



Traditional Chinese Medicine Helps Trauma Survivors

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For many years STARTTS has used traditional Chinese medicine as part of the range of services it offers to trauma survivors. Research Coordinator MARIANO COELLO and Chinese medicine practitioner THUY TRAN discuss the great impact this therapy can have on traumatised clients.

RT: What is traditional Chinese medicine?

Thuy: Traditional Chinese medicine is a practice that we use as a form of healing. It is a combination of Chinese herbs, physiology, general exercise, diet, acupuncture and so on. There are many aspects to it and you could study it for 150 years and still not comprehend all of them. Within Chinese medicine, acupuncture is a highlight in terms of the types of treatment we provide here at STARTTS, particularly for pain management.

Mariano: Chinese medicine is an integrated system which sees the person in a holistic form, not only their physical but also their mental health.

There are a number of techniques related to that, from the use of herbs to acupuncture, tuina (a type of deep tissue massage), energy points and meridians. Traditional Chinese medicine is based on energy, and the blockages of energy, that is the principal concept.

Thuy: But there are also many different interpretations. Originally, Chinese medicine was all over the place, even different families practised different versions of it! So it was not a unified system. It was not until the 1950s that Mao established a group of Chinese medicine practitioners to look into it and put it in a context.

Mariano: Chinese medicine is not only practised in China but also in most South-East Asian countries and also in places north of China such as Mongolia and as far as Turkey. It was very much divided according to schools and practitioners.

The practice in Tibet was totally different from the practice in Hong Kong or in Beijing. There was no unified method. So Mao Tse-tung attempted to unify all the forms of practice into one method and to use it as a national health system. So what we see today is the integration of diverse practitioners and schools into one method – the system of channels and energy points – which was deemed the most successful and the most practical according to the traditions and to professional practitioners. From that point on, regardless of geography, the practice of Chinese medicine was the same. And because it is based on energy, it also relates to other traditional methods such as tai-chi or qigong.

Thuy: However much of my practice is based on four generations of practice in traditional medicine, and we don't follow the ways of Mao. We were refugees that fled to Vietnam, so we practise some 'Old Chinese' styles. On top of the unified method we have the family traditions also.

RT: Why do you find traditional Chinese medicine so useful with STARTTS clients?

Mariano: Many of our clients come from traditions and cultures where traditional Chinese medicine is important, and they believe in its power and value.

However western medicine has its own problems in terms of the reach of its methods on how far it can help people. In the last 50 years there has been valuable scientific research to prove the effectiveness of acupuncture to treat certain problems. To date, acupuncture has been shown, using evidence-based methods, to be effective for several conditions including chronic back pain.

We use it because for some clients it is a culturally appropriate treatment method. We also use it because it is effective for certain problems that clients present with. Often, the main thing that is improved by using this technique is the client's physical pain. However, we believe that pain and mental health are very much related – most people with chronic pain have problems with depression, and depression exacerbates pain. So it is obvious to us that if you can influence one of these problems it also helps reduce the other.

RT: Do you have much difficulty convincing people who are not familiar culturally with traditional Chinese medicine to take it up?

Mariano: Well that is why it is essential to do a proper assessment before doing any kind of treatment. Each STARTTS client goes through a detailed assessment and traditional Chinese medicine is used alongside counselling. We apply a comprehensive evaluation of the client in order to determine and recommend the most suitable methods.

But as you say, many clients are not familiar with it, and many problems can arise. They may be afraid. They

do not understand the procedure. They may have been tortured with sharp instruments. So there is a preparation by the counsellor and we need to show them what to expect, show them the needles and so on – we psycho-educate the client in a way. And most people are receptive to that.

Thuy: Also, we can be flexible in the way we work. This year I have a woman who is afraid of needles, but her friend was receiving acupuncture from here and got better, so she asked her counsellor to be referred to see me. So we are doing aromatherapy instead of acupuncture because of her fear of needles.

Mariano: We are able to shift the techniques that we use and we do not focus too much on one particular technique. At STARTTS we do not prescribe herbs or supplements, but we do give advice on diet and exercise and Thuy also works with groups doing exercise, meditation and other techniques that improve physical and mental health. In that context our clients from Africa and Iraq are usually happy to receive treatment. Once they are happy with the results, they talk about these treatments in their community.

RT: So most of the clients are not from Asian backgrounds?

Thuy: No, the majority of our clients now are from Iraq or other Middle Eastern countries, as well as a number of African clients. And they do not want to leave the program!

RT: Can you describe the before and after of someone who has been helped by traditional Chinese medicine?

Thuy: We had one particular client who could not get herself out of the house because of the pain. She was in a 'halfway house' and had just come to Australia two or three months before. So what she did was she came to the front of her house to catch a bus to come to STARTTS, but then she rang us up and said "No, I'm sorry, I can't come because I can't walk further than that". So we decided to go to her. When we got there she was still sitting on the front porch, she could not move. Eventually we were able to get her into the house for an assessment, and after that I saw her regularly.

She had severe headaches and chronic back pain, as well as knee pain, ankle pain and hip pain. She was

not motivated, and had insomnia and severe depression. Much of this was related to the fact that she had walked hundreds and hundreds of kilometres to reach a refugee camp with her child on her back and six other children, including the children of her cousin and brother.

Mariano: Her escape was very daunting and she was strongly affected, plus there was also violence perpetrated against her, so she was physically and mentally very damaged.

Thuy: So this particular client, after about 20 sessions was quite recovered, she walked and she was a different woman. It has been a life changing experience for her.

RT: How long has STARTTS been using Chinese medicine?

Mariano: We've been using it for a very long time. There is a history of using Chinese medicine, particularly acupuncture, at STARTTS. We opened our physiotherapy department in the early 1990s and it was our physiotherapist, Paula Raymond, who began using acupuncture. We have treated hundreds and hundreds of clients since the inception of the program. Previously we really targeted the Indo-Chinese community but now it is everyone and it is very welcome and very successful with many communities.

RT: What does the future hold for traditional Chinese medicine at STARTTS?

Thuy: Well I am just beginning some PhD research focusing on posttraumatic stress disorder and somatic stress, in a joint project with the University of Technology Sydney. We will be comparing different treatments – acupuncture alone, counselling alone and a combination of both.

I normally monitor the level of pain of the client each session, to see if clients are improving or not through the treatment. This style of continued monitoring provides a good guide to what I have to do next, and also a guarantee that what I am doing is effective.

Mariano: We are expecting to find that the combination of acupuncture and counselling is going to be a much more effective treatment for the posttraumatic consequences of refugee trauma, including mental health issues. This type of research has not been done before. R

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