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As loved ones disappear in their homeland, community members in other countries feel helpless and afraid. Telehealth and social media are helping.

by **Andrew McCormick**
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Mustafa Aksu had a bad track record with therapists. Growing up in China, he was bullied by his Han Chinese classmates for being Uyghur. This made him constantly anxious, and his stomach often hurt, so much that sometimes he threw up. A concerned teacher referred him to counseling, but Aksu was skeptical it could help. "I was always waiting for the time when I could go out and live somewhere that I would feel comfortable," Aksu says.

In 2017, when news began to emerge of a government crackdown in China targeting Uyghurs and other minority ethnic groups, Aksu was a graduate student in Central Asian Studies at Indiana University, Bloomington. In China's northwestern Xinjiang province, where most Uyghurs live, people were going missing. Police targeted Uyghurs for <u>an ever-expanding list of infractions</u>: growing a beard, throwing a wedding party, having contact with people abroad, including members of their own family.

The news grew worse every month. By the hundreds of thousands, the Communist Party forced Uyghurs into sprawling detention facilities, which it dubbed "vocational training centers" though they better resembled concentration camps. Inside, Uyghurs were subject to all manner of <u>torture and abuse</u>; soon, the number of people interned topped 1 million.

Aksu, in his early 30s, had lived abroad for years at this point—in Istanbul and Dubai, before the US—but always kept in close touch with family back home. A short phone call was 20 minutes. Long calls lasted hours. Now, like most Uyghurs living away from Xinjiang, Aksu was cut off from his parents and siblings entirely. He became depressed and later developed insomnia. All night, he wondered: was his family safe? Throughout 2018, Aksu learned his older brother, uncle, and two cousins had all died in Xinjiang. His anxiety deepened.

Eventually, Aksu sought help from a local therapist. But the first meeting went terribly.

Aksu's experiences are typical of many in the Uyghur diaspora, both those who left China long ago and who fled more recently to make a new life, away from persecution. Watching from afar as loved ones disappear and a way of life is erased, trauma has set in, sparking a mental health crisis that leaders in the diaspora say is all too apparent. Many, though, are reticent to seek help, or even acknowledge the emotional pain of the past years, leaving the community's needs both underassessed and unmet. But lately a small group of outspoken Uyghurs is trying to change that. Using social media, they're starting conversations about grief and mental health and, through telehealth, connecting people across the country with volunteer therapists.

The program, called the Uyghur Wellness Initiative, is still in its infancy; to date, it has paired only a few dozen Uyghurs with mental health professionals. As news from Xinjiang grows worse, however, its creators hope that it will help foster resilience in the diaspora—and provide a lifeline to a community during its darkest hour.

"Uyghur 101"

Rights abuses in Xinjiang have warped every aspect of Uyghur life. Thousands of mosques have been destroyed. The Uyghur language is banned in schools. Many thousands have been pressed into forced labor. The camps likely represent the largest mass incarceration of an ethnic group since the Holocaust, and recently, the governments of the US, Canada, the Netherlands, and the UK formally labeled China's actions "genocide."

For the Uyghur diaspora—which, in the US, is centered in DC and Northern Virginia—the past few years have been excruciating. Virtually everyone has family or close friends who have been sent to the camps. If they were to return to China, they too would surely be taken captive.

At first, the psychological toll of the Xinjiang crisis was not deeply considered among the diaspora, says Rushan

Still, the pain in the community, and the silence that had fallen over it, was apparent. "I hear a lot of people saying, 'Oh, we used to have a normal life,'" Abbas says. "Now, when they do anything, even if they just laugh or have some sort of fun, they feel *guilty*."

Between 2019 and early 2020, Memet Emin, a Uyghur American medical researcher in New York, conducted a non-scientific survey of 1,100 members of the diaspora. Feelings of hopelessness, anger, and depression, he found, were common. Close to one in four respondents said they regularly experienced thoughts of suicide—roughly five times the adult average in the US. And that was likely an undercount, Emin says. Communist Party authorities routinely harassUyghurs outside of China, warning them on social media against speaking out, demanding personal information about themselves or others in the diaspora, and threatening retaliation against friends and family in Xinjiang if they don't comply. This means many are reluctant to share information, even anonymously.

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Then came their pitch to the Uyghur community. Because many in the diaspora fear the public eye, they offered a confidential referral system. They also tried to normalize therapy by describing their own suffering, says Abbas, whose sister was sentenced to prison in Xinjiang, likely in retaliation for Abbas's advocacy. "I am frustrated and despairing," Abbas says. "I wake up in middle of night, because I worry for my sister. It helps me to talk to somebody, to relieve some of these feelings."

For anyone, finding the right therapist can be a fraught process. Between cost, location, specialty, and availability, the difficulty of the search can be a deterrent. Therapists working with the Uyghur Wellness Initiative, a collaboration between the Uyghur organizations, are doing so pro bono, lowering the first of those barriers. Through telehealth, leaders aimed to lower the others.

Though many Uyghurs live in DC and Northern Virginia, others are dispersed across the country. The fact that telehealth is available almost anywhere means people outside of major metropolitan areas, where therapists specializing in trauma, immigration, and other relevant issues are easier to find, can also benefit. Likewise, therapists living in areas where there are few Uyghurs are now able to pitch in via the Wellness Initiative.

Most critically, the Wellness Initiative's online cadre of therapists reduces the likelihood that a person seeking help will encounter a therapist who knows too little about China or Xinjiang; every therapist involved has already raised their hand to say they care.

Progress has been slow, due partly to apprehension in the community towards talking about mental health. One by one, though, the crew is chipping away at walls and connecting people with support.

New connections

The day in December 2019 that Aksu moved to DC, it rained. But straight away, he liked the city. He made friends. He got a job with the Uyghur Human Rights Project, a research and advocacy outfit, which he enjoyed. He felt happy—even after covid-19 upended everything. "I'd always wanted to move here and finally I had made it happen," Aksu says.

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In 2020, Xinjiang police began sending Aksu text messages over WeChat and WhatsApp. They pressured him to cooperate and threatened his family. Aksu never responded, so messages arrived from more phone numbers, with diverse country codes, not just for mainland China but also Hong Kong and Turkey.

Many felt that *they* weren't the ones in danger and had little right to dwell on how the crisis was affecting *them*.

In September, Aksu received a call from an old friend, a high school classmate with whom he'd shared a dormitory bunkbed for four years. The friend, now a police officer, was polite. He reminisced about old memories and thanked Aksu for times he'd helped him. But it was clear the purpose of the call wasn't friendly. "He wanted me to give him information," Aksu says.

As it was, Aksu was struggling to hold things together. Though DC represented a positive change, he still ached for his family and remained "tortured" by his brother's death. The phone call was a final straw. "I felt betrayed," Aksu says. "I cried. I was saying, 'How could this happen to me, how could someone do that?'"

Later that day, he passed out. He woke up the next morning on the floor to a colleague knocking on his door. Aksu had missed a meeting and coworkers were concerned. His anxiety, Aksu found, was back in force. So were the long, wakeful nights. Some days later, he passed out again. "Then, one day, I had this stupid idea of suicide."

"I was so concerned," Aksu says. "Like, 'Oh my god, why should I think about this?'"

He confided in a colleague, who confided in their boss, Louisa Greve. Greve, the Uyghur Human Rights Project's global advocacy director, took Aksu to a popular Uyghur restaurant in the district's Cleveland Park neighborhood. Over spicy noodles, she comforted him and suggested he seek counseling.

Aksu had been here before, of course. He was reluctant to try therapy again, but allowed himself to be convinced. Greve introduced him to Charles Bates, a psychologist in Northern Virginia who had volunteered with the Uyghur Wellness Initiative.

This time, the first meeting went great. Bates knew what was going on Xinjiang and, as a former refugee from

Uyghurs in Xinjiang have been treated as second-class citizens for decades, but because the current crisis there is relatively new, there are no formal studies articulating the unique shape of related trauma within the diaspora. According to Cathy Malchiodi, a psychologist and national trauma expert associated with the Uyghur Wellness Initiative, historical comparisons might serve as a guide to understanding what people are going through.

Based on the examples of Native Americans in the US and Jews during the Holocaust, Malchiodi suggests the terms "secondary trauma" and "intergenerational trauma and grief" as places to start. Each person will have their own reaction to a crisis, of course, but as a community Uyghurs likely share deep-seated senses of trauma and anguish, resulting both from historic oppression and ongoing efforts to expunge their culture. As Malchiodi explains, even people not directly affected by a crisis may still carry associated trauma with them.

In some regards, Malchiodi says, talk therapy alone may be ill-suited to a challenge of this magnitude. "Most psychology and psychotherapy is very Western oriented," Malchiodi says. "There needs to be an expanded view of what wellness means." Investments and participation in cultural activities, for example, might prove as essential to the community's mental health, she explains. Where talk therapy is effective is in addressing acute trauma symptoms, like anxiety and clinical depression.

Amid the pandemic, roughly three-quarters of psychologists in the US shifted to teletherapy, usually via videoconferencing. There are drawbacks: State licensing requirements, for example, sometimes prohibit clinicians from working across state lines. Remote experiences deny therapists the nonverbal signals—how a person is sitting, bodily ticks like foot-tapping—that help them observe feelings a client isn't verbalizing. But teletherapy can be just as effective as in-person sessions, according to the American Psychological Association. And the relative comfort and safety a client might feel at home can be particularly conducive to a positive therapy experience.

This last point is especially relevant when it comes to the Uyghur community, says Bates, the therapist working with Aksu. The Communist Party has been extremely effective in setting Uyghurs around the world ill at ease.

"Sometimes you can tell there are things they want to say, things that are implied," Bates says. "But there's a lot

Europe and in Australia, Uyghur groups are piloting similar projects; and these groups, along with ones in the US, have traded notes to support each other's work. "It's more of a movement, more of an emerging effort" across the diaspora, says Greve of the Uyghur Human Rights Project.

Along the way, project leaders are fine-tuning their message. With older audiences and first-generation immigrants, for example, indirect terms like "resilience" and "wellness," which skirt around negative preconceptions of mental health, tend to resonate better than direct ones, like "depression" and "therapy." With younger Uyghurs, the latter terms are often fine.

To spread the word, leaders hold regular informational sessions over videoconferencing platforms. They post on social media and host conversations on platforms like Facebook Live and the audio social network Clubhouse. In April, for Ramadan, they held a virtual celebration of Uyghur culture and cuisine. In May, a webinar featuring Aksu and two psychologists with the Wellness Initiative discussed the emotional burden of survivor's guilt.

Here, too, a virtual approach has helped. Whereas many in the Uyghur community might hesitate to show their face in a public forum—whether for safety reasons or to avoid becoming the subject of gossip—the anonymity that some virtual environments proffer lowers the stakes.

This is how Dilare, a woman in her 30s living in Northern Virginia, arrived to a Clubhouse discussion this March. She'd seen an advertisement on Instagram—Uyghurs gathering to talk about mental health—and decided to pop in. But only to listen, she told herself.

"When you can trust, that's when a lot of good things happen."

Charles, Bates, a psychologist working with the uyghurs

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"I realized, '*Oh*, they're not really in the hospital," Dilare says. "They're detained."

Then, one day, Dilare says it suddenly sank in that she may never be able to go home again. She became aware of the cloud of anxiety that had formed around her life. "You know, you feel low all the time, melancholy," she says. "Even just looking at stuff, all of a sudden it's not that bright and shiny anymore."

At the March Clubhouse event, dozens like Dilare had joined in. Over the course of two and half hours, prominent community figures shared their experiences, which Dilare realized sounded an awful lot like hers. "When I heard that they were referring people to available therapists, that was just like, 'Oh, let me do this.'"

Now, Dilare talks with a therapist in Virginia once a week over FaceTime. At first, she was nervous that she would say the wrong thing. She was afraid she would come off as "too emotional." "You just don't want other people to see you as too damaged," she says. But the therapy helped. Her therapist encouraged her to stop speaking in qualifiers and own her emotions. She's started journaling, per the therapist's recommendation, which Dilare says helps her recognize and manage her moods. She remains anxious before she begins each session—but once she starts talking that feeling quickly fades. "Now, it feels very natural and relaxing," she says.

That's Aksu's experience, too.

Circumstances in Xinjiang remain grim. Aksu still worries that his activism is "ruining" his family's life. "I feel totally lost sometimes," he says. "I feel like, because of me they are suffering." But at the end of therapy sessions, Aksu says, he feels a burst of energy. He feels able to carry on and notices himself smiling more. He has no intention of quitting therapy.

"I feel warm when I talk to him," Aksu says of his time with his therapist. "I feel like there's a connection, like I'm telling a story to someone I know." T

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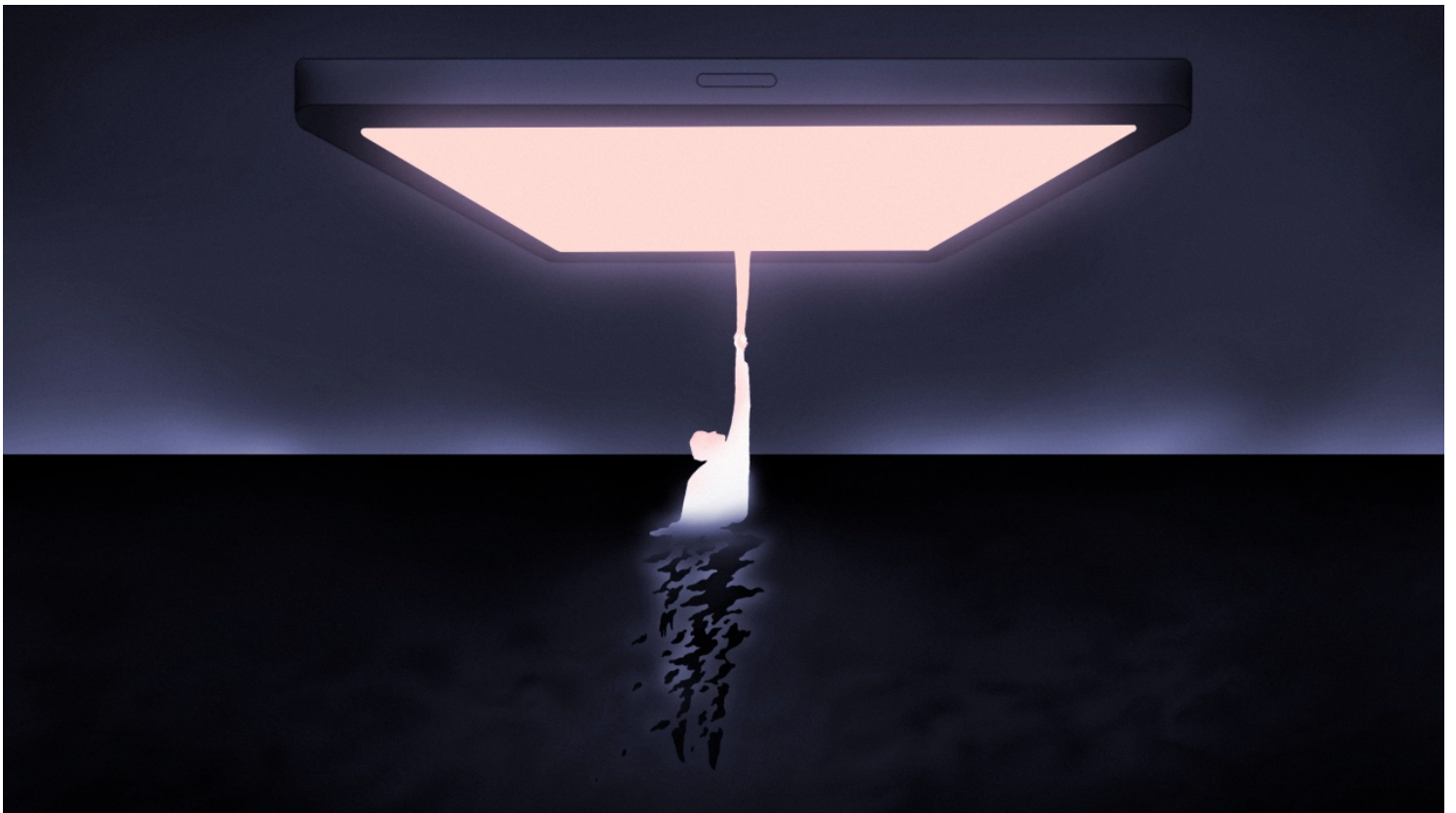
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