

# Working with Hopelessness and Helplessness with an Asylum Seeker in the Final Stage of Deportation

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STARTTS Clinical Master Class  
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NSW Service for the Treatment  
and Rehabilitation of Torture  
and Trauma Survivors

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# Presentation overview

- 'Oshin' (meaning Ocean/Deep Sea) Sri Lankan Tamil asylum seeker with negative immigration pathway (Permission from client to present)
- Trauma history
- Presenting Problems and Assessment
- Clinical interventions
- Suicidal ideation /fear of torture

# Client details

- 51 years old male
- Place of Birth: Sri Lanka
- Language: Tamil
- Religion: Hindu
- Referred by Red Cross Sydney then moved to small country town for work



Tamil Tiger Street Art, Northern Sri Lanka  
Image source: Shay Tal/Flickr

# Trauma experiences in country of origin

- Was a farmer and joined LTTE (Liberation Tigers of Tamil Eelam) 'Sea Tigers' to fight in war
- Brother LTTE officer killed in battle, Father Head Chef for LTTE also killed
- Saw 9 family members killed in massacre, mother lost two limbs
- Recalled horrific experiences of battles and massacres also involving children
- Tortured –toe nails pulled out, cigarette burns
- Escaped from prison and took boat in 2012

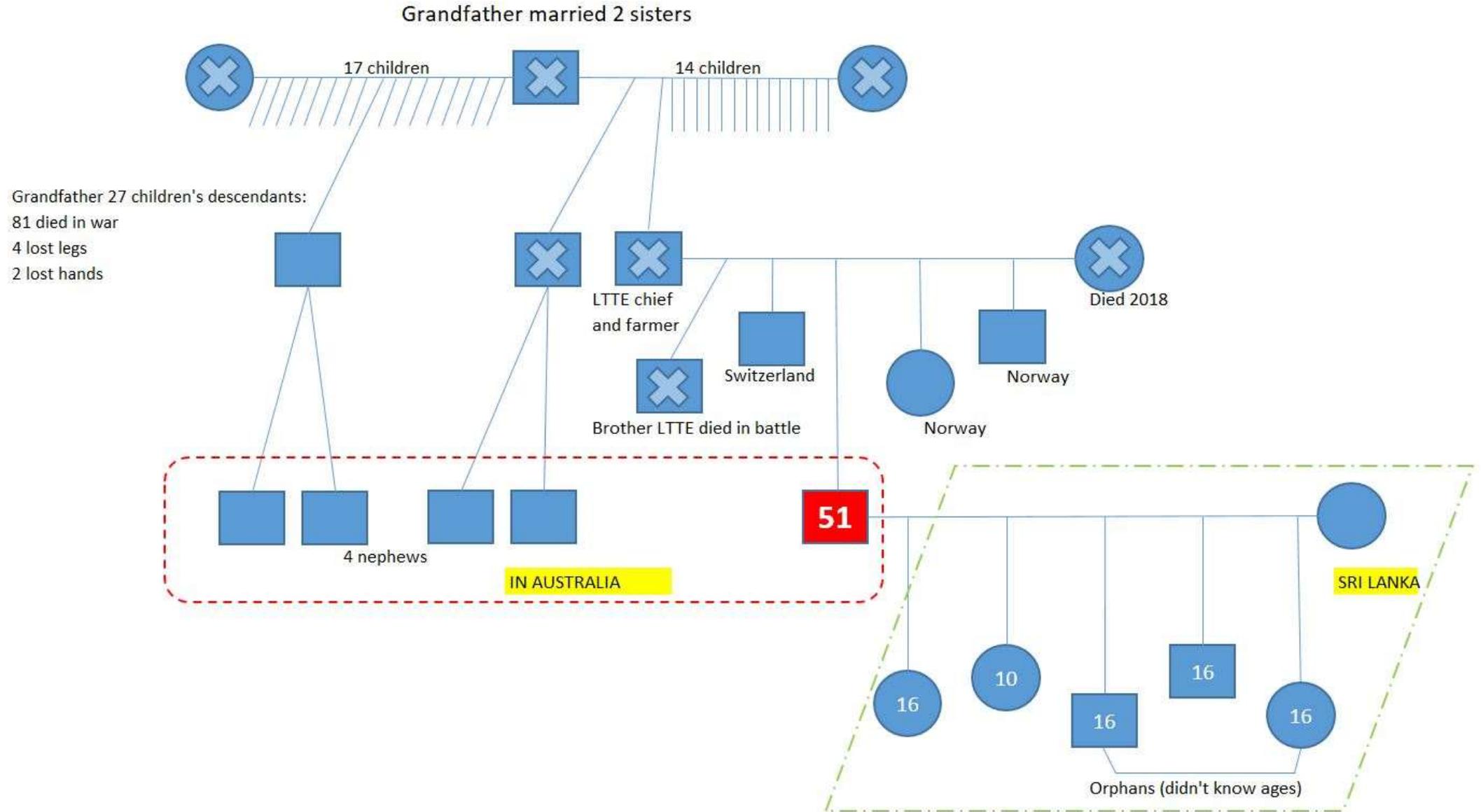
# Seeking protection in Australia

- Landed Cocos Keeling islands 2012
- Detention in CI 13 days, Darwin 127 days
- Released into community in Sydney
- Moved to a small regional town for
- Job in abattoir 2016

# Immigration process

- Bridging Visa 050 Class E
- IAA (Immigration Assessment Authority) negative decision, May 2017
- Federal Circuit Court - negative
- High Court-negative
- Has strong, recent written declarations from Tamil MP and Christian priest in Sri Lanka it is not safe for him to return
- Final Minister's decision negative- August 2021

# Family genogram



# Assessment:

Initial presentation: Small to medium height, strong build, rides bicycle to session straight from work. Friendly, smiling greeting, initially chaotic and unfocussed and wanting to retell same stories repetitively. Could not focus and respond appropriately to assessment instruments.

## Biological

Poor sleep 2-3 hours initially  
Headaches

Pain from shrapnel wounds

Partial loss of hearing from  
bomb blast

High blood Pressure

## Psychological

PTSD- flashback nightmares,  
intrusive memories  
Anxiety

Panic & fear

Traumatic grief

Shame

Low mood

Suicide as last resort before  
deportation

## Social

Critical of co-workers

Jealous of counsellor's other  
Tamil clients

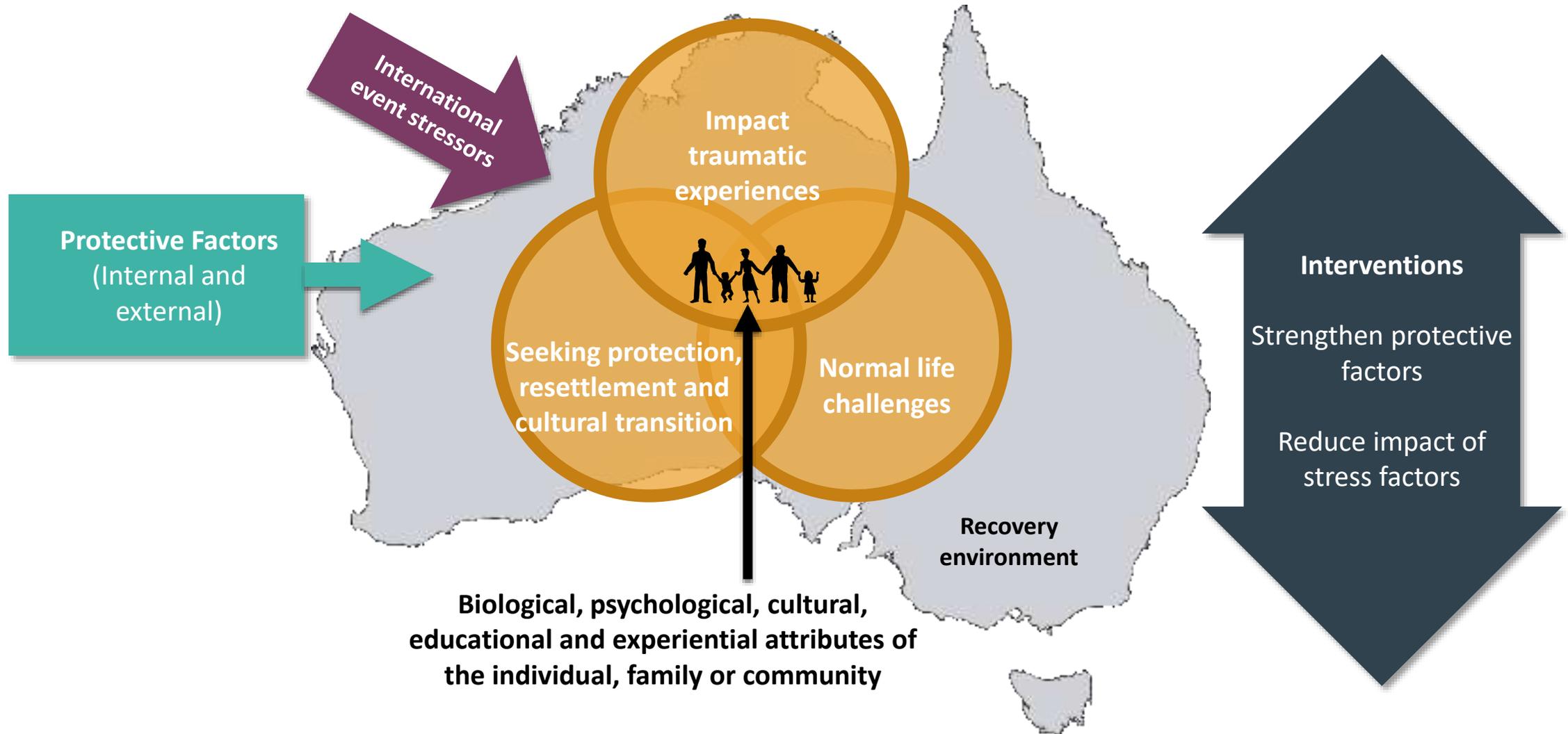
Likes country town seclusion

Enjoys limited social contact

# Protective factors

- Resilient
- Disciplined (LTTE training)
- Stamina –long work hours 3.30am to 3.30pm
- Strong work ethic
- Valued at work
- Prayer, shrine in home
- Yoga
- Nephews
- Weekly counselling

# The complex interaction of challenges



# Interventions

- 135 sessions to current date (101 Face to Face /34 Telehealth phone sessions)
- Consistency and predictability (weekly sessions -same interpreter)
- Safety
- Containment
- Psycho education –anxiety, sleep, nightmare
- Case management (housing, written communications, advocacy)
- Referral to psychiatrist

# Interventions continued



- Identity –valuing
- Identifying and reframing shame –forgiveness
- Imagery Rehearsal Therapy (IRT)

(ref. Isaac Marks,1978)

# Outcomes

- Nightmares reduced in frequency and severity
- Sleep improved to 5 hours and up to 12 hours
- Self regulating
- Coping in spite of increasing anxiety
- Strong trust to explore deepest fears in July 2021
- Hopkins Anxiety Questionnaire (HSCL-A) score 3.90 where scores > 1.75 symptomatic
- Hopkins Depression Questionnaire (HSCL-D) score 2.07 where scores >1.75 symptomatic
- WHO-5 score 10/25

# Suicidality

- LTTE trained- suicide to prevent disclosing information
- Only surviving person with strategic knowledge of value
- Previously in prison and tortured for information
- “ I can’t take any more torture”
- Suicide - a means of taking control of his situation
- Slaughter role in meat-works – ‘fight response’ re-enactment identifying as warrior, numbing
- Exploring alternative ‘versions’ of his return
- Discussion around fear of torture and pain
- Hopelessness and Helplessness in client – denial and suicidal ideation

Client has stated he would suicide to avoid further torture and more painful death

Client ‘fight’ response as a way of retaining control

# Hopelessness and helplessness

- Focus on hope till final Ministerial decline for protection
- Sees suicide as a means of control in a hopeless situation
- Heroic martyr –paradoxically the slaughterhouse makes him feel stronger
- Responses split - sometimes overcome with fear sometimes 'fight'

- After 5.5 years of strong attunement
- Impact on therapist of hopelessness and helplessness
- How can I instill hope in such a situation?

# Presented on behalf of STARTTS by:

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# References

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