Adolescent and Young Refugee Perspectives on Psychosocial Well-being

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Jaya Earnest, Tambri Housen and Sue Gillieatt

Centre for International Health
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Jaya Earnest, Tambri Housen & Sue Gillieatt
Centre for International Health
Curtin University of Technology

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For further information, please contact:
Dr Jaya Earnest
J.Earnest@curtin.edu.au
The Centre for International Health
Curtin University of Technology
GPO Box U1987, Perth  6854
Western Australia
Telephone:  +61 8 9266 4151
Facsimile:  +61 8 9266 2608
EXECUTIVE SUMMARY

Today's migration patterns have shifted in ways that bring new challenges to the field of refugee mental health. Increasing numbers of new refugee arrivals in Australia have histories of loss, grief and trauma. Migration alone is a stressful experience but, when accompanied by traumatic pre-migration and trans-migration experiences, the stress induced commonly exceeds an individual's normal coping capacity.

It has been clearly demonstrated that refugee children and adolescents are vulnerable to the effects of pre-migration, most notably exposure to trauma. Refugee children are often torn between their homeland culture, the culture of the new country and the culture of refugee resettlement. This research study interwove migration, resettlement and identity formation into an understanding of psychosocial well-being of adolescent refugee children.

There is a paucity of research and literature specifically concerned with refugee adolescents and an even smaller proportion focusing on refugee adolescent school-based interventions and programmes. This is in spite of schools playing a central role in the initial adjustment and psychosocial well-being of refugee youth.

This project examined psychosocial well-being from the perspective of refugee adolescents in four government schools in Perth, Western Australia. Focus group discussions were conducted with a total of 45 students from Intensive English Centres within the government schools. All students had entered Australia within the last 2yrs under the refugee or special humanitarian visa categories. In addition, key informant interviews were conducted with IEC staff and support workers, appropriate government departments and community services.

The aims of the study were: first, to investigate perceptions and anxieties about escape, flight, migration, resettlement, acculturation and future goals; and second, to identify the multiple stressors that refugee adolescents and youth have to cope with during the process of acculturation. Here the researchers conversed about everyday experiences at school, struggles with language and skill acquisition and formation of emerging identities. Finally, recommendations for school-based strategies to promote psychosocial well-being among refugee adolescents were outlined and areas requiring further research were identified.
Interpretation of the data was underpinned by a conceptual framework of individual psychosocial well-being which has three core domains: human capacity (mental health and well-being); social ecology (relationships linking individuals within and between communities); and culture and values (the value and meaning given to behaviour and experience).

The research highlights the vulnerability of adolescent refugees and the gaps in current service provision and support. The multiple stressors this group faces as individuals attempt to acculturate and attain their high career aspirations can lead to decreased psychosocial well-being. The current support programmes in schools need to be reviewed in light of challenges the current cohort bring with them. There is an identified need for interventions that reach not only the adolescents but also the families of these children in order to maximise their opportunities for successful educational outcomes and improved psychosocial well-being.

While the focus of the study was on refugee adolescents’ perspectives, the research also explored the perspectives of those working closely with them in the school environment. Teachers, support workers and IEC principals provided insight into challenges they face in meeting the educational, social and psychological needs of their students.

The challenge for schools, the Department of Education and Training, the Department of Health and the Department for Community Development is to further develop their efforts to address the social, cultural, economic and educational realities experienced by newly-arrived refugee adolescents and their families.
# LIST OF ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>DET</td>
<td>Department of Education and Training</td>
</tr>
<tr>
<td>DIMIA</td>
<td>Department of Immigration and Multicultural and Indigenous Affairs</td>
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<tr>
<td>DCD</td>
<td>Department of Community Development</td>
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<tr>
<td>CALD</td>
<td>Culturally and Linguistically Diverse</td>
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<td>FGD</td>
<td>Focus Group Discussions</td>
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<tr>
<td>IEC</td>
<td>Intensive English Language Centre</td>
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<tr>
<td>IDP</td>
<td>Internally Displaced Person</td>
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<td>SHP</td>
<td>Special Humanitarian Program</td>
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<tr>
<td>ESL</td>
<td>English as a Second Language</td>
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CHAPTER 1
Introduction & Overview

1.0 Introduction to the Chapter

This Chapter provides the introduction and background to the research study, introduces the study design and describes the research process.

1.1 Background to the Study

1.1.1 United Nations High Commissioner for Refugees Basic Facts
The founding mandate of the Office of the United Nations High Commissioner for Refugees (UNHCR) defines refugees as persons who are outside their country and cannot return owing to a well-founded fear of persecution because of their race, religion, nationality, political opinion or membership of a particular social group. At the end of 2005, the number of people 'of concern' to the UNHCR stood at nearly 30 million. They included asylum seekers, refugees, internally displaced people, returned refugees, and stateless persons (UNHCR, 2006). In 2005, 30 500 refugees were resettled from their asylum countries with UNHCR's assistance. The main nationalities were refugees were from were Somalia, Liberia, Sudan, Afghanistan and Myanmar.

1.1.2 Australia’s Humanitarian Refugee Policy
In 1981, Australia’s Special Humanitarian Program (SHP) was established to assist individuals and families that suffered human rights abuses in their country of origin but did not meet the refugee category criteria. Australia had a comprehensive refugee system by the 1990s, allocating an average of 13 000 places annually under its humanitarian programme since 1998. Since 2003-04, a large majority of resettlement grants have been allocated to those of African origin (over 70%), with Middle-eastern and South-West Asian making up the remainder. These entrants are eligible under the Integrated Humanitarian Settlement Strategy (IHSS) to receive 6 months of intensive settlement support. Services include on arrival reception and assistance, English language instruction, education, accommodation support, settlement support, Centrelink benefits, emergency medical attention and short-term torture and trauma counselling. In the 2003-04 intake, 1200 people assisted under the Integrated Humanitarian Settlement Strategy were settled in the Perth Metropolitan area. (Department of Parliamentary Services, 2005).
1.1.3 Australia and Psychosocial Health

Australia has a strong record of meeting the health care needs of its young people. In recent years, there has been an increasing focus on the mental health of children and adolescents in Australia (Minas & Sawyer, 2002). The reform of Australian mental health services now emphasises mental health promotion, the development of preventive approaches, early detection of mental disorders and early treatment interventions (Raphael, 2000). The importance of mental health to normal development and well-being has been recognised increasingly in recent decades, together with a growing understanding of the profound effects of social and family change (Raphael, 2000). There is now clearer recognition that, in a country as culturally and linguistically diverse as Australia, specific attention must be paid to the cultural dimensions of mental disorder and mental health service design and the specific needs of Indigenous people, immigrants and refugees (Minas et al., 1996). Today’s migration patterns have shifted in ways that bring new challenges to the field of refugee mental health. The origin and experiences of new refugee arrivals are extremely diverse. As a result, multiple treatment approaches must be developed addressing the needs of diverse, multicultural and multi-lingual populations (US DOHHS, 2003).

1.2 Research Design

1.2.1 Aims

In summary the aims of the project were to:

1. Investigate and explore ways in which refugee adolescent youth perceive their experience about escape, flight, and resettlement;

2. Examine how adolescent refugee children perceive the process of migration, loss, resettlement and consequent acculturation;

3. Discuss refugee adolescent views of their personal, economic and social environment, the nature of everyday experiences at school, struggles with language acquisition, and formation of emerging identities;

4. Identify the multiple stressors that refugee adolescents and youth have to cope with during the process of acculturation.

1.2.2 The Approach

This study like all research had a conceptual structure underpinning a small number of research aims seeking information and revolving around themes (Merriam, 1998). The research methodology adopted a case study approach within a qualitative framework and made use of interpretive ethnographic
analysis (Denzin & Lincoln, 2000). This research study was thus designed to interweave history, migration, resettlement and identity formation into an understanding of psychosocial well-being of adolescent refugee children.

1.2.3 Outcomes
One of the key findings is the existence of a lack of community infrastructure to assist new refugee arrivals. The school serves as the central resource for young refugees. While IEC staff are highly committed to improving life for students while also providing a quality education they are faced with limited funding and resources to meet the complex needs of the current cohort of students.
- Although most students have high educational and career aspirations and hope for financial security, the reality is that currently they are not receiving the support needed to assist them in attaining their goals.
- Refugee adolescents are currently at risk of decreased psychosocial well-being the longer they stay in Australia.

Further research is required to explore cultural, family and support dimensions of resettlement and enculturation.

1.3 Significance of the Study

There is a paucity of research and literature specifically concerned with refugee adolescents. Although schools play a central role in the initial adjustment and psychosocial well-being of refugee youth, very little research focuses on school-based interventions and programmes for this group. This lack of research leaves important policy questions unanswered:

1. Do refugee youth have access to and do they utilise social, health and other services.
2. Is adequate psychosocial support provided to refugee adolescents and their families’?
3. How do schools currently address the psychosocial needs of refugee students and their families?
4. Do schools and their staff have resources to effectively manage the new challenges these students bring to the classroom?

During this project, we respond to some of these and other questions. The study has provided insight into the complexities of refugee psychosocial well-being and the authors hope that improved policies and interventions will assist and support young adolescent refugees in the enculturation process. The results will hopefully be used to re-align and enhance teacher education, school support programmes,
DET priorities and government funding in an effort to shape resettlement programmes which are more relevant and suited to the needs of adolescent refugee children and their families and take into account their country of origin.

1.4 The Research Process

The research was carried out by a team of 4 researchers from the Centre for International Health at Curtin University of Technology in Western Australia. The research process was structured into predominantly three different periods. The first period was the pre-interview period, during which ethical approval was sought, permission from appropriate government organisations was gained, an in-depth literature review was carried out, contact was made with the schools and IEC principals, and a research framework was drawn up.

The second phase consisted of the data collection period which extended over 6 weeks where the researchers travelled to four government schools across the Perth metropolitan area and carried out focus group discussions, key informant interviews and visited government departments and community services. This phase culminated with the initial data analysis where major themes were identified and clarified with participants. Data analysis and report writing took place during the third phase of the study at the Centre for International Health at Curtin University of Technology in Western Australia. The final report was presented to Healthway in January 2007.

1.5 Outline of the Report

This research report is presented in 7 chapters:
1. Chapter 1 provides an introduction and background to the research and study.
2. In Chapter 2, Theoretical underpinnings are presented
3. In Chapter 3, the framework used for the study, the methodology considerations and the data analysis are discussed.
4. In Chapter 4 data analysis of the Focus Group Discussions with students is presented.
5. Chapter 5 outlines the data analysis and discussion of key informant interviews.
6. Chapter 6 provides the limitations and concluding remarks.
7. The list of References and Appendices has been included at the end of the report
CHAPTER 2

A Review of Literature

2.0 Introduction to the Chapter

Chapter 2 provides a review of literature outlining the theoretical underpinnings of psychosocial well-being in young refugees. Recent research in the areas of refugee resettlement, pre-migration mental health, well-being in refugee adolescents, acculturation and intergenerational stress and psychosocial health promotion in schools will be summarised.

2.1. Theoretical Underpinnings

Erickson’s developmental theory has been applied to understanding vulnerability among refugee children (Eisenbruch, 1988) whose wartime experiences of mistrust, self doubt and inferiority exacerbates the psychological crises that occur during normal development. A critique of developmental theory is its cultural relativism and reliance upon western constructions of childhood and cross-cultural generalizability. As such, one school of thought is the view that assessments of war-affected youth measure loss and adversity and downplay refugee children and adolescent’s resilience and innate strengths (Papadopoulos 2001, Watters 2001).

The ecological systems theory (Belsky 1980, Brofenbrenner 1979) posits development occurring within interactions between individuals and their environment at four nested levels: the macro system (societal and cultural belief system), exosystem (community and neighbourhood factors), micro system (family factors) and the ontogenic level (individual factors). Refugee children’s native cultures also influence multiple aspects of their psychosocial well-being. Cultural explanations for symptoms and aetiology of illness may be very disparate from western views. Familiarity with a child’s culture and how cultures associate stressful events relevant to the refugee experience is important (Morris & Silove, 1992).
2.2 Pre-migration Mental Health and Psychosocial Well-being of Adolescent Refugee Children

While there is considerable growing literature about the mental health of both adult and adolescent refugee/asylum seekers, current research acknowledges the need for better understanding in regard to the mental health of child and adolescent refugee/asylum seekers (Dybdahl, 2001; Hicks, Lalonde & Pepler, 1993; Hyman, Vu & Beiser, 2000). Previous reviews of child refugee mental health include Keyes (2000), Rousseau (1995), Jensen & Shaw (1993) and the US Dept of Health and Human Services (2003). Sourander (1998) also found that, in addition to Post Traumatic Stress Disorders (PTSD), depression and anxiety were most common among refugee children. While the presence of anxiety is not surprising given its overlap with Post Traumatic Stress Disorders, Clarke et al. (1993), cited in Howard & Hodes, (2000) note that depression may commonly occur due to ongoing adversity following resettlement.

In their study of problems such as minor affective disorders, anxiety, conduct, eating and sleeping in three groups of refugee, immigrant and British children, Howard and Hodes (2000) noted that refugee children received more diagnoses of a psychosocial nature than the other two groups of participants. While similar social impairment was observed across comparative groups, refugee children were more isolated and disadvantaged. This tendency to manifest disorders of a psychosocial nature is consistent with the findings of Rousseau, Drapeau and Corin (1996). These differential findings across cultures reflect the need to systematically investigate cultural influences on child and adolescent mental health among the refugee and asylum-seeking populations (Thomas & Lau, 2004).

Many refugee children have encountered the violent death of a parent, injury/torture towards a family member(s), bombardments and shelling, detention, beatings and/or physical injury, disability inflicted by violence, sexual assault, disappearance of family members/friends, and witnessed murder/massacre, terrorist attack(s), parental fear and panic, famine, forcible eviction, separation and forced migration (Burnett & Peel, 2001; Davies & Webb, 2000).

In a study conducted in the United States, Berthold examined the relationship between exposure to violence and mental health outcomes among Khmer refugee adolescents (Berthold, 1999). Although one quarter of the refugees studied either partially or fully met the criteria for post traumatic stress disorder (PTSD), most were found to be functioning adequately. However, conversely, the study also
found that “the accumulation of risk factors such as early deprivation and chronic community violence (can) jeopardise the development of children and have lasting effects on their emotional well-being and ability to function.” (Berthold, 1999, p. 455).

Heptinstall et al. (2004) also found a significant correlation between the number of pre-migration traumas experienced by refugee families and their children’s PTSD scores. The study examined possible relationship between children’s post trauma and ongoing stress and symptoms of depression and PTSD. Other significant positive correlations included the number of family’s post migration stressors and children’s depression scores, rates of PTDS with pre-migration experience of the violent death of family members and the post migration experience of an insecure asylum status. Higher depression scores were positively associated with insecure asylum status and severe financial difficulties. Limitations of the study were that sample families were unrepresentative of the wider refugee population and that the study’s focus on adverse experiences was drawn from the perspectives of parents. This possibly suggests an under-recognition of more child-specific traumas and stresses associated with children’s psychological distress.

Fazel & Stein (2003) utilised teacher informants in their study about the mental health of children in the UK. This study assessed refugee children’s emotional and behavioural adjustment using a ‘strengths and difficulties’ questionnaire, whereby teachers completed questionnaires about their perceptions of students’ psychological adjustment. Whilst no account was taken of cultural differences, for example, Pakistani and Bangladeshi children were compared to Balkan, Kashmiri and Afghan children, they found that more than a quarter of refugee children had significant psychological disturbance which was three times the national average. Limitations of the study included the fact that parents were used as informants and diagnostic interviews were not undertaken. The study found that the refugee children studied had large unmet mental health needs that needed to be addressed in collaboration with schools, primary health care and community child mental health teams. Refugee children scored significantly higher than ethnic minority children on both total and emotional scores and higher than non-refugee children on total, emotional and hyperactivity scores. Lynch & Cuninghame (2000) found that 16-18 year old refugees are the most excluded groups of young people in the United Kingdom in terms of meeting the needs of children in a culturally acceptable and non-stigmatising way.

Not surprisingly, Rousseau et al’s (2001) study found that the co-occurrence of trauma and separation has a significant impact on emotional distress. Bereavement and post traumatic reaction were the two concepts which formed the basis for the examination of trauma in refugee families and the interaction
between separation and trauma has been seen most often in unaccompanied children and adolescents (Rousseau et al., 2001, p. 40).

In 2004, Begovac et al. studied self-image, war psychotrauma and refugee status in adolescents to assess how war psychotrauma, refugee status and other factors related to self-image. 322 participants from Bosnia Herzegovina and Croatia were included and the study found that up to 60% of participants experienced greater than four different war stressors and 13.7% experienced PTS reactions.

In an extensive literature review of child and adolescent refugee mental health, Lustig et al. (2004) found that child and adolescent refugees suffered from significant conflict-related exposures. They found that reactions to stress may be mediated by coping strategies, belief systems and social relationships. They concluded that more research is required on intervention strategies, especially on the efficacy of strategies and their cultural relevance.

Montgomery & Foldspang (2005) found that the asylum-granting decision process appeared to divide children with only superficial disparity into two groups: concern as to their previous exposure to violence and their present state of mental health. Their study reported five major types of violent refugee experience: living under conditions of war, residing in a refugee camp, witnessing events of violence, disappearance of a parent and death of a parent. Childhood mental health was plagued by three frequent symptoms; anxiety, disturbance of sleep and frequent and/or intense occurrence of the depressive symptom ‘sad or miserable appearance’.

In Denmark, Abdullah & Elkit (2001) found in a sample of newly-arrived refugee children from Kosovo that 40% had witnessed violence, 9% had been victims of violence themselves and 14% lived in a torture surviving family. 20% of the children suffered from emotional signs and symptoms (anxiety, depression, aggression and nervousness), 24% from psychosomatic disturbances and 3% from PTDS (Abdullah & Elkit, 2001, cited in Montgomery & Foldspang, 2005, p. 236). Montgomery and Foldspang found, in their analysis of a dataset of 311 asylum-seeking children from the Middle East, that refugee camp experience and living in a torture surviving family were the most important predictors of anxiety.

The above-mentioned studies have documented associations between exposure to violent events and mental health problems for adolescents. However, as far as is known, very little research into how adolescents who have experienced pre-migration trauma and resettled in Australia have experienced refugee resettlement.
2.3 Refugee Resettlement

The transition from one country to another for refugees often encompasses changes in every aspect of daily life from the language one speaks to the ways in which groups and individuals interact. It includes loss of work status, communicating in a new language and encountering discrimination. This process of cultural transition has been defined as acculturation and the stresses associated with it are known as acculturative stress (Berry, et al, 1987; Williams & Berry, 1991). Once refugees resettle in a host country, new belief systems, values and morals challenge their adjustment. During acculturation four broad phases take place: contact, conflict, crisis and eventual adaptation (Papadopoulos 2001, Williams & Berry 1991).

During the resettlement phase many refugee children and families re-establish their lives and encounter western mental health services for the first time (Rousseau, Drapeau, & Corin, 1995). The legacy of trauma is superimposed on the already complex acculturation and adjustment process. Numerous studies and literature suggests that multiple stressors impact refugee children in resettlement: migration and loss of the familiar, acculturation and ensuing difficulties between generations and trauma (Angel, Hjern & Ingleby (2001), Howard & Hodes 2000).

Refugee children are often torn between the culture of their homeland in their or their parents’ memories, the culture of the new country as well as the culture of refugee resettlement. Children and adolescents struggling with identity formation may experience psychological difficulties in the context of dual cultural membership (Phinney, 1990). It has been clearly demonstrated that refugee children and adolescents are vulnerable to the effects of pre-migration, most notably exposure to trauma. Certain risk and protective factors which can aggravate poor psychological health include family cohesion, parental psychological health, individual dispositional factors and environmental factors such as peer and community support.

2.4 Acculturative Stress and Inter-generational Stress

Acculturative stress (that is stress due to difficulties associated with adapting to a new culture) places refugee/asylum-seeking children and adolescents at greater psychological risk. For example, difficulties at school and in language acquisition have been shown to predict poor adaptation (Rousseau, 1995). There are two important factors in the adaptation to a new culture that either increase or decrease
susceptibility to poor mental health. First, conflict in the development of identity among adolescents has consistently been related to poor psychological adjustment (Rousseau, 1995). Second, even though the adapting to a new culture can make provision for good outcomes, it can also increase psychological vulnerability through the creation of inter-generational stress.

Intergenerational conflict arises when children and adolescents, particularly adolescents, adapt much faster than their parents. As such, the authority of parents is often compromised by virtue of their dependence on children for language and cultural access to the host society (Hyman, Vu & Beiser, 2000). Other factors which have a negative influence on the mental health in refugee children and adolescents include low socio-economic status (Howard & Hodes, 2000); long-term unemployment in parents, particularly fathers; and school problems such as language problems and discrimination (Hyman et al., 2000).

In the study about predictors of adjustments across life domains for Soviet Jewish refugee adolescents, Birman et al.’s (2002) findings support the ecological thesis that acculturation to different cultures is differentially related to adaptation across life domains. The study acknowledges a variety of acculturative styles, and in particular, recognizes that adolescents incorporate ways of coping with not only the cultural transition but also the psychological transition from child to adult. Berry (1994) cited in Birman (2002) developed a typology of acculturative styles: assimilation, traditionalism, marginality and biculturalism in order to compartmentalise the transition.

Birman et al. (2002) describe three aspects of the acculturation experience: language competence, behavioural participation and identification. These aspects are conducive to achievement at school or work because they allow individuals to communicate and function in these contexts. Identification, in particular ethnic identity, has been linked to outcomes such as self-concept and psychological adjustment. For adolescent refugees, the school environment is a key context for the development of language proficiency.

The review found that during acculturation, four broad phases may take eventuate: contact, conflict, crisis and eventually adaptation (Williams & Berry, 1991, cited in Lustig et al.. 2004, p.4). Berry also found that “loss of homeland, family, friends and material possessions and the challenges of a new language and culture characterise resettlement systems…Identification with one’s own cultural identity and pursuit of relationships with groups outside ones’ own categorise acculturation as integration, separation, assimilation or marginalisation.” (Berry, 1991, cited in Lustig et al.. 2004, p. 6).
2.5 Psychosocial Health Promotion in Schools

Psychosocial health promotion is the framework within which effective prevention and early intervention can be accomplished. It is relevant to the whole community as it is applicable regardless of current mental health status and across mental health intervention spectrums. Psychosocial health promotion is a process that is concerned with enabling people to maximise their well-being through influencing environmental determinants of mental health. The implementation of school psychosocial health promotion aims to give power, knowledge, skills and resources to individuals, families and the whole communities. In 2001, Layne et al. used focus group discussions, stress management, psycho education, relaxation skills and practical problem solving skills with high school Bosnian students and had significant reduction in PTSDs.

School psychosocial health promotion programs can provide a comprehensive range of services that both address individual needs and have impact in the school and classroom environment. Atkins, Frazier, Adil, & Talbot (2003) used a school psychosocial health promotion and intervention approach in Chicago with low-income African-American populations. School psychosocial health promotion takes place outside clinical settings and thus reduces power disparities. It thus has the potential to become an important modality for overcoming barriers to accessing services as well as providing ways of effectively intervening with refugee children. Schools also provide an avenue to engage parents and create a bridge between the worlds of family and school. Schools can provide an orientation and education about the larger culture and lives of children and can help reduce the acculturative gap between parents and children (Delgado-Galtan, 1991).

In one of the few examples of Australian research, Miller et al. (2005) reported on the perspectives of teachers working with Sudanese students, their views on the challenges these students have in adapting to high school and the levels of language and literacy support provided by Australian schools. According to Coelho, 1998, cited in Miller et al., 2005, teachers found that some of these students are withdrawn, aggressive, unable to concentrate, anxious and hyperactive and that identity formation is disrupted in the adolescent. Miller et al. also emphasized the frailty of an under-resourced education system as it endeavoured to respond to these students.

Segal & Mayadas (2005) in their study, recommend strategies such as discriminating between refugees’ realistic and unrealistic expectations, evaluation of families’ problem-solving abilities, exploration of family functioning within the context of heritage, identification of transferability of work skills, evaluation
of families learning capabilities and motivation for adaptation. A practice model is promoted whereby the cultural sensitivities of the refugee and the professional principles of the health care provider are incorporated. The study found that refugee children (can) challenge parental authority and deride parental perceptions and behaviour, undermining cultural norms, and that the greatest barrier to integration is low English proficiency (Segal & Mayadas, 2005, p. 577).

In an Australian study, Cooke et al. (2004) identified that approximately 60% of humanitarian arrivals to Australia are under 19 years of age (DIMIA, 2003). Given the paucity of research in the Australian context, there is a requirement that the experiences of refugee adolescent youth in Australia need to be better understood. Their process of acculturation in the Australian context needs to be examined and, in particular, the role which schools and other institutions can play in improving their psychosocial well-being and adjustment.
CHAPTER 3
Methodology

3.0 Introduction to the Chapter

This chapter outlines the research methodology used for the study. The chapter briefly describes the methods employed by the study and the research process, as well as the data analysis used in the study.

3.1 The Conceptual Framework used for the Study

The conceptual framework used for this study rested on the assumption that psychosocial well-being of an individual is defined with respect to three core domains. Fig 1 illustrates the interlocking of these domains: human capacity, social ecology and culture and values. These domains also map the human social and cultural capital available to people responding to the challenges of prevailing events and conditions. These domains have utility and validity as discrete ‘lenses’ through which the impact on resources at the community level is considered (Psychosocial Working Group, 2003).

![Figure 1: The interlocking circles of human capacity, social ecology and values](Psychosocial Working Group, 2003)

This framework encourages the exploration of the goals and priorities of existing programmes that deal with vulnerable populations. Understanding the interdependency between the domains enables barriers to be identified and promote planning and implementation of interventions/action plans.
Human Capacity constitutes the physical and mental health knowledge and skills of an individual. In these terms improving physical and mental health, education and training thus enhances human capacity. Transition and changes in the lives of refugee adolescents lead to a wide disruption in the social ecology of a community as it leads to changes in power relations between and in families, between ethnic groups and results in shifts in gender relations. These changes can also disrupt the culture and values of a community, challenge human rights, values and morals (Psychosocial Working Group, 2003). All refugee adolescents have experienced loss of physical and economic resources and the degradation of the natural environment in the communities often leading to an impact on their psychosocial well-being.

Guided by Psychosocial framework, the broad discussion topics and themes explored were: the socio-cultural contexts of the lives of the adolescents; the sense of belonging, rootedness, security and community cohesion experienced as they resettle in Australia; cultural and social identities and how these link to perceptions and anxieties about the future; and the mediating influence of the community and school. In interviews, specific issues relating to ties with the ‘homeland’ from which participants had to flee, perceptions of their future security in their country of resettlement and changing access to resources were also explored.

3.2 Research Design and Procedures

3.2.1 The study Approach
The study also involved an interpretative case study approach which included a combination of multiple research methods and the constructive and critical theory perspective. The critical theory perspective implies that reality is shaped over time by social, political, cultural, ethnic and gender factors (Guba & Lincoln, 1994). This study also drew on a constructive perspective which assumes that there are multiple realities in which the researchers and their subjects create their own understanding (von Glasersfeld, 1993). According to Gergen (1995, p. 25), meaning is achieved through dialogue and communication between two or more persons, and is concerned with "negotiation, co-operation, conflict, rhetoric, rituals, roles and social scenarios...."

3.2.2 Methods of Data Collection
A combination of the following data collection processes were used throughout the study: in-depth interviews, focus group discussions (FGDs), school visits, and accumulated documentary data. Every endeavour was made to ensure all data collection were sensitive to the context of the lives of the young
refugee adolescents. Permission was sought from the Project Officer (Intensive English Program for Refugee and Migrant Children) of the Department of Education and Training in Western Australia, the Principals of the Intensive English Centres (IECs) in the 4 government schools and the Culturally and Linguistically Diverse (CALD) Senior Policy Officer for the Department for Community Development in Western Australia. The data was obtained from 46 secondary school students enrolled across four government secondary schools in Perth, Western Australia. In addition a systematic review of documents, articles and literature pertaining to well-being of refugee children in Australia was carried out.

3.3 Study Participants

3.3.1 Refugee Adolescents

A purposive sample of refugee adolescents attending Intensive English Centres (IECs) in four government schools in Perth metropolitan area was selected. The students were selected by the respective IEC principals. Students who had been accepted to Australia as refugees and entered the country under a special humanitarian visa\(^1\) or under the Refugee Category\(^2\) were chosen. Other criteria were as follows:

- Students had adequate oral English proficiency to participate in discussion without the need for interpreters. The research team felt that the presence of interpreters would have had a negative effect on the dynamic of the focus group discussions.
- The sample attempted to reflect the different age groups and nationalities represented in the IECs. The aim was for equal distribution of male and female students.

A total of six FGDs took place in April 2006. Each group met for approximately 45 minutes and comprised an average of six participants. The largest group had 8 participants. The FGDs were held at the respective schools during school hours. With students’ permission, the FGDs were tape recorded for use in data collation and analysis.

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1 Special Humanitarian Program (SHP) category: Entrants are people outside their home country who have suffered substantial discrimination amounting to gross violation of their human rights and who have been proposed by an Australian citizen, resident or community group in Australia. (DIMIA, 2005)

2 Refugee Category: includes people outside their country of nationality, who are subject to persecution in their home country and have been identified in conjunction with the United Nations High Commissioner for Refugees as in need of resettlement (DIMIA, 2005)
3.3.2 Key Informants

Key informants were selected on the basis of the following involvement with adolescent refugees: that they had direct daily contact with students during school hours, that they met students out in the community or were heads of departments influenced policy development directly affecting the target population.

A total of nine interviews with key informants in direct contact with adolescent youth were conducted in June/July 2006. These key informants consisted of the four IEC principals or deputy principals of the government schools involved in the study, an IEC psychologist, 2 student support workers and 2 IEC teachers. These interviews addressed the research themes and provided a forum whereby those working closely with the students could identify key issues.

The majority of these interviews were conducted separately. In one school, this was not feasible and a group interview was held with the IEC deputy principal, an IEC teacher and a student support worker. Informants were very enthusiastic to communicate. Verbal consent was obtained for recording prior to each interview. The interviews were between 30-60 minutes in length and held at a time that was convenient to those involved.

Key informants also included a service area consultant with the Department of Education, Employment and Training (DEET), a senior policy officer for culturally and linguistically diverse (CALD) youth in the Department of Community Development (DCD), a representative from ASeTTS (Association for Services to Torture and Trauma Survivors) and a community leader from one of the African communities in Western Australia.

3.4 Development of FGD and Key Informant Interview Schedules

Prior to the FGDs and interviews, the research team identified the important determinants on the psychosocial well-being of refugee adolescents during resettlement from a review of the literature and used these as broad areas of interest from which to develop questions to guide the FGDs. Draft questions were sent to each of the IEC principals for review of language usage and to help identify any questions which may have potentially caused distress. Questions were modified according to recommendations and the schedule was finalised (see Appendix C).
A second interview questionnaire was developed and used as a guide during the semi-structured key informant interviews. The aim was to gain insight into the perceptions and experience of teachers and other staff involved in working closely with the target group. Areas of interest included informants’ experiences with refugee students and their families, challenges faced in their role and recommendations on where systems could be strengthened to provide greater support for both staff and students (see Appendix D).

### 3.5 Data Analysis

Initial data analysis commenced after the first round of focus group interviews. FGDs and interview transcripts were coded to ensure themes specific to the participants’ experiences were appropriately acknowledged and analysed. The data was then analysed using standard qualitative thematic interpretation.

Focus group questions were categorised using the following themes: life in transition, flight and resettlement, first impressions of Australia, family adjustment and challenges, friendships formed, school/education/language acquisition, identity formation and enculturation, support structures and thoughts about the future. Responses were conceptualized within the larger framework of viewing psychosocial well-being within three domains; human capacity (mental health and well-being); social ecology (relationships linking individuals within and between communities); and culture and values (the value and meaning given to behaviour and experience).

The strands and themes generated from the FGDs and interviews were analysed using four common research commitments; student interpretations and perceptions were examined, researcher knowledge was brought to bear upon those interpretations, relevant documentary and literature data were studied, and the degree to which the findings had implications to the promotion of psychosocial well-being were investigated.

### 3.6 Rigour in the Study

Steps were taken throughout the data collection and analysis to establish trustworthiness of the method and credibility with respect to the findings. Multiple methods provided multiple perspectives on the subject enabling the development of a more holistic and contextual portrayal of real-life situations. The
multiple research methods also served to ‘triangulate’ the data and strengthen the analysis (Denzin & Lincoln, 2000).

Verification strategies such as systematic checking of data to eliminate errors and ongoing monitoring and interpretation of data to modify the direction of the research were used to achieve reliability and validity. Constant analysis of incoming data guided future selection of the sample and strategies were questioned to ensure confirmation of newly formed and developing conjectures.

An audit trail, as discussed by Guba & Lincoln (1994), was also conducted, ensuring methods and data were documented so that the analysis of the data could be confirmed and replicated by other researchers. It is widely accepted that multiple methods in any study are useful in achieving enhanced understanding (Keeves & Adams, 1994).

**3.7 Ethical Considerations of the Project**

This research was carried out in accordance with the Australian National Health and Medical Research Council guidelines. The Human Research Ethics Committee of the Office of Research and Development of Curtin University of Technology approved the project.

All interview participants especially the refugee adolescents and their parents read a one-page information sheet outlining the objectives of the study and the requirements associated with participation. All participants were made aware that participation was voluntary and that consent may be withdrawn at any time. This study required the participation of adolescents and youth between the ages of 12-21 years of age and hence had a small group of minors. Appropriate permission was sought from parents with letters of consent being sent out from the school to the children’s homes. The purpose of the project was outlined to the students a second time prior to initiation of the FGDs.

Every care was taken in the selection of participants. Any student who was deemed to be potentially at any risk of experiencing discomfort or distress was excluded. Selection involved consultation with the Principal of the Intensive English Centres (IECs) in the 4 Government schools.

A protocol for responding to any participant experiencing discomfort or distress was developed in consultation with the Principals of the IECs. Each of the Principals at the IECs was also the Case Manager for the refugee students. They also have an awareness of those students using the services of
ASeTTS (Association for Services to Torture and Trauma Survivors) in Western Australia and were familiar with the case history of students who participated in the study. All data collection occurred during school time to ensure the presence of the appropriate school staff.
CHAPTER 4
The Adolescent Experience of Resettlement in Perth, Australia

4.0 Introduction to the Chapter

This chapter presents the students’ demographic background and analysis of the focus group discussions and key informant interviews. The discussion of identified themes is intertwined with the analysis and is not considered in a separate section.

4.1 Demographic Background

The six focus groups were comprised of 45 IEC students who came from Southern Sudan (13), Liberia (8), Afghanistan (7), Sierra Leone (5), Myanmar (4), Democratic Republic of the Congo (3), Ethiopia (2), Iran (1), Rwanda (1), and Kenya (1). In all, 10 countries were represented as can be seen in Figure 2. The age range was 12-21 years with the median age being 15 years. Most of the participants had experienced displacement due to civil conflict or other forms of political instability.

![Figure 2: Participants’ Country of Origin](image-url)
4.1.1 Life in Transition

To begin to understand the context for many of these young refugees, the FGDs all commenced with questions related to their country of origin and countries resided in during transition (see Appendix C).

During the transition period of flight from their country of origin to resettlement in Australia, participants lived in one or more countries (excluding their country of origin). Between them they had lived in 14 different countries prior to arriving in Australia. The length of time spent in transition varied with the range extending from 5 months to 16 years. The median time spent in transition was 5 years. Figure 3 summarizes the main countries from where refugees have sought UNHCR-assisted resettlement in the last five years.

![Figure 3: UNHCR-assisted resettlement by country of departure 2001-2005](image)

UNHCR (2006) reported that the largest number of refugees assisted by UNHCR departed from Kenya, Thailand, Guinea, Ghana and Egypt. Most students reported living in these countries whilst in transition and for extended periods prior to arrival in Australia.

Most students were bilingual – adopting the language of the country in which they sought refuge during the transition period. Some students spoke 3 or 4 languages prior to admission into an IEC programme.
4.1.2 Refugee Resettlement

The length of time students had been in Australia ranged from one month to 24 months with the median time being 9 months. The majority of students arrived with one or both parents, with/without siblings and members of extended family as can be seen in Table 1. Two older students arrived in Australia alone. Students reported two main channels of assistance in coming to Australia. Sponsorship was provided by family/friends already living in Australia, or a successful application through the UNHCR.

<table>
<thead>
<tr>
<th>Arrived with</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alone</td>
<td>2</td>
</tr>
<tr>
<td>Mother +/- siblings</td>
<td>10</td>
</tr>
<tr>
<td>Father, no Mother</td>
<td>4</td>
</tr>
<tr>
<td>Mother and Father +/- siblings</td>
<td>14</td>
</tr>
<tr>
<td>Siblings only</td>
<td>6</td>
</tr>
<tr>
<td>Members of extended family</td>
<td>6</td>
</tr>
<tr>
<td>Non-specific ‘family’</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 1: Arrival into Australia

4.2 The Experience of Resettlement

The experience of resettlement is described by utilising the main themes of the conceptual framework outlined in Chapter 3. The psychosocial well-being of an individual is defined with respect to the three core domains of social ecology, human capacity and culture and values. For example, positive psychosocial well-being outcomes will support effective social networks and promote more effective utilization of skills and capacities with consideration and attention given to personal and cultural values. By looking at an individual or community thru these ‘lenses’, it is possible to unpack the nature and degree of impact which life events and circumstance have on individuals. The conceptual model suggests a way of evaluating the impact of past and present events by looking directly at the effect of the resource domains (Strang & Ager, 2001).

4.2.1 Social Ecology

Social ecology encompasses social connection and support, relations within family structures, peer groups, cultural and religious institutions and school. There is strong evidence linking effective social engagement to mental health outcomes (Ager et al. 2002). The disruption of family and social networks
can deplete the resources which are key to managing the emotional and practical challenges associated with relocation.

4.2.1.1 Family

The terms parents/guardians are joined purposively and used interchangeably since the compositions of African refugee families in particular are often complex and indefinable. Many of the African refugees participating in the study entered Australia without parents and were accompanied by siblings, extended family members or non-specified ‘others’. One young refugee from the Congo was living with his siblings and stated he did not know if his parents were dead or alive.

For those with parents, most felt that their parents had a difficult time adjusting to Australia and experienced language barriers, an inability to find work and a strong sense of isolation. Parents/guardians often depended on their adolescent children. Female children and sometimes male children provide emotional and practical support to parent and/or siblings. One adolescent was caring for an older brother and younger sister with no parent in Australia. Many of the refugee children mentioned that they had little time for study and had often had to assist at home doing chores or assisting their mothers. Some spent time accompanying parents to the doctors, Centrelink or the bank.

*It is hard for my mum…. Hard for her to shop, no Sudanese are living close to us. Mum went to TAFE but too difficult for her… wants to learn to drive but license too expensive…. I sometimes miss school because my mum needs help* (Sudanese student)

*When I arrived I had to look after my mum and little sister so I could not start school for 2 months* (Liberian student)

Intergenerational stress has been noted to create family conflict as children attempt to find a balance between the new culture in school and their family’s traditional culture in the home (Ascher, 1989). Portes & Rumbaut (2001) illustrated how parent-child dynamics interact with other factors such as racial discrimination, urban subcultures and labour market opportunities influencing the child’s social, academic and economic outcomes.

The literature suggests that involving parents in school can help decrease inter-generational stress, facilitate engaging parents and allows parents to participate in the lives of their children (Rousseau, 1995, Cassity & Gow, 2005a, Blair & Bourne, 1998). It is also suggested that involving ethnic
communities in school activities eases the transition and facilitates the psychosocial well-being of refugee students (Rousseau, 1995).

*Parents don’t understand the Australian schooling process…. Gap of understanding between parents and child…creates tension in family* (trauma counsellor)

Australian-based studies have also emphasised the importance of considering youth with refugee backgrounds in terms of their communities rather than as individuals (Cassity & Gow, 2005b; Gunn, 2005). Culturally complex social relationships and obligations should be both acknowledged and supported in the school setting.

### 4.2.1.2 Friends

Interview quotes revealed a sense of loneliness and loss of transient-country friendships as important for refugee adolescents.

*My first month was very difficult. I missed my friends, it was lonely. Very different to ……. I had no friends and stayed in my room* (Congolese student)

*It was really hard. I left my friends and feel bad leaving my country. I didn’t know anyone. I still feel bad after 6 months, I miss my friends. Other friends went to the USA* (Sudanese student)

In spite of these feelings of loss, all students reported having made friends within the school environment. Most reported having also made friends in the outside community and those who had not made friends outside of school, tended to be female students of Afghan origin. Having friends has been shown to ease the settlement period and facilitate a positive acculturation process (Brough et al. 2003).

### 4.2.1.3 Cultural Support Networks

Resettlement programmes which have located refugee cohorts near to existing groups of similar ethnicity, religion or nationality appear to be more successful than those situations in which refugees have been placed in communities with no similar cultural group. A study in Montreal reported less mental illness in refugee populations which had experienced past trauma when they had contact with their own ethnic community in their country of resettlement. Those who were isolated and away from such contact were found to be more likely to exhibit signs of mental illness (Rousseau et al, 2001). Interview quotes reflect a sense of isolation and sadness among family members.
My mother is sad, she has no language and no friends... the culture is different, she misses her parents and says she wants to go back to Afghanistan (Student from Afghanistan)

In an effort to maximise psychosocial well-being in newly arrived refugee populations in Australia, DIMIA needs to consider culturally sensitive placement of new arrivals in the integrated humanitarian settlement strategy where possible.

4.2.1.4 School and Community Activities

When not at school, students reported involvement in a variety of activities. Playing soccer was a common activity among male participants and household chores such as cooking and cleaning were common among female participants. In addition to these other activities, going to church, visiting friends, dancing, attending parties and going to the library were also nominated.

I sit at home, help my mum do things at home and read books, sometimes I go to the park with my brothers... so that is how I spend my time (female student from Afghanistan)

Kotze (n.d.) indicates that social activities, such as dancing, sport and other activities which encourage socialising, facilitate cultural adaptation and are recognised as positive coping strategies in culturally and linguistically diverse young people.

Box 1 provides a summary of the key social ecological influences in the students’ experience of the resettlement process.

Box 1: Social Ecology Influences

<table>
<thead>
<tr>
<th>Influences on Psychosocial well-being</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summary: Social ecology</strong></td>
</tr>
<tr>
<td>1. Disruption of family structures.</td>
</tr>
<tr>
<td>2. Students role in the family altered.</td>
</tr>
<tr>
<td>3. Loss of friendship and peer support.</td>
</tr>
<tr>
<td>4. Isolation from culturally similar communities.</td>
</tr>
<tr>
<td>5. Lack of involvement in community outside of school.</td>
</tr>
</tbody>
</table>


4.2.2 Human Capacity

Human capacity is constituted by the levels of physical and mental health and knowledge and skills of an individual. By increasing knowledge through education, training and skill development and improving physical and mental health, an individual’s capacity to cope with life events increases as so does psychosocial well-being (Strang & Ager, 2001). Reduced sense of control over life events and circumstances has a detrimental effect on human capacity, as does poor physical or mental health and lack of employment opportunities.

4.2.2.1 Mental Health

It is clear that the cognitive, emotional and psychological effects of trauma manifest in multiple ways affecting an individual’s perception of control over life events. Community workers report that underlying trauma impacts on the ability of young refugees and their families to cope with the many challenges and changes they face during resettlement and acculturation.

A lot of anger management issues, frustration…a lot of pent-up guilt, they feel guilty because their mother or brother is still in the refugee camp..they were chosen to be saved and they have to live with that...Also there is the added concern of where missing family members are...they don't know where they are or if they are still alive.. they are trying to get on with life here but they also have responsibilities back home. (trauma counsellor)

4.2.2.2 Language Acquisition

Students all reported finding understanding language and communicating difficult. It was not uncommonly stated that Australian people talk very fast. Many of the students indicated that the longer they are here, they find it increasingly easier to communicate and feel more confident to speak to others.

The language is difficult.. at first I don't want to speak… I learnt English in refugee camp but here it is different. I don’t answer questions, I just look at them, sometimes I walk away….. now I will speak but I often need questions repeated (Congolese student)

DIMIA recognises that English language proficiency is the most significant indicator for successful resettlement (DIMIA, 2003). A disturbing theme in the interviews was that, in many cases, family members had started English language classes at TAFE but discontinued study. Further research is needed to examine why some refugee adults are not completing the TAFE English language courses
available to them. This could have an influence on the ability of family members to resettle, thereby affecting the capacity for psychosocial well-being.

4.2.2.3 Knowledge and Skill Acquisition

Work
A common concern about finding employment was voiced. Some students suggested having a driver’s licence would enable them to find work more easily although they sometimes found this process too expensive and cumbersome. Others mentioned that a lack of experience prevented them from finding work. One young Afghan girl had applied for many positions but believed she was being refused work due to her traditional Islamic head covering.

Employment was regarded as important by students because it enabled them
- to send money to family and relatives back ‘home’.
- to pay for further education.
- to support families here.

Education
Many refugees reported disrupted schooling in their countries of origin and transition. For example: Afghan refugees in Iran were not allowed to complete high school and Liberian refugees in Ghana found it difficult to complete their education. In terms of their experience of the Australian education system, all expressed praise with reference to the libraries, the internet access, the material resources and the IT facilities. Almost all expressed a deep desire to continue their studies but saw a need for more career counselling. Some students indicated disappointment that their earlier education experiences had not prepared them as well for the Australian system as they had hoped. The realisation that achieving their career goals might not be as simple as first thought was discouraging. Career counsellors also reinforced these feelings.

I started at IEC 1 and was very disappointed. I had a year 10 certificate from completing studies in a town in Thailand. I had hoped to go on to University…I am very disappointed  (Burmese student)

I went to boarding school in Ghana….and am now only in IEC 12… it takes a long time to get to university…. I have to run the house and look after my sister and brother…… counselling here says it will be too hard, people discourage you about doing your TEE…..there should be more encouragement. I am too busy being a mum….it affects my study…(Sierra Leonean student)
Other concerns included the cost of education, family commitments and lack of support.

**Career Aspirations**

All students expressed career aspirations with hoped-for professional careers in journalism, medicine, computing, music, the police force, fashion design, the military, acting, law, engineering, aeroplane pilot work and a teaching. Others sought trades work as electricians, hairdressers, secretaries or jobs in sports-related careers and business.

*I wish for a bright future...I would like to become an engineer...it is up to me to make future bright* (student from Sierra Leone)

High career aspirations are a common finding amongst this target group (Cassity and Gow, 2005). However, despite such goals, Australian research has revealed that 63% of students experience more than 2 years of interrupted schooling and nearly 90% of students, with no prior schooling, failed to complete year 12 (Warrick, 2000 cited in Davies et al. 2001).

In a study conducted with young refugee people in the Greater Dandenong area of Victoria; Olliff and Couch (2005) demonstrated that new arrivals were struggling in mainstream schooling. High rates of dropout, poor achievement outcomes and low-skilled labour employment were found in spite of the expression of high goals for educational achievement. Gunn (2005) found that refugee students underestimated the educational skills necessary for professional participation. The author also found that students were ill-prepared for the demand of bridging and other courses. Olliff and Couch (2005) therefore recommend a new framework for integrating young refugees into an appropriate education, training and employment pathway.

Box 2 provides a summary of the key human capacity influences in the students’ experience of the resettlement process.
Box 2: Human Capacity Influences

<table>
<thead>
<tr>
<th>Influences on Psychosocial well-being</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summary: Human Capacity</strong></td>
</tr>
<tr>
<td>1. Mental health.</td>
</tr>
<tr>
<td>2. Poor English language acquisition among parents/guardians.</td>
</tr>
<tr>
<td>3. Poor understanding of Australian education and employment pathways.</td>
</tr>
<tr>
<td>4. Lack of employment opportunities.</td>
</tr>
</tbody>
</table>

4.2.3 Culture and Values

An individual’s culture and values define how events are interpreted, coping styles employed and the appropriateness of an intervention. Ogbu (1995), states that refugees are at risk of developing oppositional cultural identities due to the nature of their resettlement.

4.2.3.1 Cultural Conflict at Home

The process of altered family structures, migration and resettlement can disrupt the traditional ‘culture and values’ of a community. Interviews with key informants highlighted cultural conflict occurring in the home with young men and their female parent/guardians.

*Our culture is that teenage boys do not take orders or instructions from women…it is a problem as most of these teenagers are here only with their mother...their fathers were killed in the war* (Sudanese community leader)

Key informants from cultural community groups and government departments report a breakdown in cultural respect as African men struggle to redefine their role and identity within the Australian context. The men blame government payments such as youth allowance for the breakdown of cultural family values. Where tight family units were once upheld, young people are now free to make their own decisions with access to finances to support their actions.
Young people learn ‘you are not allowed to touch me’ and parents are not empowered in this new culture to challenge their children...they are not sure what to do (DCD representative)

Some of them have skipped the whole developmental stage of being a child and having fun…now they are here in Australia…they are expected to look for work and look after themselves…all the adult type things yet they have missed out on their childhood and they want to party and have a good time (Trauma counsellor)

Young people are moving out of their family homes and adopting the behaviour of Australian youth, which is sometimes in conflict with traditional cultural behaviours.

Some mothers say ‘I wish I did not bring you here’…some go to the extent of saying ‘I wish I did not come to this country’, because they have lost their children…they have no control any longer over their children, there is no respect (Sudanese community leader)

4.2.3.2 Cultural Conflict in School
The culture of young males not taking instructions from females has also caused conflict in the school environment where the majority of teachers are female. Schools have called on community leaders to help mediate this problem and efforts have been met with some success. Young refugees also face conflict when the behaviours they are taught at home are culturally unacceptable, but are yet encouraged by teachers in Australian schools. This misunderstanding has led to teachers to view student refusals as motivated by tenacious rebellious and behaviour rather than cultural inappropriateness.

Some sports are not appropriate for girls…the girls will not do it and the teacher will say this child is being difficult…all of this goes on the students report….crossing legs is also inappropriate for Sudanese girls, it is disrespectful (Sudanese community leader)

4.2.3.3 Cultural Identity
As young refugees struggle to adapt to life in a new country and culture, they search to establish an identity that allows them to bridge the gap between their traditional culture and the new culture.

Government and community key informants stated that young African male refugees are adopting black American clothing, music, speech and body language in an effort to carve out an identity within the
Australian community. Youth of Middle Eastern origin and young refugee females from Muslim cultural backgrounds tend to retain their traditional cultural norms and this is largely attributed to their strong religious, community and family ties enabling them to adjust to a new environment without letting go of traditional culture and values.

Box 3 provides a summary of the key cultural capacity influences in the students’ experience of the resettlement process.

**Box 3: Cultural Capacity Influences**

<table>
<thead>
<tr>
<th>Influences on Psychosocial Well-being</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summary: Cultural Capacity</strong></td>
</tr>
<tr>
<td>1. Cultural conflict in the home.</td>
</tr>
<tr>
<td>2. Cultural conflict at school.</td>
</tr>
<tr>
<td>3. Establishing a new cultural identity.</td>
</tr>
</tbody>
</table>
CHAPTER 5
The Perspectives of the Staff in Intensive English Language Centres

5.0 Introduction to the Chapter

This chapter constitutes the analysis of IEC key informant interviews. As with the previous chapter, the discussion is included here and will not be considered in a separate section.

5.1 IEC Staff Profile

Briefly, the role of the principals in Intensive English Language Centres (IECs) encompasses:

- Administration
- Pastoral care
- Advocacy
- Resource procurement
- Professional development
- Teaching
- Liaising with government departments

All of the four IEC principals and deputy principals had extensive experience in both mainstream education and in secondary school IECs. The IEC teacher also had extensive experience in mainstream and ESL teaching, concentrating on limited schooling students in her current employ. The two student support workers both had a background working in juvenile justice and played a key liaison role between families, students, community support networks and schools. The IEC psychologist came from a trauma counselling background.

During the interviews with key informants, a picture of dedication in the face of challenge and a commitment to meet the needs of refugee students emerged strongly among IEC staff. The main themes identified in the interviews were the challenges experienced by staff. These were related to the numbers of refugee youth coming with limited schooling backgrounds and the demands placed on staff to meet their educational, social, psychological needs. Further, managing the problems associated with their, not uncommonly, poor transition from IEC to mainstream were also noted.
5.2  The Perspectives of the IEC Staff

5.2.1 Perceptions of IEC staff
Although the primary aim of the study was to identify the perceptions of adolescent refugees about psychosocial well-being, the important role that IEC staff play in the initial phase of adjustment was considered. We sought to glean information on the roles of IEC staff, the challenges they face and the practical recommendations they believe will improve educational, psychological and social outcomes for these youth during the acculturation and settlement process. Based on IEC responses, it was our aim to understand the challenges experienced by IEC staff in assisting newly-arrived refugee adolescents.

5.2.2 Impact of Trauma, Loss and Grief
It is widely recognised that the trauma, loss and grief experienced by refugee youth can lead to psychiatric morbidity, dysfunctional behaviour and social incompetence (Ahean & Athey, 1991). This can be exacerbated further with the impact of displacement when refugee youth find themselves in refugee camps where the environment is often unstable, stressful, access to food and water is insufficient and the primary focus is on survival on a daily basis. Some young refugees live this way for months or years before being granted a visa for resettlement.

IEC staff identified poor social skills, problematic behaviour and lack of coping mechanisms as common problems among the current cohort of refugee students. All IEC staff appreciated the challenging backgrounds of their students and recognised that behavioural difficulties are a response to the multiple stressors on their lives.

Most of them suffer from PTSD but it is different for all of them.... Some of them have been witnesses to lots of traumatic events, they have had lots of loss in their life (IEC psychologist)

Another problem all the teachers are finding is in the students’ behaviour. Not only academically are they functioning at a very low level but, behaviourally and psychologically, the kids have very few strategies for actually resolving conflict (IEC Deputy Principal)

Teachers identified that their primary teaching role needed to expand to encompass a greater role of support, mediation, social coaching, conflict management skills and behaviour management.
Because they have never been to school, they don’t have the social skills that we would expect teenagers to have when it comes. Getting the kids to sit down for 10-15 minutes at a time is a problem…I reckon that in the first 3-4 months when students arrive in an IEC, we are just trying to teach social skills (IEC Deputy Principal)

IEC staff identified that anger was a common emotion expressed by students and that often very little provocation was required to reach heightened anger levels. This was said to be more common among African students whereas withdrawal was commonly seen in youth of Middle Eastern and Asian cultural backgrounds. Poor concentration, memory loss and, in some situations, very poor cognitive ability were considered problems among the current cohort of refugee adolescents. Research studies examining the psychological impact of living in conflict areas have found that PTSD reactions are commonly experienced among those coming from countries experiencing war (Montgomery, 1996; Ahearn & Athey, 1991). All of the above-mentioned affective, cognitive and behavioural issues faced by teachers have been identified by Cole (1996) as common indicators for PTSD.

It was surprising to note that, given the adolescents’ history of trauma, only one school had access to an IEC psychologist 3 days per week. It was made clear this was a result of much lobbying from the IEC Principal. Other schools had an IEC psychologist available from a half day to full day per week. In one school, a waiting list in excess of 1 month was in place for a consultation with the IEC psychologist.

5.2.3 Academic Expectations of Parents and Students

A common theme identified in the interviews was the unrealistic educational and career expectations of both students and their parents.

I had a father who had widely unrealistic ideas about what his child could do…. He was from the camps. I had his son here, he didn’t want his daughter to come here……he said I want him to be a doctor, I was a nearly a doctor – hadn’t finished his studies…I want my son to be a doctor…he kept going on like this. (IEC Principal)

Issues of poor concentration, poor organisational skills, lack of ability to study independently, poor capacity to follow instructions all featured strongly when informants were asked about the refugee students, the majority of whom had come from limited educational backgrounds (less than 3 years of primary level education). It was felt that these limitations severely compromised their capacity to attain high career goals.
It is a really big issue with the limited schooling kids. Cognitively, they are just not aware of how much more they need to learn. Because they can talk to us on a daily basis, they think they are well on their way to going to uni [University] now and they don’t see all the hidden aspects of a child at school, the study that mainstream kids put in……it is like they see it as osmosis. I sit here, I will learn. You can’t make them see it until they are ready to see it……it is a process they have to go through before it clicks in (IEC teacher)

The issue of unrealistic educational expectations has been reported in other studies about this target group (Cassity & Gow, 2005b). Possession of such expectations by students and parents can be detrimental to psychosocial well-being leading to feelings of disillusionment, self-criticism and failure. In order for students with so many hurdles in front of them, it is important they establish realistic goals that provide a sense of achievement and encouragement when reached. Educational and career pathways must be realistic and attainable with potential challenges and barriers identified and understood by both students and parents in order for them to be overcome and the end goal to be reached.

5.2.4 Partnership with Parents/Guardians

The IEC Principals and Deputy Principal described the family composition of African refugees in the following way:

...occasionally they have parents, a lot of them with single mothers, a lot of them are just with cousins or older siblings, they have been separated from their families (IEC Deputy Principal)

Amalgamated families are not uncommon…made up of children they have picked up along the way during the crisis in their country, some of these children have no parents (IEC Principal)

Many families are made up of combinations of relatives and, in some cases, children have no relatives but are absorbed into a family network as a result of coming from the same village or tribal grouping. Students from Middle Eastern and Asian background were more likely to have traditional family units consisting of mother/father and siblings.

Most schools reported having limited contact with parents/guardians in spite of recognising that family relations were very important. Contact usually occurred during admission/enrolment procedures and when issues regarding the student required discussion. Language and culture were recognised as
barriers to communication with parents. It was widely felt that parents wanted the best outcomes for their children and although this sometimes resulted in unrealistic expectations, it was felt that parents had a high regard for education and teachers.

*I appreciate that the backgrounds of some of the families are troubled and they have come from difficult circumstances and I respect them in return for what they have been through in order to get here and their resilience in the face of adversity. I have to admire that. That makes me strive even harder in what I do to help meet the needs of the kids* (IEC Deputy Principal)

It was recognised that parents should be more strongly involved in the school process so that the Australian education system could be explained in greater detail.

*Helping the parents to understand the variety of choices that are available to them in the Australian education system is difficult - it must be baffling to a lot of them… and then understanding the consequences of making certain decisions….What path the students are going to take….even consequences of behaviour at school becomes a steep learning curve* (IEC Deputy Principal)

International studies have recognised the importance of parental/family involvement and activity in schools with multi-ethnic populations. Employment of a staff member who liases with and assists families has led to relationship-building between families and schools and ensured parents/families have a more integral role in the education process of their children (Blair & Bourne, 1998).

Recent Australian research focussing on refugee adolescents experiences in school also recommends programmes that facilitate greater parental/family involvement and understanding of the Australian education system. This has been suggested as a means to easing the transition for students and results in more successful educational outcomes and greater academic achievement (Cassity & Gow, 2005b)
5.2.5 Transition from IEC to Mainstream

Those working closely with the students felt that the current transition practice from IEC to mainstream was inadequate particularly with those students from limited-schooling backgrounds. Many expressed a paucity of professional development for mainstream teachers on issues specific to limited-schooling youth from refugee backgrounds. This was considered to have a negative effect on both the mainstream teachers and the students.

The workload of mainstream high school teachers is enormous and then, adding to that by putting in low literacy kids from cultural and linguistically diverse backgrounds with little support. I mean you can understand perhaps why teachers are throwing their hands in the air and saying: look I can’t cope with these students in this class. . . . There could be improvements made to supporting kids to being successful in a mainstream school (IEC Deputy Principal)

For one IEC Deputy Principal, the poor transition from IEC to mainstream was professionally discouraging.

We do our very best and to see them give up and disengage when it is crucial that they don’t is difficult. It often happens when they suddenly have to cope in mainstream with no support (IEC Deputy Principal)

I really believe that mainstream has to take on board the needs of the students…. Making mainstream accessible and getting people to understand that the answer is not less school because they are not capable, but more school to address their specific needs (IEC Deputy Principal)

It could be seen as detrimental for these young people to go from an environment where they have support and encouragement in the IEC to a total lack of support in mainstream. This sudden shock leads to feelings of disillusionment, lack of hope, failure, shattered dreams and has resultant detrimental effects on psychosocial well-being. A suggestion was to extend the IEC eligibility to 3yrs for students perceived in need of more support.

You can see that at the end of the second year they are at a point where you can work with them now….and you have a small class of kids who are able to follow your instructions, read, and you can find suitable texts for them so you can extend them so that is like a really good learning point now where you have them and if we could keep them for another 12 months I think that would be
very beneficial. They are at the cusp ready to learn and they get thrown into a class of 30 kids (IEC teacher)

Box 4 provides a summary of the school support needs as identified by the key informants.

**Box 4: School Support Needs**

<table>
<thead>
<tr>
<th>School Support Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>The analysis of IEC Key informant interviews identified important programmatic areas that require development to further support the psychosocial needs of refugee students.</td>
</tr>
<tr>
<td>1. Staff development on manifestations of PTSD in refugee students is required.</td>
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<tr>
<td>2. Increased funding is necessary for increase time-allocation of specialised school-based IEC psychologists.</td>
</tr>
<tr>
<td>3. Partnership with parents/guardians requires facilitation at a greater level. With an emphasis on education of parents/guardians on the Australian education system and realistic educational and career pathways.</td>
</tr>
<tr>
<td>4. Funding for full-time student support workers is required. Their role enhances partnership with parents/guardians and can facilitate student involvement in community activities outside of school.</td>
</tr>
<tr>
<td>5. The current transition programme from IEC to mainstream requires review and greater support is required for mainstream teachers.</td>
</tr>
<tr>
<td>6. IEC eligibility should be reviewed considering the needs of students with limited or no previous schooling.</td>
</tr>
</tbody>
</table>
CHAPTER 6

Discussion, Conclusions and Recommendations

6.0 Brief Discussion

The needs of refugee youth are complex and multi-faceted requiring a co-ordinated approach between educational institutions, families, communities and service agencies. The data from this study demonstrate the complexities and many challenges young refugees face during the acculturation process. Their pre- and post-migration experiences culminate in the experience of the stressors of resettlement in Australia, demanding extraordinary levels of resilience and coping in order to maintain psychosocial well-being.

This study has also revealed that schools and educational institutions are the setting in which many of the hopes of refugee adolescents and youth materialise or do not materialise. The refugee adolescents and youth find school a safe environment where friendships are established. They enjoy learning and the routine that school provides. Ethnic assistants and student support workers have proved an invaluable resource both to schools in this study and others.

The study has attempted to argue that government departments (health, education and community development), need to work together more to create a supportive and enabling environment to improve the well-being of refugee children. The project was able to highlight the needs and important gaps in service provision for young recently-arrived refugees. It is hoped that this initiative will encourage the allocation of funding for more support staff and resource allocation to programmes that build on this vulnerable population’s capacity and strengthen their psychosocial well-being. Australian and overseas literature highlight the importance of bringing health and social service providers into schools, recognising schools are a most powerful resource for refugee youth and their families.

Strong school-based programming inclusive of parents and families has been shown to increase psychosocial well-being and educational outcomes. Ethnic assistance and student support workers have proved an invaluable resource both to schools in this study and others. Interviews with students and key informants clearly demonstrated an inner strength that drives students to strive for educational outcomes that would enable them to accomplish their hopes for a better future. This strong desire to build positive and productive futures should be supported and not suppressed.
6.1 Limitations

- This research project has limitations. The sample size is small and considers only recently-arrived refugee students enrolled in an Intensive English Language Centre.
- The limited English proficiency of students and the sensitive nature of the topic under investigation mitigated against undertaking any in-depth interviews with adolescents.
- One-on-one interviews with interpreters may have highlighted more issues but this strategy was beyond the capacity of this project.
- The exclusion of students less proficient in English may have lead to the omission of data about important needs and experiences. This should be considered in further research.

6.2 Recommendations from the Study

6.2.1 School-based Recommendations
1. Enhancing relationships between schools and parents/families by facilitating space and opportunities for parents of similar ethnic groups to meet and discuss issues of concern they can then bring up with staff.
2. Allocation of staff (student support workers) to liaise with and create important links between parents/families, community support services, the school and students.
3. Organization of social activities for families of students, on school grounds, to facilitate making schools a welcoming place for families from different cultural groups.
4. Orientating the parents/families to the Australian education system and realistic career pathways for their children with the help of interpreters and translation of appropriate documentation.

6.2.2 Recommendations for Government Department
   (Education and Training, Community Development and Health)
1. The Department of Education and Training needs to revisit the current transition of students from IEC to mainstream and support research that will explore alternative approaches to maximise educational outcomes.
2. Facilitate networking and time for teachers of limited schooling students to come together and brainstorm, share experiences and resources.
3. Liaise with DCD, DIMIA, UNHCR, ICRC and other organizations to obtain timely and culturally specific data on the cohort of students arriving with specific data on their past educational history. Timely dissemination of this data to families, community leaders and schools.
6.2.3 National Level Recommendations

1. National policy on refugee resettlement and education needs to be established with sufficient funding to meet the real needs of this vulnerable population. Policy and funding should include additional support for refugee support services within the community.

2. Extension of the current 6-month new arrival programme.

3. Extension of eligibility criteria for IEC support should be available to students who require longer stays to prepare them for mainstream transition.

4. Funding released to schools to meet the needs of refugee students and their families and provide essential services. Funding is required for
   - More full-time student support workers
   - IEC psychologists should be made more available to schools with refugee cohorts.
   - Resource procurement and development
   - Implementation of programmes specifically targeting relationship building with families of refugee children.

Future Research

There is almost no research on the ramifications for higher education institutions and university teaching and learning in relation to refugee students. Currently, even though the numbers of refugee students in universities is relatively small, educators need to be prepared to understand diversity in student intakes and to be alert to providing the best possible opportunities for refugee students. Further research is also required to explore cultural, family and support dimensions of resettlement, enculturation and formation of new identities.

Conclusion

As a result of informing the Department of Health, Department of Community Development and the Department of Education of outcomes, the study hopes that enhanced policies and interventions will assist and support young adolescent refugees in the enculturation process in order to improve psychosocial outcomes.

The results can be used to re-align objectives of curriculum, student engagement and possibly resettlement programmes to ones that are even more relevant and suited to the needs of adolescent refugee children and youth taking into consideration individual countries they have come from.
The project was able to highlight needs and important gaps in service provision for young recently-arrived refugees. It is hoped that this initiative will encourage the allocation of funding for more support staff and resource allocation to programmes that build on this vulnerable population’s capacity and strengthen psychosocial well-being.
REFERENCES


Kotze, B. Information for Culturally and Linguistically Diverse Young People and their Families. Recognizing the signs of depression and tips for young people in self-managing and seeking help. Retrieved 03.05.06 from 03.05.06. http://blackdoginstitute.org.au/depression/explained/inteens.cfm


APPENDIX A

INFORMATION SHEET

The Centre for International Health at Curtin University is conducting a research study on young refugee perspectives on personal well-being. The study's purpose is to gain insight into the experiences of refugee children adapting to their new life in Australia.

In order for us to gain this information we will need to interview a group of refugee students. The interview will last for approximately 45 minutes and will be conducted in a group setting of 6-8 students. A second interview will be conducted in one month's time with the same students to verify our conclusions and ensure we have not missed an issue the students feel is important.

Dr Jaya Earnest, Tambri Housen and a research student Jane Fellman will be conducting the interviews.

The students are free to discontinue the interview at any time and for any reason. All information will be treated as confidential and no one will be able to identify the students from the data collected. In writing up the results no names will be used.

If you are able to help with this study and do not have any objection to your son/daughter participating in the interviews please fill in the attached form and return it to your Intensive English Course (IEC) Principal.

If you have any questions regarding the study or its outcome, please do not hesitate to contact

Dr Jaya Earnest
Lecturer
Centre for International Health
Curtin University
9266 4151

Tambri Housen
Research Assistant
Centre for International Health

Thank you
Dr Jaya Earnest and Tambri Housen
APPENDIX B

CONSENT FORM FOR PARENTS

I ________________________________ agree to allow my child to participate in the research project developed by the Centre for International Health at Curtin University. I understand that my son/daughter can withdraw from the research at any time.

I understand that any information provided by my son/daughter and used in the research will be anonymous. I understand the information provided by me will be confidential. I understand that information given by me will not be used for any other purpose than for the specified goals of the study.

CONSENT FORM FOR PARTICIPANTS

I ________________________________ agree to participate in the research project developed by the Centre for International Health at Curtin University. I understand that I can withdraw from the research at any time.

I understand that any information provided and used in the research will be anonymous. I understand the information provided by me will be confidential. I understand that information given by me will not be used for any other purpose than for the specified goals of the study.

Signed ______________________________ (Participant)             Date ___/___/_____

Signed ______________________________ (Parent)            Date ___/___/___

Signed ______________________________ (Researcher)            Date ___/___/___

Signed ______________________________ (IEC Principal)           Date ___/___/___
APPENDIX C

GUIDING ASSESSMENT QUESTIONS FOR FOCUS GROUP DISCUSSIONS

Life in Transition
1. Names and country of origin.
2. What countries did you spend time in before you arrived in Australia?
3. Have you attended school before coming to Australia?
4. What languages do you speak?

Resettlement
1. When did you come to Australia?
2. With whom did you come to Australia?
3. What is your family size?
4. Who assisted you to come to Australia?

First Impressions
1. What were your first feelings on arriving in Australia?
2. Is this your first school?
3. What did you like about Australia?
4. What did you not like about Australia?

Family
1. Has your family adjusted to life in Australia?
2. What difficulties/challenges has your family faced?

Friends
1. Have you made friends in Australia?
2. What nationalities are your friends?

School
1. How do you find school?
2. How do you find learning English?
Vulnerability
1. Do you have any worries or concerns about your life in Australia?
2. How do you spend your time when not at school?
3. Have you been ill since arriving in Australia?

Identity Formation/Acculturation
1. Do you feel you are Australian now?
2. Has your role changed since living in Australia?

Support Mechanisms and Structures
1. Who supports your family?
2. Who helps you in difficult times?

Thoughts about the Future
1. What do you want for your future?
2. Do you have any concerns about your future?
3. What are your thoughts about conflict and war?
APPENDIX D

KEY INFORMANT INTERVIEW QUESTIONS

1. Tell us something about yourself and your background.
2. What do you do in your role (e.g. as IEC principal)?
3. What are your experiences with Refugee Children?
   • Middle Eastern
   • West African
   • Eastern European
   • Somali/Sudanese
4. What are your experiences with the parents of refugee children?
5. What are the challenges/constraints you face in your job?
6. Can the government do things differently?
7. From your own experience, do you feel these children encounter racism and discrimination?
8. How are the teachers in IEC sensitised to refugee issues?
9. How are classroom teachers and other students in the school sensitised?
10. What are your personal thoughts of conflict/war?
11. Suggestions or thoughts for future of IEC programmes and interventions in schools.