SettleMEN: Health and settlement among men from refugee backgrounds living in South East Queensland

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The La Trobe Refugee Research Centre (LaRRC) takes a collaborative and interdisciplinary approach to research in the field of refugee and forced migration studies. LaRRC works to promote the wellbeing, participation and social inclusion of people with refugee backgrounds through applied and foundation research, teaching, continuing education and professional development.

The Queensland Program of Assistance to Survivors of Torture and Trauma (QPASTT) provides flexible and culturally sensitive services to promote the health and wellbeing of people from refugee backgrounds who have survived torture and war-related trauma. Direct services to clients include counselling, advocacy, group work, psycho-education, and recreational programs. Direct services are coupled with referral, training and education aimed at developing and strengthening the resources of communities and service providers.
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DISCLAIMER

The contents of this report are solely the responsibility of the authors and do not reflect the views of the funding body (NHMRC), partner organisation, or associate investigators.
EXECUTIVE SUMMARY

Between 2008 and 2010, the SettleMEN study followed a cohort of 233 recently arrived men from refugee backgrounds living in urban and regional areas of South East Queensland with the aim of documenting their health and settlement experiences. This report presents the key findings of the study.

Methods

SettleMEN was a descriptive longitudinal study that used a combination of quantitative and qualitative methods and a peer interviewer research model. Eligible participants were male, aged 18 years and over, recent humanitarian arrivals to Australia (between 2004 and 2008), and living in the greater Brisbane metropolitan area or in the Toowoomba–Gatton region of South East Queensland. The study used a quota sampling technique to ensure that participants were representative of the overall population of refugee men settled in those areas between 2004 and 2008, at least in terms of age and region of birth. Nine peer interviewers recruited participants through their own community networks. The study consisted of a baseline and three follow-up surveys administered at six-month intervals. In addition, a semi-structured qualitative interview was conducted over the last year of data collection with a sub-sample of 28 participants. These interviews aimed at exploring in more detail participants’ experiences of health and settlement.

The SettleMEN questionnaire consisted of five sections:

- Socio-demographic characteristics,
- Education and employment,
- Health and wellbeing,
- Family and social support, and
- Life in Australia

A number of standardised instruments were included. This report describes participants’ socio-demographic characteristics, their health and settlement outcomes at baseline, and the significant changes over time. A comparison of these outcomes by area of settlement (urban versus regional) is also included. Longitudinal data were analysed using Generalised Estimating Equations (GEE) with an exchangeable correlation, adjusting for
potentially confounding factors. Thematic and content analysis guided the interpretation of the qualitative data.

Findings
Of the 233 participants, 76% were living in Brisbane (urban settlement) and 24% in the Toowoomba–Gatton region (regional settlement). The majority (74%) were born in Africa, 13% in the Middle East, and 13% in Southeast Asia (Burma). At the baseline interview, participants ages ranged from 18 to 69 years (mean=32). They had been in Australia for an average of 24 months (range= less than one month to 57 months). All participants settled in the regional area were African-born. Compared with men living in urban areas, those in regional areas were significantly more likely to be single, have lived longer in Australia, report good levels of English language proficiency, and to have lived most of their lives in rural areas or in refugee camps. At the end of the study, the overall attrition rate was just 10%. This small drop-out rate reduces the chances of non-response bias and strengthens the validity of the study.

Overall, the SettleMEN study has found that, despite their recent traumatic history, this group of recently arrived men from refugee backgrounds report good levels of subjective health status and mental health, low prevalence of health risk behaviours, and moderate to good levels of wellbeing. However, wellbeing in the psychological, social relationships, and environment domains decrease significantly over time. Although men settled in regional areas appear to be healthier and happier than those living in urban areas, they show a greater decline in their levels of wellbeing in the social relationships and environment domains. Men in regional areas also experienced more difficulties in accessing health care services.

Most SettleMEN participants reported healthy levels of family functioning, and for those who were married (or living together) the majority were happy with their relationship. However, making decisions about financial matters, including how to support their relatives overseas, was a common source of family conflict. Although a slight majority of participants reported more traditional beliefs about the role of men and women in society, their attitudes towards gender roles varied. Overall, tensions regarding how to reconcile their traditional cultural roles with the roles of men here in Australia were common. Also common were concerns about police and government representatives’ direct intervention in parenting issues and family conflict, and the lack of acknowledgement of the mediating cultural role of extended family and community elders in these situations. Most men reported high levels of social support and social trust. Although most aspects of social trust increased over time, bridging relationships with people from other cultural backgrounds decreased over time. At the initial interview, men in regional areas were more likely to report healthy levels of family functioning, feel confused about what was expected from them as men in Australia, and were more likely to trust and be trusted by their ethnic communities. The longitudinal data reported a greater increase over time in the levels of trust towards and from neighbours, workmates, the media, and the wider Australian community among men living in regional areas when compared to those in urban areas.

A considerable number of men had either obtained tertiary/trade qualifications overseas or were undertaking tertiary studies in Australia upon resettlement. Many, however, reported negative experiences while studying at Australian institutions, including learning difficulties (English language ability, literacy, numeracy, and computer skills), poor interaction with and inadequate support from lecturers, and experiences of discrimination from lecturers and fellow students. Negative educational experiences were more common among regional participants.

This group of men reported high levels of unemployment and significant barriers while trying to secure work in Australia, including discrimination. A considerable number reported an income below the estimated poverty line
for a single person in Australia. Most of those working were employed in low-skilled and low-paid occupations, which many believed were below their level of skills and qualifications. Regional participants faced even greater discrimination and difficulties participating in the labour market. Family, friends and community networks were an important source of information about work and one of the most successful strategies to find employment. Dissatisfaction with employment services was common.

Mixed findings emerged from the experiences of life in Australia. Commonly acknowledged important sources of support were government departments, settlement services, own ethnic communities, and educational institutions. However significant challenges for men’s successful settlement were the language barrier, difficulties finding work, lack of own transport, acculturation stress, financial difficulties, and difficulties finding housing. Most were paying high rental fees relative to their limited income.

Reported experiences of discrimination were widespread and not limited to the housing market, but also in the neighbourhood, on the street and public places, from the police, and in stores and restaurants. Men in regional areas were significantly more likely to report racism and discrimination. Also, although most participants reported positive interaction with police, men in regional areas felt particularly targeted by police, especially while driving a car.

In general, the men rated their subjective social status within the low to mid ranges in terms of educational institutions, workplace, in their own ethnic communities, and in the broader Australian community. When compared with men in urban areas, their social status in the wider Australian community decreased significantly over time among men in regional areas. Issues such as low income, unemployment and discrimination influenced not only their assessment of their social status but also their sense of control over their lives, which decreased significantly over time. This decline was greater among men in regional areas.

Despite the challenges encountered while living in Australia, most participants, in particular those living in regional areas, felt that their lives were getting better. However, repeated failed attempts to find and secure a good job, financial difficulties and experiences of discrimination impacted markedly on men’s satisfaction with life in Australia.

Policy implications
One of the most important implications of the SettleMEN study for policy makers, employers, service providers, and host communities in general are the pressing needs to tackle barriers to economic participation and to reduce discrimination. Economic participation in particular underpins the wellbeing and successful integration of men from refugee backgrounds with important positive flow on effects for their families and the whole Australian community. Discrimination in rural and regional areas is a particular challenge that requires specific targeted strategies and whole of local government approaches. From a policy and service provision perspective, there is a need to examine models of best practice implemented in other regional areas across Australia. This is of particular relevance given the emerging evidence that some regional areas have been able to overcome the challenges of diversity and provide better settlement outcomes for refugee communities.
THE SettleMEN STUDY

One third of refugee and humanitarian entrants to Australia are adult men. Little systematic research has specifically documented the health and settlement outcomes of this population group. Obtaining this evidence is highly important, particularly in the context of the recently developed Australian National Men’s Health Policy which has called for the need to build a strong evidence base on males at risk of poor health. Previous torture and trauma, lower education, lack of social support, unemployment and pain have been found to predict emotional distress among male refugees. There is strong evidence that post-migration factors have a significant impact on wellbeing and settlement outcomes and that these may be more important than those of the refugee experience. For example, social support and financial security were predictors of positive psychosocial adjustment among Southern Sudanese refugee men resettled in Canada.

Aim and objectives
Between 2008 and 2010, the SettleMEN study followed a cohort of 233 recently arrived men from refugee backgrounds living in urban and regional areas of South East Queensland, with the aim of documenting in depth their health and settlement experiences. This report addresses the following research questions:

a. How do refugee men rate their physical and mental health during their initial stages of resettlement?
b. What are the levels of family and social support for recently arrived refugee men?
c. What are the educational and occupational outcomes among refugee men in their initial years of resettlement?
d. What are the elements/resources that support or hinder the lives of refugee men as they resettle in Australia?
e. How do refugee men’s health and settlement outcomes change over time?
f. How do health and settlement outcomes compare between refugee men settling in urban and regional areas of South East Queensland?
Approach and methodology
The SettleMEN study was informed by a multidisciplinary approach that underpins refugee studies in general,7 and the biopsychosocial and ecosocial approaches found in social epidemiology.8 9 It was a descriptive longitudinal study that used a combination of quantitative and qualitative methods and a peer interviewer research model.

Sampling
Eligible participants were:

- Male,
- Aged 18 years and over,
- In Australia on a refugee or humanitarian visa,
- Recent arrivals to Australia (i.e. between 2004 and 2008), and
- Living in the greater Brisbane metropolitan area (i.e. Brisbane city, Logan, Ipswich, Redland, Pine Rivers) or in the Toowoomba–Gatton region of South East Queensland (see Figure 1).

Brisbane, the capital of Queensland, is Australia’s third largest city with a population of 1.76 million people, 22% of whom were born overseas (2006 Census).10 Toowoomba is located 127 km west of Brisbane, with a district population of 115,000 people in 2006, 10% of whom were born overseas.11 Gatton, a small town of about 6,000 people (10% overseas born),12 is located in the fertile Lockyer Valley of South East Queensland, 100 km west of Brisbane. Between 2004 and 2008, 7,343 humanitarian entrants settled in Queensland (11% of the total number of humanitarian entrants to Australia). Of these, 5,871 settled in Brisbane, 517 in Toowoomba, and 100 in Gatton.1

Figure 1: Map of South East Queenslandi

i  www.discoverbrisbane.com/maps/seqld.html
The study used a quota sampling technique\textsuperscript{13} to ensure that participants were representative of the overall population of refugee men settled in those areas between 2004–08, at least in terms of age and region of birth.

Nine research assistants from a variety of ethnic backgrounds (peer interviewers) were trained in basic research skills, study methods, and ethical conduct of research prior to commencement of the study. Based on the study selection criteria and the quota sampling framework, peer interviewers recruited participants through their own community networks.

Data collection
The study consisted of a baseline and three follow-up surveys administered at six-month intervals. In addition, a semi-structured qualitative interview was conducted with a subsample of 28 participants over the last year of data collection. These qualitative surveys aimed at exploring in more detail participants’ experiences of health and settlement. Surveys were administered face-to-face either in the participant’s first language or in English if this was their preferred language. When required, peer interviewers verbally translated the question from English (in the questionnaire) to the participant’s first language, and then recorded the participant’s response back to English in the questionnaire. The majority of interviews took place at participants’ homes or in community venues. Interview sessions took an average of two hours. Qualitative interviews were audio-recorded and fully transcribed.

The SettleMEN questionnaire
A number of standardised instruments which have been developed either in refugee research or adapted for use in refugee populations were included in the questionnaire. The questionnaire had five sections:

1. About you: This section included key socio-demographic characteristics, and participant’s subjective social status in their educational institution (for those that were studying), work (for those working), ethnic community, and the wider Australian community. The MacArthur Social Ladders were used to assess subjective social status.\textsuperscript{14}

2. About what you do: This section included items about participant’s previous and current education, educational aspirations,\textsuperscript{15} educational experiences in Australia,\textsuperscript{16} previous and current work, overseas skills recognition in Australia,\textsuperscript{17} income and financial situation, job satisfaction,\textsuperscript{18} barriers to finding secure employment,\textsuperscript{17} and participants’ satisfaction with employment services.

3. About your health: This section assessed whether participants had a long-standing illness or disability,\textsuperscript{19} their subjective health status and wellbeing (four domains: physical, psychological, social relationships, and environment),\textsuperscript{20} body mass index, health risk behaviours,\textsuperscript{21} symptoms of anxiety and depression,\textsuperscript{22} post-traumatic stress disorder (using 16 DSM-IV-related PTSD items),\textsuperscript{23} use of and satisfaction with health services,\textsuperscript{24,25} and barrier to access health care services.\textsuperscript{26}

4. About your family and the social support you have: This section included items about the family household, family functioning,\textsuperscript{27} participant’s perception of gender roles,\textsuperscript{28,29} social support,\textsuperscript{30,31} and social capital.\textsuperscript{32}

5. About your life in Australia: This section assessed participant’s living arrangements, problems with the law in Australia, interactions with police, experiences of discrimination,\textsuperscript{33} sense of control,\textsuperscript{34} and happiness.
Analytical approach

This report presents a descriptive analysis of the key socio-demographic, health and settlement characteristics of the SettleMEN participants at first interview and the changing patterns over time. A comparison of some of these characteristics by area of settlement (urban versus regional) is also included. Simple descriptive statistics were employed to analyse the quantitative baseline data using SPSS (SPSS Inc, 2007). For descriptive purposes, mean scores ± the standard deviation (SD) were used. The non-parametric Mann–Whitney test was used to assess cross-sectional differences in continuous variables between urban and regional areas of settlement. Chi-squared tests (or Fisher exact tests when there were low cell numbers) were used for categorical variables. For binary variables, 95% binomial confidence intervals (CI) were generated using Wilson’s method.35 Tables with shading are used to highlight those variables that reported statistically significant differences by area of settlement.

Longitudinal data on key variables were analysed using Generalised Estimating Equations (GEE) with an exchangeable correlation, adjusting for potentially confounding factors.36 Thematic and content analysis guided the interpretation of the qualitative data from the semi-structured interviews.37

Study limitations

A number of limitations need to be acknowledged.38 First, the study used a non-probabilistic sampling strategy so this group of participants may not be representative of the overall population of recently arrived men from refugee backgrounds living in Australia. Nevertheless, the quota sampling strategy used was successful in ensuring that the sample closely resembles the population of refugee men who settled in urban and regional South East Queensland between 2004 and 2008, at least in terms of region of birth and age.1

Even though significant efforts were made to ensure that the peer interviewers were able to recruit a broad range of participants regardless of their health status, the sampling may have been skewed towards healthier participants. When assessing the levels of health and wellbeing reported here, it is important to consider that this is a community sample and not a clinical sample of men from refugee backgrounds.

Second, some of the instruments used to assess mental health have not been validated in all cultural groups or may contain a gender bias (i.e. being more suited to assess women than men). The measures may have underestimated mental health problems among this group of men. These are important challenges when undertaking cross-cultural and gender-specific research. However, the study has used those instruments that have been most commonly applied on refugee populations across the world,39-41 including men from refugee backgrounds.4 Also, during the training of peer interviewers, the different interpretations of symptoms and questionnaires’ terminology across cultural and language groups were discussed to assist peer interviewers with the administration of the questionnaire.

Third, this is an observational study that focused on the subjective experiences of refugee men; no objective measures of health status (apart from weight) and settlement outcomes were included. Finally, as the study did not include a control group, health (and settlement outcomes) cannot be accurately compared with groups of men from other migration categories, or with the broader Australian male population.
THE SettleMEN PARTICIPANTS

Of the 233 participants who were recruited into the study, 176 (76%) were living in the greater Brisbane metropolitan area (urban settlement) and 57 (24%) in the Toowoomba–Gatton area (regional settlement). Overall, 118 (51%) participants were born in Sudan, 29 (13%) in Burma (Myanmar), 29 (13%) in Iraq, 22 (9%) in Burundi, 15 (6%) in the Democratic Republic of Congo, 10 (4%) in Rwanda, five (2%) in Liberia, and the remaining five (2%) were born in other countries (Afghanistan, Congo–Brazzaville, Iran, Tanzania and Uganda). Participant ages ranged from 18 to 69 years (mean ± SD = 32 ± 9 years). Their time since arriving in Australia ranged from less than one month to 57 months (mean ± SD = 24 ± 17 months).

Table 1 compares key socio-demographic characteristics of participants at the first interview by area of settlement. All participants who settled in the regional areas were born in Africa. Compared with participants living in urban areas, participants living in regional areas were significantly more likely to be single (never married), have been in Australia for a longer period of time, report good levels of English language proficiency, and to have lived most of their lives in rural areas or in refugee camps.
Table 1: Key socio-demographic characteristics of the SettleMEN participants at first interview by area of settlement

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Overall</th>
<th>Urban</th>
<th>Regional</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=233</td>
<td>N=176</td>
<td>N=57</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Region of birth</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Africa</td>
<td>173 (74%)</td>
<td>116 (66%)</td>
<td>57 (100%)</td>
<td>P &lt; 0.001</td>
<td></td>
</tr>
<tr>
<td>Middle East</td>
<td>31 (13%)</td>
<td>31 (18%)</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southeast Asia</td>
<td>29 (13%)</td>
<td>29 (16%)</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age categories (years)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 – 40</td>
<td>193 (83%)</td>
<td>144 (82%)</td>
<td>49 (86%)</td>
<td>P = 0.471</td>
<td></td>
</tr>
<tr>
<td>41 and over</td>
<td>40 (17%)</td>
<td>32 (18%)</td>
<td>8 (14%)</td>
<td>4% [-8, 13]</td>
<td></td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never married</td>
<td>103 (44%)</td>
<td>68 (39%)</td>
<td>35 (61%)</td>
<td>P = 0.009</td>
<td></td>
</tr>
<tr>
<td>Married/living together</td>
<td>120 (52%)</td>
<td>99 (56%)</td>
<td>21 (37%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Separated/widowed</td>
<td>10 (4%)</td>
<td>9 (5%)</td>
<td>1 (2%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time in Australia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 years or less</td>
<td>119 (51%)</td>
<td>104 (59%)</td>
<td>15 (26%)</td>
<td>P &lt; 0.001</td>
<td></td>
</tr>
<tr>
<td>More than 2 years</td>
<td>114 (49%)</td>
<td>72 (41%)</td>
<td>42 (74%)</td>
<td>33% [17, 45]</td>
<td></td>
</tr>
<tr>
<td>English language proficiency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Poor</td>
<td>72 (31%)</td>
<td>64 (37%)</td>
<td>8 (14%)</td>
<td>P = 0.001</td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>160 (69%)</td>
<td>111 (63%)</td>
<td>49 (86%)</td>
<td>23% [8, 33]</td>
<td></td>
</tr>
<tr>
<td>Lived most of his life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>83 (36%)</td>
<td>73 (42%)</td>
<td>10 (18%)</td>
<td>P = 0.003</td>
<td></td>
</tr>
<tr>
<td>Rural area</td>
<td>70 (31%)</td>
<td>47 (27%)</td>
<td>23 (40%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refugee camp</td>
<td>76 (33%)</td>
<td>52 (30%)</td>
<td>24 (42%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

^ Valid cases; CI = Confidence Interval

**Loss to follow-up**

At the last data collection point (18-month follow-up), 210 participants completed the questionnaire, with a total attrition rate of just 10%. This small drop-out rate reduces the chances of non-response bias and strengthens the validity of the study. Those who dropped out of the study were significantly more likely to live in urban areas (P=0.004) and to be employed at the first interview (P=0.012). There were no statistically significant differences between those who dropped out and those who completed the last interview in terms of region of birth, age, marital status, time in Australia, highest educational level, English language proficiency, or area where they lived most of their lives.
HEALTH AND WELLBEING

My health has got better. Because there is always checking up with the GP, vaccinations are available. In terms of health everything is available and provided... [But difficulties finding] accommodation is one of the things that influences my health and wellbeing. Finding a job, studying, these are other influences. Homesickness is another factor, all the time the minds are with the extended family, we keep thinking about them all the time here and what is going on with them. So keeping contact with people in the homeland affects feelings of wellbeing and feeling stable in Australia. Even keeping in touch with events that happen there... one is always thinking about there...

24 years old, Iraqi-born, 2 years in Australia, living in urban area

Health status and wellbeing at first interview

At the initial interview, 25 (11%) participants reported having a long-standing illness or disability, the most common being musculoskeletal (n=8), followed by respiratory (n=4), infectious diseases (n=4), cardiovascular (n=3), mental illness (n=2), metabolic conditions (n=2), gastrointestinal (n=1), and genitourinary conditions (n=1). Poor subjective health status was reported by 38 (16%) participants. Twelve (5%) men were identified as having Post-Traumatic Stress Disorder (PTSD), and five (2%) depression.

Table 2 below compares the health and wellbeing outcomes by area of settlement. Overall, men living in regional areas were significantly more likely to report no long-standing illness or disability (P=0.012), good subjective health status (P=0.001), good levels of wellbeing in the social relationship domain (P=0.005) and higher levels of happiness (P<0.001) than men living in urban areas.

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ii Sixteen DSM-IV (Diagnostic and Statistical Manual of Mental Disorders 4th Edition)-related post-traumatic stress disorder (PTSD) items of the Harvard Trauma Questionnaire (HTQ) were used to assess the emotional symptoms associated with trauma. The 25-item Hopkins Symptoms Checklist (HSCL-25) was used to assess depressive symptoms. Because the standard cut-off scores of HTQ PTSD and HSCL-25 scales for psychiatric diagnosis have not been established for this population, the algorithm method was used to define caseness (see Mollica et al, JAMA 1999; 282(5):433-39).
Table 2: Health and wellbeing outcomes of SettleMEN participants at first interview by area of settlement

<table>
<thead>
<tr>
<th>Outcome A</th>
<th>Overall N=233 (100%)</th>
<th>Urban N=176 (76%)</th>
<th>Regional N=57 (24%)</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long standing illness or disability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>208 (89%)</td>
<td>152 (86%)</td>
<td>56 (98%)</td>
<td>P = 0.012</td>
<td>12% [2, 18]</td>
</tr>
<tr>
<td>Yes</td>
<td>25 (11%)</td>
<td>24 (14%)</td>
<td>1 (2%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subjective health status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>195 (84%)</td>
<td>139 (79%)</td>
<td>56 (98%)</td>
<td>P = 0.001</td>
<td>19% [9, 26]</td>
</tr>
<tr>
<td>Poor</td>
<td>38 (16%)</td>
<td>37 (21%)</td>
<td>1 (2%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wellbeing – Physical domain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>139 (60%)</td>
<td>109 (63%)</td>
<td>30 (53%)</td>
<td>P = 0.180</td>
<td>10% [−5, 25]</td>
</tr>
<tr>
<td>Poor</td>
<td>92 (40%)</td>
<td>65 (37%)</td>
<td>27 (47%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wellbeing – Psychological domain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>135 (59%)</td>
<td>98 (56%)</td>
<td>37 (66%)</td>
<td>P = 0.197</td>
<td>10% [−6, 24]</td>
</tr>
<tr>
<td>Poor</td>
<td>95 (41%)</td>
<td>76 (44%)</td>
<td>19 (34%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wellbeing – Social relationships</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>155 (67%)</td>
<td>108 (62%)</td>
<td>47 (83%)</td>
<td>P = 0.005</td>
<td>21% [5, 31]</td>
</tr>
<tr>
<td>Poor</td>
<td>75 (33%)</td>
<td>65 (38%)</td>
<td>10 (17%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wellbeing – Environment domain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>142 (62%)</td>
<td>110 (63%)</td>
<td>32 (56%)</td>
<td>P = 0.341</td>
<td>7% [−8, 23]</td>
</tr>
<tr>
<td>Poor</td>
<td>89 (38%)</td>
<td>64 (37%)</td>
<td>25 (44%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Happiness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Happy</td>
<td>186 (80%)</td>
<td>131 (74%)</td>
<td>55 (97%)</td>
<td>P &lt; 0.001</td>
<td>23% [11, 30]</td>
</tr>
<tr>
<td>Unhappy</td>
<td>47 (20%)</td>
<td>45 (26%)</td>
<td>2 (3%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A Valid cases; CI = Confidence Interval

Changes in health status and wellbeing outcomes over time

The SettleMEN participants reported statistically significant changes over time in the following health and wellbeing outcomes: iii

- **Wellbeing – Psychological domain**: participants’ wellbeing in the psychological domain decreased significantly over time (OR=1.31; 95% CI [1.13 – 1.52]; P<0.001).iv
- **Wellbeing – Social relationships domain**: the levels of wellbeing in the social relationships domain decreased significantly over time (OR=1.21; 95% CI [1.04 – 1.41]; P=0.014). This decline was significantly greater among men living in regional areas (OR=2.11; 95% CI [1.49 – 2.98]; P<0.001).

iii After controlling for region of birth, age, time in Australia, marital status, area of settlement, English language proficiency, educational level, and employment status

iv At each consecutive interview, the odds of reporting poorer levels of wellbeing in the psychological domain were multiplied by 1.31 (P<0.001)
• **Wellbeing – Environment domain**: men’s wellbeing in the environment domain decreased significantly over time (OR=1.18; 95% CI [1.02 – 1.36]; P=0.023). The decline over time in the environment domain was significantly greater among men in regional areas (OR=1.38; 95% CI [1.14 – 1.68]; P=0.001).

**Use of health services at first interview**

Over the six months prior to the first interview, participants’ mean number of visits to general practitioners (GPs) was 2.1 ± 2.8 (median = 1; range = 0–24); hospital emergency departments 0.3 ± 0.9 (median = 0; range = 0–5); mental health services 0.3 ± 1.7 (median = 0; range = 0–24); and dentists 0.4 ± 0.7 (median = 0; range = 0–5). The mean number of admissions to hospital over the previous six months was 0.1 ± 0.3 (median = 0; range = 0–2). No participants visited a traditional healer or doctor from their own cultural background, and only two had visited a complementary health care practitioner over the previous six months.

Table 3 compares use of health care services at first interview by area of settlement. Overall, men living in regional areas were significantly more likely to report a greater number of visits to hospital emergency departments than those living in urban areas (P=0.001).

**Table 3: Mean number of visits to health care services among SettleMEN participants at first interview by area of settlement**

<table>
<thead>
<tr>
<th>Health service</th>
<th>Overall</th>
<th>Urban</th>
<th>Regional</th>
<th>P value a</th>
</tr>
</thead>
<tbody>
<tr>
<td>N=233 (100%)</td>
<td>N=176 (76%)</td>
<td>N=57 (24%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Practitioner</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>2.1 ± 2.8</td>
<td>2.2 ± 3.1</td>
<td>1.6 ± 1.5</td>
<td>P = 0.488</td>
</tr>
<tr>
<td>Median (range)</td>
<td>1 (0–24)</td>
<td>2 (0–24)</td>
<td>1 (0–5)</td>
<td></td>
</tr>
<tr>
<td>Hospital emergency department</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>0.3 ± 0.9</td>
<td>0.2 ± 0.5</td>
<td>0.8 ± 1.4</td>
<td>P = 0.001</td>
</tr>
<tr>
<td>Median (range)</td>
<td>0 (0–5)</td>
<td>0 (0–3)</td>
<td>0 (0–5)</td>
<td></td>
</tr>
<tr>
<td>Hospital admissions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>± 0.3</td>
<td>0.1 ± 0.3</td>
<td>0.0 ± 0.2</td>
<td>P = 0.498</td>
</tr>
<tr>
<td>Median (range)</td>
<td>0 (0–2)</td>
<td>0 (0–2)</td>
<td>0 (0–1)</td>
<td></td>
</tr>
<tr>
<td>Mental health services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>0.3 ± 1.7</td>
<td>0.3 ± 2.0</td>
<td>0.0 ± 0.1</td>
<td>P = 0.059</td>
</tr>
<tr>
<td>Median (range)</td>
<td>0 (0–24)</td>
<td>0 (0–24)</td>
<td>0 (0–1)</td>
<td></td>
</tr>
<tr>
<td>Dentist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>0.4 ± 0.7</td>
<td>0.4 ± 0.7</td>
<td>0.3 ± 0.8</td>
<td>P = 0.811</td>
</tr>
<tr>
<td>Median (range)</td>
<td>0 (0–5)</td>
<td>0 (0–5)</td>
<td>0 (0–5)</td>
<td></td>
</tr>
</tbody>
</table>

^ Past six months; a Non-parametric Mann–Whitney tests

Forty-six (20%) participants had used prescribed medications and 41 (18%) over-the-counter medications in the previous two weeks. There were no statistically significant differences in use of medications by area of settlement (see Table 4).
Table 4: Use of medications in previous two weeks among the SettleMEN participants at first interview by area of settlement

<table>
<thead>
<tr>
<th>Have used medications over the past two weeks</th>
<th>Overall N=233 (100%)</th>
<th>Urban N=176 (76%)</th>
<th>Regional N=57 (24%)</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescribed medications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>185 (80%)</td>
<td>138 (79%)</td>
<td>47 (84%)</td>
<td>P = 0.408</td>
<td>5% [−9, 16]</td>
</tr>
<tr>
<td>Yes</td>
<td>46 (20%)</td>
<td>37 (21%)</td>
<td>9 (16%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Over-the-counter medications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>191 (82%)</td>
<td>142 (81%)</td>
<td>49 (86%)</td>
<td>P = 0.407</td>
<td>5% [−9, 15]</td>
</tr>
<tr>
<td>Yes</td>
<td>41 (18%)</td>
<td>33 (19%)</td>
<td>8 (14%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Changes in use of health services over time
The use of health care services and medications remained fairly constant over time (no statistically significant changes). There were no significant differences in use of health care services and medications over time by area of settlement.

Satisfaction with health care services
Overall, SettleMEN participants were satisfied with the health care services in Australia. Compared to men living in urban areas, participants living in regional areas were significantly more likely to be satisfied with the extent to which their day-to-day health needs were met (P<0.001) and with the care provided by their GPs (P=0.037). However, men in regional areas were more dissatisfied with getting help in times of emergency (P=0.030). There were no statistically significant changes over time in relation to participants’ satisfaction with health care services.

Table 5: Satisfaction with health care services among SettleMEN participants at the initial interview by area of settlement

<table>
<thead>
<tr>
<th>How satisfied are you with A</th>
<th>Overall N=233 (100%)</th>
<th>Urban N=176 (76%)</th>
<th>Regional N=57 (24%)</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extent to which day-to-day health needs are met</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>175 (82%)</td>
<td>121 (76%)</td>
<td>54 (98%)</td>
<td>P &lt; 0.001</td>
<td>22% [11, 30]</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>39 (18%)</td>
<td>38 (24%)</td>
<td>1 (2%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Getting help in times of emergency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>123 (78%)</td>
<td>86 (84%)</td>
<td>37 (69%)</td>
<td>P = 0.030</td>
<td>15% [0, 31]</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>34 (22%)</td>
<td>17 (16%)</td>
<td>17 (31%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care provided by GP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>188 (89%)</td>
<td>135 (86%)</td>
<td>53 (96%)</td>
<td>P = 0.037</td>
<td>10% [−1, 18]</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>24 (11%)</td>
<td>22 (14%)</td>
<td>2 (4%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care provided by hospitals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>154 (91%)</td>
<td>108 (94%)</td>
<td>46 (85%)</td>
<td>P = 0.082</td>
<td>9% [−1, 22]</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>15 (9%)</td>
<td>7 (6%)</td>
<td>8 (15%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A Valid cases
Barriers to accessing health care services

The most common reported barriers to accessing health care services at the first interview were lack of:

- Transport to attend appointments (reported by 15% of participants),
- Interpreters (14%),
- Health care professionals from their own cultural/ethnic background (13%),
- Money to pay for services (10%),
- Information about how to access health services (10%), and
- Trust towards health professionals (6%)

Men living in urban areas were significantly more likely to report the lack of professionals from their own cultural background as a barrier (16% versus 4%; P=0.017), whereas men in regional areas were more likely to report lack of transport (36% versus 9%; P<0.001) as a barrier to accessing health care. Overall, barriers to accessing health care services decreased over time but these decreases were not statistically significant. There were no significant differences in barriers to accessing health care over time by area of settlement.

Health risk behaviours

Body Mass Index

At the initial interview, 16 (7%) participants were underweight (Body Mass Index BMI < 18.50), 147 (63%) were within the normal range (BMI = 18.50 – 24.99), 56 (24%) were overweight (BMI = 25.00 – 29.99), and 13 (6%) were obese (BMI ≥ 30.00). Men living in urban areas were more likely to be either overweight or obese than those living in regional areas but this difference was not statistically significant. There were no significant changes in BMI over time (and no differences over time by area of settlement).

Alcohol

At the first interview, 166 (72%) SettleMEN participants reported never drinking alcohol, 54 (23%) drinking occasionally (once a week or a few times per month), and 12 (5%) drinking alcohol 2–3 times a week or more. There were no statistically significant differences in alcohol consumption by area of settlement. There were no significant changes in alcohol consumption over time (and no differences over time by area of settlement).

Gambling

Most participants (n=222; 96%) had never tried gambling since arriving in Australia. Eight (3%) had gambled occasionally, and only 2 (1%) had gambled once/twice per month or more. There were no differences in gambling by area of settlement. There were no significant changes in gambling over time (and no differences over time by area of settlement).
Many of us came from extreme poverty and conflict. When we arrived in Australia, we got government benefits regularly. In our culture only men earned for a living so men control the family and women have no control over the family. In Australia, all the family members have incomes but we men want to control over everything in the family as our cultural practice dictates. This causes a lot of problems for us. Not only that but also sending money to our siblings abroad is causing conflict in the family. Western counselors are not that helpful in this matter. It will be great if there are counselors from the same culture for financial problems […] having an open mind is very good to learning yet it’s very difficult to do that when the culture we’ve grown up is the opposite. Our culture has taught us not to listen to women and children yet in the real life here in Australia it’s difficult to follow the culture. Accepting equality is very easy in the mind but not in the practice. However if men really want to enjoy the family he has to give up his ego and cultural practices that doesn’t bring joy and happiness to the family…

29 years old, born in Burma, 2 years in Australia, living in urban area

At the first interview, 52% of SettleMEN participants were married or living with their partners, 44% were single (never married) and 4% were separated or divorced. Only one participant was widowed. By the end of the study, the rate of divorce had increased slightly to 5% (not statistically significant).

Seven percent of those married or living together reported that their wives (or partners) were in paid employment.

Forty-four percent of participants were living with their wives, 40% with their children, 9% with their parents, 17% with siblings, 15% with other relatives, and 27% had at least one non-relative living in the household. Six percent were living alone.

Family relationships
About three quarters of participants reported healthy levels of family functioning at the first interview. Among those who were married or living together, 86% reported being happy with their marriage or relationship. Men living in regional areas were significantly more likely to report healthy levels of family functioning than their urban counterparts (P<0.001) (see Table 6).

Neither family functioning nor levels of happiness with marriage or relationship reported statistically significant changes over time (and no significant differences over time by area of settlement).
SettleMEN: HEALTH AND SETTLEMENT AMONG MEN FROM REFUGEE BACKGROUNDS

Table 6: Indicators of family relationships among SettleMEN participants at first interview by area of settlement

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Overall N=233 (100%)</th>
<th>Urban N=176 (76%)</th>
<th>Regional N=57 (24%)</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family functioning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthy</td>
<td>169 (73%)</td>
<td>115 (66%)</td>
<td>54 (95%)</td>
<td>P &lt; 0.001</td>
<td>29% [17, 38]</td>
</tr>
<tr>
<td>Unhealthy</td>
<td>63 (27%)</td>
<td>60 (34%)</td>
<td>3 (5%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How happy with marriage or relationship</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Happy</td>
<td>102 (86%)</td>
<td>83 (86%)</td>
<td>19 (91%)</td>
<td>P = 0.734</td>
<td>5% [−18, 17]</td>
</tr>
<tr>
<td>Unhappy</td>
<td>16 (14%)</td>
<td>14 (14%)</td>
<td>2 (9%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

^ Valid cases

Supporting their families overseas
At the first interview, 140 (61%) of the SettleMEN participants reported providing financial help to their families living overseas. There was no statistically significant difference across the areas of settlement. With limited family budgets, making decisions about what relatives to support and how much to send was a common source of family conflict.
The percentage of men sending money to their families overseas increased over time (but this increase was not statistically significant). However, financial support to families overseas decreased significantly over time among men settled in regional areas compared to those in urban areas (OR=0.75; 95% CI [0.58 – 0.99]; P=0.039).

**Gender roles**

Overall, 55% of participants reported more traditional beliefs about the roles of men and women in society. For example, 64% believed that the man should always be the head of the household; 70% considered that it is a man’s responsibility to discipline family members; 47% believed that the leadership of a community should be largely in the hands of men; 52% believed that women tend to leave their husbands if they become economically independent; and 68% considered that men feel less worthy when they cannot adequately provide for their families here in Australia.

On the other hand, 86% of men believed that men should share household tasks with women; 85% believed that men should not be embarrassed if their wives/partners earn more money; 87% considered that women should assume their rightful place in all professions along with men; and 89% believed that both sons and daughters should be given equal encouragement to go to college or university.

At the initial interview, 92 (40%) of participants felt that they could not fulfil their cultural and traditional roles as men in Australia, 123 (53%) believed that, as men, their ethnic communities expected too much from them, and 92 (40%) felt confused about what was expected from them as men in Australia. When comparing by area of settlement, men in regional areas were significantly more likely to feel confused about what was expected from them as men in Australia (60% versus 33%; P<0.001).

There were no significant changes in men’s perceptions of their roles in Australia over time (and no significant differences over time by area of settlement).

**Social support**

When asked at the first interview about the number of people very close to them, the SettleMEN participants reported a mean number of 8 ± 14 (median=4; range = 0–100). Three-quarters of participants reported good levels of social support from the most significant people in their lives, and half recounted having close friends from cultural/ethnic backgrounds other than their own. No significant differences in number of people close, social support, or friends from other backgrounds were found by area of settlement.

When analysing the data over time, the likelihood of participants reporting having close friends from cultural/ethnic backgrounds other than their own decreased significantly over time (OR=0.83; 95% CI [0.71 – 0.96]; P=0.015). There were no significant differences over time by area of settlement.

**Issues of trust**

About two-thirds of participants believed that most people can be trusted, 90% thought that the Australian community cares about them, and 96% felt welcome in Australia. The lowest levels of trust were with the media. Participants’ perceptions of trust towards others and being trusted by others are shown in Table 7.

---

v After controlling for age, region of birth, time in Australia, marital status, area of settlement, educational status, English language proficiency, and employment status.
Table 7: SettleMEN participants’ perceptions of trust at first interview

<table>
<thead>
<tr>
<th></th>
<th>I trust the following people n (%)&lt;sup&gt;A&lt;/sup&gt;</th>
<th>The following people trust me n (%)&lt;sup&gt;A&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your family</td>
<td>228 (99%)</td>
<td>228 (98%)</td>
</tr>
<tr>
<td>Your friends</td>
<td>221 (95%)</td>
<td>225 (97%)</td>
</tr>
<tr>
<td>Your ethnic community</td>
<td>200 (86%)</td>
<td>214 (94%)</td>
</tr>
<tr>
<td>People who work in stores you shop</td>
<td>180 (79%)</td>
<td>160 (71%)</td>
</tr>
<tr>
<td>Wider Australian community</td>
<td>180 (79%)</td>
<td>184 (83%)</td>
</tr>
<tr>
<td>Your workmates</td>
<td>133 (79%)</td>
<td>150 (89%)</td>
</tr>
<tr>
<td>Police</td>
<td>176 (78%)</td>
<td>147 (67%)</td>
</tr>
<tr>
<td>Your neighbours</td>
<td>152 (71%)</td>
<td>151 (74%)</td>
</tr>
<tr>
<td>The media</td>
<td>145 (63%)</td>
<td>130 (63%)</td>
</tr>
</tbody>
</table>

<sup>A</sup> Valid cases

Compared to participants living in urban areas, men in regional areas were significantly more likely to report that they trust their ethnic communities (98% versus 82%; P=0.002) and are trusted by their ethnic communities (100% versus 92%; P=0.042). Men in regional areas were less likely to report that they trust police (70% versus 81%) or are trusted by police (58% versus 71%) but these differences were not statistically significant.

When analysing the longitudinal data, the following trust items reported statistically significant changes over time:<sup>vi</sup>

- **I trust my neighbours**: trust towards neighbours increased significantly over time (OR=1.29; 95% CI [1.07 – 1.57]; P=0.009). This trend over time was significantly greater among men living in regional areas (OR=2.19; 95% CI [1.32 – 3.63]; P=0.003).
- **My neighbours trust me**: feeling trusted by neighbours increased significantly over time (OR=1.26; 95% CI [1.04 – 1.52]; P=0.020). This trend over time was significantly greater among men in regional areas (OR=2.07; 95% CI [1.35 – 3.18]; P=0.001).
- **I trust the police**: trust towards the police increased significantly over time (OR=1.23; 95% CI [1.01 – 1.49]; P=0.038). There were no significant differences over time by area of settlement.
- **Police trust me**: feeling trusted by police increased significantly over time (OR=1.19; 95% CI [1.02 – 1.38]; P=0.028). There were no significant differences over time by area of settlement.
- **I trust the wider Australian community**: trust towards the wider Australian community increased significantly over time (OR=1.36; 95% CI [1.11 – 1.66]; P=0.002). This trend over time was significantly greater among men living in regional areas (OR=1.53; 95% CI [1.02 – 2.29]; P=0.039).

<sup>vi</sup> After controlling for age, region of birth, time in Australia, marital status, area of settlement, educational status, English language proficiency, and employment status.
- **The wider Australian community trust me**: feeling trusted by the wider Australian community increased over time (OR=1.22; 95% CI [1.02 – 1.46]; P=0.032). This trend over time was significantly greater among men living in regional areas (OR=1.45; 95% CI [1.01 – 2.09]; P=0.047).
- **I trust the people I work with**: trust towards workmates increased significantly over time (OR=1.50; 95% CI [1.16 – 1.94]; P=0.002). This trend over time was significantly greater among men living in regional areas (OR=1.87; 95% CI [1.06 – 3.33]; P=0.032).
- **I trust the media**: trust towards the media increased significantly over time (OR=1.18; 95% CI [1.01 – 1.39]; P=0.036). This trend over time was significantly greater among men living in regional areas (OR=1.33; 95% CI [1.00 – 1.76]; P=0.047).
- **The media trust me**: feeling trusted by the media increased significantly over time (OR=1.27; 95% CI [1.09 – 1.49]; P=0.003). This trend over time was significantly greater among men living in regional areas (OR=1.37; 95% CI [1.02 – 1.85]; P=0.038).

**Religious support**

When asked about their religious affiliation at the initial interview, 187 (81%) of the men reported being Christian, 42 (18%) Muslim, and 3 (1%) ‘Other’ (one was a Buddhist and the other two reported not having any religious affiliation). Eighty percent of participants reported being either somewhat or very religious. Men living in regional areas were significantly more likely to be not at all or slightly religious compared to men in urban areas (33% versus 16%; P=0.003). There were no significant changes in religiosity over time and no differences over time by area of settlement.
EDUCATION AND EMPLOYMENT

There are a number of obstacles for refugees, for instance, many who came from the Northern part of the Sudan, they went to Arabic pattern schools, and some obtained degrees there. Then when they came here, their degrees became invalid according to Australian standards. That means they have to improve their English language in order to join the University. The other obstacle could be family responsibility such as kids, and the father of the family needs to get a job and improve their lifestyle. As you see here in Gatton there is no TAFE or University (except Agricultural University of Queensland), therefore means of transport is another obstacle, and we have to drive to Toowoomba or Brisbane in order to get to TAFE or University…

It would be a privilege to obtain an Australian degree or certificate. Even if I fail to get a job here in Australia, this certificate can assist me to get a job overseas. I think obtaining a degree will be a good example to my kids in future. They will also struggle to get degrees and reach my standard of education as I had done…they will have the concept that, as our dad has a degree, we need to struggle to obtain that too…

The Australian government does not recognize overseas qualifications… they said, you first have to go to TAFE, instead the first thing is give me a job and let me show my skills... if I’m unable to do the job, then send me out [to TAFE]…

I sometimes feel bad when I see the supervisor discriminating me from the rest of the co-workers. For example, at the workplace I had worked for, the supervisor sent us to another supervisor to give us some jobs. He stated that “come and take these blacks away from here, I don’t have a job for them”. However, when I told him to repeat his statement, he said “I can repeat it for ten or a hundred times, it doesn’t affect me what so ever”. So such kind of supervisor makes people feel bad and discriminated…

26 years old, Sudanese-born, 5 years in Australia, living in regional area
Education and employment at first interview

Half of the men had completed their high school education overseas, 25% had completed primary school only, and 19% had obtained a college, trade or university degree overseas. About 6% had not completed any level of education prior to arriving in Australia. At the first interview, 47% of participants had completed their English courses in Australia, 9% had obtained tertiary qualifications at an Australian institution (e.g. aged care, community services, business/management, information technology, nursing, engineering), and 10% had completed high school. Sixty-one percent of the men were enrolled at educational institutions at the time of the first interview. Of these, two-thirds were undertaking English courses while the other third were enrolled at a tertiary institution (e.g. apprenticeships, community/human services, business and management, nursing). Overall, most participants were keen to undertake further education in Australia.

Participants’ main occupation before arriving in Australia were teaching (12%), farming (12%), interpreting (9%), community work (9%), factory work (7%), and building/labourer (7%). One quarter were studying prior to coming to Australia. Overall, 44% were employed at the time of the first interview; of these 46% were employed full-time and 54% part-time or casual. Their main occupations were factory work (35%), building/labourer (20%), farming (8%) and cleaning (2%). Among those with formal overseas qualifications (n=97; 42%), only 20% had them either partially or fully recognised in Australia.
Table 8 compares key educational and occupational outcomes at the first interview by area of settlement. Compared to men living in urban areas, participants living in regional areas were significantly less likely to have completed tertiary education or trade ($P=0.002$), and more likely to have had negative experiences at educational institutions in Australia ($P<0.001$), be dissatisfied with their jobs ($P=0.002$), have jobs below their skills and qualifications ($P=0.029$), and have experienced discrimination while finding employment in Australia ($P<0.001$).

Table 8: Educational and occupational outcomes of SettleMEN participants at first interview by area of settlement

<table>
<thead>
<tr>
<th>Outcome A</th>
<th>Overall N=233 (100%)</th>
<th>Urban N=176 (76%)</th>
<th>Regional N=57 (24%)</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest educational level B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None/Primary school</td>
<td>31 (13%)</td>
<td>23 (13%)</td>
<td>8 (14%)</td>
<td>$P=0.002$</td>
<td></td>
</tr>
<tr>
<td>Secondary school</td>
<td>145 (63%)</td>
<td>100 (57%)</td>
<td>45 (79%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tertiary education/Trade</td>
<td>56 (24%)</td>
<td>52 (30%)</td>
<td>4 (7%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Currently involved in studies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>141 (61%)</td>
<td>110 (64%)</td>
<td>31 (54%)</td>
<td>$P=0.216$</td>
<td>10% [-6, 25]</td>
</tr>
<tr>
<td>No</td>
<td>89 (39%)</td>
<td>63 (36%)</td>
<td>26 (46%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perceived academic performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>141 (92%)</td>
<td>109 (90%)</td>
<td>32 (97%)</td>
<td>$P=0.301$</td>
<td>7% [-8, 15]</td>
</tr>
<tr>
<td>Poor</td>
<td>13 (8%)</td>
<td>12 (10%)</td>
<td>1 (3%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Educational experiences at Australian institutions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mostly positive</td>
<td>91 (55%)</td>
<td>81 (62%)</td>
<td>10 (29%)</td>
<td>$P &lt; 0.001$</td>
<td>33% [13, 49]</td>
</tr>
<tr>
<td>Mostly negative</td>
<td>75 (45%)</td>
<td>50 (38%)</td>
<td>25 (71%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employment status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employed</td>
<td>95 (44%)</td>
<td>68 (43%)</td>
<td>27 (48%)</td>
<td>$P=0.480$</td>
<td>5% [-9, 20]</td>
</tr>
<tr>
<td>Unemployed</td>
<td>120 (56%)</td>
<td>91 (57%)</td>
<td>29 (52%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perceived work performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>96 (89%)</td>
<td>71 (89%)</td>
<td>25 (89%)</td>
<td>$P=0.938$</td>
<td>0 [-19, 13]</td>
</tr>
<tr>
<td>Poor</td>
<td>12 (11%)</td>
<td>9 (11%)</td>
<td>3 (11%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall job satisfaction</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>50 (51%)</td>
<td>43 (61%)</td>
<td>7 (26%)</td>
<td>$P=0.002$</td>
<td>35% [11, 53]</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>48 (49%)</td>
<td>28 (39%)</td>
<td>20 (74%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How appropriate is your current job to your skills/qualifications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appropriate/above</td>
<td>44 (46%)</td>
<td>36 (53%)</td>
<td>8 (29%)</td>
<td>$P=0.029$</td>
<td>24% [1, 43]</td>
</tr>
<tr>
<td>Below</td>
<td>52 (54%)</td>
<td>32 (47%)</td>
<td>20 (71%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weekly income</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$400 or more</td>
<td>84 (37%)</td>
<td>61 (35%)</td>
<td>23 (41%)</td>
<td>$P=0.433$</td>
<td>6% [-9, 21]</td>
</tr>
<tr>
<td>Less than $400</td>
<td>145 (63%)</td>
<td>112 (65%)</td>
<td>33 (59%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction with financial situation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied</td>
<td>142 (62%)</td>
<td>110 (64%)</td>
<td>32 (56%)</td>
<td>$P=0.269$</td>
<td>8% [-7, 24]</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>86 (38%)</td>
<td>61 (36%)</td>
<td>25 (44%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Forty-three percent of those either looking for work or working in Australia reported having experienced discrimination because of their: accent (85%), English language ability (69%), physical appearance (63%), name (37%), and religious customs (6%).

### Changes in educational and occupational outcomes over time

A number of educational and occupational outcomes reported statistically significant changes over the duration of the SettleMEN study: vii

- **Highest educational level:** the percentage of participants who had completed tertiary education (e.g., certificate, diploma, bachelor degree) or trade qualifications increased from 24% at the initial interview to 41% 18-months later (OR=1.34; 95% CI [1.09 – 1.65]; P=0.005).viii There were no significant differences over time by area of settlement.

- **Currently studying:** the percentage of men who reported being enrolled at an educational institution in Australia decreased from 61% at the initial interview to 43% 18 months later (OR=0.86; 95% CI [0.75 – 0.99]; P=0.033). There were no significant differences over time by area of settlement.

- **Recognition of previous skills and qualifications:** the percentage of participants reporting either partial or full recognition in Australia of their previous skills and qualifications increased from 20% to 35% over time (OR=1.66; 95% CI [1.26 – 2.18]; P<0.001). There were no significant differences over time by area of settlement.

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vii After controlling for region of birth, age, time in Australia, marital status, English language proficiency and area of settlement

viii At each consecutive interview, the odds of having completed a tertiary education or trade qualification were multiplied by 1.34 (P=0.005)
• **How appropriate is current job to skills and qualifications:** the percentage of participants reporting that their current job was either appropriate or above their level of skills and qualifications increased from 46% at the initial interview to 57% 18 months later (although not statistically significant after controlling for potentially confounding variables). This increase over time was significantly lower among men living in regional areas (OR=0.61; 95% CI [0.40 – 0.94]; P=0.025).

• **Weekly income:** the percentage of men reporting a weekly income of $400 or more increased from 37% at the first interview to 58% 18 months later (OR=1.22; 95% CI [1.05 – 1.42]; P=0.011). There were no significant differences over time by area of settlement.

• **Difficulties finding work in Australia:** the percentage of participants reporting considerable difficulties finding work in Australia increased from 57% at the initial interview to 83% 18 months later (OR=1.49; 95% CI [1.25 – 1.78]; P<0.001). There were no significant differences over time by area of settlement.

• **Experienced discrimination finding work in Australia:** the percentage of participants who reported experiencing discrimination while finding work in Australia increased from 43% to 60% over time (OR=1.29; 95% CI [1.08 – 1.55]; P=0.005). This increase over time was significantly greater among men in regional areas (OR=1.66; 95% CI [1.08 – 2.55]; P=0.020).

Although the employment rate increased over time (from 44% in the first interview to 60% 18 months later), this change was not statistically significant after adjusting for potentially confounding factors such as age, region of birth, marital status, time in Australia, place of settlement, and highest educational level.

**Barriers to employment**
At the initial interview, the most common barriers faced by the SettleMEN participants while trying to secure employment in Australia were: requirement to have Australian work experience (64% of those who had looked for work); requirement to have referees in Australia (63%); necessity of having a car (57%); lack of opportunities for work experience in refugee camps (55%); difficulties getting promoted (47%); problems getting qualifications recognised (39%); and breaks in working life (38%).

**Methods used to find employment**
Participants used a range of methods when looking for employment in Australia: family and/or friends (74%); job networks/services (71%); newspaper or internet adverts (60%); other community networks (39%); door knocking (26%); and self-employment (4%).

The most successful methods for finding employment were: self-employment (5 participants; 83% success rate); family and/or friends (77% success rate); job networks/services (63% success rate); newspaper or internet adverts (60% success rate); other community networks (60% success rate); and door knocking (56% success rate).

**Job networks/services**
Of the 128 participants with valid data on satisfaction with job networks/services at the initial interview, 79 (62%) were dissatisfied. Men in regional areas were significantly more likely to be dissatisfied with the job services than those in urban areas (81% versus 54%; P=0.004). Dissatisfaction with job services increased over time to 69% at the final interview (although not statistically significant). There were no significant differences over time by area of settlement.
Good things have happened to me here in Australia, for example education opportunities, no war or persecution so we are in a peaceful country, you feel secure [...] But we have been having difficulties because of family size. You may get a family of nine which Australians believe is a miracle. Our names made us targeted by real estate agents and our applications are rejected. It is hard to get a house because of our names and the family size... Other landlord clearly said that he didn’t want family with children... families may become homeless...

[Since becoming Australian citizen] I have been able to vote in an election and apply for Australian passport... but not even citizenship can give you a good job here...

Police department should organize community meeting... explain their main role because the way we understand police in Africa is different here in Australia. Police are so rough in Africa so when you hear about police you will be panicking but this is not the case here in Australia... Police department should recruit people from refugee background and employ them so that they work hand in hand... like liaison officers from the community; it has worked well in other cities like in Brisbane...

Discrimination could be in many forms. Sometimes people can just shout at you when you are walking on the footpath. People gossip on you while you are there... I think it will not go away but we ignore them even if they keep talking. Sometimes in education sector you are marked down even when you did your assignment to your best... in fact discrimination is everywhere, at workplace and wherever you go... but even if you know that you have been discriminated and you have no evidence then it is a waste of time to complain, and even if you have evidence you need a lawyer but due to financial problems you can’t afford one. The best solution to discrimination is to ignore it because if you think about it will harm you...

42 years old, Sudanese-Born, 4 years in Australia, living in regional area
Things that have helped the SettleMEN participants to start a new life in Australia
At the initial interview, the most common sources of support that helped participants to start their new life in Australia were: Centrelink support (mentioned by 70% of participants); settlement services (39%); relatives and friends from their ethnic communities (39%); educational institutions (31%); Australian government departments (other than Centrelink) (14%); health care services (13%); work opportunities (11%); charities (e.g. St Vincent de Paul, Lifeline) (9%); church (9%); previous skills and qualifications (7%); and sense of freedom, safety and peace (6%).

Things that have made life in Australia difficult
The most common difficulties faced by participants while starting a new life in Australia were: language barriers (40%); finding work (40%); lack of own transport (35%); different culture and lifestyle (17%); financial difficulties (16%); finding housing (12%); lack of friends and social isolation (12%); difficulties getting a driver’s licence (9%); discrimination and racism (6%); different food (5%); different environment and climate (5%); and lack of qualifications or qualifications that are not recognised in Australia (5%).

Living arrangements
At the first interview, 212 (91%) participants were living in a private rental property, 18 (8%) in a government rental property, and two (1%) were living in their own property. Those renting were paying an average of A$250 per week (SD=78; Median=255; range=50–500).
Men living in regional areas were significantly more likely to pay lower rent (Mean ± SD = A$230 ± 40; Median=235; range=120–290) compared to those in urban areas (Mean ± SD = A$256 ± 85; Median=261; range=50–500) (P=0.005). Although men in regional areas were less likely to live in a government rental property than those in urban areas, this difference was not statistically significant.

Living arrangements did not change significantly over time. At the last interview, six (3%) participants reported living in their own property.

Driving offences and problems with the law in Australia
At the initial interview, 91 (31%) of participants reported owning a car (this increased to 67% by the 18-month follow-up). There was no significant difference in the percentage of men owing a car by area of settlement. Thirty one (13%) men have had at least one driving offence since arriving in Australia (e.g. traffic fines, speeding tickets, drink driving). Four (2%) participants have had other legal problems in Australia. Men in urban areas were significantly more likely to report driving offences than those in regional areas (17% versus 2%; P=0.003).

There were no significant changes over time in participants’ reporting of driving offences or other legal problems.

Interaction with police
At the initial interview, 91 (39%) of the men had been stopped by police at least once since arriving in Australia. Eighty-nine (74%) described their interaction with police in Australia as good, while 32 (26%) described it as poor. Men in regional areas were significantly more likely to have been stopped by police at least once (68% versus 30%; P<0.001). They were also more likely to describe their interaction with police as poor although this difference was not statistically significant (35% versus 20%; P=0.060).

Neither having been stopped by police nor descriptions of interaction with police reported statistically significant changes over time. However, the chance of being stopped by police increased significantly over time among men in regional areas compared to those in urban areas, even after controlling for having a car (OR =1.54; 95% CI [1.16 – 2.05]; P=0.003).

Australian citizenship
At first interview, 71 (31%) of the SettleMEN participants reported being Australian citizens. Those living in regional areas were significantly more likely to have Australian citizenship (63% versus 21%; P<0.001) than those living in urban areas. Note that men in regional areas had been, on average, longer in Australia and therefore more likely to meet the time requirements for application to Australian citizenship.

Over time, the number of participants reporting being Australian citizens increased significantly (48% in the 18-month follow-up interview; P=0.001). There were no significant differences over time by area of settlement.

Subjective social status
Participants’ subjective social status at first interview by area of settlement is shown in Table 9. When compared across areas of settlement, men living in regional areas were significantly more likely to rate lower in their subjective social status for all four domains investigated.
### Table 9: SettleMEN participants’ subjective social status at first interview by area of settlement

<table>
<thead>
<tr>
<th>Subjective social status ^</th>
<th>Overall</th>
<th>Urban</th>
<th>Regional</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=233 (100%)</td>
<td>N=176 (76%)</td>
<td>N=57 (24%)</td>
<td></td>
</tr>
<tr>
<td>At your educational institution</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>5.5 ± 2.2</td>
<td>5.6 ± 2.3</td>
<td>4.8 ± 1.6</td>
<td>P = 0.021</td>
</tr>
<tr>
<td>Median (range)</td>
<td>5.0 (1–10)</td>
<td>6.0 (1–10)</td>
<td>5.0 (2–8)</td>
<td></td>
</tr>
<tr>
<td>At your workplace</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>4.7 ± 2.4</td>
<td>5.1 ± 2.7</td>
<td>3.7 ± 1.2</td>
<td>P = 0.014</td>
</tr>
<tr>
<td>Median (range)</td>
<td>4.0 (1–10)</td>
<td>5.0 (1–10)</td>
<td>4.0 (1–6)</td>
<td></td>
</tr>
<tr>
<td>In your ethnic/cultural community</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>5.8 ± 2.3</td>
<td>6.1 ± 2.3</td>
<td>5.1 ± 2.3</td>
<td>P = 0.011</td>
</tr>
<tr>
<td>Median (range)</td>
<td>6.0 (1–10)</td>
<td>6.0 (1–10)</td>
<td>5.0 (1–10)</td>
<td></td>
</tr>
<tr>
<td>In the broader Australian community</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>3.8 ± 2.5</td>
<td>4.5 ± 2.5</td>
<td>1.9 ± 1.1</td>
<td>P &lt; 0.001</td>
</tr>
<tr>
<td>Median (range)</td>
<td>3.0 (1–10)</td>
<td>5.0 (1–10)</td>
<td>2.0 (1–6)</td>
<td></td>
</tr>
</tbody>
</table>

^ Valid cases; Subjective social status scores range from 1=lowest status, to 10=highest status

The analysis of the data over time showed no significant changes in relation to subjective social status at educational institution, workplace, in the ethnic community or in the broader Australian community. ^ix However, social status in the wider Australian community decreased significantly over time among men in regional areas when compared to those in urban areas (mean change = −0.23; 95% CI [−0.41, −0.05]; P=0.013).

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^ix After adjusting for age, region of birth, time in Australia, marital status, educational level, English language proficiency, employment status, and area of settlement
Experiences of discrimination
At the first interview, 95 (41%) of the SettleMEN participants reported having experienced discrimination, been prevented from doing something, or been hassled or made inferior, because of their ethnicity, religion or colour, since arriving in Australia. Men living in regional areas were significantly more likely to report experiences of discrimination overall (see Table 10). Only discrimination while getting medical care reported no significant differences by area of settlement.

Table 10: Percentage of SettleMEN participants who reported having experienced discrimination since arriving in Australia (at first interview and by area of settlement)

<table>
<thead>
<tr>
<th>Experienced discrimination</th>
<th>Overall N=233 (100%)</th>
<th>Urban N=176 (76%)</th>
<th>Regional N=57 (24%)</th>
<th>P value</th>
<th>% difference [95% CI]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall discrimination</td>
<td>95 (41%)</td>
<td>52 (30%)</td>
<td>43 (75%)</td>
<td>P &lt; 0.001</td>
<td>45% [30, 57]</td>
</tr>
<tr>
<td>At an educational institution</td>
<td>35 (15%)</td>
<td>9 (5%)</td>
<td>26 (46%)</td>
<td>P &lt; 0.001</td>
<td>41% [27, 54]</td>
</tr>
<tr>
<td>Seeking housing</td>
<td>58 (25%)</td>
<td>24 (14%)</td>
<td>34 (60%)</td>
<td>P &lt; 0.001</td>
<td>46% [31, 59]</td>
</tr>
<tr>
<td>Getting medical care</td>
<td>4 (2%)</td>
<td>3 (2%)</td>
<td>1 (2%)</td>
<td>P &gt; 0.05</td>
<td>0% [−3, 9]</td>
</tr>
<tr>
<td>Getting service in store or restaurant</td>
<td>19 (8%)</td>
<td>9 (5%)</td>
<td>10 (18%)</td>
<td>P &lt; 0.01</td>
<td>13% [3, 26]</td>
</tr>
<tr>
<td>Getting credit, bank loans, mortgage</td>
<td>6 (3%)</td>
<td>1 (1%)</td>
<td>5 (9%)</td>
<td>P &lt; 0.01</td>
<td>8% [2, 19]</td>
</tr>
<tr>
<td>On the street</td>
<td>64 (27%)</td>
<td>31 (18%)</td>
<td>33 (58%)</td>
<td>P &lt; 0.001</td>
<td>40% [25, 54]</td>
</tr>
<tr>
<td>From the police</td>
<td>30 (13%)</td>
<td>12 (7%)</td>
<td>18 (32%)</td>
<td>P &lt; 0.001</td>
<td>25% [12, 39]</td>
</tr>
<tr>
<td>In public places like shops and trains</td>
<td>49 (21%)</td>
<td>24 (14%)</td>
<td>25 (44%)</td>
<td>P &lt; 0.001</td>
<td>30% [16, 45]</td>
</tr>
<tr>
<td>In your neighbourhood</td>
<td>32 (14%)</td>
<td>17 (10%)</td>
<td>15 (26%)</td>
<td>P &lt; 0.01</td>
<td>16% [5, 31]</td>
</tr>
</tbody>
</table>
At the 18-month interview, 63% reported having experienced discrimination since arriving in Australia. The likelihood of participants reporting overall experiences of discrimination increased significantly over time (OR=1.31; 95% CI [1.11 – 1.54]; P=0.001). This trend was significantly greater among men living in regional areas (OR=1.42; 95% CI [1.03 – 1.96]; P=0.034).

Responses to discrimination

When treated unfairly, 142 (62%) of the SettleMEN participants reported trying to do something about it while 88 (38%) accepted it as a fact of life. Moreover, 196 (85%) talked to other people about it, while 35 (15%) kept it to themselves. Table 11 compares the responses to discrimination at first interview by area of settlement. Men in regional areas were significantly more likely to try to do something (P<0.001) and to talk to other people about it (P=0.005) than those living in urban areas.

Table 11: SettleMEN participants’ responses to discrimination at first interview by area of settlement

<table>
<thead>
<tr>
<th>Responses to discrimination</th>
<th>Overall</th>
<th>Urban</th>
<th>Regional</th>
<th>P value</th>
<th>% difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=233</td>
<td>N=176</td>
<td>N=57</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(100%)</td>
<td>(76%)</td>
<td>(24%)</td>
<td></td>
<td>[95% CI]</td>
</tr>
<tr>
<td>When treated unfairly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accept it as a fact of life</td>
<td>88 (38%)</td>
<td>85 (49%)</td>
<td>3 (5%)</td>
<td>P &lt; 0.001</td>
<td></td>
</tr>
<tr>
<td>Try to do something about it</td>
<td>142 (62%)</td>
<td>88 (51%)</td>
<td>54 (95%)</td>
<td>44% [31, 52]</td>
<td></td>
</tr>
<tr>
<td>When treated unfairly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talk to other people about it</td>
<td>196 (85%)</td>
<td>141 (81%)</td>
<td>55 (97%)</td>
<td>P = 0.005</td>
<td></td>
</tr>
<tr>
<td>Keep it to myself</td>
<td>35 (15%)</td>
<td>33 (19%)</td>
<td>2 (3%)</td>
<td>16% [4, 23]</td>
<td></td>
</tr>
</tbody>
</table>

*Valid cases*

Over time, there was a statistically significant increase in the percentage of participants who reported talking to other people about it when they felt treated unfairly (OR=1.30; 95% CI [1.02 – 1.64]; P=0.031)*x* (but no statistically significant differences over time by area of settlement).

Sense of control

At first interview, 124 (53%) participants reported having little or no control over their lives while 108 (47%) felt they had some or complete control over their lives. Men living in regional areas were significantly more likely than those in urban areas to feel they had some or complete control over their lives (75% versus 38%; P<0.001).

The likelihood of participants reporting they had little or not control over their lives increased significantly over time (OR=1.19; 95% CI [1.02 – 1.64]; P=0.031)*x* This trend was significantly greater among men living in regional areas (OR=1.82; 95% CI [1.34 – 2.47]; P<0.001).

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*x* After adjusting for age, region of birth, time in Australia, marital status, educational level, religious affiliation, English language proficiency, employment status, and area of settlement

*xi* After adjusting for age, region of birth, time in Australia, marital status, educational level, religious affiliation, English language proficiency, employment status, and area of settlement
Is life getting worse or better?

At the initial interview, most participants (n=191; 82%) felt their life was getting better, while 42 (18%) felt it was getting worse. Compared to men living in urban areas, participants living in regional areas were significantly more likely to report that their life was getting better (100% versus 76%; P<0.001).

There were not significant changes over time on participants’ perceptions on whether life was getting worse or better (and no significant differences over time by area of settlement).
Health and wellbeing

Overall, the SettleMEN study has found that despite their recent traumatic history, this group of recently arrived men from refugee backgrounds report good levels of subjective health status and mental health. The proportion of participants reporting poor subjective health status (16%) is similar to that reported by the overall Australian adult male population (16.5%). The prevalence of PTSD and depression among this group of refugee men is in the lower range of that reported in other studies of refugee populations resettled in Western countries. This low prevalence may explain the low levels of use of mental health services.

In terms of health risk behaviours, refugee men reported half the prevalence of overweight and obesity when compared to the overall Australian adult male population (30% versus 62%). Five percent of participants reported high frequency of alcohol consumption (2–3 times a week or more). The 2005 ABS Australian National Health Survey found that 15.2% of Australian adult males reported risky/high risk alcohol consumption. Any comparison, however, needs to be made with caution because the measures used to assess alcohol consumption in this study were different from those of the ABS survey.

Although men settled in regional areas appear to be healthier and happier than those living in urban areas, they face more difficulties in accessing health care services. Better health status among those in regional areas may be explained by the types of jobs available (e.g. meat factories, farming) which require physically fit workers. Also, men with long standing illnesses and poorer health may choose to live in urban areas with better access to health care and support services. Higher levels of use of hospital emergency departments (and dissatisfaction with getting help in times of emergency) among men living in regional areas reflect greater difficulties in accessing general practice services in regional Australia. Participants reported that a small number of GPs provide services to refugee families living in the Toowoomba–Gatton area, and that both lack of bulk-billing and lack of interpreters are common barriers to accessing primary health care. Importantly, despite these difficulties and perhaps influenced by their overall good levels of health, men in regional areas reported greater levels of satisfaction with the extent to which their day-to-day health needs are met and with the care provided by their GPs.

At the initial interview, the SettleMEN participants reported moderate to good levels of wellbeing. However, wellbeing in the psychological, social relationships, and environment domains worsened significantly over time. The decline in wellbeing in the social relationships and environment domains was significantly greater among men in regional areas. These findings are of particular importance given the relatively short follow-up period (18 months). When taken in conjunction with the other findings reported here, and with the qualitative data...
provided by a subgroup of participants, it can be argued that these changes in wellbeing may be a reflection of broader experiences of social exclusion, including barriers to education and economic participation, high unemployment, financial difficulties, experiences of discrimination and social isolation.46

You cannot feel healthy if you still have something troubling your mind [...] thinking a lot about your future life... for example what will I be in the future? Also if you have problems but you can’t find anyone to help or nobody cares about you. That causes trouble to us... for example, people from the government who deal with employment, do not care when I speak to them about this... they only deal with reports... [42 years old, Burundian-born, 3 years in Australia, urban area]

Family and social support
Most SettleMEN participants reported healthy levels of family functioning, and for those who were married (or living together) the majority were happy with their relationship. However, making decisions about financial matters, including how to support their relatives overseas, was a common source of family conflict.

Sometimes my wife and I argue about sending money. We both want to send money to our own family members. Cultural practices play a vital role in this matter. It’s very difficult not to send money to your own parents or siblings when they ask or are in need. [33 years old, born in Burma, 3 years in Australia, urban area]

Although a slight majority of participants reported more traditional beliefs about the role of men and women in society, their attitudes towards some aspects of gender roles varied. Overall, concerns about how to reconcile their traditional cultural roles with the roles of men here in Australia were common.

This is another country… back home in Africa, women do a lot of activities that belong to them and men do different activities that are assigned to them culturally. It is just a division of labour, but here in Australia that division of labour is not there [...] for example for me as a young person, whether I cook or not, it doesn’t matter much. But according to our culture we have something like respect, because you can’t assign somebody of fifty years to cook food while the wife is there. This can’t be accepted culturally as Africans, it is not bad but the culture aspects need to be respected. We are not neglecting women’s rights but we are respecting the culture, but other things we can do like washing clothes, cleaning houses, and driving to shopping are very simple. [22 years old, Sudanese-born, 3 years in Australia, regional area]

Concerns about police and government representatives’ direct intervention in parenting issues and family conflict (e.g. Child Protection), and their lack of acknowledgement of the mediating cultural role of extended family and community elders in these situations, were frequently stated by the SettleMEN participants.

As an Asian I have never seen families and children detained by police because how we discipline is based on traditional cultural practices. But I have seen many refugee families struggle here in Australia because the Australian legal systems don’t allow the culture practices like spanking… I believe refugee families will do better if the child protection and police do not get involved with refugee family problems unless it is in extreme situations. Because when the child protection and police are involved in the refugee family problems that are not extreme, it brings more damage to the family and the community. [33 years old, born in Burma, 4 years in Australia, urban area]

We are capable of protecting our children. We have extended family and we believe in an extended family so if anything happens to the child, the child should be placed to the other relatives. This is what we need the government
Most participants reported high levels of social support (from both their own ethnic communities and from people from other ethnic backgrounds) and social trust. Bonding relationships with one’s own ethnic communities are important for developing a sense of identity and for sharing knowledge and material resources that are fundamental for starting life in a new country. Importantly, bridging relationships with people from other backgrounds decreased significantly over time. Bridging relationships with the broader host community are essential for a sense of belonging to a new place, for becoming at home, and developing the broader social networks required to access education and employment opportunities, and becoming active participants in the civic and social life of the new country.

Social trust is essential for individuals to maximise their opportunities. Individuals choose to build networks when they “have trust that others will reciprocate their actions and will feel some obligation to do so” (p.2). The fact that the SettleMEN participants, in particular those in regional areas, reported a significant increase in many of the indicators of social trust over time seems to be in contradiction with the decrease over time in participants’ bridging relationships. Further research is needed to clarify the relationship between trust and bridging social capital among this group of men from refugee backgrounds.

Education and employment

A considerable number of SettleMEN participants had either obtained college, trade or university qualifications overseas or were undertaking tertiary studies in Australia upon resettlement. Most participants were keen to engage in further education in Australia. Many men, however, reported negative experiences while studying at Australian institutions, including learning difficulties (English language ability, literacy, numeracy, and computer skills), poor interaction with and inadequate support from teachers/lecturers, and experiences of discrimination from lecturers and fellow students. Negative educational experiences were more common among men living in regional areas.

The way of interacting with the Australian community. For instance, in our classroom where we are given our lecture or tutorial, we really feel isolated and when we engage in our tutorial most of the people from Australian background actually group themselves alone and as a result someone from a refugee background feel discouraged […] writing essays also, in fact we are told we have a lot of grammatical errors…especially those doing arts subjects… because you require to write assignments in an appropriate language so this is an area we are facing problems…

We African who come here are considered as nothing, and as people who do not have any knowledge, who have not study, or people who come from the forest. We do not come from the forest. We have studied and had a normal life like other human beings. But when we get here, we are reduced to the lowest level as if we were children who have never been at school. The big barrier for studying at TAFE or university here in Australia is that you are asked to undertake an English course or an IELTS test when you have already completed a certificate III or IV at TAFE… and most of the time there is much pressure that people fail the test… It can be a problem of being under pressure. Pressure because the education system is different. Back home in Africa, the teacher dictates notes and does everything. When here, the teacher tells you to use the computer, use the internet while you do not know to use it. Tomorrow when the teacher comes [says] “How can’t you do this?” So this becomes a pressure and you feel being at the bottom compare to other students…
This group of men reported high levels of unemployment and significant barriers, including experiences of discrimination, while trying to secure work in Australia. Even though men’s weekly income increased over time, a considerable number of participants had an income below the estimated poverty line for a single person in Australia. Most of those working were employed in low-skilled and low-paid occupations, which many believed were below their existing level of skills and qualifications. Although the level of recognition of overseas skills and qualifications increased over time, only one third were successful in getting these either partially or fully recognised (by the end of the SettleMEN study). These findings indicate the existence of a segmented labour market “where racially and culturally visible migrants are allocated the bottom jobs regardless of their human capital.” Many of those that completed tertiary degrees at Australian educational institutions were unable to find jobs. Men living in regional areas reported greater discrimination in the labour market.

Most of the students who finished [degrees] here in the University are working in the meat factory of which no one actually specialised in meat... so we are forced to do something which is not relevant to your career and we have been writing hundreds of applications and at the end of the day you end up not knowing what is going on. Yes, we will finish [studies] but our worry is that where are we going to get appropriate job equivalent to one's career [...] We are welcome to Australia, that was a good spirit, and they should also allow us to continue building our own life so that we can depend on ourselves and be self-reliant [...] There are so many job opportunities in Australia but we are asking ourselves, what is wrong with the system? We may just ask sometimes, is it race or what? And nobody gives the right answer, but if we are given an opportunity here in Australia we may build our life better rather than relying on Centrelink all the time [...] We are perceived to be a community which is not interested in looking for work or whatever but we don't have opportunity of getting jobs. Many companies are not interested in us and we have no way of expressing our grievances so we are confused... [43 years old, Sudanese-born, 4 years in Australia, regional area]

There are job opportunities but there is some discrimination. For example in some jobs you see all those who work there from the same nation and they don't accept those from other nations. The government has to interfere with companies to enforce selecting people from everywhere [57 years old, Iraqi-born, 2 years in Australia, urban area]

Family, friends and community networks were an important source of information about work and one of the most successful strategies men used to find employment. Dissatisfaction with employment services was commonly reported.

The city council, job networks and companies should work very closely to provide work for migrants and refugees. The very few programs to train refugees to get jobs are limited to a few industries only and we have no choice but to accept the only program they can provide. Job networks are so slow in finding jobs for us. I could get a job very easily in Malaysia before I came to Australia without knowing the language. After a few months of working I can do the job very easy. But in Australia, they want us to be perfect in the language before the job is offered [...] For me, not having a job caused me too much pain and anxiety. I cannot concentrate on learning anymore because I am passionate to work and want to earn for a living [31 years old, born in Burma, 2 years in Australia, urban area]

Currently there is a shortage of employment in this country so immigrants are competing for the available jobs. The other thing is discrimination with job employment agencies. When you are referred to them, they do not even assist you with computer service there. They leave everything entirely on you. How can someone with no computer skills able to do this? There needs to be some change with the way the job agencies handle immigrants [41 years old, Sudanese-born, 6 years in Australia, urban area]
Life in Australia

Mixed findings emerged from the SettleMEN participants experiences of their life in Australia. While the role of Centrelink (social security income), settlement services, own ethnic communities, and educational institutions were commonly acknowledged as important sources of support, issues such as the language barrier, difficulties finding work, lack of own transport, acculturation stress, financial difficulties, and difficulties finding housing represented significant challenges for men’s successful settlement. Most participants were living in private rental accommodation and paying high rental fees relative to their limited weekly income. Many participants felt discriminated when trying to access the rental housing market.

First they prefer people with pay slips…those working over the couples who are full time students like me and my wife. Also when one gets here you have no history, however, even if you have a history, when I had history I applied for 50 houses and didn’t get them. So there is no history, no job experience, pay slips one doesn’t have. So they prefer others who do have such things over refugees… even good references don’t help in renting a house… like doctors or Australian people in high status… they don’t look at it and they don’t consider referees. The main thing is the income and if one is working. They also don’t like people with Arabic names (…) not just I but others have felt that they [a real state agent] care so much about names and most of us didn’t get a house through them. So the name plays a part in that. I remember once we went to see a house and I said that the carpet was all rotten, and they said, ‘What? You’re coming from a third world country and you’re also asking for things?’ They do have discrimination, so I get very angry… [29 years old, Iraqi-born, 2 years in Australia, urban area]

Reported experiences of discrimination were widespread and not limited to the housing market, but also occurred on the street and in public places, in the neighbourhood, from the police, and in stores and restaurants. The longer participants were in Australia, the more likely they were to have experienced discrimination. By the final interview, two-thirds of participants reported having experienced discrimination because of their ethnicity, religion or colour since arriving in Australia. Men in regional areas were more likely to report racism and discrimination experiences overall. Previous studies have found high levels of racist attitudes in the Darling Downs region of South East Queensland (where Toowoomba and Gatton are located).55

Participants responded differently when feeling discriminated; while some tried to talk to other people about it, others felt powerless and accepted it as a fact of life.

I was near a train station on one Sunday evening when a group of people taunted me saying…’stupid Asian, come here, let’s have a fun time’. They were very aggressive towards me and I don’t know what to do but run. I was very angry but can’t do anything except run away from them… I have seen discrimination everywhere and I have to deal with it… [31 years old, born in Burma, 2 years in Australia, urban area]

When assessing the impact of discrimination upon their lives here in Australia, a number of participants made this judgment based on their previous traumatic experiences before arriving in Australia.

There is street discrimination you know, there is direct and indirect discrimination… for example indirect discrimination is common in employment opportunities, when one applies no result will be given. This is indirect discrimination… it means one has been undermined… Where I came from there was torture, and here there is only discrimination… I don’t mind very much, I take it easy. It means I don’t have much effect of discrimination here upon my life… [33 years old, Sudanese-born, 3 years in Australia, regional area]

Interaction with the police was a particular issue that came about during the qualitative interviews. Although
most participants reported a positive interaction, men in regional areas were more likely to feel targeted by police, especially while driving a car, and in some instances this interaction would result in conflict.

The police have the right to stop anyone, for example if you are driving… but the problem here is that other police take this right in opposite way, so as to get means to discriminate the blacks whom they suspect have no driving licence. For this, the police can just pullout any blacks driving on the street for a breath test. After that, they will start asking many irrelevant questions which can provoke a short tempered person… [28 years old, Sudanese-born, 5 years in Australia, regional area]

What I can see regarding police is that when ten people go on a road, police see a black man and pulls him by the road side yet leaving other white people. If police is for all the people, everybody should be treated the same with high dignity. The worst thing is when black people see police… they run away from them at high speed. It happened to me when I was pulled by the same police officer four times in three months. I asked, ‘are you the only police officer on the road looking for me?’ [42 years old, Sudanese-born, 5 years in Australia, urban area]

Previous experiences with police or military personnel in participants’ countries of origin or while living in refugee camps were likely to influence men’s perceptions of and interaction with police in Australia.

I hate police because of what has happened to us in my country. It is very hard to overcome this hatred… because of this I am not comfortable to see police here in Australia though I know that they will not hurt me [32 years old, born in Burma, 2 years in Australia, urban area]

In general, participants rated their subjective social status at educational institutions, workplace, in their own ethnic communities, and in the broader Australian community within the low to mid ranges. Subjective social status in the wider Australian community decreased significantly over time among men in regional areas when compared to those in urban areas. Issues such as low income, unemployment, and discrimination influenced not only men’s assessment of their social status but also their sense of control over their lives. Importantly, participants’ sense of control decreased significantly over time. This trend was greater among men in regional areas.
If I compare my life with the other Australians in fact we are the last. We are in the bottom class of Australia… we the refugees are the last people in Australia… [42 years old, Sudanese-born, 4 years in Australia, regional area]

Nevertheless, despite the many challenges encountered while living in Australia, most participants, in particular those living in regional areas, felt that their lives were getting better. Again, traumatic life experiences prior to their arrival in Australia were likely to influence participants' appraisal of their lives in Australia.

I think my life is getting better here. I have plenty of opportunities and options. It is a matter of just adapting to the Australian laws and I will go far... we need to understand our problems as we have grown in different conditions and different cultures... [41 years old, born in the Democratic Republic of Congo, 3 years in Australia, urban area]

Personally, I feel my life is getting better. Due to many reasons including feeling secure, my children are studying and following the right path. I work and Medicare is there, and overall it is feeling secure [57 years old, Iraqi-born, 2 years in Australia, urban area]

My life is getting better because I study for free, and the government helps me if I don't have money for rent, buy food, go to school. In fact my life is getting better compared to where I have been before in refugee camp in Uganda where if you don’t have money nobody helps you [22 years old, Sudanese-born, 3 years in Australia, regional area]

For a number of participants, however, repeated failed attempts to find good job opportunities, financial difficulties and experiences of discrimination made them feel that their lives were getting worse.

To start with, when I first arrived here, I had steps and I wanted to follow them to reach the high stages by having more experiences in the language and working and living in Australia. But after two years of living here, I started to realise that discrimination is even more clear, because when I first arrived I used to tell myself that all this will go by time but sadly it is actually increasing. And I used to promise myself that after those two years I’ll have more opportunities in getting a job... but this didn't happen and I'm still trying hard and I still get refused for most jobs [31 years old, Iraqi-born, 2 years in Australia, urban area]

My life is getting worse because I do not have a job. If I get sick today and don’t have money to buy medicaments, don’t you think I will die? (...) I would feel better if they [job agency] can find me a job because back in Africa I was working [34 years old, born in Burundi, 4 years in Australia, urban area]
CONCLUSIONS AND IMPLICATIONS FOR POLICY AND PRACTICE

Overall, the picture that emerges from the SettleMEN study is of a group of adult men from refugee backgrounds who arrived in Australia with high expectations about their life and opportunities in their new country. The majority of these men bring important resources that may help them to cope with the challenges of settlement: good levels of subjective health status, mental health and wellbeing; healthy levels of family functioning; and good levels of social support and social trust. Over time, however, their levels of wellbeing decrease as they experience a range of barriers to their social participation and inclusion within their host community. High levels of unemployment and significant barriers to secure work in Australia (even for those who have obtained tertiary/trade qualifications from Australian educational institutions), financial difficulties, difficulties accessing adequate housing, and experiences of racism and discrimination all impact negatively on men’s wellbeing, their status within their family and community, and on their ability to settle successfully.

Importantly, although men living in the Toowoomba–Gatton region of South East Queensland acknowledge some of the benefits of regional settlement, they face greater barriers to participation in the labour market, report lower job satisfaction, and are more likely to experience racism and discrimination overall.

Some of the SettleMEN findings coincide with those reported in the recently published study (2011) on settlement outcomes among humanitarian arrivals, commissioned by the Department of Immigration and Citizenship (DIAC). Although the DIAC-commissioned study was cross-sectional and included both men and women, it also found good levels of health status, high levels of involvement in further education, high unemployment, low pay and low job satisfaction among those working, and difficulties accessing housing. Similar to SettleMEN, the study also highlighted some of the advantages of regional settlement for humanitarian arrivals. However, contrary to the SettleMEN study, the DIAC-commissioned research did not specifically assess experiences of racism and discrimination among humanitarian arrivals.

One of the most important implications of the SettleMEN study for policy makers, employers, service providers, and host communities in general is the pressing need to tackle barriers to economic participation and to reduce discrimination. Economic participation in particular underpins the wellbeing and successful integration of men from refugee backgrounds with important positive flow on effects for their families and the whole Australian community. Discrimination in rural and regional areas is a particular challenge that requires specific targeted strategies and whole of local government approaches. From a policy and service provision perspective, there is a need to examine models of best practice implemented in other regional areas across Australia. This is of particular relevance given the emerging evidence that some regional areas have been able to overcome the challenges of diversity and provide better settlement outcomes for refugee communities.45 57
REFERENCES


