

TRAUMA AND LOSS

GUIDELINES FOR PROVIDING MENTAL HEALTH FIRST AID TO AN ABORIGINAL OR TORRES STRAIT ISLANDER PERSON

Purpose of these guidelines

These guidelines describe how members of the public should provide first aid to an Aboriginal or Torres Strait Islander person who has experienced trauma or loss that has resulted in ongoing grief or distress. The role of the first aider is to assist the person until appropriate professional help is received or the crisis resolves. The guidelines aim to be respectful to cultural differences in understanding and responding to trauma and loss. More information regarding culturally respectful first aid practice can be found in *Cultural Considerations and Communication Techniques: Guidelines for Providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

Development of these guidelines

The following guidelines are based on the expert opinions of Aboriginal clinicians from across Australia, who have extensive knowledge of, and experience in, mental health.

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How to use these guidelines

These guidelines are a general set of recommendations about how you can help an Aboriginal or Torres Strait Islander person who has experienced trauma or loss, either recently, or in the past. For information about assisting after a large-scale trauma, such as a natural disaster or terrorist attack, please see the guideline *Psychological Trauma: First Aid Guidelines for Assisting Adults*.

Each individual is unique and it is important to tailor your support to the needs of the person you are helping. These recommendations may not be appropriate for every person who has experienced a trauma or loss.

It is also important to acknowledge that Aboriginal and Torres Strait Islander people may differ in their understanding, approaches and responses to trauma and loss. You should be familiar with the way the person you are helping understands their feelings and responses. Also, the guidelines are designed to provide first aid in Australian Indigenous communities and may not be suitable for other cultural groups or for countries with different health systems.

THE GUIDELINES

Trauma and loss in Aboriginal people

An experience of trauma or loss affects the whole person; their mind, spirit and body, as well as their relationships with others. When assisting Aboriginal people, it is particularly important to acknowledge the effect experiences of trauma or loss can have on mental health. Aboriginal mental health professionals say that all recognition and treatment of mental distress within Aboriginal communities should involve an understanding of trauma and loss.

What do we mean by trauma?

Trauma is a reaction to an extremely distressing event. Trauma can occur when someone experiences, witnesses, or hears unexpectedly about, a situation involving actual or threatened death or serious injury.

WHAT ARE TRAUMATIC EVENTS?

The types of traumatic experiences individuals may have had include:

- Physical assault including rape, robbery or mugging
- Car accidents or other life-threatening accidents such as falls or near drownings
- Ongoing abuse including bullying, family violence or sexual abuse
- Death of a loved-one by suicide or other untimely circumstance
- Witnessing any of the above events

Be aware that these are only a few examples of events that most people would find traumatic. An event that is traumatic for one person may not be traumatic for another.

The initial response to a traumatic event usually involves feelings of fear, helplessness or horror. These normally pass within a few hours or days after the event. However, if symptoms persist some people may go on to develop post-traumatic stress disorder or other associated mental disorders such as depression or anxiety.

When trauma is ignored and there is no support for dealing with its effects, trauma can be passed from one generation to the next. This process is often called intergenerational trauma.

What do we mean by loss?

A loss occurs when a person no longer has access to someone or something significant to them. Feelings of grief, deep sadness or a sense of hopelessness, can often follow an experience of loss. For Aboriginal people, colonisation meant a loss of land, language and culture. The forced removal of

Aboriginal children also involved a loss of identity, family and community. Unresolved or ongoing grief are common in Aboriginal communities because of the 'unfinished business' of colonisation and the Stolen Generations.

Trauma and loss and Aboriginal mental health

Although experiences of trauma and loss are not necessarily causes of mental illness, unresolved emotional distress or overwhelming grief can lead to poor mental health. A history of invasion, the ongoing impact of colonisation, loss of land and culture, racism within the wider Australian community, family separations and deaths in custody, are all examples of trauma and loss experienced by Aboriginal people that contribute to mental distress.

In addition, many Aboriginal people experience the loss of loved ones at an early age and may do so frequently throughout their lifetimes. These losses are also likely to occur in the context of traumatic or untimely circumstances and, because Aboriginal communities are highly integrated, bereavement and traumatic events often have a widespread and devastating impact on health and community stability, even when only a few people are the primary victims (e.g. in a car accident).

Current experiences of trauma or loss can also be affected by the person's past experiences of trauma or loss. For instance, where death, separation and loss are more frequent, a person may find it increasingly difficult to deal with each individual event.

If a person has experienced a loss or traumatic event, even if it was a very long time ago, unresolved emotional distress can still affect a person's life. Some people may even become suicidal. If at any time, the person you are helping becomes suicidal, you should encourage them to seek professional help. For more information about assisting an Aboriginal person who is suicidal, please refer to the other guidelines in this series *Suicidal Thoughts and Behaviours and Deliberate Self-Injury: Providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

When assisting someone who has experienced trauma or loss, it is important not to misinterpret the person's behaviours or experiences as symptoms of mental illness. Be aware of what constitutes culturally appropriate behaviour after trauma or loss. For instance, it is not unusual for Aboriginal people to see, hear or talk to spirits of deceased loved ones. If the person you are assisting believes they have been visited by the spirit of a loved one, reassure them that this is a common experience for many Aboriginal people and encourage them not to feel frightened or to feel shame. If the person remains afraid of a spirit, encourage them to seek appropriate help, for example by seeing an Aboriginal health worker, Ngungkari/Traditional Healer, Elder, family member or someone strong within the person's community who can help them with the issue.

Also, some Aboriginal communities may use 'payback' as a way of dealing with traumatic events or loss of loved ones. If the person is afraid that they will suffer from payback, encourage them to seek appropriate help, perhaps from a Ngungkari/Traditional Healer, Elder, or family member.

CULTURAL COMPETENCE

You should demonstrate cultural respect when assisting an Aboriginal person who has experienced trauma or loss. Be aware of the cultural practices used in the person's community. For instance, many Aboriginal people participate in 'sorry business', or traditional ceremonies, to help them resolve their grief or trauma.

Be sensitive to the cultural practices of the person's community so you do not do or say something that causes the person shame. For instance, some communities avoid referring to deceased loved ones by name. For more information on culturally competent first aid, see the other guideline in this series *Cultural Considerations and Communication Techniques: Providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

Immediate assistance after a traumatic event

When there is current danger or if the person is injured

Before taking any action, you should determine whether or not it is safe to approach the person. Look for possible dangers from fire, weapons or debris. Explain to the person what your role is and why you are present.

Try to create a safe environment for you and the person. If the person is badly injured, you should encourage them to go to a hospital or clinic. Stay with the person and try to remain calm. Once emergency professionals are involved, follow their directions.

When emergency professionals are not involved

If emergency professionals are not required, ask the person if they would like you to stay. If they agree, ask the person how they would like to be helped. Speak clearly and try to show that you understand and care. Communicate with the person as an equal, rather than as a superior or expert and avoid the use of clinical or technical language. Try to reassure the person that their reactions are normal by saying something like "it's okay to be feeling the way you are feeling".

Remember that providing support doesn't have to be complicated. It can involve small things like spending time with the person, having a cup of tea or coffee, yarning with the person or giving them a hug.

If the trauma involved an assault

If the person has been the victim of a violent crime, there are some extra things that you may need to consider. Forensic evidence, for example, may need to be collected via swabs from the body or materials on the clothing or skin. Suggest to the person that, although they might not want to consider the possibility of pressing charges now, collecting evidence may be a good idea. Be aware that the person might need some time, days or weeks, before they feel ready to report any violence or abuse to police. Understand that the person may fear contacting police for a number of reasons; they may not trust police, they may not want to cause family feuding, or they may fear payback from reporting someone to the police. If the person is reluctant to contact police, try to help the person overcome their fears about police intervention. For instance, you could offer to find out who the local Aboriginal liaison officer is or offer to stay with the person while they talk with police. You could also talk about compensation for victims of crime with the person. If, however, the person does not want to take any further action, you need to respect their right to refuse counselling, medical treatment and police intervention.

What about family violence?

Family violence involves a number of different forms of abuse: physical, verbal, emotional, sexual or cultural. It affects all members of the family, including babies and children, even if they are not being physically hurt. Be aware that family violence is illegal, it is not part of Aboriginal culture and it is damaging for those affected.

If the person has experienced family violence, reassure them that it is okay to talk about violence or abuse. If the person tells their story, you should believe what the person tells you has happened. If a child discloses abuse, you should contact the appropriate authorities.

The suicide of a loved one

After the suicide of a loved one, a person may feel shame and a sense of isolation. Reassure the person that this is a normal response. Do not lay blame or try to explain the death and encourage the person not to blame themselves or others for their loved one's suicide.

In the days and weeks after a traumatic event or loss

You can help the person by simply being there for them; be available, attentive, and let them know that you care. Allow the person to make their own decisions, without nagging, judging or blaming them for their feelings or behaviours.

The person's reaction

Each person will differ in how they react to a trauma or loss. Be aware that the person might not be as distressed about the trauma or loss as could be expected. Try to be tolerant of

any strong emotion expressed by the person, except if they become threatening, abusive or violent. Behaviours such as withdrawal, irritability and bad temper may be a response to the trauma or loss, so try not to take them personally. Respect the person's need to be alone at times. Encourage the person to let others know when they need or want something, rather than just assume that others will know what they want. Also suggest the person doesn't let small day-to-day hassles build up and add to their stress.

Try to avoid saying things that minimise the person's feelings, such as "don't cry", "calm down" or "get over it". Also avoid statements that may minimise the person's experience, such as "you should just be glad you're alive" and the use of clichés like "life goes on" or "you must be strong now". Be patient with the person, and don't expect that they will be 'over it' in a few weeks. If the person is experiencing changes in their mood or loss of energy, reassure them that it is common after trauma or loss to have good and bad days. Do not say to the person "I know how you feel" or try to tell them how they should be feeling.

Expressing feelings

Do not discourage the person from expressing their feelings of trauma or loss. Instead, encourage the person to allow themselves to feel sadness and grief over what has happened and to express their feelings when they feel they need to. You could tell the person that you are okay with them expressing their feelings in front of you, even though it may be hard to see them upset.

Suggest the person try to find a way to express their feelings that is meaningful to them, such as physical activity, music, writing or journaling, art, praying or meditating, story telling, cultural activities or ceremonies. Make sure you encourage ways that do not cause harm to the person or harm to others.

Provide the person with information and resources about dealing with trauma or loss. Help the person identify other sources of support, such as loved ones and friends. Encourage the person to fulfil their cultural practices for dealing with trauma or grief and loss, for example, by going home to country and participating in sorry business.

Talking about the trauma or loss

It is important that you acknowledge the person's trauma or loss and what it means to them. Reassure the person that everyone has their own pace for dealing with trauma or loss, and that they can come and talk to you another time if they don't want to do it now. If the person does not want to talk to you at all, encourage them to consider calling a crisis line, going to a crisis centre or using other community resources. You should never force the person to tell their story or probe for more details, and avoid repeatedly asking about the trauma. Also be aware that it is not unusual for men to not want to express their feelings verbally or to avoid having to talk it out.

If the person wants to tell their story, give them lots of time and listen to them in a non-judgemental and accepting way. Do not interrupt the person, allow for moments of silence and reflection. If you feel that you cannot listen to the details of the trauma, let the person know, while offering your support and understanding. If you do not know what to say in response to the person, let them know that this is the case. Once the person has told their story, you should respect their right to confidentiality by not telling others what they said without their permission.

If the trauma involved the recent death of a loved one, and the person thinks that they might have seen their loved one, or talks about them as if they are still alive, the first aider should reassure the person that this is normal.

It is also important to remember that you are not the person's counsellor. If the person's grief or distress becomes a problem, you should encourage them to seek professional help.

What about professional help?

How do I know if professional help is needed?

You should suggest the person seek professional help straight away if they:

- become suicidal
- are overwhelmed by intense or distressing feelings
- feel their important relationships are suffering as a result of the trauma or loss
- abuse alcohol or other drugs to deal with the trauma or loss
- feel jumpy or have nightmares relating to the trauma or loss
- are unable to enjoy life at all as a result of the trauma or loss
- feel like no-one understands them
- start picking arguments with friends or getting into fights

You should suggest the person seek professional help, if for two weeks or more, they:

- feel very upset or fearful
- can't get on with their usual activities
- can't stop thinking about the trauma or loss

After 4 weeks, if the person is acting very differently compared to before the trauma or loss, it is best that they seek professional help.

What kind of professional help?

Be aware that the needs of each person will be different when it comes to seeking help. Some people, for instance, may want one-to-one contact with a professional, while others may prefer participating in a group. For some people more traditional methods of healing, such as that provided by a Ngungkari, may be important, while for others conventional grief counselling will be more helpful.

Be aware of the different types of professionals who can help the person. These may include psychologists, healing circles or cultural healing groups, bereavement support groups, doctors or religious leaders. Know the range of specialist services that can provide help and assistance for specific types of trauma or loss. For instance, Centres Against Sexual Assault (CASA), Link-Up or Bringing Them Home counsellors who specialise in Stolen Generations issues, and counselling services for victims of crime.

Suggest that the person see a professional who is trained or has experience in working with Aboriginal people and their experiences of trauma and loss. It is important to note that counselling suitable for Aboriginal people may be quite difficult to find or gain access to, as there is a shortage of appropriately trained Aboriginal psychologists and counsellors. If this is the case, you can engage other options. For instance, you could suggest the person find a service that specialises in assisting with the type of trauma or loss the person has experienced. Most importantly however, encourage the person to find someone who will help them tell their story and who the person can trust and feel comfortable talking to.

Although you should assist the person in finding out what services are available to them, you should also allow the person to decide what sort of help will be best for them. Have a yarn with them about their options for counselling, traditional or medical treatment.

What if the person doesn't want professional help?

Sometimes people will not want professional help, even if they need it. If this is the case, you should reassure the person that they may benefit from professional help. Tell them that reaching out for help is not a sign of weakness and that there is no need to feel shame about having a yarn with a doctor or health worker to help them through their healing. Reassure the person that a lot of people need help after experiencing a trauma or loss, and that seeking professional help is normal.

Be aware that where there has been ongoing trauma of any kind, the sooner professional help is sought, the better. If the person has been experiencing ongoing trauma, such as family violence, or if the person experienced trauma a very long time ago, such as child abuse, reassure them that it is never too late to benefit from professional help.

For further information on providing assistance to someone who is at risk of suicide, please see the other guideline in this series:

Suicidal Thoughts and Behaviours and Deliberate Self-Injury: Guidelines for Providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person.



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What else can I do?

Encourage other supports

Although you should try and be there for the person, you should not make promises you cannot keep. Encourage the person to find other supports where possible. Whether or not the person seeks professional help, you should encourage them to identify sources of support. These may include community members, support groups and men's or women's groups.

Be aware that the person may find particular times stressful. Some occasions that might be difficult, particularly if the person has lost a loved one, are anniversaries, celebrations such as Christmas or birthdays, or hearing about situations that remind them of the trauma or loss. It is a good idea to help the person develop a list of people, services or places that they can contact when the going gets tough. Also be aware that it is possible that the person may feel guilty or worried about being happy. If this is the case, reassure them that it is okay for them to enjoy themselves and the company of others.

Encourage positive coping strategies

To help the person recover, it is important that you encourage the person to take care of themselves by getting some exercise, having plenty of rest when they are tired, and eating well and regularly. Encourage the person to be patient with themselves and to either take time out from normal activities or maintain their routine, depending on what feels best to them.

Help the person to find some effective coping strategies. For instance, you could suggest that the person think about and use strategies which have helped in the past.

You could help the person find some ways to relax, such as practicing slow deep breathing, or finding somewhere they can spend time feeling safe and comfortable. Above all, encourage the person to do the things that feel good to them, even if it is as simple as taking a walk, going fishing or watching television. In addition, you should discourage the person from using negative coping strategies such as working too hard, using alcohol and other drugs, or engaging in self-destructive behaviour. Let the person know that excessive intake of alcohol or other drugs is not likely to be helpful.