

A personal reflection: rebuilding the Burmese community one client at a time

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In this personal reflection the author, a Burmese refugee in Thailand, describes how his training in psychosocial counselling has helped him to overcome a state of demoralisation and given him new confidence in the future, for himself and for his people.

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Background and context

Decades of rule under a military dictatorship in Burma led to the student uprisings in 1988 where I, and other students, took to the streets to demand democracy. Life under this dictatorship had created economic hardship and anger towards the government for nearly everyone. When students took to the street at the Rangoon Institute of Technology, the government responded with violence. We then called on the government to be held accountable for their violent actions.

In 1992, I was arrested, along with many other university students, for my involvement in protests against the national convention developing the constitution. This was during my final year of studying chemistry in Rangoon, Burma. I was 20 years old and spent the next six years of my life as a political prisoner in Insein prison, known for their brutal treatment and torture of prisoners. I was in prison, along with around 90 other political prisoners, in the annex jail of Insein prison. We were made to remain in our 8 by 8 foot cells for 23 hours per day, with two to five people per cell, and very little food or water.

When I was released in 1998, I had little hope for my future and felt I had lost everything. After being released, I stayed with my parents and brother in Rangoon. I met my wife while working at a garment factory and we were married in 2001. My son was born in April 2004. In 2008, I fled to Thailand with my wife and young son, seeking security and the opportunity to earn a living. We found ourselves in an overcrowded refugee camp, where I did manual labour every day to provide for my family. During our time in the camp, my son worried about me, and it made me sad that he had to see me in this situation.

In 2010, we left the refugee camp and moved to Mae Sot, Thailand, a border town between Thailand and Burma. Although we did not have passports or any other documentation, we felt a sense of freedom being outside the refugee camp. At the same time, I was unsure of what employment I could find or what our future would hold.

Assistance Association for Political Prisoners

After arriving in Mae Sot, the Assistance Association for Political Prisoners (AAPP) approached me as a former political prisoner, offering me the training to become a mental health counsellor for torture and trauma survivors from my community. The AAPP has worked for the release of all political prisoners and to improve prison conditions inside Burma, since 2000. It is run entirely by former political prisoners like myself. Throughout the years it has carried out a range of activities on behalf

of Burma's political prisoners, including local and global lobbying and advocacy for the release of political prisoners and providing financial support to political prisoners and their families. However, this training in counselling was the first opportunity for those of us affiliated with the organisation, to learn new skills in order to provide counselling to those individuals in our community who needed it. Our clients are former political prisoners or family members of former political prisoners, and the impact of the imprisonment on their lives is immense. Many of these people still live in fear because of the time in prison, or under surveillance by the military government, and have experienced discrimination and loss of employment because of their affiliation with the political movement. Other issues resulting from imprisonment are disagreements within the family, and also the community, because of high levels of mistrust in general.

To me, counselling is necessary to help individuals and the country as a whole to rebuild. At the time of the initial training, there were over 100 former political prisoners in Mae Sot and Burma, not to mention the large numbers still being held in prisons across the country. The need for mental health counselling is huge when you also include the impact on families and communities as well, but we were up for the challenge.

Becoming a clinical supervisor

During training, clinicians from Johns Hopkins University (who provided the training) selected me as one of the clinical supervisors for the project. Our training lasted 14 days, during which time 30 of us, from three organisations, were trained in the evidence based therapy Common Elements Treatment Approach (Murray et al., 2013). I learnt new skills, such as how to listen to others and use relaxation techniques. One particularly interesting component of the counselling training was 'cognitive

coping'. Cognitive coping involves changing someone's negative thoughts about a situation into something more positive through use of a triangular mapping, showing the connection between thoughts, feelings, and behaviour. If we can change our thoughts about a situation, then our feelings and behaviour will follow. I, personally, found this method very helpful and believed it could be helpful to others as well.

During the training, initially, I lacked the confidence that I could work effectively as a mental health counsellor, but with practice I gained the confidence I needed and was selected to be the clinical supervisor. As a clinical supervisor, I am responsible for overseeing the work of several counsellors and supporting them in designing treatment plans for clients. For example, based on our assessment form results and observations during sessions, we noticed that some clients needed additional components, or more time for particular components, thereby allowing us to adapt the programme to each individual's needs.

Challenges and opportunities to create positive change

When we first started offering counselling services, people within the community were unfamiliar with mental health issues and concepts. As a result, I was unsure of how our services would be received. At first, people misunderstood what we were providing and called us 'crazy doctors', or said: 'I'm not crazy' and ran away. Or, they would avoid us and appeared to be uninterested in counselling.

In order to overcome these barriers, we made every effort to approach the community with patience and to use less formal language. We also tried different methods of sharing information, including creating a radio programme on a station popular with many people from Burma living in Mae Sot and holding group information sessions within the community.

Our hard work eventually paid off and we were able to break down some of the initial barriers. People started coming to us for counselling, or referred their friends to us. Now, we are widely respected and recognised for our work. Box 1 below shows an example of how positive client experience can lead to the positive recognition our services need to reach out to the community. Some problems prove more difficult to solve. In our training we learnt to provide a brief intervention for alcohol abuse. This involved providing extra support during our weekly sessions for clients who had scored high on the alcohol use section of our assessment form. What we found is that some clients who scored high did not want to change their drinking behaviour and sometimes came to counselling sessions under the influence of alcohol. Box 2 below is an example of a client's story who was, at the time, unwilling to change his behaviour.

One of the biggest challenges and the most difficult thing we face is talking to people about specific traumatic events they have experienced, such as: imprisonment, torture, rape and witnessing the killing of a family member. There is a component within our counselling steps called *'talking about difficult memories'*, where a counsellor guides a client through talking about a difficult memory in order to help them learn to deal with the emotions triggered by such a

memory. While I understood the theory behind this, I asked myself if *'people really can speak out about their experience and will this really help them?'* Although it was difficult, we actually found that people were able to speak about their experiences. Many clients told us that they felt relief after having the chance to talk through their difficult memories. We also could see, from our regular monitoring forms in sessions, that their symptoms of depression and trauma were decreasing as well.

Another challenge for me is that as a supervisor, I have the additional role of making sure that counsellors are taking care of their own emotional health. Many counsellors feel sad and upset hearing these traumatic stories. It is, therefore, part of my role to support counsellors and to ensure they offer support to each other as well, in order to deal with the stress inherent in the work.

Alternatively, I can also see that counsellors benefit from this work. They are all former political prisoners and have struggled to find work after being released. Now, they have a sense of purpose once again, and no longer feel a burden to their families. Instead, they can teach counselling skills and support others within our community.

For myself, I used to be aggressive at times, but now I feel in control of my feelings.

Box 1: Positive client experience

One of the counsellors I supervise was providing counselling to a woman with mental health problems resulting from her past. However, this client was also experiencing current problems with her husband; for the past five years, their relationship was getting worse day-by-day, primarily due to their poor financial situation. Another counsellor started to provide counselling to the client's husband, because he also needed support. While our counsellors worked mostly on mental health problems stemming from past events, this couple found they developed a better relationship after receiving individual counselling. The counselling taught each of them the skills to control their emotions and to work to change their negative thoughts. As a result, they decided to work together to overcome the struggles in their lives. Now they refer their friends to come to us for counselling and promote our work within the community.

Box 2: A client's story

One man in particular stands out for me. I remember that he came to two counselling sessions while under the influence of alcohol. I explained to him that we would be unable to help him if he continued to drink before coming to counselling. In the end, he stopped coming. I was very sad because I had really wanted to help him. However, I also had to realise this was his choice, and the best we can do is continue to provide services and make ourselves available in case he wants to return.

I can take a step back and take the time to change my thoughts in order to solve my problems in a calm way. Also, as a result of my work, I now have more confidence in myself, and a better relationship with my wife and son. I feel so grateful that my son can see me working in this position. Now, he can be a child and come running up to me after school to tell me about his day, instead of worrying about me and our future.

Positive impact and hopes for change

As a result of my beliefs in democracy and freedom, I was never able to finish my chemistry degree. Yet, the journey of my life has brought me to a place I never dreamed of before; I have not only learnt skills through my work as a clinical supervisor, but now I have a profession. When I was living in the refugee camp, I thought I would always work as a labourer, with my only dream being that my son would have a brighter future. Now, I have been promoted to the level of chief clinical supervisor and every day I am working with an amazing group of counsellors, providing services in Thailand and Burma. Together, we are helping people and rebuilding the future of our country.

I have seen, first hand, that working as a provider of counselling can positively impact the lives of counsellors, as well as clients and the community. Through my work as a clinical supervisor, I have learnt more about what it means to adapt a programme to the local context; taking theories we learn and applying them within the community in a way that uses language people understand,

are familiar with, and find culturally appropriate ways to carry out our services. The need for ongoing work is great and I hope that we can continue expanding these services throughout Burma.

Providing counselling means that we are helping individuals gain the skills to think better and feel better. On the larger scale, though, we are leading the way towards reconciliation, because this process can only happen when people are calm and have a clear mind. In this way, we are helping to create an environment where true and lasting change can come to our country.

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Reference

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