

What is STARTTS counselling not for?

Trauma counselling does not pretend to have all the answers. Refugees with drug and alcohol (D&A) abuse or psychotic illness will not be counselled at STARTTS until their D&A intake or their psychotic features have been addressed. Domestic violence and other marital issues are normally not taken on by STARTTS unless they are clearly the consequences of torture and trauma (T&T). Similarly, critical conditions, eg. suicide attempts, though they might be related to past T&T experiences, are better catered for by crisis intervention services elsewhere.

What are the benefits of trauma counselling?

Trauma counselling is largely a process whereby traumatised people work through their distressing memories to the point where they feel far better. While they might not ever be able to forget their most painful experiences, they may be able to have recollections of these experiences without feeling overwhelmed or seriously disturbed.

In the long run, it is expected that there will be a significant reduction or elimination of post-trauma symptoms and an improvement in work performance, family life, social or recreational activities and coping skills. One of the processes in trauma counselling involves establishing a link between the uncontrollable past event and the client's current response. Through this process people may come to understand that their symptoms are common reactions to extreme situations and are not signs of their own weakness or madness. They may gradually become freer from feeling trapped in the common reaction of guilt and self-blame.

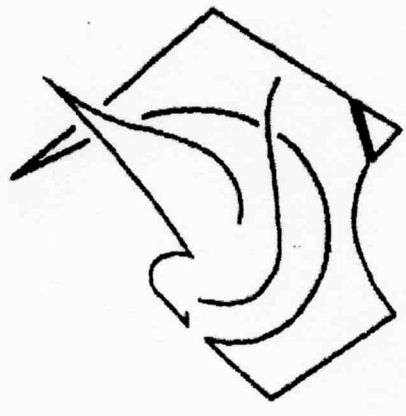
Where the family is involved, it is hoped that all members will have a clearer picture of why and how problems arise, and thus there will likely be less blame and more support.

In brief, through a nurturing and trusting relationship with the counsellor, trauma survivors will enjoy a higher quality of life, less governed by the trauma of their past.

Other interventions at STARTTS

While most traumatised clients show a good response to counselling, some need more than counselling to cope with their chronic post-trauma symptoms and regain an optimum level of daily functioning. Pharmacotherapy, especially the use of antidepressants, is sometimes required to settle a highly tense and anxious state or a seriously depressed mood. Physiotherapy and somapracic are also provided to relieve aches and pain resulting from musculoskeletal injuries and/or psychosomatic complaints. Groupwork and group activities, employment and training assistance, youth and children residential camps and other forms of psycho-social support are also available for clients.

# Refugee Trauma and Trauma Counselling



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S.T.A.R.T.T.S. NSW

The Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) provides a range of services, which have evolved in response to client needs. These include culturally appropriate counselling and therapy for individuals and families. This leaflet deals briefly with refugee trauma and the trauma counselling service provided at STARTTS.

#### What is refugee trauma?

Many refugees have reported being exposed to single, multiple or continuous events associated with war or organised violence, such as active combat, harassment, persecution, imprisonment and torture. They have experienced or witnessed these forms of violence in the context of war, civil unrest, concentration camps, dangerous escapes, exile and migration. The exposure to these events might threaten people's lives or physical integrity and evoke an intense emotional response.

In addition, many refugees have suffered massive losses, such as deaths of significant others, separation from loved ones and loss of material possessions, support networks, social roles and status, control over one's life, independence, self-esteem, ideals and hope.

#### What is the impact of refugee trauma?

In many people the traumatic event is persistently re-experienced in one way or another. It might result in a numbing of their general responsiveness, while at the same time might increase their neurological arousal and physiological reactivity. These disturbances might cause significant distress or impairment in social, occupational, or other important areas of functioning.

People presenting for treatment at STARTTS commonly report all or some of the following symptoms.

**Physically:** difficulty falling or staying asleep, heart palpitations and breathing difficulties, headaches or general aches and pains, feeling tired and fatigued,

nausea, diarrhoea or constipation, easily startled by noises, general agitation and muscle tension.

**Mentally:** inability to concentrate, memory problems, intrusive thoughts of the past trauma or/and attempts to shut out the painful memories, dreams and nightmares about what happened.

**Emotionally:** anger, grief, sadness, fear, shame, confusion, severe anxiety and depression.

**Behaviourally:** withdrawal from others, easily irritated by other people, loss of interest in normal activities and hobbies, loss of appetite, loss of sexual interest, increased use of alcohol or cigarettes.

People react differently to the same event and many people recover from trauma without outside help. Most people, however, find some type of outside intervention, such as counselling, useful in dealing with trauma.

#### What is trauma counselling?

This is a process of clients talking with trained professionals concerning past traumas and their physical and psychological sequelae, and working through these at both an emotional and cognitive level in order to live in a more satisfying and healthy way. In the event of traumas impacting on relationships, work interest, life enjoyment, or other important areas of daily functioning, clients are also encouraged to talk this through.

Trauma counselling is different from other forms of counselling in that trauma is the key issue and the trauma counsellor will help traumatised clients to identify or address it and to overcome its impact on themselves and their families. Clients are encouraged to communicate their traumatic experiences from the past, to understand how these experiences may have continued to influence their day to day living and relationships and to consider future plans and hopes with this new understanding.

The counsellor will make sure that the pace and depth of discussion is always set by the client and that the client feels safe in the environment and in the relationship with the counsellor.

The length of the counselling process conducted at STARTTS depends upon the needs of the client. The establishment of a trusting relationship between the counsellor and the client right from the beginning is necessary. Also an understanding of refugee and humanitarian issues, sensitivity to cultural expressions of psychological distress and acceptance of the client's account of what happened and what he/she is still experiencing are considered essential elements of the relationship. Confidentiality is seen as a crucial aspect of professional practice.

#### Who performs counselling at STARTTS?

At STARTTS, trauma counselling is performed by bicultural and generalist counsellors. They often train in specialist counselling courses in addition to university programmes. They practice from a range of counselling models and receive professional supervision and support. Many of them come from refugee backgrounds and often have experienced torture and trauma themselves.

#### Who is STARTTS counselling for?

STARTTS provides trauma counselling to refugees and people from refugee-like backgrounds, now living in NSW, who have suffered torture and other traumatic experiences in their home countries or in the process of migrating to Australia.

It is known that people who have been tortured or traumatised may carry the effects of these experiences for many years. Trauma counselling aims to help individuals and their families to deal with these problems sooner rather than later.