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REFUGEE RESETTLEMENT AND PARTICIPATING AS A PEER IN AUSTRALIAN SOCIETY

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REFUGEE RESETTLEMENT AND PARTICIPATING AS A PEER IN AUSTRALIAN SOCIETY

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ABSTRACT: Numerous studies acknowledge the increased mental health concerns of refugees who have experienced trauma from forced migration. Whilst past traumatic experiences may place people at risk, it is recognised that resettlement is an equally salient concern. Australia’s most recent National Mental Health Policy has several overarching aims which endeavours to promote well being, prevent mental illness and help facilitate recovery for individuals, families and the community. To accomplish such goals with resettling refugee populations, it is important to create spaces that provide people the opportunity to voice their story and perspective – recognising they are often marginalised by a number of factors that may include past traumatic experiences and difficulties adapting to a new life in Australia. This paper relates to Sudanese men’s narratives about resettlement and their perspectives of participating in Australian society as key considerations towards the promotion of health and well-being.

INTRODUCTION

Australia grants protection to approximately 13,000 people with refugee status as part of its humanitarian resettlement program every year. In comparison with other countries, this intake places Australia as the second or third highest country for the resettlement of quota refugees according to recent statistics from the United Nations High Commissioner for Refugees (UNHCR, 2006, 2007, 2008). There are now more than 24,000 Sudanese refugees who have immigrated to Australia via the humanitarian programme visa scheme since 1996 according to the Department of Immigration and Citizenship (DIAC, 2007b). Of the 13,000 refugees who gained permanent residency in 2005-2006, almost 30 percent were Sudanese (DIAC, 2007a). Although these numbers have declined significantly over the last several years, the Australian Census 2006 shows that the Sudanese population has grown more than 287 percent since the previous count five years earlier and identifies this group as the country’s fastest growing ethnic community (DIAC, 2009).

Most of these recent Australian arrivals have come from Southern Sudan resulting from a twenty-two year civil war between rebel groups in the South and the Khartoum associated government forces based in the North (see Duffield, 2003; Johnson, 2003; Jok, 2001; Ruiz, 1998). A consequence of this protracted conflict is that many Southern Sudanese refugees have survived traumatic and dangerous experiences associated with forced migration, including displacement, torture, sexual violence and other forms of injustice (Bolea, Grant, Burgess, & Plasa, 2003; Jeppsson & Hjern, 2005; Khawaja, White, Schweitzer, & Greenslade, 2008). In relation, The UNHCR (2002) maintains that refugees can be at a higher risk of developing mental health problems as a result of past experiences of trauma associated with forced migration (see also Fazel, Wheeler, & Danesh, 2005; Marlowe, 2009b; Derrick Silove, 1999). Thus, programs that support emotional and personal recovery are critical. The UNHCR (2002: 231) report on resettlement states:

It is important that integration programs are provided in ways that support emotional and personal rebuilding. As well as promoting the optimal well-being required to deal with the stresses and adjustments involved in resettlement, this approach can help to prevent the development of more serious mental health difficulties.

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This statement acknowledges that while past traumatic experiences may place people’s mental well being at risk, resettlement is also a salient concern (Simich, Este, & Hamilton, 2010). Procter (2006: 42) recognises this significance, stating, “Important will be actions that build resilience intrinsically over time, such as the asylum seekers’ values, sustained supportive interpersonal relationships and therapeutic care plans.” The emphasis on resilience and strengths relates to Australia’s most recent National Mental Health Policy starting in 2008, which has several overarching aims that focus upon the promotion of well-being, prevention and recovery:

- Promote the mental health and well-being of the Australian community and, where possible, prevent the development of mental health problems and mental illness
- Reduce the impact of mental health problems and mental illness, including the effects of stigma on individuals, families and the community
- Promote recovery from mental health problems and mental illness
- Assure the rights of people with mental health problems and mental illness, and enable them to participate meaningfully in society.

(Australian Government, 2009: 9)

To accomplish such goals with resettling populations, it is important to create spaces that provide people the opportunity to voice their story and perspective, recognising that often they are marginalised by a number of factors, including past traumatic experiences and difficulties adapting to a new life in Australia. This paper presents a research study conducted with Sudanese men who speak in depth about what helps embody a sense of well-being in resettlement contexts and how professionals such as social workers, psychologists and service providers can collaboratively work alongside this emerging community. The study does not include assessments of Sudanese people’s mental health using Western diagnostic categories, nor does it document their mental health history. Rather, the emphasis has been on allowing participants to express their concerns associated with resettlement, and then to identify sources of meaning, survival and recovery in response to extremely challenging experiences. This focus highlights people’s agency, strategies of coping and capacity to heal – an important consideration when thinking about mental health and pathways to well-being (Ingleby, 2005; D. Silove, 2005; Summerfield, 2002).

**STUDY DESIGN**

This qualitative study reports on twenty four Sudanese men’s in depth narratives, and an ethnographic engagement with their community over the period of several years (see Marlowe, 2009a). The interview process was inspired by White (2004) and Denborough’s (2006) writings on using ‘double storied testimony’ which provides a flexible framework to acknowledge both the trauma story and a person’s response to it. This framework provided a means to both dignify and validate the experiences of trauma while also recognising a person’s agency and capacity to respond to difficult events. These interviews were audio recorded and transcribed. After transcription, the participant was given a written copy of the interview that included a two page executive summary of what the author thought were the main themes of the interview. In subsequent meetings (ranging from 1-6 additional interviews), the participant could make any omissions, changes or additions to the interview transcript and executive summary as he saw fit. The amended transcript was then imported
into the qualitative software package NVivo 8 to help sort, manage and code the data. Analysis was carried out through a process of initial and focused coding, writing memos, theoretical sampling and using the constant comparative method as per constructivist grounded theory (Charmaz, 2006). In total, seventy interviews were conducted. This information was triangulated through the ethnographic field data with the community that helped to link participant narratives and attitudes to observable actions at various celebrations, meetings and mourning events.

RESULTS

This section is divided into two parts and draws upon the Sudanese participant’s narratives about resettlement to examine both the obstacles and positive developments to realising Australia’s National Mental Health Policy aims. These two themes are elaborated below by focusing on three key indicators identified by participants: social connectedness; participation in civil society; and working through past trauma.

Challenges: Belonging, Employment and Trauma

Many participants mention that resettlement opportunities are where they place their hopes of addressing past injustices associated with forced migration. However, the multiple new social, cultural and historical contexts that a new migrant must navigate can make the tacit assumptions of Australian life extra burdens to negotiate:

This story that I am telling you today – I can call it a story. Today we are making a story of Sudanese people. It is a series or a story of a journey between two worlds. Because all people came from a first world to a second world, you can say. Yes, you can say it is a journey between two worlds and this journey between two worlds, some people will not understand. (Participant 12)

Numerous participants described the experience of leaving Sudan and coming to Australia as a journey between two worlds. This journey has resulted in an abrupt encounter between the Sudanese community and Australian society that can sometimes create misperceptions, miscommunications and fear (Gale, 2004; Hage, 2003; Klocker & Dunn, 2003; Windle, 2008). There are many challenges associated with understanding what many native born citizens take for granted in Australian life. The multiple new social and cultural contexts highlight that integration is not an easy or apolitical process. The different social constructions around time, family, relationships with neighbours and the distribution of resources creates an environment where socially constructed Australian meanings, relations and responsibilities often remain obscure for outsiders to decipher. When Sudanese people arrived, they invested in finding opportunities for greater self-determination and the ability to contribute in meaningful ways to their families, community and the wider society. They placed their hopes on resettlement to provide the opportunity for such realisations. Whilst some of these hopes have been met, other aspirations remain elusive.

Having known that the standard of living in the Western world is very high, I said that I have to go there, but that too was very challenging and to an extent, very traumatising. I was just dropped into Australia and it was really just very strange... Because even if I come to this country well educated, [employers] will say no. (Participant 21)

You know, because the most important thing is that our people are from a very different background. The experiences that they have been through are the hardest ones. And the experience that they are getting here [in Australia], for some it is worse than what they were experiencing [in forced migration contexts]. (Participant 4)
Participants note how exclusionary practices, which embody experiences of racism and discrimination, powerfully impact upon their perceptions of belonging and being able to craft a meaningful existence in society. In fact, the participants' narratives frequently emphasise that the resettlement experience (albeit under different circumstances as forced migration) can be just as difficult as the traumatic events associated with leaving one's country of origin.

Importantly, a number of participants also described the negative experiences associated with forced migration as ‘war trauma’ and having a ‘hangover from the war’. Several participants emphasised how these hangovers have made it difficult for some members of their community to sustain jobs or pursue an education. Others noted the potential for negative mental health outcomes and the difficulties associated with finding culturally resonant pathways to work through people’s past experiences. One participant discussed how his community is coping with past traumas associated with forced migration:

We are not there yet [recovery] but growing towards that because we still have a hangover from the war yet in this area. There is peace but there are remnants of the hangover that caused all that to happen, which are still, you know, creeping up. They are still surfacing. (Participant 8)

Though almost all participants identified that war trauma was part of their forced migration experience, they were also quick to emphasise that such experience(s) does not necessarily embody an indelibly deleterious impact. In fact, there were numerous ways that participants were able to respond to these difficulties; responses that situate the participants as active agents who have skills and knowledge to use towards healing, coping and recovery – the focus of the next section.

Promoting recovery and finding meaningful participation in society

Whilst many participants noted the multiple challenges associated with resettlement, they also noted pathways to agency and well-being. The participants identified that the most helpful things to respond to past traumas and difficulties in resettlement related to:

- Maintaining a social connection to their community and the wider society;
- Sourcing pathways to agency and self determination (often through education and employment); and
- Having a sense of spirituality to transcend and create meaning from past injustices

It was these areas that assisted participants to respond to challenging circumstances, work through the ‘hangovers of war’ and provided a means to live meaningful lives in the present. One participant speaks about unemployment and hope:

At the moment, I don't work. And I am optimistic one day that I will find work. Sometimes this keeps troubling me and when I arrived in Australia I discovered that at the moment I did not have the qualifications to get a job. So I am still struggling to attain work. I hope to find work to be able to manage myself. (Participant 4)

Being employed empowers a person’s ability to support oneself and one’s family. It reinforces one of Sudanese men's most important roles – the power to make financial contributions in the familial and community spheres.

It was striking that most participants were fairly critical of the role played by social workers, psychologists, counsellors and other health care professionals that were from outside their community. Much of this criticism was levied towards a failure to establish a trusting
relationship with the community and not placing adequate attention to help address the concerns of unemployment, poverty, inadequate housing and seeing their children succeed in schools. Participants identified these practical outcomes as some of the most salient considerations of recovery whereby opportunities for self determination were greater realised. The implications of these findings are discussed further below.

DISCUSSION

Australia’s National Mental Health Policy 2008 forwards four primary aims directed at promoting well-being, prevention and recovery. These aspirations, however, need to be contextualised within the specific circumstances of individuals, families and communities. The participant comments about the difficulty of securing employment and the challenges with adapting to a new social reality illustrate some obstacles to self determination and a sense of belonging. Their narratives provide some important signposts towards the realisations of well-being and positive mental health outcomes. The fact that Australian Census 2006 shows that the unemployment rate is six times higher to the national figures and the Sudanese weekly income is half the national average (DIAC, 2009) demonstrates the need to critically think about the manifestations of discrimination and what employers might believe about the ‘refugee journey’. Evidence of exclusionary spaces characterised by high unemployment, discrimination and the allocation of low status jobs has been documented elsewhere in Australia (see Colic-Peisker & Tilbury, 2006; Fozdar & Torezani, 2008; Tilbury & Colic-Peisker, 2006). Simich (2004) reports that the most frequently identified concerns of 240 Sudanese refugees resettling in Canada were addressing employment, education, community fragmentation, family reunification and language acquisition. These issues, while not negating the impact of war trauma and psychopathology, highlight the need to think holistically about mental health, resettlement and trauma.

Life in the refugee camps and experiences of forced migration reduced people’s sense of agency whereby opportunities for self determination, employment, and prospects to pursue an education were very limited, unstable/temporal or nonexistent. Whilst Australian life is far from experiences of the refugee camp, the conditions of unemployment and limited opportunities for upward social and economic mobility directly impact on this community’s ability to contribute to individual, familial, community and the broader society’s well-being. Participants passionately emphasise that the pathways towards recovering from past injustices usually involve employment and having a sense of agency in which they can better realise their own hopes and aspirations for the future. Stoll and Johnson (2007: 627) acknowledge the immense emotional and financial strain that Sudanese men experience when trying to fulfil their role as what these authors term ‘global breadwinners’. They use this term as it highlights the number of remittances paid to family members living in Sudan and their transnational gaze and responsibilities.

Whilst the focus on social cohesion and the practical outcomes of work and employment is important, so too is the awareness of traumas associated with forced migration and resettlement. It is critical to acknowledge the ‘hangovers’ previously mentioned as such experiences can have very real negative impacts on people’s physical and mental well-being. Though all participants spoke of traumas associated with forced migration, many noted that adapting to the new social realities in a new host country and trying to forge a new life was as difficult (if not more so) than the adversities associated with forced migration. It is also necessary to differentiate the experiences of trauma and a traumatised person. This is an important distinction if the Sudanese community is to be considered as peers participating in society rather than victims surviving within it (Marlowe, 2010; Pupavac, 2008). Such comments reinforce the importance of understanding the challenges of resettlement from a broad vantage point (that includes an interrogation of ourselves and
practices) and how people create meaning in their lives within new social, political and
cultural landscapes. Westoby (2006: 157) states,

‘There is little space for refugee voices to interrupt these colonizing processes and
articulate their own aspirations for reconstructing a social world that would facilitate
well-being on their terms.’

The need to work collaboratively alongside the Sudanese community highlights the
important roles that researchers, practitioners, policy makers and fellow community
members have to play to greater ensuring positive outcomes for some of Australia’s most
recent citizens. This partnership highlights the need to not only think about the effects of
trauma but also the ways in which people incorporate meaning and work through such
experiences, which provides a perspective beyond a victim discourse to one of agency, hope
and what might be possible. If members of the Sudanese community are able to participate
as peers in Australian society, it will necessitate a critical engagement with different
professional assumptions about trauma, a sincere appreciation and recognition of people’s
histories and an awareness of the challenges of journeying between the different worlds of
one’s country of origin and resettlement.

BACKGROUND

Jay Marlowe is a lecturer within the School of Counselling, Human Services and Social Work
at the University of Auckland and former visiting fellow with the Refugee Studies Centre at
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Research Council.
REFERENCES


