-oriented, so rapid-fire, they feel very different from the slow pace of psychotherapy. I like the contrast. However, at the beginning some aspects of the work alarmed me; I would dream about the blood-stopping nature of their tales, this happens less often now. Questioning clients in detail about their pain felt sadistic, exactly what I had been taught not to do as a psychoanalyst. But I changed my mind about this because of client feedback. At the end of some interviews clients have thanked me saying that “although it is hard, each time helps” to get their stories in some kind of perspective. Sometimes my questions help recapture details that have been “forgotten.” The interviews also give me an opportunity to describe the value of “counseling.”

Over time I have developed a more individualized approach to questioning. Now I include questions about the courage that has sustained the asylee through his/her ordeal. This can produce tales of faith and resilience that amaze me. One virtually illiterate Tibetan peasant was held in solitary confinement for nearly a year and beaten regularly. The Chinese wanted information about some nuns for whom he cared deeply. “How did you survive without losing your mind or telling them?” I asked. “I decided that fear was my worst enemy,” he said. “So I convinced myself that the beatings were normal, nothing to be terrified of.” With this conviction and his faith in the Dalai Lama he remained in charge of himself and revealed nothing about the nuns.

CONTINUED ON PAGE 8
To join Section IX, and to renew your membership for 2012, please fill out this form

Your Name: ______________________________________________________________________
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send it with a check for $40
($20 for students and candidates)
made out to “Section IX, Division 39, APA” and mail to:
Ruth Heleine, 2615 Amesbury Road,
Winston Salem, NC 27103

Evaluating Asylum Seekers

CONTINUED FROM PAGE 7

One woman, beaten and serially raped over the course of days by opposing soldiers in her African country, then imprisoned with other women, many of whom died, survived because she pretended to be an innocent country girl, uneducated, and therefore not a member of the opposition. What sustained her, I asked, throughout these days? She told me that she could not bear the thought that no one would care for her mother if she were killed. In listening to these stories, I am struck by how deep attachments, combined with unruffled decision making motivate people to survive.

THE PSYCHOANALYST’S LENS

My curiosity about my clients as individuals, why they are fleeing, and how they survive, is deepened by my psychoanalytic interest and training. I seek to understand everything I can about the person’s motivation, strength of character, intelligence, and survival skills. In my report I summarize my understanding and focus as much as possible on feelings. Judges, attorneys, and agency staff have commented how helpful my evaluations are. Rather than providing a diagnosis and list of symptoms, I believe my psychodynamically oriented questioning yields a much fuller picture of the client, hopefully enabling the court to make an informed decision. But not always.

When the case finally goes to court, I am asked to stand by the telephone in case the judge wants to question me. Twice I have been asked to make an in-court appearance. The small, courtrooms I saw were modern and clean, in contrast to the sub-standard conditions in which illegal immigrants (including asylees) are often housed (Dow, 2004). The cast of courtroom characters includes the judge, the client, his/her attorney, a translator, and an attorney for the government. The latter is there to question the asylee’s statements, which can be done with virulence. On the days I attended, one case was won, to great rejoicing, the other, lost. An appeal, however, was certain.

1 Local courts, called Gacaca Courts, were organized to speed up trials of genocide perpetrators. For more information go to: http://www.idea.int/publications/reconciliation/upload/reconciliation_chap07cs-rwanda.pdf.

2 There are some few situations in which, by law, judges must grant political asylum. Among them are threat of Female Genital Mutilation or on-going spousal abuse.

For those of you who would like to volunteer to evaluate people seeking asylum, here is a list of organizations to contact:

East Bay Sanctuary Covenant, Berkeley, CA. Mike Smith, mike@eastbaysanctuary.org.
Health Right International, New York, NY. Max Shmookler, max.shmookler@healthright.org
Physicians for Human Rights, Boston, MA. Kelly Holz, kholz@phrusa.org.

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