THE FLIGHT FOR REFUGE: THE PLIGHT OF THE REFUGEE

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REFUGES IN THE UNITED STATES

*80,000 refugees sought refuge in the United States in 2011

U.S. Department of State, 1/31/2012

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- According to the Department of State:
- 15,00 Refugees came from Africa:
 - Eritrea: 2,032
 - Congo: 977
 - Solmalia: 3,060

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- 2,000 Refugees came from Europe
 - Ukraine: 428
 - Moldova: 331
 - Russia: 165

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- 5,500 refugees came from Latin America/ Caribbean:
 - Cuba: 2,929
 - America Caribbean: 2,976

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- 35,500 refugees came from the Near East/
 South Asia
 - Afghanistan: 428
 - Bhutan: 14,999
 - Iran: 2,032
 - Iraq: 9,388

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- 19,000 Refugees came from the East Asia
 - Burma: 16,972
 - Laos: 211
 - Vietnam: 119

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Refugee groups are "at risk" for chronic and recurring mental health issues.

Refugees have been found to experience heightened rates of anxiety

Research on **Hmong** (Westermeyer, 1995), **Vietnamese** (Birman & Tran, 2008), **Iraqi** (Jamil et al 2007), and **Bosnian** populations (Sundquist et al, 2005) have each consistently identified heightened levels of anxiety within refugee groups.

- ** Cross-cultural studies have also identified the prevalence of anxiety symptoms within refugee populations (Gerritsen, 2006; Fazel & Stein, 2000).
- Specifically, the identification of **PTSD** symptoms within **populations exposed to war-traumas** has been a focus of ongoing research (e.g. Daud et al, 2008; Heptinstall et al, 2004; Cardozo et al 2004; Matsunaga et al, 2006; Momartin et al 2003).

- Outcomes of this research suggest that exposure to war-trauma can have far-reaching impacts upon refugees, including:
 - #Impact upon **personality development** (Daud et al, 2008).
 - Broad impairment of both physical and mental health (Gerittsen et al, 2006).

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- Other findings suggest:
 - The long-term development of feelings of hopelessness and purposelessness (Matsunaga et al, 2006)
 - ** The development of somatic symptoms (Van Ommeran et al, 2002)
 - **Co-morbid** development of **PTSD** and **depression** (Hepinstall et al, 2004)

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- A growing base of research involving refugee groups have also identified the *unique expression of anxiety* within particular refugee populations, including:
 - ** Panic attacks and flashbacks and sleep paralysis amongst Cambodian refugees (Hinton et al, 2007; Hinton et al, 2005)
 - ** Orthostatic symptoms (occurring when standing) experienced by Vietnamese refugees (Hinton et al, 2007)

- ** Anger-related panic attacks in Cambodian refugees (Hinton et al, 2003)
- Somatic panic-attacks amongst
 Rwandan widows (Hagengimana et al,
 2003)
- ** Paralysis-type panic attacks and olfactory-triggered panic attacks in Khmer refugees (Hinton et al, 2004;

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- **Depression has been consistently identified in the literature on mental health challenges facing refugees (e.g. Fazel & Stein, 2002; Gerritsan et al, 2006; Heptinstall et al, 2004)
- This research base has offered some insight into the development of depression in refugee populations. For instance:

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- **Depression** has been found to be significantly correlated with ∂egree of exposure to war-trauma in a population of child refugees from **Darfur** (Morgos, 2007)
- Research findings of **Morgos** and colleagues suggest a strong relationship between **depression** and histories of; being raped, seeing others raped, and being forced to fight or kill family members

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Heptinstall and colleagues (2004) have identified a relationship between depression and; insecure asylum status and financial problems



Suicidal behavior has also been identified as being a risk for some refugee populations. *However*, research has generally suggested suicidal behavior as *being culturally relative*, with *different rates* and *patterns* of suicidal behavior evident across varying ethnic groups (Bhui et al, 2007)

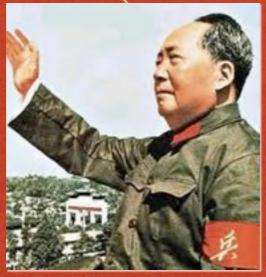
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- Research has also supported increased rates of *thought disorders* amongst certain refugee groups
- Recently, a meta-analysis has found increased rates of *schizophrenia* across refugee groups. The nature of the findings tend to support the role adverse circumstances related to the transition are believed to have played upon these challenge areas (Selten et al, 2007)

Research has also supported the role *profound* social and political discord play in mass-trauma, resulting in psychotic reactions of victimized refugee populations.

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For instance, Cambodian refugees made to endure the Pol Pot regime have been found to experience increased rates of psychotic symptoms (Kinzie et al 1989)





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- Findings have suggested that the rates of schizophrenia are lowest in immigrants when the sending and receiving countries are socially and culturally similar (Kinzie, 2006)
- Such findings further point to the broad impact issues of *adjustment* and *social-relatedness* seem to have on the mental health of the refugee

CONCEPTUALIZATION:

MODELS FOR UNDERSTANDING

ADLERIAN CONSTRUCTS

TRANSCULTURAL PERSPECTIVES

MALIGNANT SOCIAL SYSTEMS

REFUGEE-ISM AS A FLIGHT FROM

REFUGEES AS DISPLACED PEOPLE

ADJUSTMENT- MULTI-GENERATIONAL PROCESS

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Adler

- Exogonous Factors- Having to do with the triggering circumstances resulting in a negative shift in psychological functioning. Exogenous factors consist of the social circumstances which the individual was not psychologically prepared for.
- In the case of refugees, these would be the circumstances necessitating relocation as well as the circumstances of resettlement.

- Community Feeling- A benchmark for mental health and wellness- the affective component of social interest- the individual's sense of connection to his or her social context.
- For refugees this feeling may be **eroded** or **distorted** by the conditions of warfare or necessitated flight. May conversely be strengthened under the right conditions due to received support of immediate or extraneous social entities.

- Degree of activity- A central component to healthy striving, reflective of the degree of agency or action in response to life circumstances
- For refugees, one's capacity to actively manage life circumstances may be **compromised** by larger than life circumstances that compromise agency and force the refugee into a position of reliance upon external forces that reduce a healthy degree of activity.

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- Organ Jargon- term referring to expressions of private logic or vulnerability as expressed through bodily expressions of feelings of inferiority.
- For refugees, bodily systems may break down or the individual may develop somatic representations of psychological despair.
 Transcultural perspectives provide us with the means of understanding culturally informed expressions of organ jargon and help in deciphering physiological experiences of marginalization and distress.

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- Culture- An important component of Adlerian perspectives, serving to organize the weltbild and meaning making occurring at the level of the individual.
- An accurate appreciation for **cultural meaning making** is necessary in work with refugee groups displaying variatable expressions of psychological distress.

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- **Weltbild** German term used by Adler to describe the individual's working appreciation for the unitary organization of the world and others.
- As a **dynamic construct** influenced by **existing sociological realities**, the **weltbild** of refugees is shaped by the conditions that led to a need to relocate and by the conditions of resettlement. When refugees are younger in age, the **weltbild** is particularly malleable.

TRANSCULTURAL PERSPECTIVES

- Transcultural Psychiatry
- A perspective derived from psychiatry and anthroplogy that has considered how psychiatric disorders and conditions are organized by and through culture.
- Culture serves not only how conditions are defined, but also play a role in how they are experienced and organized and factor into etiology.

TRANSCULTURAL PERSPECTIVES

- Transcultural perspectives have been employed to consider:
 - shifts in the expression, diagnosis and treatment of psychiatric conditions that occure within a culture, as related to changing medical paradigms or means of understanding "disease" and "illness" across the ages
 - differences in the etiology, course, and expression of psychiatric disorders across different cultures
 - the diversity of psychiatric conditions that occur relative to different cultural and ethnic groups
 - the expression of differing conditions between groups within a culture

TRANSCULTURAL PERSPECTIVES

Phenomenological considerations have been employed in considering cultural nuances in psychiatric disorder.

REFUGEE-ISM AS FLIGHT FROM

- TRAUMA AS A PSYCHOLOGICAL WOUND
- POWER BASES-VIEWED WITH AMBIVALENCE

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- THE DRAMA TRIANGLE
- THE FLIGHT TO DEVIANCE and "MADNESS"

REFUGEE-ISM AS FLIGHT FROM

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TRAUMA AS A PSYCHOLOGICAL WOUND



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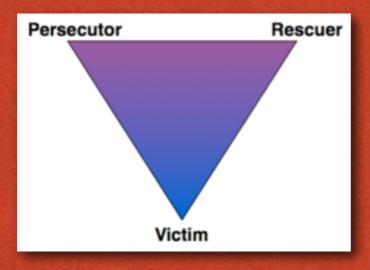
- Researchers on the impact of exposure to violence have introduced the concept of trauma being a psychological wound (e.g. Garbarino, 2001).
- From this perspective, traumatizing experiences with violence serve to **alienate** the individual from their sense of social embeddedness, and negatively influence subsequent interactions with future **social contexts** and with existing social networks.

- POWER BASES VIEWED WITH AMBIVALENCE
- The conditions experienced by refugees fleeing warfare and/or persecution, may challenge their capacity to trust any external authority source.
- At the same time, the sociopolitical process facilitating relocation places refugees at a greater dependence upon external and (frequently) foreign entities.

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- At any given time, any number of psychological responses to the process of resettlement may occur within the refugee. These include:
- Extreme social withdrawal- and self-marginalization
- Adversarial responses to any perceived authority
- Exaggerated and pathological displays of power relative those perceived to be more vulnerable
- Internalized "isms" and psychological/physiological displays of vulnerability

Steven Karpmen (1968) offered a model for interpreting ambivalent responses to perceived authorities in his **drama triangle**:



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The **drama triangle** views *help-seeking* in victimized people as a drama that is perpetuated when the individual develops rigid and selfperpetuating roles in which to cast themselves and others.

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- The drama triangle involves the help-seeker casting others in one of the three roles:
- Persecutor -The social aggressor who constitutes a threat and from whom the victim needs rescuing.
- Victim-The powerless prey to the prosecuter, in need of rescuing.
- Rescuer- The "hero" who has been type-caste by the victim, to intervene on the victim's behalf.

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- The drama triangle perpetuates itself due to the rigid and limited manner of conceptualizing each player in the dynamic. For instance:
- When the rescuer fails to rescue- he or she may be cast as the persecutor
- OR as the rescuer intervenes, he or she may take on a sense of victimizationand further confer the victim's vulnerable and helpless status
- OR the rescuer's involvement may shift dynamics so that his or her interventions come to be viewed by the helpseeker as victimizing the "persecutor" moving the previous help seeker to emotionally rescue the "persecutor"!

Refugee groups may be particularly prone toward the drama triangle when resettlement organizations or related systems assume a paternalistic response to the refugee group, and fail to assess and value the refugee group's internal strength and capacity for agency.

Ultimately, the one unifying condition for the refugee is a pervasive and ongoing **flight from** (as distinct from the implied *flight to* of an immigrant)

This **psychological trajectory** serves to confound the social and emotional processes necessitated by permanant resettlement and or acculturation.

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Unable to flee the **static realities** and **demands** of the new **social context** and the haunting effects of psychological wounds, the refugee is forced to reconcile their experience in unique ways.

Thus, a psychological **flight from** may take on a variety of forms for the refugee in the **new** context.

Social deviance- various forms of deviance (relative to the refugee's cultural identity or the laws and expecations of mainstream society) may develop, constituting a **protest against** prevailing circumstances by way of **social postulating**. This may be viewed as a disowning of existing values, or a desire to assert personal power and agency.

Expressions of vulnerability- Feeling a need for additional social support and assistance, the individual may flee from the imposing expectations of **real** world circumstances, through a display of (culturally informed) physiological and/or psychological distress.

Flight into madness- Unable to cope with real world conditions, the refugee may fragment reality and seek an entirely subjective flight from the pejorative circumstances of life. An unbriddling of reality ensues, which takes culturally relative forms but ultimately serves to fracture and dissipate a unitary, culturally relative, sense of self in world.

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Flight into substances- Refugees may also turn to substance use and dependence as a form of escape from social and emotional problems.

This may include a turning toward **culturally specific** forms of use or a detour into the substance use and practices prevelent in the new social context.

The **choice of substances** may there by serve as reflections of the individual's **movement relative to** their cultural heritage and their new social context.

REFUGEE STATUS AS SOCIALLY DISPLACED

Perpetual displacement



REFUGEE STATUS AS SOCIALLY DISPLACED

- More so than being merely a psychological perspective, the refugee's sense of social displacement is organized and informed by real world social and political forces. These forces impact upon the nature of the refugee's daily interactions with mainstream ententies and fellow refugees.
- Social and political realities thereby influence the refugee's degree of social embeddedness in their new social context.

REFUGEE STATUS AS SOCIALLY DISPLACED

- When confronted by the conditions of social exclusion, refugees come to internalize a sense of social displacement that runs contrary to the development of community feeling with the larger society.
- Forced to flee their homelands and socially excluded from their new **new communities**, refugee groups learn to endure a permanent and pervasive sense of social displacement.

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WARFARE

WELFARE

CHILD-PROTECTIVE SERVICES

LEGAL SYSTEMS

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Warfare-

- The **conditions of warfare** and/or **international discord** set a backdrop for the refugee's experience thereafter. Particularly impressionable would be the very young- who's earliest experiences are shaped by conditions of warfare.
- The social systems that are established during periods of war are necessarily hostile to civilian life- and perpetuate positions of further warmaking.
 Fundamental vulnerability in the "civilian" role may be overcome by adopting a hostile stance against others and the world in general.

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Welfare

- Although designed to aid persons unable to provide for themselves- the welfare system in the United States struggles to meet the unique needs of refugees. Refugees who come to America, frequently come with job skills and professional training that is not compatable with the skills and training requirements in the United Staes- forcing refugees to "take what they can get" in the American workforce-resulting often in a loss of social prestige and clout.
- **Jobs assistance** programs are not designed with the needs of refugees in mindand tend to focus on basic job skills and placement goals. When cultural differences and language serve as the primary obstacles for successful employment, refugees may be at a loss for job success.

• Discouraged by prospects of employability, refugees come to be increasingly dependent upon the **cash assistance** required for them to survive. The **limited time** that this is available constitutes a constant pressure for families. Such distress may contribute to existing physical and psychological vulnerabilities - exacerbating risk factors that come to be experienced as being insurmountable- leading refugees to seeking support in the form of **social security** resources (when such resources are even available) -or- to simply **break down** and place demands upon existing family, medical, and mental health systems. Always- **crime** constitutes one circumvential route to being placed in situations of dependence upon state support.

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Child protective services

- One of the most unfamiliar systems to many refugee groups, is the child protective services system in the United States. As refugee groups resettle in the United States, they are required to adopt to American parenting norms, but at no time are provided accurate and useful information regarding how to be effective parents in this new context.
- Many refugees find themselves turned off by the parenting patterns and conduct of children evidenced in the United States- and become increasingly appreciative of their own traditional values.

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- Told only what they **can't do** in terms of parenting norms- refugee parents find themselves helpless and desperate as they observe their children take on the values and behaviors of their American peers.
- The unique stressors faced by refugee family's (war trauma, relocation, discrimination, and "forced" assimilation) constitute factors that trigger increased emotional/behavioral disruptions and family discord.

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- Child protective service professionals frequently lack **culturally informed perspectives** when it comes to refugee groups, and may underestimate **the unique needs** faced by families transitioning to a new way of living. When this happens- one of two mistaken responses may be taken by child protective services:
 - 1) The child protective services worker wrongfully concludes that displays of parental distress are "culturally appropriate parenting"- and the service providers fail to offer the family with the additional support they need.
 - 2) The child protective services worker **over-reacts** to strategies that may be "acceptable to the family" and pursues separation of family without properly understanding the unique needs of the family and the role of **culture** relative to parenting practices.

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- Legal systems
- Court system
- Justice in the United States operates in a patriarchal manner- in which a desginated entity (judge or jury) castes a decision regarding relative guilt or innocence of a person based upon the infomration that has been provided.
- This system is based off of the assumption of "blind justice" and the notion that justice can be meaningfully conferred in an objective manner- unhindered by bias.

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- When these systems lack a proper understanding of the involved parties and their unique, culturally informed experiences, valuations, and meaning-making, bias enters into decision making that is fundamentally not accounted for by the legal
- When "justice" is conferred- the results can be detrimental to a refugee's prospects of successful adjustment- with the social ramifications of a high profile court cases involving persons of a particular refugee group also making it difficult for other persons from that group to become successfully integrated into society.

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- Police system
- When refugees are placed in undesirable social settings upon inilial relocation to the United States, they frequently experience an increase in social discord which place them in frequent contact with police activity. This highly visible extension of the legal system serves to illustrate to refugees, the nature of "justice" in the United States.
- As serving a role to "serve and protect" the greater society, police fall victim to the same prejudices of mainstream society, and may come to view their role as "protecting" citizens from the perceived threat of "outside" threats, such as refugees.

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- When police behavior is perceived to be biased, unconcerned for the needs of the refugee group, or in other ways inappropriate, it serves to underscore a perception of unfairness in the system, which serves to dissuade refugees to turn to the legal system to address concerns they experience in their new setting.
- Consequently, refugees may be more prone to "take the law into their own hands" when attempting to settle disagreements within the refugee community, or with groups/persons outside the refugee group. This places the refugee at risk for acting "outside the legal system"- further estranging them from police systems that are designed to enforce "law and order".

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- Correctional system
- For refugees (as well as mainstream society) there is perhaps no more malignant a system than the United State's correctional system. As system that is deisgined to **penalize misconduct** and to enforce aspired to **social values** by way of example, the correctional system is less organized around a priority of "correction" or "reform" than it is by a priority of chastising "wrong doers" and protecting mainstream society from perceived moral and social contaminants.
- From a **sociological** perspective, the correctional system thereby serves its role simply by **externalizing "threats"**, and absolving existing social structures from responsibility for social conduct which is inconsistent with the aspired to values of mainstream society.

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- When such examples can drawn from an "outside" entity (such as with refugees), it serves a dual role of being able to **illustrate behavior** that is "outside" of social moral code, while **absolving "society"** of morally repugnant behavior.
- Inside the correctional system, the refugee will experience further exposure to "criminal conduct" and a new "social order"- as organized around an anti-social agenda.
- The experience of incarceration will thereby **challenge** and **erode** existing value sets of the indigenous culture, and re-enforce a position of "**social outcast**". A new identity is thereby forged in the correctional system, which is perpetuated after incarceration by society's response to the "**criminal offender**".



- As refugee groups strive to find a place in their new settlements, **second generation** immigrants may distance themselves from their cultural roots and familial heritage.
- Seeking belonging, such groups may find themselves increasingly drawn to new ways of **asserting their distinction** from the **values** and **practices** of their respective **cultural identity**, which they come to equate with experiences of alienation and victimization.

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- When immigrant groups have experienced adverse treatment from mainstream entities, these efforts may lead them toward antisocial and/or criminal processes and gang affiliations.
- Other approaches may involve exaggerated and unhealthy identification with the values and assumptions of mainstream society.

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- In both circumstances, failure to integrate aspects of familial and cultural heritage set a detrimental trajectory that influences subsequent generations.
- Future generations face prospects of cultural genocide and the internalization the caustic cultural/ ethnic biases of the mainstream society.

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THE GLOBAL VILLAGE

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- It is our perspective that healthy community is described by pluralism, with cultural identity being an important component of one's larger belonging
- Healthy transitions involve circumstances in which refugees are welcomed by communities and nations who are eager and willing to "help out" given the circumstances faced by the refugee group.

THE GLOBAL VILLAGE

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- When refugees experience themselves as immigrants who have willingly and intentionally relocated to a new home- the transition is easier- and integration into the new society is promoted.
- The status of "refugee" conveys a condition of persisting transience and displacement- which is only resolved upon the refugee group's "return home".

THE GLOBAL VILLAGE

- From our standpoint- the following conditions are necessary for establishing a "global village" within which "refugees" may be able to find a "new home"
 - Atmosphere of mutual respect and tolerance between groups
 - Mutual curiosity regarding culture and customs between groups
 - Capacity to find common ground while valuing diversity
 - Invested interest & **prioritization** of shared resources to help refugee groups accurately understand and address the consequences of **warfare/transition**
 - An **infrastructure** and **means** for facilitating accurate understanding of laws and customs in new location, provision of **education** and **information** (v. penalization and judgment)

SEBASTIAN FAMILY PSYCHOLOGY PRACTICE

Sebastian Ssempejja, Ph D
Co-founder and Clinical Director of
Sebastian Family Psychology
Practice



SEBASTIAN FAMILY PSYCHOLOGY PRACTICE

- 23 years in Milwuakee
- Dr. Sebastion- has experienced 28 years in Milwaukee Serving diverse clientele from:

SEBASTIAN FAMILY PSYCHOLOGY PRACTICE

- U.S. Born Africa, Uganda, Sudan, Eritrea, Ethopia, Somalia, Congo, Liberia, Senegal,
 Nigeria, Rwanda, Burundi,
- Middle East, Iran, Iraq
- S.E. Asia Burma Laos, China,
- Former Yugoslavia; Croatia, Serbia, Bosnia,
- Europe: Russia

