

**Trauma Focused: Compassionate Witnessing and Listening  
Observations from Six-Week Jamaica Practicum  
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While in Jamaica, I was provided with two great but distinct placements for the six-week duration. An experience that greatly resonated with me and expanded my work as a Child and Youth Worker occurred at Fort Augusta Adult Correctional Centre for women. The work my partner and I were there to do was life skills workshops. However, as we began to interact and got to know the ladies, the work became more personal, profound and trauma focused.

This is best exemplified by my work with client A who disclosed the numerous ordeals she had gone through as a child, adolescent and presently as an adult. She expressed a lot of anger towards her mother because she did not feel that she cared about her. This was frustrating and painful because her mother was taking care of her children while she completed her sentence. Furthermore, she felt hopelessness because she could not do anything to help her missing son while she was in the correctional center. Her son's disappearance intensified her anger towards her mother because she had kicked him out.

Client A's sense of hopelessness has led to two suicide attempts; the first time was at six years old and the second time was when she was pregnant. She stated that since the last attempt, she had endeavored to stay alive for her children. However, life struggles and losses, such as the loss of her partner, triggered her hopelessness and suicidal thoughts. Lastly, A felt isolated from the other ladies and correctional officers because of her sexual orientation as well as past interactions

while in prison such as charges of attempted manslaughter of an inmate who she was in a relationship with.

For A these hardships were compounded by the fact that she had no one to confide in and was not able to express her feelings and thoughts in artwork because of an eye problem. Like A, many of the females expressed frustration, pain, betrayal, isolation, uncertainties about their present and future situation, grief over the separation from their children and family amongst other concerns. The need for interaction, especially compassionate connection, was prominently evident.

In my eagerness to do Child and Youth work as well as to utilize everything I had learned thus far, my partner and I started brainstorming strategies we could employ to redress the pain and betrayal that was expressed. An activity that I was really keen on trying was simulation of conversations that they can have with individuals that caused them pain.

This approach would provide the females with a platform to voice everything they felt in a safe space. When my partner and I ran the idea to the group, it was a unanimous and resounding NO. It soon became apparent that the group was not ready for that stage yet. What A and the group really wanted and needed was someone to compassionately witness and listen to their trauma, shame and pain.

At that point, I let go of my expectations and focused on their needs, which guided the course of our interactions. I sat with them and actively listened to A's and others conversation about their children, loneliness, need for genuine friendship amongst other traumas.

Hearing A's and the other lived reality was hard because I had never experienced anything comparable to what they had undergone. However, I have come to the awareness that to witness one does not need to have commonality but to actively and nonjudgmentally listen. This enabled me to empathize with their experiences and to feel unified in the witnessing.

It is impossible to heal without someone hearing or acknowledging our pain. Without compassionate witnessing and listening, people are left alone and locked up in their pain. Compassionate witnessing and listening draws people into humanity as well developing their empathy skills for themselves and others, which is the real meaning of rehabilitation.