1: THE PHOENIX EFFECT

FROM OPPRESSION AND VULNERABILITY

TO STRENGTH AND RESILIENCE

The phoenix hope can wing her flight thro' the vast deserts of the skies, and still defying fortune's spite, revive, and from her ashes rise.

- MIGUEL DE CERVANTES SAAVEDRA, Don Quixote

umidity and emotion filled the air. The expression on each face seemed to move in slow motion from fear to disgust to shock to relief. As my colleague Jacob spoke with passion, in a rural area of Kenya, a group of doctors, nurses, police officers, attorneys, and judges listened closely. Looking on, I sat in the back of the stark room littered with flip chart paper taped to coarse white walls. We were nearing the end of an exhausting week of training health and legal professionals in the community to take care of sexual violence survivors. We had been asked to focus the training sessions on caring for children; clinicians in the region had noted an increase in the number of young children and adolescents being sexually assaulted. Jacob was sharing his own experiences as a police officer working in the northeastern part of Kenya, near the Somalia border.

Standing in a white button-down shirt and dark trousers, Jacob described how he was patrolling on foot in an area near a refugee camp when he heard high-pitched, frenzied cries. It was near dusk, heightening his anxiety. He followed the screams to a small concrete building and came upon a young girl being assaulted by an older man. Her shaking body was wrapped in a torn stretch of cloth tied over her shoulder and draped around her waist: traditional dress known as a *guntiino*. She looked up at Jacob with wide eyes. She was only twelve years old, but her clear, round face made her appear even younger. The girl, Aiyana, had been forced into marriage with an older man—her attacker.

Jacob arrested the man, though he correctly predicted he would face death threats because of his actions. After removing Aiyana from the crime scene, Jacob tried to find her family. He discovered her father had taken her out of school and sold her to the older man. He didn't uncover exactly why Aiyana's father had traded her life and body for money, but poverty often plays a major role in parents' decisions to marry off their underage girls. It leaves one less mouth to feed, and in some places it's still tradition for the bride's family to receive a dowry: compensation for taking a daughter.

Though "child marriage" is still legal in some countries around the world, it is illegal in Kenya, where the minimum age of marriage is set at eighteen years. Adopted in 2014, the relatively new legislation applies to all forms of marriage, including religious and customary unions. Nonetheless, about one-quarter of all girls in Kenya marry before the age of eighteen. This statistic is slightly lower than the global average. About one-third of all girls in the developing world are married before their eighteenth birthday. In many of these cases, girls are forced into marriage with an older man, which commonly results in physical and sexual violence. According to a survey conducted by the International Center for Research on Women, girls who marry before the age of eighteen years are twice as likely to report being beaten, slapped, or threatened by their husbands as girls who marry later. When asked about the prior six months of their lives, they are about three times as likely to report being forced into sex.¹

Many young girls coerced into marriage are also forced to bear children, a particular danger since their bodies aren't yet fully developed. Many don't have access to good medical care. Some girls are left to care for children on their own. In some cases, their husbands abandon them, leaving them as single mothers with no income and few job choices. Since they are pulled out of school at such an early age, their financial future is often bleak, perpetuating a relentless cycle of unfulfilled potential.

In theory, girls are protected from child marriage through international law. Both the United Nations' Universal Declaration of Human Rights and the Convention on the Rights of the Child call it a violation of children's rights. However, these treaties are poorly enforced. The

United States has not yet even ratified the Convention on the Rights of the Child. Fortunately, there are many groups and organizations working to end child marriage, including Girls Not Brides, a global partnership of hundreds of civil society organizations committed to enabling girls to fulfill their potential.

Jacob knew the statistics when he saved Aiyana. He had seen too many children shattered by sexual abuse. When Jacob learned about the intentions of Aiyana's father, he realized it was a difficult situation. Aiyana had nowhere safe to go, and Jacob feared she would be returned to a dangerous place if he didn't find an alternative. After talking with Aiyana about what she wanted to do, and working with social services, Jacob helped her find a new home and school, hundreds of miles from the trauma she suffered.

Though Aiyana's story ended better than it could have, many stories like hers do not. My colleagues and I are constantly reminded of this stark reality through our work to end impunity for sexual violence in areas marked by conflict and unrest. By the end of that week in Kenya, we were left with a mix of sadness, rage, and hope. And a fundamental question: How can we reduce vulnerability and prevent suffering, especially for those like Aiyana who cannot always protect themselves? As I prepared to leave Kenya, I had no idea how a vulnerable dog I met on a congested Nairobi highway would test these reflections: one of a series of powerful experiences that led me to think more holistically about how we can turn vulnerability into strength and resilience.

LOVE

As we drove back to Nairobi, I stared out the window and saw shadows of people lining the side of the road near shops made of red and brown tin. We were in the back of a white utility van moving at less than five miles per hour on the highway entering Nairobi. Though it was dark and cool, the air was thick. The smell of charcoal lingered, mixed with exhaust fumes from dented cars and trucks with missing parts. Oncoming vehicles provided the only source of illumination. Looking up from the windows smeared with dust and grime, I saw only darkness.

Our five-hour trip had taken us from rural Kenya, which was scattered with people and animals making their journeys by foot, to a Nairobi highway crowded with cars, buses, and trucks. Night had just fallen as we drove into the city, and traffic had slowed to a near stop. A car had struck someone or something and continued on, as other cars maneuvered around the obstacle. I looked down and saw wide eyes looking up from the road. I looked at my colleague and saw tears welling up in her eyes. She confirmed what I had witnessed, a live dog lying still.

I insisted we stop. Another of my colleagues thought I had mistaken the dog for a person. She pointed out that the dog was not human, but "just a dog." Fortunately, our driver turned around, but only to let another colleague out to find a restroom. I thought of Jacob's courage in a far more dangerous situation, and I didn't hesitate. I jumped out of the van and ran toward a security guard in a blue uniform who had pulled the dog to a grassy median. I asked him to take me to him. The security guard put out his hand to stop oncoming traffic, and it slowly came to a reluctant halt.

When I reached him, the dog was whimpering in pain. He looked up at me with his huge brown eyes. His body was riddled with open wounds and scabs. He had old scars and scratches on his face, a torn blond floppy ear, a bitten nose, and severe fractures in his front and hind legs. Fleas and ticks covered his body. He had been neglected and abused. Michele, my colleague who had requested a bathroom break, helped me pick him up with some clothes I had grabbed from my bag. Since I wasn't sure if he would bite out of fear, I took some old scrubs to tie as a muzzle if needed. It wasn't necessary. He easily let me pick him up, and I held him close as he trembled.

A severed electric cord was wrapped around his neck; he had chewed his way free. Michele and I carried him to our van and, despite earlier objections, our colleagues had already arranged for a veterinarian to meet us at his clinic.

On the way, the dog shook uncontrollably in my arms. I tried to keep him from being jostled around by the potholes cluttering the back roads of Nairobi, so his broken bones wouldn't cause him more pain.

We reached the veterinarian's office in fifteen minutes. It was a Friday night, so the city was busy, but we drove into a quiet, dark driveway in a dirt alleyway. We walked into the clinic and heard the sounds of dogs barking in the back. A technician greeted us, and we waited another thirty minutes for the veterinarian to arrive. As we surveyed

the dog's injuries together, we realized he suffered from multiple serious wounds and shock. He was unlikely to pull through surgery. His eyes drifted open and closed as we held him, and I tried to figure out what he wanted. After asking the veterinarian what types of medications would be used, we made the difficult decision to euthanize him. We wanted to ensure that he wouldn't suffer or experience a prolonged death. He lay in my arms while Michele and I gently stroked him and, through soft, soothing words and tears, we whispered that we loved him. He died quickly. Michele told me, "At least he knew love before he died." The veterinarian asked me to name him: I named him Love.

DOC

When I was about nine years old, around the same time I decided I wanted to become a doctor, I crawled up on my mom's built-in bookshelves and reached for a shiny red book. I had seen my mother reading the book with sad eyes and a long, drawn frown on her face, and I was curious to know what it was about. I was intrigued by the title—A Cry from the Heart. Written by William Sears in the 1980s, the book details the persecution of a minority religious group in Iran. As I opened the book and turned its pages, I read about a child who had been burned to death because of his religion. 2 I couldn't believe something so horrible had happened to a child like me, and I wanted my friends to know, too. I'm not sure how it happened, but I used Sears's book for an oral book report in the fourth grade. I still think it's a testament to the courage of my mother and my fourth-grade teacher that I was allowed to speak about such a frightening incident to my nine- and ten-year-old classmates. No parent complained, and after I read my report to the class, my friends and I all returned to the luxury of our less solemn books and the playground. Today, that image of a child being burned to death still lingers in my mind.

Almost thirty years after I picked up that shiny red book—but before I had ever learned about Aiyana or Love—I walked toward the glass door of my clinic waiting room and saw a man with a slight build and graying hair. It was the middle of the week, toward the end of the day, after all the other patients had been seen. The man was the shape and color of my father and from the same part of the world, one I knew only

through the stories my father had told me. Kind, bowed, and humble, the man came toward me in a hesitant rush. With both anticipation and trepidation, he reached out his hand and I took it. He cradled my hand in his own and then released it. After he followed me into a bright clinical examination room, we both took a seat. Though he was an established expert in a rare field of medicine, he was unassuming. Like so many torture survivors I've met, he exuded a calm, quiet dignity.

The clinic is where I practiced medicine as a volunteer physician for nine years. In many ways that clinic became my own sanctuary in a profession now driven by everything medicine isn't supposed to be. It's where I watched other doctors, nurses, lawyers, social workers, and front-desk personnel live and breathe the words "respect," "justice," "compassion," and "hope." It is where I learned to be the doctor I wanted to be.

As I grasped soon after we met, the man, whom I'll call "Doc," had been tortured by the same ruthless regime that killed the small boy in William Sears's book. After introducing ourselves, Doc told me how Iranian government officials targeted, detained, and tortured him. In the 1980s, he became politically active after his colleagues were executed for speaking out against the government. On a cool winter night, government agents came to his home and arrested him. He was terrified for his family and tried not to resist or infuriate the officers.

After he was arrested, Doc was taken to a prison, where he was interrogated and beaten. He was held down and restrained on what he described as a "torture bench." Among human political prisoners and detainees, confinement to overly small spaces, restraint, and multiple forms of physical injuries are common torture techniques. Victims end up in fixed, hyperextended, or other unnatural positions, leading to short- and long-term pain and injuries to ligaments, tendons, nerves, and blood vessels. When I hear survivors' stories, I am often reminded of a poem by Wisława Szymborska, who lived through the Germans' occupation of Poland and won the 1996 Nobel Prize for Literature. She writes in her poem "Tortures" that bones are breakable and joints are stretchable—and both facts are taken into account by torturers; "The body writhes, jerks, and tugs... bruises, swells, drools, and bleeds."

While he was restrained, Doc was incessantly beaten on the soles of his feet with an electric cable, a common torture technique practiced

all over the world. Doc was continually questioned and threatened with his life. In a subtle Farsi accent, he told me, "I closed my eyes to shield my emotional response to the beatings." He explained to me that if he lived, he didn't want to remember the faces of his torturers or the tools used to torture him.

Once he was released, Doc lived in fear. From 1988 to 1998, there were a series of murders and disappearances of Iranian dissident intellectuals who were critical of the Islamic Republic government. This series of murders has been referred to as the "chain murders of Iran," and many believe the killings occurred in response to reformists' attempts to open up Iran's cultural and political place in the world. Victims included journalists, doctors, and other citizens. After protesting the chain murders of Iran, Doc was arrested again. He noticed the torture methods had become more sophisticated. Parts of his body were covered to prevent the formation of certain scars—forensic evidence that, if documented, could be used against perpetrators. After weeks of repeated torture, he was placed in solitary confinement. As we sat together in the clinic room, he dropped his head to his hands and told me he felt "broken."

The use of torture to intimidate and break victims has a long history. The ancient Greeks and Romans were among the first, but not the last, to systematically use and rely on torture as a means toward domination and oppression. Much as it is today, torture was commissioned to extract the "truth" from slaves who were considered unreliable witnesses, even though many ancient Romans acknowledged the unreliability of information obtained under torture. By the third century, the ancients' slippery slope of torture had slid down class lines, rendering virtually no one immune to torture. And by the mid-thirteenth century, even court judges and leaders of the Christian Church sanctioned torture. Though activists had ushered in attempts to abolish torture in democratic nations by the eighteenth century, communist and fascist governments widely relied on torture to maintain control. Democratic nations were at times complicit, continuing to support torture perpetuated by authoritarian commands. By the middle of the twentieth century, under the Nazi regime, torture often took the form of medical experiments. American medical experts even colluded with the Nazis: as observers, in experimental design and execution, and by excusing torture.

Though torture occurred long before the Gestapo, Nazi atrocities motivated the international community to end it. Soon after the Nuremberg Trials began in 1948, the United Nations General Assembly adopted the Universal Declaration of Human Rights. It marked an international commitment to eliminate torture. Over the next half century, governments enacted agreements banning torture. By 1984 the United Nations had unanimously approved the legally binding Convention against Torture. Today, if survivors can demonstrate a credible fear of torture, they are eligible for protection in countries such as the United States. Doctors like me conduct forensic examinations for people seeking asylum to evaluate whether there are indications of torture that can be used in their court cases. My work in this area relates to my work in Kenya, where I teach other health professionals how to conduct forensic exams on sexual violence survivors so perpetrators can be prosecuted.

As I do for other people seeking asylum in the United States, I provided a pro bono clinical examination of Doc to determine whether there was objective medical and psychiatric evidence that he had been tortured. After listening to Doc's story, I measured his visible scars and carefully documented their location, texture, size, shape, and color. Far more time was needed to gradually unravel his psychological wounds, which are often more severe. Even though many of Doc's external wounds have healed, psychological wounds remain deep. His nightmares resurfaced years after he was tortured.

Months after I wrote a medical report substantiating his claims, I learned from Doc's attorney that he would not be forced to return to Iran. Today, Doc is an active member of the medical community. In his hospital, he mentors his colleagues. He has reunited with his family, and he continues to pursue interests outside medicine, including history and gardening. He has become a friend.

A few years after our first encounter, Doc and I met over iced tea. We spoke about politics, religion, and history. He shared a story about the first human rights charter, which ironically came from ancient Persia, around the same time the ancient Romans and Greeks started using torture to extract confessions. In 539 BCE, Cyrus the Great, the first king of ancient Persia, entered the old city of Babylon, freed the slaves, and

established religious and racial equality. Around that time, a bakedclay cylinder with cuneiform script in the now-extinct Akkadian language was buried beneath some walls; it was excavated in 1879.4 In 1971, this cylinder was described as the world's first human rights charter since it called for racial and religious equality and an end to slavery and other forms of oppression. The charter has been translated into all six official languages of the United Nations, and its provisions resemble the first four Articles of the Universal Declaration of Human Rights. Doc told me how our views about human rights are not new but rather ancient ideas that require safeguarding and expansion—not unlike ideas about animal rights proposed by the ancients. Doc sought these ageless ideals in a thriving, open society in the United States. And today, safe from harm and the risk of deportation, with the love of his family, the respect of his colleagues, and freedom and opportunity, he is healing, rising from the ashes, and helping others rise as well. He, too, has led me to think more broadly about how we can turn oppression into hope and vulnerability into strength.

Over the past decade, through my work as a human rights physician, I've met countless men, women, and children who have suffered through unimaginable trauma. Like Doc, many have fled unsafe, oppressive lands, seeking refuge. They have witnessed unimaginable atrocities. Today, there are more people displaced by war, conflict, and persecution than ever before. They are doctors, lawyers, teachers, and journalists. Others are mechanics, police officers, bankers, and business owners. They are also fathers, mothers, brothers, sisters, sons, and daughters. And, like Doc, many have been tortured.

Torture still occurs in the majority of countries around the world, often in places that are hidden from the public. Anyone can be a victim of torture, and many torture survivors never figure out why they were targeted. They have survived severe beatings, electric shocks, rape, mock executions, starvation, sleep deprivation, and other abuses. Their bodies and minds bear discernible and hidden scars—including chronic pain, broken bones, traumatic brain injury, terminal diseases, and mental health challenges. In many ways, torture takes advantage of the body's most basic needs—the need to breathe, eat, drink, sleep, move, and remain whole and intact. As long as our bodies can experience fear and

pain, torturers exploit our innermost vulnerabilities. And the bodies and minds of animals—like Love—are similarly vulnerable to torture and other forms of violence.

GRACE

Currently, there are about half a million torture survivors living in the United States. Many of these immigrants have a desire to contribute to society in precisely the ways that made them targets of human rights abuses in their home countries. Just as Emma Lazarus's famous poem, "The New Colossus," reads on the pedestal of the Statue of Liberty, they are "yearning to breathe free."

I finally realized the meaning of these words while standing on the white marble steps of a federal court building outside the nation's capital. There I stood with a woman named Grace, who pulled me toward her and shouted in my ear: "I'm free! I'm free!" About one year prior, Grace had fled her home in Africa after being tortured. As a result of being raped, she contracted HIV. She arrived in the United States after a long and difficult journey.

On the day Grace gained freedom, I was at the courthouse to provide oral testimony on her behalf. I had already provided written testimony substantiating her claims, based on my forensic medical evaluation. Although each story is unique, there are some threads of commonality among torture survivors. In addition to her physically discernible scars, Grace suffered from posttraumatic stress disorder (PTSD). Psychological trauma is overpowering and pervasive. Frequently, survivors struggle with chronic psychiatric disorders, especially PTSD and depression. After I concluded that Grace demonstrated objective physical and psychological evidence of torture, her attorneys used my medical report in her legal case.

Outside the courthouse, Grace looked at me with a smile that reached her deep-set brown eyes. She still lived with a potentially lethal medical condition. She was starting her life over in a new country with little social support and the long-term physical and emotional ramifications of torture. But she *was* free. Her life would no longer be threatened because of her political beliefs, gender, or ethnic background. After being held captive, deprived of her most basic needs, and physically and

sexually assaulted, she was finally granted asylum. Like Doc, she found sanctuary in the United States.

When I first met Grace, I learned she had a young son in the United States. Grace became pregnant when she was raped and tortured. She spoke of her son with complete love; she felt no animosity toward him. She insisted the love she shared with him helped her heal. From the instant I met her to the moment we said good-bye, she showed unwavering strength and valor, in spite of how she was exploited by her perpetrators. Like so many other women I've met in her position, she demonstrated a level of resilience that seemed implausible after what she lived through, but was very real.

THE PHOENIX EFFECT

The stories of Aiyana, Love, Doc, and Grace are deeply linked—through the oppression, vulnerability, suffering, and resilience of people and animals—connections that led to the conception of this book. I have slowly begun to see a meaningful pattern in these stories: one that includes hope amid violence and aggression.

When I returned to the United States from Kenya, after learning about Aiyana and meeting Love, I struggled to grasp how we could better protect children like Aiyana, or other vulnerable beings, like Love. At the same time, I reflected on my decade of experience working with survivors of torture and sexual violence, as well as my experiences in the area of animal protection. I couldn't separate these issues in my mind. I knew that animals, like people across the world, were subjected to multiple, compounded sources of neglect, cruelty, and abuse over the course of their lives. I felt a compelling obligation to understand the links between violence against vulnerable people and animals, to encourage change. I was desperate to find hope and answers.

At the time of Love's death, I saw no other options for him. However, I have since wondered if despair temporarily blinds us to answers that hope provides. Is it actually possible to build refuge for those like Aiyana, Love, and other beings shaken by tragedy—so they can not only survive but thrive, as Doc and Grace have? And if so, how?

In Grace and Doc, I began to recognize a phenomenon I had witnessed repeatedly in others I have cared for—people defying their seen

and unseen injuries and thriving after indescribable trauma, much like the mythical Phoenix. In Chinese, Egyptian, Indian, and Greek mythology, the Phoenix is a magical bird who is cyclically reborn. She rises from the ashes of her previous form. Even after living through what can only be described as hell, some survivors rebound, recover, and heal. Through Grace, Doc, and many other survivors I've met, I've come to understand how it's possible for despair to metamorphose into hope, almost like a physical and emotional rebirth. In medicine, this transformation is called the Phoenix Effect. With time, I've begun to view survivors as spirited Phoenixes who ascend from the ashes, despite the odds against them. And over the years, I've realized how animals can also heal after severe pain and suffering—offering a model for recovery and hope for how we can all rise from the depths of suffering. These stories, and the science behind them, are also a metaphor for how society at large can turn oppression and vulnerability into hope and resilience.

INSPIRING HOPE THROUGH THE PHOENIX EFFECT

It's tough to turn toward suffering. In medicine, journalism, law enforcement, and other professions, people face a range of psychological risks, including burnout and compassion fatigue—also referred to as secondary traumatic stress or vicarious traumatization. These conditions lead to numbness, withdrawal, anxiety, difficulty sleeping, nightmares, anger, and cynicism. There is an emotional cost to caring genuinely for others. But there is also an inexplicable emotional gift. Caring for other people and animals can make us more hopeful and courageous—a notion called "vicarious resilience" in the field of psychology. Through the eyes of survivors, we can glimpse the promise of a better world. The inspiring stories of survivors—Phoenixes like Doc and Grace—provide insight into a better world that many people envision, have faith in, and work toward every day.

Survivors' stories have led me to extraordinary places, literal and figurative sanctuaries I call "Phoenix Zones." In Phoenix Zones across the globe, where the injured heal and mend, I've found remarkable similarities, not just in people's stories, but also in the tales of animals. In each sanctuary, I've found core principles—specifically, respect for

basic liberties and sovereignty, a commitment to love and tolerance, the promotion of justice and opportunity, and a belief that each human and nonhuman animal possesses dignity. In Phoenix Zones, I've witnessed how practicing these principles can encourage resilience and even broader social change. Those who create these sanctuaries prove that it is within our power to change life for the better, and they give us the courage to do the same.

But first we must understand the roots of subjugation, violence, and suffering, the basis for our vulnerability and resilience, and all that Phoenix Zones are up against.