

Chapter 2

The Psychological Experience of Refugees: A Gender and Cultural Analysis

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Refugees are migrants who are forced to relocate outside their countries of origin due to war or persecution. Often, refugees are targeted because of their ethnicity, gender, religion, sexual orientation, and/or political opinion. The latest figures from the United Nations Refugee Agency indicate that 38.6 million people are vulnerable to displacement worldwide (UNHCR, 2013), of which over 11 million are deemed convention refugees or people in refugee-like situations. Since the Second World War, the largest waves of refugees to so-called Western countries have included the Vietnamese boat people, Cambodians fleeing the Khmer régime, former Yugoslavians, Palestinians, the Romani people from Eastern Europe, and Africans from the Great Lakes region (e.g., Rwanda, Burundi, and Congo). Widespread active armed conflicts remain in many countries today, with Afghanistan, Syria, and Somalia being the recent top three refugee-producing countries (UNHCR, 2013).

The Need for Gender-Sensitive Refugee Research

In the past decades, issues and policies related to refugee trauma, resettlement, adjustment, and health outcomes have been well researched by social and biomedical scientists (for reviews, see Porter & Haslam, 2005; Steel, Chey, Silove, et al., 2009; Yakushko, Watson, & Thompson, 2008). However, much of the research focusing on the plight of refugees has tended to be gender-blind (Goodkind & Deacon, 2004; Schlenzka, Sommo, Wadia, & Campani, 2004; Sideris, 2003). The adoption of a gender-blind approach in refugee research is, however, problematic. In the past, researchers have tended to assume that there is one *common* refugee experience, irrespective of how gender identities may shape the experience of migration and

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resettlement. Early research projects have thus mainly focused on the experience of refugee men, ignoring the specific realities of refugee women (e.g., Barakat, 1973; Mezey, 1960).

During the 1980s and 1990s, research on gender-based and sexual violence in war settings gained increased attention, largely due to Western mass media reports of ethnic cleansing and rape camps during the Yugoslavian civil war (Pittaway & Bartolomei, 2001). Since then, there has been a greater emphasis on researching the experiences of refugee women (Pittaway & Bartolomei, 2001; Goodkind & Deacon, 2004). Despite these attempts, overly simplistic portrayals of how gender identities shape the refugee experience continue to dominate. Even more alarmingly, some researchers and policymakers have started to group refugee women in the same category as refugee children and youth under the generic term *special populations* (Goodkind & Deacon, 2004). Women refugees were often portrayed as vulnerable and “weak” victims of war and violence, and thus in great need of protection from male family members or from foreign humanitarian aid workers. While in many cases women are more at risk of being victims of gender-based violence in war settings, these views lead to further oppression and marginalization of refugee women thereby clouding our understanding of their whole experience (Hajdukowski-Ahmed, Khanlou, & Moussa, 2008).

More recently, gender-sensitive research efforts have been described as a swinging pendulum, with the most recent shift moving away from focusing solely on men’s experiences (Annandale & Hunt, 2000). Although some researchers have attempted to capture and to compare the experiences of both genders, most have tended to focus exclusively on women refugees in exploring their gendered experience (Goodkind & Deacon, 2004). As a result, issues related to male gender roles and masculinities have gone from being overly represented in the early refugee literature to being neglected in the contemporary (Oosterhoff, Zwanikken, & Ketting, 2004; Williams, 2011).

In summary, gender sensitive research builds on the premise that gender roles and power differentials often affect the lived experiences of individuals, including immigrants and refugees. By adopting a more gender-sensitive approach, we can begin to better understand the multifaceted ways in which gender shapes refugees’ migration and resettlement experiences.

An Overview

The goal of this chapter is to provide an overview of the ways in which gender intersects with culture in shaping the refugee experience. This chapter is divided into four major sections. In the first, we discuss the commonalities and differences between refugee men and women in terms of the traumatic events survived in their home countries and during flight. We then explore the gender-based differences faced by refugee men and women during resettlement, with a particular focus on how gender roles affect work place adjustment, discrimination, and marital and parental relationships. In the third section, we discuss the impact that premigration

trauma and resettlement stressors have on refugee men and women. In particular, we aim to illustrate the similarities and differences in mental health outcomes, as well as indicators of positive psychological well-being. Finally, we conclude by highlighting the research and practical implications of our review of the gender-specific body of work done with refugees.

Throughout this book chapter, we highlight the commonly discussed themes in the refugee research literature, and supplement these themes with findings from our own research projects. However, it is important to be aware that there is often greater variability within a social group (i.e., gender and culture) than there are between groups. Thus, we encourage our readers to exercise caution as they apply the discussed themes in this chapter, and to be mindful of the individual contexts and differences among the refugees that they come in contact with as researchers and clinicians.

Trauma and Violence in Premigration and During Flight

Irrespective of gender, most refugees experience traumatic events in their countries of origin and during flight. Traumatic events commonly encountered include being injured because of war, witnessing the deaths of others, being persecuted and tortured, having one's home ransacked and belongings destroyed, and experiencing unwanted sexual behaviors (Porter & Haslam, 2005). In this section, we will focus more specifically on the gender-based violence that men and women refugees experience prior to resettlement.

Gender-based violence is defined as threats or behaviors targeted at individuals based on their sex (Heise, Ellsberg, & Gottmoeller, 2002). Examples of gender-based violence that often affect women include intimate partner violence, sexual abuse and assault, sexual torture, genital mutilation, forced marriages, and forced prostitution (Heise, Ellsberg, & Gottmoeller, 2002; Oosterhoff, Zwanikken, & Ketting, 2004). Refugee men and women may experience gender-based violence from their family members, neighbors, law enforcement officials, and members of (para-) military groups.

Intimate Partner Violence

One of the most common forms of gender-based violence that affects refugee women is intimate partner violence (Feseha, G/mariam, & Gerbaba, 2012; Guruge, Khanlou, & Gastaldo, 2009). Acts of intimate partner violence include physical, sexual, or emotional abuse behaviors inflicted by a romantic partner. Similar to other forms of gender-based violence, the root cause of intimate partner violence is often attributed to the unequal status of women in society (Feseha et al., 2012). In the context of an Ethiopian refugee camp, the lifetime prevalence rate of intimate partner violence was estimated to be as high as 31 % (Feseha et al., 2012). Among

Palestinian refugees in Jordanian refugee camps, the lifetime prevalence rate was 45% (Khawaja & Barazi, 2005). The three most prevalent risk factors for women being a target of intimate partner violence are growing up in an abusive household, having a partner who is illiterate or has low education, and having a partner who abuses substances (Feseha et al., 2012). On the other hand, women who had formal schooling were less at risk of being abused by significant others (Feseha et al., 2012).

Intimate partner violence has consistently been linked to detrimental physical and mental health (Guruge, Khanlou, & Gastaldo, 2009). Some of the deleterious physical health outcomes include chronic neck and back pains, headaches and migraines, hypertension, gynecological problems, and sexually transmitted infections. Mental health problems, such as symptoms of depression, anxiety, and posttraumatic stress disorder, along with suicidal thoughts, are also associated with being in a violent and abusive relationship (Guruge et al., 2009).

Despite these negative consequences, refugee women often feel that they have no choice but to stay in abusive relationships (Ho & Pavlish, 2011). In one study, many women interviewed in a Rwandan refugee camp stated that they feared for their physical safety should they report incidents of intimate partner violence to the authorities (Ho & Pavlish, 2011). While some women expressed concerns that their partners would retaliate with further violence when they found out that their partners had disclosed the violence, others were afraid that they would lose their only source of protection (i.e., their partners), and thus become more vulnerable to thefts and interpersonal assaults from other men. Finally, in refugee families where the husband was the sole breadwinner, women described not being able to leave for financial reasons, especially those who had children (Ho & Pavlish, 2011).

From a male perspective, two particularities are of note when discussing intimate partner violence. First, refugee men often serve dual roles (Holt, 2013). On the one hand, within the public sphere, they act as the protector of their family members against violence in conflict zones or in refugee camps. On the other hand, within the home, they resort to abusing their partner and/or children. Second, as has been documented in other sociocultural contexts, the cycle of domestic violence also occurs in many refugee families (Ho & Pavlish, 2011). Often, boys who witness their mothers being abused grow up developing more accepting attitudes towards intimate partner violence, and later become abusive partners themselves (Holt, 2013).

Physical and Sexual Torture

Torture is also commonly discussed in the literature on gender-based violence (Christian, Safari, Ramazani, Burnham, & Glass, 2011; Holt, 2013). Acts of torture include solitary confinement, often without food or fluids, threats to harm, mock executions, physical beatings, electrocution, or unwanted sexual violence and intimidation, such as rape, molestation, or forced nakedness (Fornazzari & Freire, 1990; Oosterhoff et al., 2004). Torture is aimed to inflict severe physical or psychological pain to obtain information, punish, intimidate, and/or coerce. In war settings, torture is systematically carried out by members of (para)military groups, or by third

parties with the consent of these forces (Oosterhoff et al., 2004). Beyond the intent to harm the victims as individuals, torture, particularly sexual torture, is often used to shame victims' families and communities (Holt, 2013).

Victims of torture often carry permanent physical and psychological scars (Holt, 2013). Physical health consequences of torture include deep tissue scarring, chronic pain, deformation of limbs, head injuries, dental problems, and psychosomatic problems, such as headaches, dizziness, loss of appetite and weight, and chronic fatigue (Oosterhoff et al., 2004). Survivors of sexual torture may suffer from genital mutilation, sexually transmitted infections (including HIV/ AIDS), unwanted pregnancies, and other sexual health problems, such as avoidance of sexual relations and sexual pain during intercourse. Intense anger, shame, guilt, and mistrust, along with symptoms of posttraumatic stress disorder, such as flashbacks and social withdrawal, and depression, are commonly observed among male and female torture survivors. Of note, previous political/ social involvement (i.e., being tortured for a cause that the victim believes in) does not appear to protect the victim's mental health and well-being posttorture (Brune, Haasen, Krausz, Yagdiran, Bustos, & Eisenman, 2002; Fornazzari & Freire, 1990). Finally, among cultures with strong patriarchal values, female survivors of rape and their children are often shunned and deeply marginalized by their families and communities (Sideris, 2003).

Not surprisingly, survivors tend to keep their torture history secret (Holt, 2013). Many victims do not disclose the torture to their partners, family members, and community, as they do not want to be rejected and do not want to cause them pain and suffering. In addition, survivors typically do not have the option to report the torture to the authorities. This is especially the case for those who were tortured under repressive régimes, often by members of forces who should have protected them. In the case of sexual torture, the stigma attached to sexual violations is so great that many never disclose the abuses and thus access the support they need to heal (Christian et al., 2011; Oosterhoff et al., 2004). Among male Croatian sexual torture survivors, many viewed the sexual torture as significant threats to their masculinity (Oosterhoff et al., 2004). Those who became sexually aroused during torture were particularly distressed and started to question their sexual orientation and sexual identity. Furthermore, in cultures where traditional gender roles are strongly adhered to, male sexual torture survivors were most likely to suffer in silence due to the stigma. Likewise, some helping professionals have internalized the societal stigma and thus do not believe that men can be sexually tortured: "one therapist said that she had not believed that men could be raped until one night a man was brought in naked and bleeding from the anus." (as cited on p. 74, Oosterhoff et al., 2004). As a result, such attitudes from helping professionals further discourage victims of sexual torture from seeking help and justice.

Gender-Based Violence against Men and Boys

As noted above, gender-based violence affects both refugee men and women. Although women victims typically come to mind when discussing issues such as

intimate partner violence or rape, men also suffer from a significant level of violence in war and other war-like settings, such as dictatorships (Hossain et al., 2014). For example, while 57.1 % of refugee women from the Ivory Coast reported physical and/or sexual violence, a high percentage of men (40.2 %) also stated that they had experienced physical and/or sexual violence (Hossain et al., 2014). Moreover, it is noteworthy that there are certain forms of gender-based violence that target specifically men and boys in war settings (Carpenter, 2006; Christian et al., 2011). For example, some men and boys are coerced into witnessing and/or actively participating in the sexual assault of family members (Carpenter, 2006). In the Congo, Christian et al., (2011) reported men being forced to rape their wives and daughters to humiliate and shame them, and to destroy family, community, and cultural dynamics. Similar experiences were also found among survivors of the Yugoslav War (Carpenter, 2006).

Sex-selective massacres are another form of gender-based violence against men and boys (Carpenter, 2006). Compared to women, civilian men and boys are often disproportionately targeted during conflicts on the assumption that they could become potential informants and/or combatants. An extreme example of this occurred in Rwanda, when guerilla fighters would take off infants' diapers to determine their gender so that they could kill the boys (Jones, 2002). It has also been documented that in cultures with strong patriarchal traditions, men and boys are more likely to be massacred en masse as a means of eliminating certain ethnocultural groups (Carpenter, 2006).

Challenges in Resettlement

Refugees encounter a host of challenges as they resettle (Miletic, 2014; Young & Chan, 2014). Some of these challenges include learning a new language, being un- or underemployed, experiencing discrimination, dealing with acculturative hassles and cultural learning, and having to face cultural bereavement. Not surprisingly, these stressors have been found to negatively affect refugee well-being (Schweitzer, Brough, Vromans, & Asic-Kobe, 2011; Young, 2001). In the following section, we will explore how gender affects these challenges. Specifically, we will focus on employment, discrimination, and family relationships.

Employment

Gender has been found to play a major role in shaping the economic adaptation and employment of refugees (Miletic, 2014). In the case of refugee men, many experience downward mobility during resettlement (Takeda, 2000; Watkins, Razee, & Richters, 2012). In particular, among educated refugees, their professional credentials and past employment experiences are typically discredited. In addition, fluency

in the host language is a barrier to obtaining meaningful employment. As a result, many refugee men experience employment-related challenges, such as being underemployed in low-skills and low-paying jobs, being employed on a temporary basis, or being unemployed altogether (Krahn, Derwing, Mulder, & Wilkinson, 2000). Consequently, being un- or underemployed has a number of detrimental effects on refugee men beyond financial instability and loss of social status (Beiser, Derwing, Mulder, & Wilkinson, Hou, 2001; Krahn et al., 2000; Jali, 2009). For example, un- and underemployment was found to be a strong risk factor for depression in a 10-year longitudinal study among Southeast Asian refugee men resettled in Canada (Beiser & Hou, 2001). Furthermore, in societies where employment and financial stability are seen as signs of masculinity, unemployment is often seen as a significant threat to refugee men's self-identities and self-worth (Jali, 2009).

Overall, the employment experience for many refugee women tends to follow a different course. Compared to refugee men, women often arrive in the country of resettlement with a lower educational level and with lower literacy (Hou & Beiser, 2006). While some refugee women were employed prior to migration, many never participated in the formal labor market, either by choice or due to cultural norms (Franz, 2003). However, during resettlement, many refugee women do enter the labor force to supplement the family income. Refugee women tend to be more willing to take up low-skills and low-paying jobs or to work in the informal sector. For some, they end up being the sole breadwinner when their husbands are chronically unemployed (Franz, 2003; Krahn et al., 2000). Similar to refugee men, fluency in the host language remains a major barrier for stable employment for women (Watkins et al., 2012).

Discrimination

Another challenge that refugee men and women commonly encounter during resettlement is discrimination. Discrimination is an intentional act that treats individuals unfairly based on their membership in particular social groups, such as gender, ethnicity, immigration status, and religion (Edge & Newbold, 2013). Increasingly, acts of discrimination have become more subtle and elusive in many societies. Compared to more overt forms of discrimination common in the past (e.g., verbal or physical abuse), subtle forms of discrimination are more prominent but more elusive and difficult to detect. Subtle forms include being unfairly dismissed from the workplace, being treated rudely, or excluded in social contexts (Noh, Kaspar, & Wickrama, 2007). As a result, the ambiguity inherent in these discriminatory social interactions cause stress for refugees, especially among visible minorities.

As noted in other chapters in this book, gender and culture intersect in shaping individuals' experiences. This intersectionality is of particular relevance when examining the challenges that refugees face with discrimination (Pittaway & Bartolomei, 2001). Refugee women are especially vulnerable to discrimination. Often, they are discriminated against based on gender, culture, migration status, and, in

many cases, the fact that they are visible minorities (Kira, Smith, Lewandowski, & Templin, 2010). In their countries of origin, refugee women may have encountered some forms of gender discrimination, such as forced marriages, sexual harassment and exploitation, and disadvantages at school and in the workplace (Kira et al., 2010). However, upon resettlement, many refugee women continue to encounter these gender-based discrimination hassles as well as other forms of discrimination (e.g., racial), and thus become further marginalized compared to refugee men.

Experiencing discrimination has a deleterious impact for both men and women. When refugees internalize their experiences of discrimination, they develop feelings of reduced self-efficacy and self-worth (Kira et al., 2010). Among female refugee torture survivors, encounters with discrimination worsened the effect of premigration trauma on health during resettlement (Kira et al., 2010). Compared to refugee women, it has been reported that refugee men tend to have greater difficulties coping with discrimination (Jasinskaja-Lahti, Liebkina, Jaakkola, & Rutter, 2006; Te Lindert, Korzilius, Van de Vijver, Kroon & Arends-Toth, 2008). Jasinskaja-Lahti et al., (2006) found that this gender difference was largely due to the fact that refugee men typically enjoyed higher social statuses in their countries of origin than women, and that acts of discrimination in host countries served as reminders of their loss of status. There is, however, some evidence that the stress associated with discrimination is buffered by having social support from members of the host society for both refugee men and women (Jasinskaja-Lahti et al., 2006). Interestingly, Fozdar and Torezani (2008) found that refugees resettled in Australia reported relatively high levels of well-being despite experiencing discrimination. They found that refugees had developed a wide variety of strategies to cope with the discrimination, and that they made conscious efforts not to internalize the experiences of discrimination into their self-identities. This was particularly true for refugee women. For instance, some were able to rationalize their experiences of discrimination as being a trade-off for the new economic and educational opportunities they had gained for themselves and their children (Fozdar & Torezani, 2008).

Family Relationships and Conflicts

As refugee men and women resettle, their cultural identity and behaviors often shift as their contact with the host society increases (Berry, 2008). The process of acculturation is stressful given the initial cultural shock, and the subsequent difficulties in negotiating the conflicts that arise when identity, values, and behaviors from the heritage culture are in conflict with those from the dominant culture. For example, marital conflicts can arise between marital partners when they follow different acculturation strategies and pathways (Khawaja & Milner, 2012). Refugee women who work outside the home often have greater exposure to the new culture and thus adopt new cultural norms, behaviors and language more readily compared to their husbands (Hojat et al., 2000). In addition, many working refugee women continue to be primarily responsible for the household and childrearing. As a result, many refugee women are stuck with the infamous “triple burden” (Lipson & Miller, 1994;

Spitzer, Neufeld, Harrison, Hughes, & Stewart, 2003). In addition to working outside the home and keeping up with domestic responsibilities, many refugee women also play the additional role of cultural broker between their partners and children, especially with respect to acculturation-related conflicts (Zhou & Bankston, 2001).

For some refugee men, the fact that their wives are now gainfully employed requires them to accept this new reality, to be more involved in doing household chores, and to take care of the children. This shift in gender roles is often viewed by men as stressful, especially for those who come from more traditional cultures (Khawaja & Milner, 2012; Renzaho, McCabe, & Sinsbury, 2011). Furthermore, as refugee women become more acculturated towards the host society culture, many expect more freedom and autonomy in their daily choices, such as clothing, friends, and finances (Khawaja & Milner, 2012). In some cases, refugee men become resentful towards their partners as they view their demands as threats to their masculinity. Similarly, in our studies with Bosnian refugees resettled in Canada, it was found that acculturative hassles significantly predicted less marital satisfaction for refugee men, but not for women (Miletic, 2014; Young & Miletic, 2014). As their partners acculturate towards the Canadian host culture, refugee men reported being less satisfied with their marriages. Interestingly, marital resilience (e.g., willingness to share household responsibilities, feeling safe to share concerns, and valuing time spent together) predicted greater marital satisfaction for both Bosnian refugee men and women.

In addition, family conflicts often occur between parents and children due to differential acculturation strategies (Lazarevic, Wiley, & Pleck, 2012). Typically, refugee children adapt to the host society culture and language more rapidly than their parents (Jones, Trickett, & Birman, 2012; Young & Chan, 2014). As a result, refugee children develop attitudes and engage in behaviors that may conflict with their parents' heritage cultural norms (Deng & Marlowe, 2013). In cultures where there are strong family ties and traditional moral obligations, familial conflicts often intensify as children acculturate towards the more individualistic tendencies of host society cultures (Rousseau, Drapeau, & Platt, 2004). For example, among Vietnamese refugees resettled in the United States, fathers tend to enforce strict traditional cultural values and emphasize the importance of obedience among their children, particularly with their daughters (Zhou & Bankston, 2001). In contrast, while mothers also value that their children maintain Vietnamese traditions, they tend to be more understanding of their children's needs for more independence within the context of American culture. Interestingly, there is a fine balance in negotiating the *appropriate* level of independence for daughters in particular. While many of the Vietnamese women desired more autonomy for their daughters so that they would be less dependent on their future husbands (e.g., have more decision making power), the mothers also expressed concerns that their daughters may become *too* independent and engage in behaviors that would conflict with Vietnamese traditions (e.g., dating at a young age; Zhou & Bankston, 2001).

While acculturation-related conflicts are taxing for refugee parents, they have also been found to be stressful for refugee children and adolescents (Jones et al., 2012). In a recent study with Vietnamese refugee families, refugee children who

were highly acculturated to the American culture were significantly more likely to perceive their parents as burdensome and demanding in maintaining their traditional culture values, and practices (Vu & Rook, 2013). With respect to gender differences, refugee girls who were highly acculturated towards the American culture were found to be ten times more likely to report arguments with their parents and to feel criticized by their parents. However, no significant relationships were found between acculturation and conflicts with parents among boys (Vu & Rook, 2013).

Differences in acculturation strategies between refugee parents and children have also been found to negatively impact on refugee children's mental health. For example, in Serbian refugee families where the parents' acculturation towards the American host culture is low, the children's acculturation towards the American culture positively predicted children's depressive mood (Lazarevic et al., 2012). Conversely, there were no links between children's acculturation and depressive mood in families where the parents were highly acculturated to the host culture.

Given the acculturation differences between refugee parents and their children, it is common for many refugee children to act as cultural brokers and language interpreters for their parents (Renzaho et al., 2011). Cultural brokering is especially common among families where the mothers have low levels of competence in the host society language (Jones et al., 2012). In the context of refugee families from the former Soviet Union, while most parents were appreciative of having their children help them navigate various language and cultural barriers during resettlement in the United States, some parents felt that they were less respected due to the role reversal. In particular, some parents felt that their authority as parental figures was being undermined or challenged. Furthermore, the use of refugee children as cultural brokers has also been found to lead to an increase in familial disagreements and emotional distress among the children (Jones et al., 2012). This is especially the case for children who are more acculturated towards the host society culture and less oriented towards their heritage culture (Wu & Kim, 2009).

Refugee Mental Health and Well-Being

It is well documented that many refugees suffer from an array of mental health challenges (Hollander, Bruce, Burstrom, & Ekblad, 2011; Porter & Haslam, 2005; Renner & Salem, 2009; Steel et al., 2009). Specifically, exposure to both premigration trauma and resettlement stressors has been linked to mental health difficulties with cumulative effects (Lindencrona, Ekblad, & Hauff, 2008). In this section, we will discuss the mental health difficulties that refugee men and women commonly face, with a focus on the impact of gender. In addition, we will discuss the research on positive psychological well-being among refugees.

Posttraumatic stress disorder (PTSD) is one of the most commonly diagnosed mental health disorders in refugees (Steel et al., 2009). In a large scale meta-analysis, with samples of over 64,000 refugees from 40 countries, the overall prevalence rate for PTSD was around 30.6% (Steel et al., 2009). However, substantial

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