

Master Class Clinical Evening STARTTS Community Based Clinical Interventions with Sri Lankan Tamil community



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Presentation Overview



- ❖ **Background of Tamils from Sri Lanka**
- ❖ **Pre-migration Trauma**
- ❖ **Post-arrival Stressors and Challenges**
- ❖ **STARTTS Systemic Model**
 - **Community development work**
 - **Group work**
 - **Individual work**
- ❖ **Clinical implication and challenges**

Background of Tamil's

- ❖ 1948 - Independence
- ❖ 1956 - The Sinhala Only Act
- ❖ 1958 – Riots between Sinhalese & Tamil
- ❖ 1983 - Black July
- ❖ 1995 - The Special Assistance Category
- ❖ May 2009 - End of Civil War
- ❖ 2012–13 - 6,000 Tamil Asylum Seekers
- ❖ Sri Lankan immigrants are the 13th largest overseas-born group in Australia



Pre-migration Trauma



❖ Torture in post-war rehab camps or Prison

- hot chillies forced into eyes and other bodily orifices, burned with cigarettes, beaten with iron rods and hung upside-down
- Rape or sexual abuse - men and women
- Death due to slow poisoning

❖ Forced isolation

❖ Being lost or kidnapped

❖ Exposure to unnatural death

❖ Combat zone experiences

Post-migration Stressors and Challenges



1. Refugee determination

- ❖ Delays in processing applications
- ❖ Interviews
- ❖ Negative outcomes
- ❖ Fears of detention or forced deportation

2. Health, welfare and financial problems

- ❖ Reduction of services
- ❖ Limited access to Medical, dental and psychological care
- ❖ Unemployment
- ❖ Poverty

3. Separation anxiety

- ❖ Fears for family overseas
- ❖ Indefinite separation

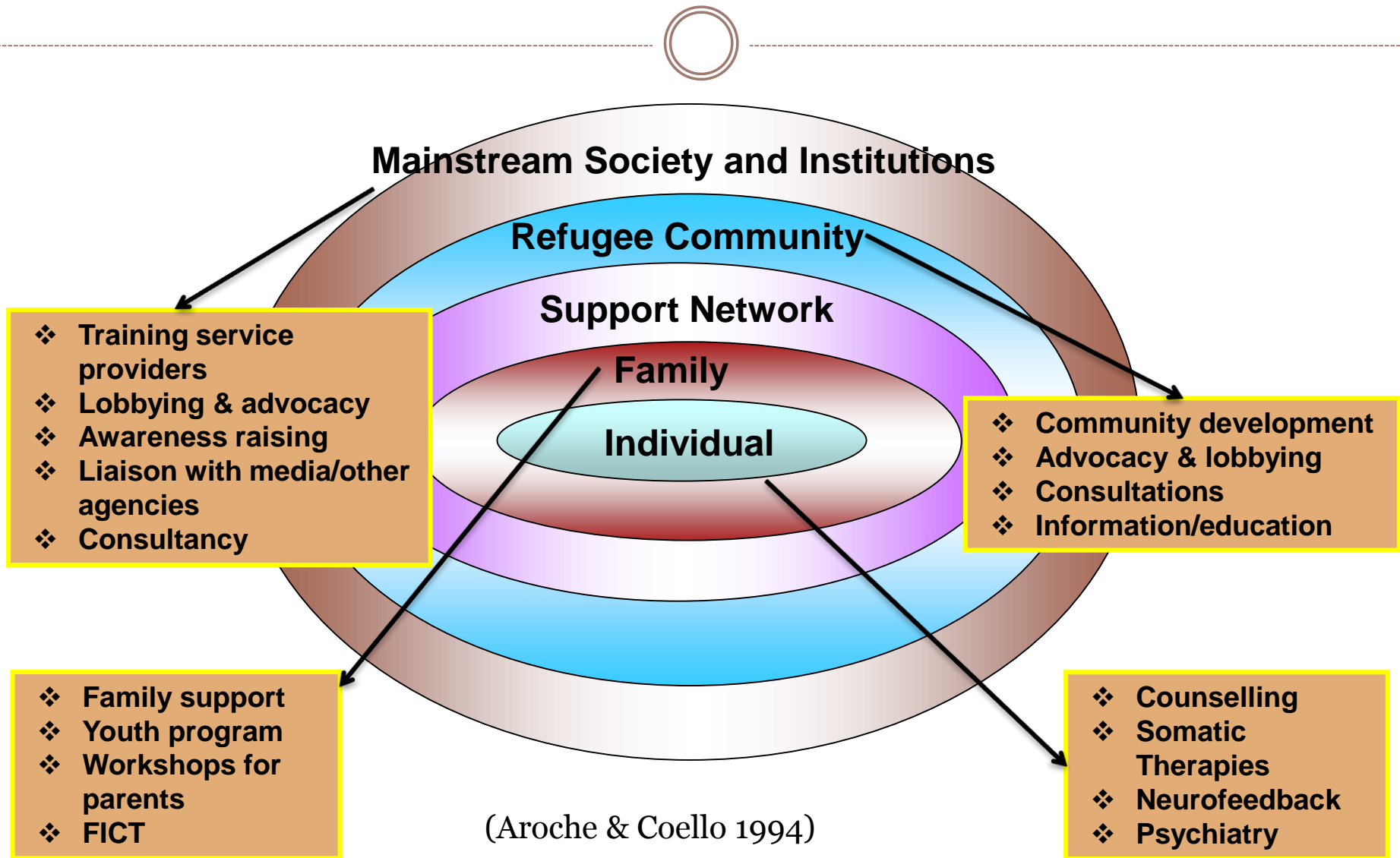
4. Adaptation difficulties

- ❖ Inter-generational conflict
- ❖ Martial tension and break-up
- ❖ Discrimination

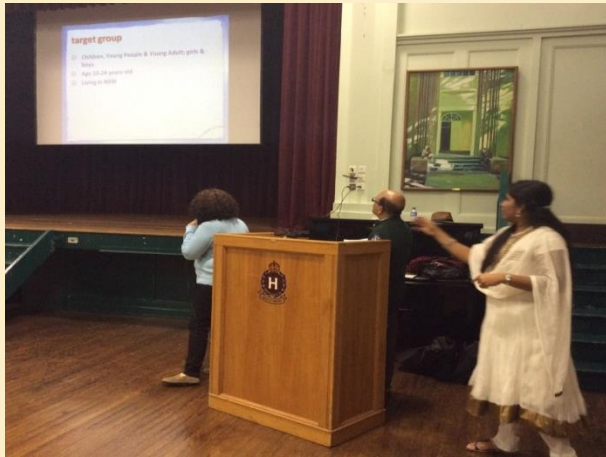
5. Lack of social support

- ❖ Loss of culture and support
- ❖ Loneliness and boredom
- ❖ Isolation

STARTTS Systemic Model



Community Consultation – 2014



Tamil Suicide Prevention Project



Aim:

To address suicide risk

- **Reducing self-harm & suicidal ideation**
- **Building strengths & resilience**
- **Promoting self-help & support**

Strategies:

- 1. Peer Leader Training and Support**
- 2. Community Leaders Training and Support**
- 3. Psychosocial Group Interventions**

Group Counselling



❖ **Tamil Men's Psycho-education groups**

- **Psycho-education - Mental Health issues, PTSD, Depression and Anger**
- **9 x 2 hours and 1 outing**

❖ **Women's Art & Clinical Support Group**

- **Started in 2013 - ongoing**
- **Regular Yoga, Cake baking and decorating, flower arrangement, hair & beauty training and Basic English Class (TAFE)**
- **Current group consist of 25 A/S women's**

Past & Current STARTTS Group Activities



- 1. Sri Lankan Tamil Asylum Seekers Women's Art & Clinical Support Group**
- 2. Families in Cultural Transition (FICT) groups**
- 3. OPICT – Older people in Cultural Transition**
- 3. Tamil Men's therapeutic group**
- 4. MANTRA – MAN Torture & RApe**
- 5. STRI – Surviving Torture Rape and their Intrusion – Women**
- 6. Tamil Suicide Prevention Project**
- 7. Tamil Men's Cricket Group**
- 8. Healthy Relationship workshop for Teenage parents and Day camp for Teenagers**
- 9. Youth camps**
- 10. Soccer group for Tamil A/S children and adolescents**
- 11. Football Team – for A/S Men**

Individual Counselling



Common Clinical Presentation of Symptoms

❖ Post-Traumatic Stress Disorder

- Recurrent and intrusive memories
- Withdrawn and dissociative symptoms
- Flashbacks
- Hyper-arousal
- Sleep disturbances
- Nightmares
- ❖ Anxiety – Separation Anxiety is very common
- ❖ Depression
- ❖ Self-harm or Suicidal Ideation
- ❖ Anger

- ❖ Poor concentration and memory
- ❖ Reluctance to disclose due to trust issues
- ❖ Social withdrawal
- ❖ Fear of going mad
- ❖ Survival guilt and shame
- ❖ Grief and loss
- ❖ Alcohol dependencies
- ❖ Hopeless
- ❖ Psychosomatic symptoms – headaches, back and neck pain, chest pain, indigestion, tiredness, etc..

Clinical Implication & Challenges



- ❖ **Impacts of mental health stigma on family**
- ❖ **Belief in witchcraft (black Magic), ancestors or spirits**
- ❖ **Belief in Karma**
- ❖ **Unique style of communication**
- ❖ **Long time to build trust**
- ❖ **Lack of disclosure**

Closing Statement



- ❖ **Practical assistance**
- ❖ **Discuss about Confidentiality**
- ❖ **Normalise their feelings**
- ❖ **Human rights violations are an ongoing occurrence in Sri Lanka and re-traumatisation is an ongoing reality**
- ❖ **Community based Group approaches are more efficient**

Thank you



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