



Reflection on a holistic model of recovery. Working with CaLD Carers

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Objectives

- To identify and respond to Cald Carers issues and needs.
- To recognize and support Cald Carers resilience, strengths and resources.
- To explore and reflect on empowering interventions and practices.
- To recognize the importance of self care and reflexivity in practice.

Outline

- Working holistically with CaLD Carers. Introduction to Ishar Multicultural Carers Support program.
- A Narrative approach in practice.
- “Stories of Inspiration from WA Cald Carers” A DVD demonstration and reflection.
- Activity: Photo-language as externalising technique.

Ishar

Multicultural Women’s Health Centre

- Doctor’s Clinic
- Counseling
- Physiotherapy and Women’s Exercise Classes
- Visiting Sisters
- Parenting From the Heart
- Midwifery Program (new)
- Training and Employment Program
- Drug and Alcohol Counseling (Drug and Alcohol office)
- Mental Health Access (Fremantle Migrant Resource Centre).
- Training
- Carers Support and Skills Development Program

Carers Program

- **Locations:** Mirrabooka
Midland
Fremantle

- **Free and Free Interpreting Service**
- **Confidential**
- **Carers of a family member with a Mental illness (e.g. personality disorders, depression, anxiety disorders, psychoses, schizophrenia, autism)**
- **Age: 18 and over**
- **Gender: Females and Males**
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Carers Program

1. Service demographics

Metro Area	Nationality	Age	Gender	Religion
North	Polish; Iranian; Italian; South African; Romanian; Australian; El Salvadorian; Malaysian; Burmese; Palestinian; Moroccan, Afghani, Russian,	30-75	F	Catholic; Bahia; Muslim; Orthodox ; Catholic
North East	Spanish; Italian; Iranian; Australian; Polish; Irish; Indian; Pakistani.	35-65	F and M	Catholic; Bahia; Muslim
South and South East	Thai; Irish; Indian; Australian; Afghani; Macedonian; Iraqi, Venezuelan, Bosnian, Croatian, Iranian	35-65	F and M	Catholic; Buddhist; Muslim; Orthodox

Carers Program.

- Individual Counseling.
- Group Counseling and Therapy.
- Support Groups.
- Psycho-Education and Information.
- Short Weekend Retreats.
- Referrals.
- Workshops and Seminars.
- Carers Stories Project.
- Conferences.
- Mental Health & Cultural Events & Celebrations.

Carers Program

- Core State Funding: Department of Health
Mental Health Division
- Carers WA (Special Project for Carers;
Workshops & Short Weekend Retreats)
- Australian Red Cross
- Department of Sport and Recreation WA
- Independent Living Centre WA

Challenges.

- Services are fragmented. Most providers work in isolation.
- They compete for resources and clients.
- There is duplication of services.
- Clients are confused and frustrated.
- Service providers are at the high risk of burnt out, compassion fatigue and a vicarious trauma.
- Quantity rather than quality.

Carers Program

- One in five people suffers the burden of mental illness.
- One in four families has an ill member.
- Mental illness is among the 10 leading causes of disease burden, accounting for 13% of Australia total disease burden.

Source: ABC 1997; Australian Institute of Health and Welfare, 2006

Pre-migration experience of Carers

- Migrants, refugees and asylum seekers
- War
- Torture and Trauma
- Economic Deprivation
- Dislocation
- Religious and Political Prosecutions
- Looking for a Better Life
- Family Reunion

Issues Faced by CaLD Carers post-migration.

- Culture Shock.
- Homesickness.
- Language Barrier.
- Sense of Belonging.
- Physical Health.
- Mental Health (PTSD, adjustment disorder, anxiety, depression, chronic stress and neurotic disorders resulting from stress).

Issues Faced by CaLD Carers post-migration

- Isolation and Loneliness.
- Grief and Multiple Losses.
- Stigma. Coping and adaptation. Influence of cultural background – “Family problem” .
- Social construction of a caring role (i.e. African communities).
- Women’s issues: 70% of Carers are women and their role impact on domestic, social, occupational and leisure routine.
- Vulnerability (issues are largely hidden and greatly undervalued in society).
- Financial security and stability.
- Achieving of personal goals.
- Relationships.

Issues Faced by Carers post-migration

- Mental health (e.g. depression, chronic stress, anxiety and neurotic disorders etc resulting from stress)
- Behavioral and emotional responses to cognitive stress (fear, anger, self-blame, shame and guilt)
- Caring as an rewarding and a challenging experience:
“This is a chance to ‘give and receive”

Issues Faced by Carers post-migration

- Coping and adaptation. Influence of cultural background – “Family problem” .
- Stigma.
- Pathways to seeking help.
- Lack of knowledge about service availability.
- Tendency to under-utilize Western based health services (e.g. Malaysian, Chinese and Indian).
- Low level of understanding of a mental illness.
- Uncertainty about treatment.

Working Holistically with CaLD Carers

- While people cope by dissociating themselves from painful memories , blocking them out rather than confronting the hurt, this does more damage in a long term.
- ‘The body remembers sharply what the mind cannot bear to face. The body keeps the score’.
- Denying the trauma prevents physical, psychological and emotional healing and the self stays fragmented, unable to form a ‘normal’ narrative to process the pain.

Source: Rowney, L., 2007 Freedom to Heal in Nova, October, pp16-17.

Working Holistically with CaLD Carers

- Mind (Mental Health).
- Soul (Emotional Health).
- Body (Physical Health).
- Social Support and Connection.

Mental Health

- Talks, Seminars and Therapy Groups
- Understanding of a mental illness and psychological trauma.
- Holistic Management of Depression, Stress, Anxiety, Fear and Pain.
- Natural Remedies. Naturopathy.
- Reiki, Yoga, Kinesiology.
- Essential Oils.
- Importance of Self Care.
- Healthy Food and Diet. Living Food.
- Positive Thinking.
- Physical Health.

Mental health



Emotional health

- Group Therapy and Counselling
- Yoga and Relaxation.
- Meditation.
- Pampering sessions.
- Creative Self Expression.
- The Healing Power of Flowers.
- Interpretive Scarf Dancing.
- Laughter Yoga.
- Art therapy.
- Narrative therapy (DVD Stories of Inspiration).

The Healing Power of Flowers workshop



Interpretive Scarf Dancing



Art therapy



Physical health

- Physical Activities
- Belly Dancing
- Badminton
- Walking
- Lawn Bowling
- Body Balance
- Tennis
- Swimming
- Yoga





Lawn Bowling



Social Support and Connection

- Picnics and outings.
- Short Weekend Retreats.
- Boat Cruises.
- Christmas Lunches.
- Semester Lunches.
- Craft Workshops.
- Harmony Day Celebrations.
- Mental and Carers Weeks Celebrations.
- Conferences.





A narrative approach in practice

- The narrative approach in practice is recommended for reflective practitioners as it represents a radical rethink of counseling practice and 'non-institutional talk' that requires adopting a curiosity and opening up rather than truth seeking and a pathological position towards the client.

A narrative approach in practice

- *“The basic philosophy of the narrative approach is that people are experts in their own lives, even though this expertise may have been undermined by the structural inequalities which affect many clients' lives and traditional ways of explaining human behavior, which are often unreliable”*
(Dryden & Fletham, 1994).

A narrative approach

- People are experts of their lives.
- Relationship of cooperation and partnership.
- No power abuse.
- Clients are in control.
- Respect.
- A safe and supportive environment.

A narrative approach

- People have many stories about their lives and relationships, occurring simultaneously.
- People have stories about themselves, their abilities, struggles, competencies, actions, desires, relationships, work, interests, conquests, achievements and failures (A. Morgan, 2006:5).
- Through stories people construct their identities and shape their lives.
- In many cases, people use language as a tool to construct and convey these meaningful stories.

A narrative approach

- In contrast to modern forms of intervention, the narratives do not seek to uncover or construct single truth about the causes of the person's situation.
- Instead, the narrative approach seeks to assess and transform the narratives that construct humans' lives.
- It seeks to challenge the harmful and dominant stories that represent the person in a negative and pathological frame.

A narrative approach in practice

- A narrative approach aims to identify and construct alternative stories that recognize and honour the person's capacities, including, e.g. his (her) capacity to take responsibility for choice.
- An important feature of the initial open and curious engagement with the person is that of exploring, how they came to be recruited into the dominant and harmful story about themselves.

A narrative approach in practice.

A DVD: Stories of inspiration
from WA Cald Carers

- Through the story of the self Carers:
 - constructed their identity,
 - identified and explored their strengths and resources,
 - reinforced their resilience,
 - explored possibilities,
 - reflected on their intentions, values, hopes and dreams and
 - connected with each other.

**A DVD demonstration
“Stories of Inspiration
from WA Cald Carers”.**

Questions that helped Carers to shape the story of the self.

- I wonder what your caring role means to you?
- I am curious how different to be a Carer in Australia and in your country of origin?
- Would you like to share with me what challenges and rewards you encounter as a Carer?
- Would you like to share with who are the special people in your life?
- I wonder what helps you to cope and succeed in your Caring role?
- I am curious why you decided to share your story?

Activity

- **Photo Language**



**For a free copy of the DVD
“Stories of Inspiration.
WA Cald Carers ”**

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Thank you