Refugees and asylum seekers: Supporting recovery from trauma

Globally around 24 million people are refugees or displaced persons fleeing war, conflict and discrimination. Around one third of these are children and adolescents, and 10% are less than 5 years of age. Infants and children are amongst the most vulnerable in situations of war and conflict. Children are both direct and indirect victims of war and conflict and are particularly vulnerable to exploitation and abuse.

Living in a country like Australia it may be hard to imagine the experience of having to leave your country because of war or due to a belief that it is no longer safe for you and your family to live there any longer. Many of the experiences that are common to refugee children and families who have resettled in Australia, are so far out of the realm of experience for most of us, that we can not fully comprehend the trauma, loss and adversities they have faced. These experiences stay with them, they form a part of who they are, and for refugees who are finally resettling in a safe place, they face the challenge of learning to live a new life whilst carrying their past experiences too.

The United Nations Convention on the status of refugees tells us that a refugee is a person who is living outside of their country of origin, due to the fear that they will be persecuted or harmed in that country because of their race, religion, nationality, membership of a certain social group or political beliefs. The person is unable to return to their country of origin, or seek protection from them, because of the belief that they will be persecuted in that country.

Asylum seekers are those seeking safety and are claiming refugee status in another country. Many asylum seekers spend long periods in refugee camps awaiting review. Children born in refugee camps may have very limited access to education and activities needed for healthy development.

Refugee children and trauma

To fully understand the nature of trauma, loss and adversity in refugee children and families, we need to look at the different phases of their journey to resettlement.

In their country of origin:

Many refugee children and families flee their country when war or violence breaks out. This means that they have often been exposed to that violence prior to leaving. Some experiences that refugees may encounter before fleeing their own country include:

- Violence directed at themselves, their families and others around them.
- Witnessing killings, rapes and other physical assaults. This is often inflicted on members of their families and neighbours.
- Living in a state of fear prior to leaving their country.
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» An arduous and dangerous journey to leave the country. This may involve leaving behind family members that can not make the journey or losing family members along the way due to death, violence or separation because of chaos.

During displacement:
Many refugees flee first to temporary refugee camps or countries where they are not in danger. They stay in this temporary accommodation sometimes for years at a time. Living in this state brings with it many experiences which can continue to traumatize. These include:
» Accommodation is often inadequate for families and unsafe for children.
» There are food shortages.
» Many children, as well as adults, are the victims of rape and physical violence in these camps. Many may witness this occurring to others and may also be witness to murder.
» Significant numbers of young people and children are unaccompanied and may have lost parents or carers.
» Parents find it difficult to parent their children effectively.
» Parents may be experiencing their own issues of grief, loss and trauma and may find it difficult to respond emotionally to the needs of their children.
» There is ongoing uncertainty about their future and their safety.
» They are often required to re-tell their story to several people in order proceed through the process of seeking refugee status.

Resettlement in a new country
Resettlement provides refugees with the opportunity to start a new life in a country where they will be safe. However, it also brings with it several challenges and adversities that may impact on children and families. These include:
» Difficulties associated with language, customs and knowledge of services in a new country.
» Financial hardship, difficulties with finding employment and in some cases, suitable housing.
» Difficulties in accessing help and assistance when unfamiliar with the way communities and services work.
» Feelings of isolation.
» Feelings of loss of home, family and other connections.
» A sense of disconnection living in a country with different customs and expectations.

Additional issues for those seeking asylum
Some people fearing for their safety come to Australia to seek asylum. They do not have a refugee visa when they arrive, but seek asylum and refugee status once they arrive in Australia. For this group of people, there are additional trauma and adversities that they face. These include:
» Often they have made an arduous or perilous journey where they may have witnessed violence, exploitation and even death.
» On arrival they may be placed in detention facilities while they are awaiting the outcome of their claim for asylum. In these facilities children often witness violence and self harm. The role of the parents is diminished by the environment where “guards” make decisions about the functioning of the family. Mental health and child health organisations do not support the detention of children or unaccompanied minors.
» The stress of the uncertainty that they will be granted asylum or be returned to their country of origin.
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The impact of the refugee experience on children:

These prolonged and cumulative stressors have a lasting and negative impact on children, young people and families. Research has shown that exposure to severe trauma, such as violence and ongoing fear of safety, have lasting negative impacts on the physical and mental health of children that last into adolescence and adulthood. Research has also shown that there is a cumulative effect in terms of trauma and adversity. That is, the greater number of traumatic or adverse experiences that a child has, the more likely they are to develop a trauma response or develop physical and or mental health difficulties.

Trauma manifests in many different ways and there are many difficulties that a child may face as a result of trauma, that may be interpreted by others as being a behavioural or emotional problem of the child.

Some of the responses that you may see from younger children include:

» Separation anxiety in young children. Wanting to be close to family members all the time. Not being able to sleep alone.
» Crying, tantrums and demanding behaviour as the child has difficulty in controlling their emotions and is also trying to have some power in their new world.
» Difficulty in forming friendships and social relationships with others.
» Developmental difficulties. The child may have not been able to receive the developmental opportunities needed for normal development.

Some of the responses that you may see from older children include:

» Feelings of responsibility in caring for or looking after other people in the family.
» Difficulties in making and maintaining friendships.
» Academic difficulties due to little schooling and also due to the cognitive impact of prolonged exposure to trauma and adversity.
» Missing school due to wanting to stay close to family, not feeling safe in their new environment.
» Isolation from peers.
» Acting out behaviours resulting from stress, feelings of powerlessness and overwhelming memories and emotions.
» Nightmares.
» Depression
» Anxiety

Some of the responses that you may see from adolescents include:

» Family conflict due to the pressure to adapt to the new culture and its conflict with the culture of the family.
» Academic difficulties.
» Difficulty in maintaining supportive friendships.
» Isolation.
» Acting out behaviours due to feelings of frustration, difficulties in dealing with emotions and difficulties in understanding and being understood in the new culture.
» Missing school which may be a result of lack of parental supervision and other supports being available within the community.
» Self harm or suicidal behaviours. Young people in refugee communities present a higher risk of suicidal behaviour than their peers from non-refugee backgrounds.
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Recovery from trauma for refugee children and young people

Australia has few child and adolescent refugee health services but we are increasingly recognising the need to develop skills in the area and to develop new approaches for support and intervention.

Treatments for trauma related symptoms need to be acceptable to different cultural groups and be developed in partnerships with refugee communities and based on an understanding of different models of mental health and recovery.

Factors important in refugee well-being and recovery include:

» Rebuilding a sense of safety and security
» Development of attachments and social groups
» Support in developing plans and goals for the future
» Maintaining a sense of cultural identity
» Developing a safe way of communicating traumatic experiences

This information sheet has been written by Professor Louise Newman and Amanda Harris for the Australian Child and Adolescent Trauma, Loss and Grief Network.

Professor Louise Newman is the Professor of Developmental Psychiatry and Director of the Monash University Centre for Developmental Psychiatry and Psychology. She is the convenor of the Alliance of Health Professions for Asylum Seekers and an advocate for the rights of asylum seekers and refugees.

Amanda Harris is a Psychologist and the Director of the Australian Child and Adolescent Trauma, Loss and Grief Network.