

Treating Tibet's Traumatized

**SPH'S
MICHAEL
GRODIN
BLENDS
EASTERN
HEALING
AND
WESTERN
MEDICINE
TO AID
TORTURE
VICTIMS**

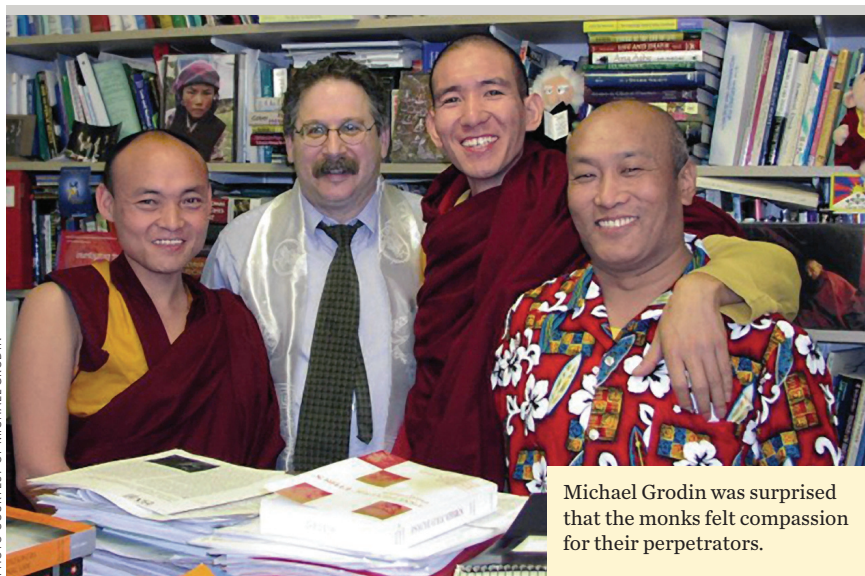
After the 2008 Beijing Olympics, Michael Grodin's monks were in trouble.

With global attention on

China, arrests and protests overseas about China's policies in Tibet led to flashbacks and nightmares for the Tibetan monks under Grodin's care at the BU-based Boston Center for Refugee Health and Human Rights (BCRHHR). The monks, who survived Chinese prisons and prolonged torture, were diagnosed by traditional healers as suffering from *srog-rLung*, or life-wind imbalance, which Tibetan practitioners say can develop into mental illness. Western doctors diagnosed them with a more familiar term: post-traumatic stress disorder (PTSD).

Grodin, a psychiatrist, BCRHHR cofounder, and a professor of health law, bioethics, and human rights at BU's School of Public Health, integrates Eastern and Western techniques to treat them. *Bostonia* asked Grodin how the two medical hemispheres can productively coexist.

PHOTO COURTESY OF MICHAEL GRODIN



Michael Grodin was surprised that the monks felt compassion for their perpetrators.

How did PTSD manifest in these monks?

They were having flashbacks, to put it in Western terms: vivid images, anxiety, and hypervigilance — classic symptoms of PTSD. They also tended to dissociate from their bodies because they were being tortured, like rape victims who have out-of-body experiences. I think the Tibetans doing higher-level meditation were having a disinhibition: their frontal lobes were keeping a hold on things, but when they got into this deep meditative state, all kinds of bad experiences and feelings came out.

What Eastern and Western approaches have you incorporated?

I do a lot of breathing exercises to recenter and recalm them, particularly when they get into these flashbacks. I do psychotherapy, but I call it them coming to teach me about Buddhism. We meet. We talk. I listen. We do qigong, tai chi, we meditate together, practice

some breathings and some mantras. We use singing bowls, which are wonderful, very calming and relaxing.

I also give them some antidepressants. For a while I was quite concerned about the interactions of my medicine with the herbs that the Tibetan doctors were giving them. But I think the interaction between the two is pretty safe.

Is our culture becoming more accepting of such alternative practices?

There's been a growing acceptance, because it works, particularly for chronic illness and chronic disease, which Western medicine doesn't do a very good job with. I call it integrated medicine — it's funny to talk about it as alternative, because the Chinese have been doing it for 4,000 years. I would call that traditional and call Western medicine alternative.

Have you tried this treatment with non-Tibetan refugee patients?

I use singing bowls with the Africans. They love it. I did qigong with a Kurd. In Latin America,

it's unacceptable to see a mental health provider, so I go to a primary care clinic, and they come and teach me about their country. We don't call it therapy.

What have you learned from working with the monks?

They've taught me about compassion — it's an incredible thing that they have compassion toward their perpetrators. They've taught me loving kindness. They taught me about being present and being in the present. They taught me that we all go through struggles — some of them are like Ph.D.s in Buddhism, but here, they work. One of the monks sweeps the floors for a restaurant, and he came to me to ask if he was doing a good job. One is a gardener; another is a baker.

It's been an incredible privilege and honor to work with these people, and hopefully I've helped them, too. What's going on in Tibet is a horrible thing. What happened to these monks shouldn't happen to anybody. **cd**