The New Belief Project – Supporting Vietnamese Families
Written and presented by Judy Cain

Abstract:
The New Belief Project – Supporting Vietnamese Families Mary of the Cross Centre has been involved in Alcohol and Other Drugs programs with the Vietnamese Community for five years. Members of this community are overrepresented in the Criminal Justice system in relation to illicit drug activities and families have long suffered emotional distress, shame and isolation. The Centre has developed a holistic model of service delivery to Vietnamese-Australian families based on John Byrne’s Action Research project Support for Vietnamese Families of Illicit Drug Users. This paper will focus on a practical outcome of that research – the New Belief project - which provides support for the family members of Vietnamese-Australians affected by problematic substance use. The project is managed within the Education Unit with clinical supervision provided by the Counselling Unit. Collaborative partnerships with other services have been pivotal to the success of the project. An evaluation of the project in 2005 provided evidence that the group program component reduced stress levels and increased family satisfaction levels of participants. It identified barriers to initial participation in group activities and pointed to the importance of partnerships when working with disadvantaged people. The presenter will show how the evaluation led to new opportunities for Vietnamese families and strengthened the existing partnerships.

The Project

Mary of the Cross Centre is a service of Centacare Catholic Family Services in Melbourne. It provides support for families and individuals affected by problematic substance use through the operations of its three units – Community Development, Counselling and Education. Its services are offered across three sites at Fitzroy, Noble Park and Footscray. In the last financial year 420 people sought counselling for drug and alcohol issues of whom 40% were users and 60% family members.

With funding from the Commonwealth Department of Health and Ageing under the National Illicit Drug Strategy Community Partnerships Initiative we set up the New Belief project in 2005. In order to meet its nine objectives (listed in the conference paper) a Vietnamese drug outreach worker was employed. A qualified social worker Sr Hue Pham joined our service at a time when we already had three Vietnamese-speaking workers on our staff, so there was great internal support for her work. One of our counsellors provided clinical supervision for Hue while I managed the project through the Education Unit….a quirk of unit structure at the time.

In the course of the next two years New Belief activities were undertaken in the following areas

- Parent support groups
- Casework
- Community development
- Education
- Promotion and networking

Because I chose the conference theme “Partnerships in Action” for this presentation I am going to focus on the parent support groups to illustrate the value of working in partnership with other agencies. I will provide you with some basic statistics about these Vietnamese parent groups, some feedback from the New Belief Evaluation at the end of its first year and talk about changes we made to the way we work in partnership. Time permitting I will conclude with an outline of a particular case clearly illustrating how “two heads are better than one”.

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Statistics (Jan 05 – Dec 06)

Parent support groups were conducted in the City of Yarra, in which Mary of the Cross Centre is located, and the City of Brimbank, which has the highest number of residents of Vietnamese background in Victoria. The second of these was established as a result of recommendations in the evaluation report of the project conducted at the end of 2005. In each municipality the groups were facilitated by a team of Vietnamese-speaking workers from Alcohol and other Drugs agencies.

Target Group: Vietnamese-Australian parents with a son or daughter involved in problematic substance use

Outcomes: Four programs with a total of 49 sessions conducted for the Link Hands Together parents support group in the City of Yarra resulting in a total attendance of 339 people-sessions, one program with 6 sessions conducted for the Vietnamese Parent Support Group in the City of Brimbank resulting in a total attendance of 26 people-sessions.

Evaluation of Parent Support Groups

Four Vietnamese-speaking workers from three different AOD agencies were involved in planning and conducting the parent support groups in the City of Yarra – Mary of the Cross Centre, North Richmond Community Health Centre and Healthworks. The participants chose the name Link Hands Together for their group. The program now runs twice/year for 12 weeks each, with most sessions following the format of input on a chosen topic followed by lunch and socializing. When the evaluation was conducted at the end of 2005 the findings identified initial barriers to participation and recorded reflections from both participants and facilitators, along with recommendations for future programs.

Barriers to participation included:
- Losing face
- Stigmatization
- Isolation
- Lack of knowledge
- Timing
- Transport

“I keep telling my friends who have the same problem ‘Don’t be afraid to come to the group’ but they are not brave enough to come here because they are afraid they will lose face” – Participant

“If I talk to my friends or relatives, they have no sympathy for me... they just don’t respect me anymore” – Participant

“They just don’t know what help is available out there. Today, two new clients attended the session and afterwards they said to me ‘Oh we never knew that groups like this existed! We didn’t know where we could turn to’” – Worker

To address difficulties related to timing the group meets late morning so participants can be home in time to collect school children (sometimes grand-children) and to overcome transport barriers, one or two of the workers collect parents and transport them to the venue.
Participant Experiences:

1. Needs

Upon first attending the group many participants reported feeling anxious, stressed and depressed, with an overwhelming concern for their children. Respondents also reported a general lack of coping, as participants did not know what to do or how to deal with their children’s drug use, which often lead to self-blame.

“When people first come to the group, they blame themselves and they look very miserable” - Worker

“I feel really stressed and when I feel stressed, I can’t do anything. I can’t solve any problems like that. That’s why I like to come here and talk” – Participant

2. Sharing

All four workers and the participants interviewed reported sharing as the thing that was most valued in the group. This appears to be due to participants’ lack of an outlet for sharing and talking to others elsewhere in their lives.

“I can’t share with other people, but when I come to this group, I can be open and talk about everything – I like to express all of my feelings and share everything” – Participant

Respondents appeared to experience a high level of ‘safeness’ within the group, making it acceptable and comfortable for group participants to share and disclose personal stories with others. Respondents commented on confidentiality as paramount and noted the high level of trust amongst participants and workers.

3. Shifts in thinking

Workers noted that through sharing personal stories and listening to the experiences of others, participants stopped blaming themselves for their children’s drug use, decreasing the idea that many of them held about being ‘bad parents’. Feeling comfortable to disclose such information within the group appears to break down the traditional Vietnamese cultural norm of stigmatising the discussion of personal problems outside the family.

“We all have the same problems and that’s why it’s easy for us to share all of the feelings and all of the stories. With me, I don’t hide anything here and that’s the difference” – Participant

This significant shift in what is considered ‘appropriate’ appears to be recognised by participants, as many acknowledged Vietnamese norms and how they have created barriers to gaining assistance in the past. Participants spoke of the group’s ability to assist them in understanding how to live with Vietnamese cultural norms within Australian society and how this understanding is able to help them build relationships with their ‘Australianised’ children.

“It’s just that I don’t really understand him (son). I used to keep the opinions of a traditional Vietnamese man and try to have that conservative relationship between father and son. But now I have changed my way of thinking and point of view because I have learnt a lot from listening to other people in the group” – Participant

Due to these shared understandings, the group appears to be extremely supportive of one another, participants both relying on the group for support whilst providing the support to others. Friendships have also been made within the group, participants reporting that they now feel comfortable to contact other group members outside meeting times for support. This appears to have created a kind of social network for some participants where they may not have much other social contact within their lives.
“All of the people in this group just love each other a lot. We are like one big family and we really believe in each other” – Participant

4. Personal Changes
As a result of the sharing and support, participants reported feeling much better equipped to deal with their situations. They commented on an increase in well-being and a decrease in stress and anxiety.

“Since I have participated in this group, I feel much better. My difficulties are much better as well and I feel much more relaxed” – Participant

The parents commented on how they had gained practical knowledge and skills, which they are able to ‘try out’ at home with their families. Particularly, they repeatedly made comments on their increased ability to cope with their situations and their children’s drug use.

“Every Wednesday, I am really keen to come to this group because from all of the information, I can learn how to cope with my son” – Participant

All four workers reported on most participants taking better care of themselves, noticing participants’ improved physical appearance and positive changes in attitude.

“I can tell that they look after themselves better and they appear more outgoing. And they laugh now all the time and they appear more relaxed and happier. Yeah, definitely happier” – Worker

5. Other changes
Some participants reported that the information they had obtained from the group and skills in parenting gained allowed for interactions with their drug-using children to be improved. Participants also noted that in some ways, these new ways of interacting appear to have helped their children with their drug use.

“I used to be very tolerant to my son and whenever he asked me if I had any money I just gave it to him. Now I’ve learnt to say I don’t have any money, and my son seems really good to me now. And he’s not that bad anymore – he still has some drugs but he comes home and cooks the food and he’s even looking for a job now.” – Participant

Workers Experiences:

1. Greater interaction within a group setting
An unexpected outcome reported by workers was just how much the participants were able to gain from being in a group situation. Workers observed that sharing and talking with others in similar situations allowed for a type of support that clients could not gain from one-on-one work.

Other benefits over individual support noted by the workers were the length and regularity of the sessions and participants’ willingness to talk and disclose personal problems.

“The group becomes like group therapy. It’s better because people learn from each other and we, the workers can learn from the participants... they leave with positive experiences that they can’t get from just one worker” – Worker

“I think that when I work with individual families, they really don’t talk much about themselves – in the group they talk more. Also, the group gives more time for them, whereas with the individual worker there’s not much time” – Worker
2. Differing approaches by workers

Some workers expressed concerns regarding the different approaches that workers take when advising group members.

“We workers have to know exactly where to lead them (participants) and our role and our job is to lead them in the right direction... but what I’m seeing is that not every worker seems to be doing that... so sometimes I feel like I’m in a difficult situation because I can’t correct other workers in front of clients” - Worker

Working in Partnership

Some agencies would think that having four workers to run a parent support group with no more than 12 participants at any one time inefficient but I would argue that the needs of this group are so great and the benefits for both workers and clients so manifest that the time and resources are justified.

Initially there were minor frustrations about who was responsible for which tasks – arrangement of refreshments, client contact between sessions, pick-up of clients, etc. There were also issues for the co-facilitators around consistency of information and client boundaries as identified in the evaluation report.

Following the evaluation we made a number of changes:
- Mary of the Cross Centre took responsibility for convening regular planning meetings.
- Meetings were also scheduled mid-program to debrief
- Roles were more clearly defined
- Meetings were chaired by the Education Coordinator so that workers were free to enter fully into the discussions
- A more formal consultation process was set up at the end of each program for participants to contribute ideas for the subsequent program.

As a result, the workers developed a better understanding of each other’s roles, and levels of trust and confidence grew markedly in the second year of the project. The sense of connection to the group established by the participants was paralleled by the sense of teamwork developed by the workers. As workers grew in appreciation of each other’s strengths they found new ways of working together.

This is illustrated in the case of a family where the wife approached our outreach worker, Sr Hue, for some support in staying an eviction notice from the Housing Department. Her husband was in prison serving a drug related sentence. She and her children had moved from the outer suburbs into a highrise estate when they lost their house … another drug related story. We worked with a pro bono solicitor through VACRO and she won the right to stay after two court appearances. In the meantime Thuy, had established contact with the husband through her work in supporting Vietnamese prisoners at Fulham. Thuy invited Hue to travel with her to join the Vietnamese New Year celebrations in prison. She took gifts from the family and returned with photos of their Dad from prison. When the father was due for release the two workers assisted him – one preparing him for a return to Melbourne but not to his home and the other to actually find him accommodation. With support and encouragement the father is now seeking accommodation where his kids can stay with him on week-ends.

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