



Counseling Center
World Relief DuPage

Who Are refugees: UNHCR definition

- *A person who owing to a **well-founded fear of being persecuted** for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of their nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it.."*



COMING TO THE USA

Who decides: The President and Congress make decision how many refugees will be resettled within a year and from what regions (countries). This year 70,000 refugees will arrive. States subcontracts with 12 resettlement agencies and one of those is World Relief.

The eligibility for each individual or family established abroad where refugee status is approved.

Refugees vs. Voluntary Immigrants

Aspects of Migration

Push / Pull Migration:

Deciding to leave the home country as opposed to being forced out. Immigrants choose to migrate, refugees are compelled to flee and typically experience pre-flight trauma (including forced migration).

Refugees vs. Voluntary Immigrants

- **Choice:** Refugees usually do not have the choice of which country in which to resettle; the country selected may not necessarily be the country of their first preference. Immigrants have engaged in a process of choice

Refugees vs. Voluntary Immigrants

Plan - Process: Immigrants make decisions, plan, pack, arrange for transference of belongings and finances. Refugees may decide to flee quickly, have not arranged for such a move, usually experience trauma and stress related to their flight and often arrive in country of first resettlement with almost nothing.

Refugees vs. Voluntary Immigrants

(cont)

Cannot go back: Immigrants have not left illegally or while being pursued. Refugees often have to flee, may have little or no documentation and may never feel safe (or welcome) to return to their home country - even after a change in the political régime.

Transition time: Refugees usually have a long transition process before they find a politically acceptable permanent residence for themselves. They usually spent years in Refugee Camps which are often overcrowded unsanitary, unsafe and can be more than a temporary refuge.

Definition of Mental Health

The WHO has defined health as a state of complete physical, mental, and social well-being, rather than merely the absence of disease.

Mental health, then, refers to optimal well-being and should be viewed holistically, as an interaction between body, mind, and the social realm. This concept of holistic mental health consists of six components:

Physical

Psychological

Intellectual

Social

Vocational

Spiritual



Holistic View

The holistic model of health provides an especially effective model for the refugee population because it goes beyond physical or mental health to incorporate the clients' **cultural and religious values.**

Cultural Differences

For example, in the United States, being assertive and open about what one wants is generally considered healthy, and an indication of high self-esteem. However, in other countries, such behavior may represent other less-desirable qualities, such as immaturity. The meanings of non-verbal communication, such as eye contact and personal space, differ widely across cultures. Behavior considered appropriate with members of the other sex, the elderly, or children may be quite different, depending upon the culture.



Cultural Sensitivity

To increase CS:

1. Find out as much about the country of origin as possible. What are the political system and recent history and what experiences are refugees likely to have undergone?
2. Review cultural values, family structure, and appropriate behavior for members of this group and society.
3. Keep in mind that each refugee is an individual and may have quite different values and aspirations from other refugees from the same culture.

Values Conflicts

Major Pressure Points

American values conflict with or compromise their values.

- Following is a list of some principal American values:
- Self reliance
- Pursuit of individual happiness and career choices
- Economic and social independence of women
- A society that values a very competitive marketplace, free speech and a secular government
- Need to be independent, but also be part of a team in certain employment environments
- Materialism as a measurement of social status
- Importance placed on youth, change and innovation
- Limited government role in providing social services

Values Conflicts :

Other attitudes that may cause confusion or conflict:

- **The nuclear family vs. the extended family**
- **Individual vs. Community**
- **Non-verbal expression between cultures**
- **Different ways of demonstrating friendship - especially between males and females and across age groups**
- **Negative local reaction or resistance to accepting anything “foreign” in the neighborhoods where refugees are resettling**
- **Marrying or dating outside of one’s ethnic or racial group**
- **The extensive use in the U.S. of the legal system to resolve problems**

Frequent Conflicts

Within Families:

- Reconfiguration of family
- Changes in traditional male/female roles
- Intergenerational conflict
- Child neglect and spousal abuse
- Individual and parental acculturation failure
- Post-Traumatic Stress Disorder

Within and Between Refugee Communities:

- War and civil unrest brought into U.S.
- Belief that other refugee groups are treated more favorably by resettlement agency

Within Neighborhoods

- Residence in low-income, high crime area
- Ethnic gangs and organized crime
- Racial/ethnic discrimination, non-acceptance and negative stereotypes

Changes in the Support System

The refugee experience can negatively impact the following support systems which individuals (and their families) rely upon:

Family, extended family, kin, clans, tribal members, elders, etc.
(play traditionally important roles in other countries)

Religious affiliations and spiritual teachers

Sense of belonging to, and being involved as part of one's neighborhood or village

Educators and the schools / Work and professional associations
Centralized and local governmental social service agencies
Religious leaders

Private therapists and family physicians are not common in non-Western cultures.



Stresses and Trauma for Adults

- Violent traumatic events prior to and during migration Violent events following resettlement
- Family Disruption / Family separation
- Communication between two worlds - communication with separated family members may be difficult or impossible
- Family reunification - expectation may not be realized
- Role reversal with youth/
- Changes in traditional male/female roles
- Intergenerational conflict
- Survivor guilt

Stresses and Trauma for Youth

- Role reversal / ambiguity
- Intergenerational conflict
- Inadequate parental figures
- Exploitation / abuse
- Inadequate educational preparation
- Pressure to excel in school
- Language barriers
- Peer pressure
- High crime neighborhoods
- Racial discrimination at school

Losses :

Family / extended family separation

Professional or social status / self-esteem

Culture, music, language, food and the physical appearance of the country of origin

Familiar social, cultural, political structures and one's place in the world

Personal support system (friends, kin, teachers, lovers, etc.)

Possessions, traditional family lands (including burial sites)

Economic security

Health

Mental and emotional well-being

Shared traditional values

Faith, spiritual beliefs

How refugees respond to this trauma

depends on a variety of factors, such as:

- a) The duration of the stressful event
- b) Whether it was one single event or multiple events
- c) Level of stability of the individual's family life prior to the stressful event
- d) Level of coping skills
- e) Personal characteristics
- f) Presence of a support system
- g) Age and developmental stage



FACTORS AFFECTING RATE OF ADAPTATION TO THE NEW COUNTRY

- *Stability of life before becoming a refugee*
- *Personality structure*
- *Level of trauma experienced*
- *Skills possessed*
- *Amount and quality of support and resources available after arrival*

GOAL: CULTURAL INTEGRATION

Basic Needs Met

- Employment and economic stability
- Language Capability

Strong Family Relationships

- Appropriate roles of parents and youth
- Balance between work and play,

Community Ties

- Strong refugee community
- Positive relationships with Americans

Bi-cultural identity

Sense of Power and Control



WORLD RELIEF DuPAGE/ AURORA

Client centered – wrap around services

Culturally and linguistically sensitive

Comprehensive services:

Refugee Resettlement

Employment Services

ESL

Youth Services

Counseling Services for refugees and their families

Immigration services

Volunteer and church relation services

Counseling Center at WRD/A

– established in 1999 (grant from Office of Refugee Resettlement – ACFS/DHHS)

One of three programs within the state for refugee mental health (FACES at Heartland Alliance and Horizon Clinic at WR Chicago).

Advantages of being within Resettlement agency –

Integrated treatment with other services – holistic approach

Program built around specific barriers to treatment that refugees experience

Culturally and linguistically appropriate



Counseling Center Services

Mental Health Services

Individual/group/family counseling

Psychiatric Services

Crises intervention

Senior Services

Bright Ideas

Case advocacy and support

Peer Advocacy

Cultural Adjustment Support groups

Family Services

Healthy Marriage Initiative

Family Strengthening Program

Family Counseling

Strenghts

- Integration of non-traditional treatment modalities
- Bicultural trained staff (MA level, licenced)
- Variety of modalities – individual, group family
- Easy accessibility /entry point not only for services but the USA
- Transportation provided
- Home and community based
- Access to Psychiatric services on sight
- Prevention / early intervention

Strengths (continued)

- Support groups, family and marriage strengthening trainings
- Programs adjusted to the client's level of literacy
- Reducing risk factors and developing protective factors through by strengthening and utilizing ethnic community
- Comprehensive Senior Refugee Services
- Strong Coalitions with other agencies serving immigrants and refugees (mostly in Chicagoland)



Cultural Sensitivity

Served clients of 24 different ethnic groups

To increase CS:1. Find out as much about the country of origin as possible. What are the political system and recent history and what experiences are refugees likely to have undergone?

2. Review cultural values, family structure, and appropriate behavior for members of this group and society.
3. Keep in mind that each refugee is an individual and may have quite different values and aspirations from other refugees from the same culture.

Challenges - Funding

- Funding Sources Include: State and Federal Grants (90%)/Private Donors (10%)
- No fees for services or insurance reimbursement
- Services based on funding not on needs and gaps in services
- Difficulty obtaining sustainable funding and therefore stable programming
- Lack of resources to obtain funding
- Understaffed and under funded

CHALLENGES continued

- Wide range of issues needs to be addressed by staff .need for continues staff development
- Each new ethnic group has specific mental needs
- Difficulties diagnosing / symptoms and clinical pictures culturally determined
- Lack of research based studies and relevant resources
- What is a best model practice for one group does not apply for another – constant need to change approach and modalities of treatment
- Need for qualified interpreters and culture brokers
- Prevention of staff burn-out and secondary traumatization
- Need for strong relationships across the service network within DuPage

GAPS IN SERVICES

- The need for services is greater than the capacity of the agency
- Services limited to 60 months upon arrival to the USA
- Need for services for refugee children and adolescent
- Need for Domestic Violence program specific for refugee families
- Need to build strong collaboration with schools, criminal justice system, primary physicians and other community based agencies to enlarge the scope of available services and prevent duplication of services



Future Developments

- The need for cross-cultural services will be expanding as the numbers are growing
- Suburbs are for the first time becoming entry point for immigrants
- Ethnic population is following job market available in the suburbs
- Congregating initially into ethnic communities is not any more the only model in adjusting to the new culture I



Possible Solutions/ Suggestions: Chicago Experience

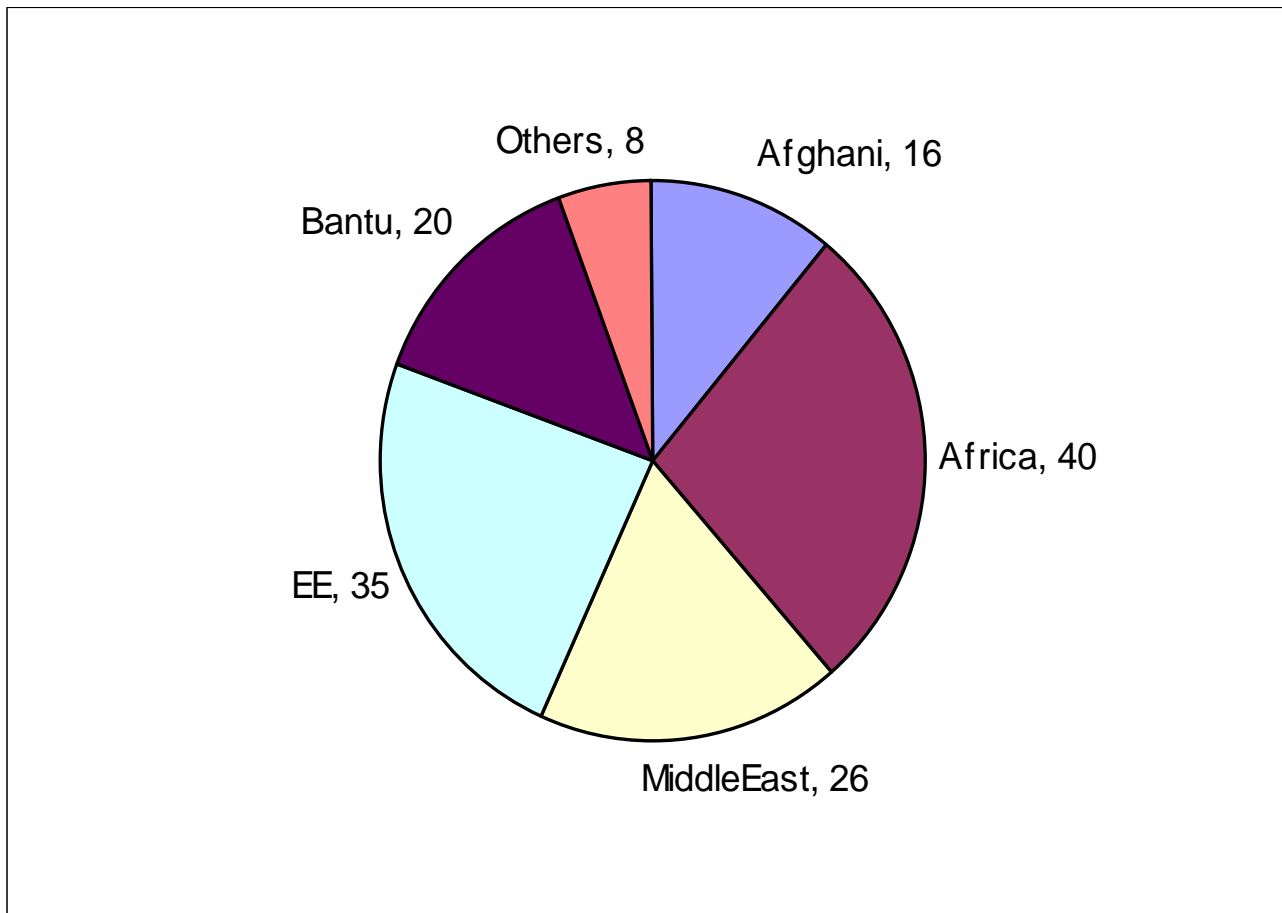
- Many of **community based ethnic associations** are natural place where to start with services
- The access and utilization of services will be improved by well funded programs delivered by ethnic community based services.



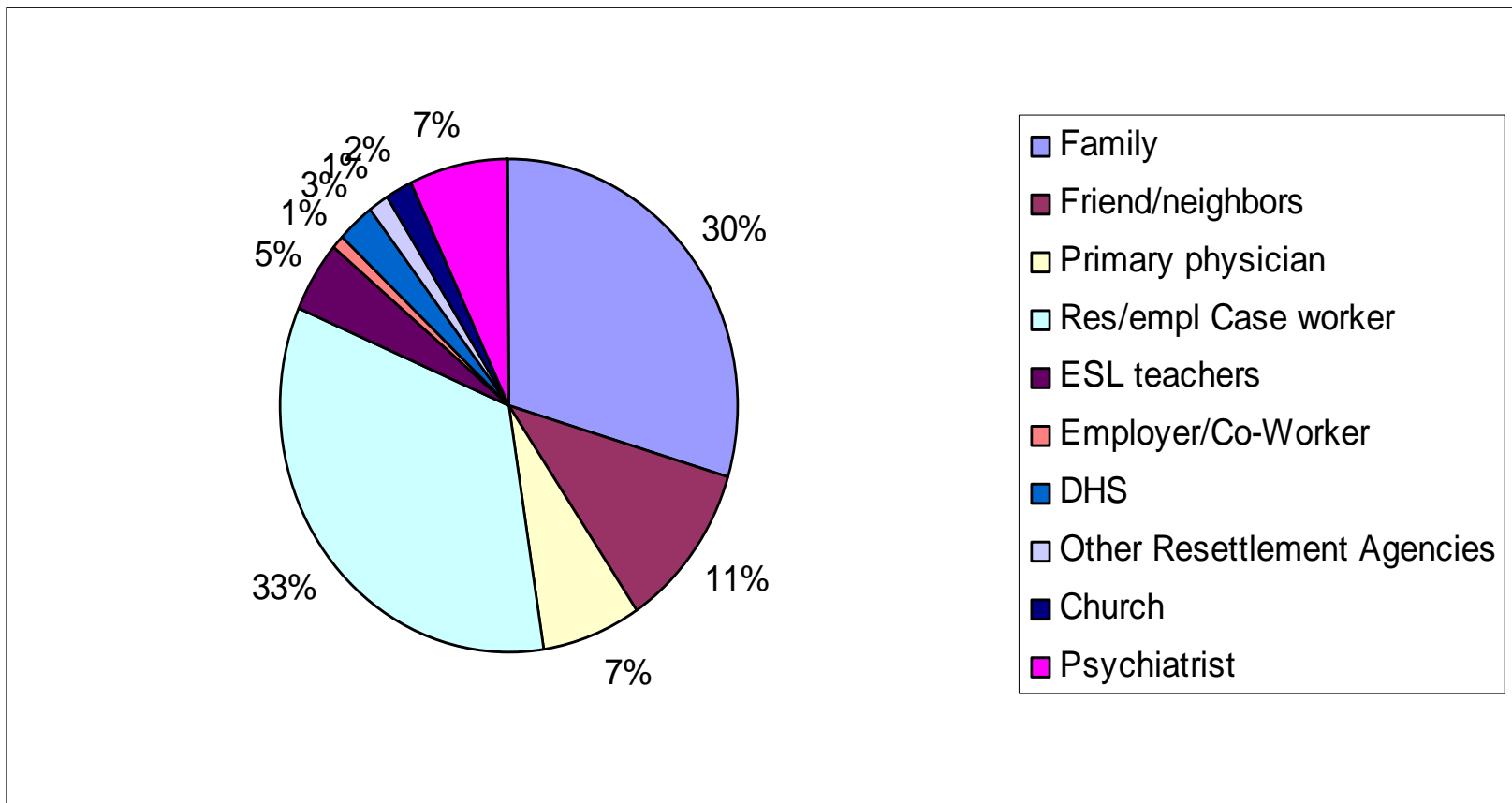
Empower Ethnic Community Organizations (continued)

- Promote development of Ethnic community organizations (MAA) and empower them to create programs that are culturally and linguistically appropriate and that are at the same time cost-effective
- Integrate (MAA) services into existing network within the county (many are based in the city and opening suburban sites as the population is shifting)

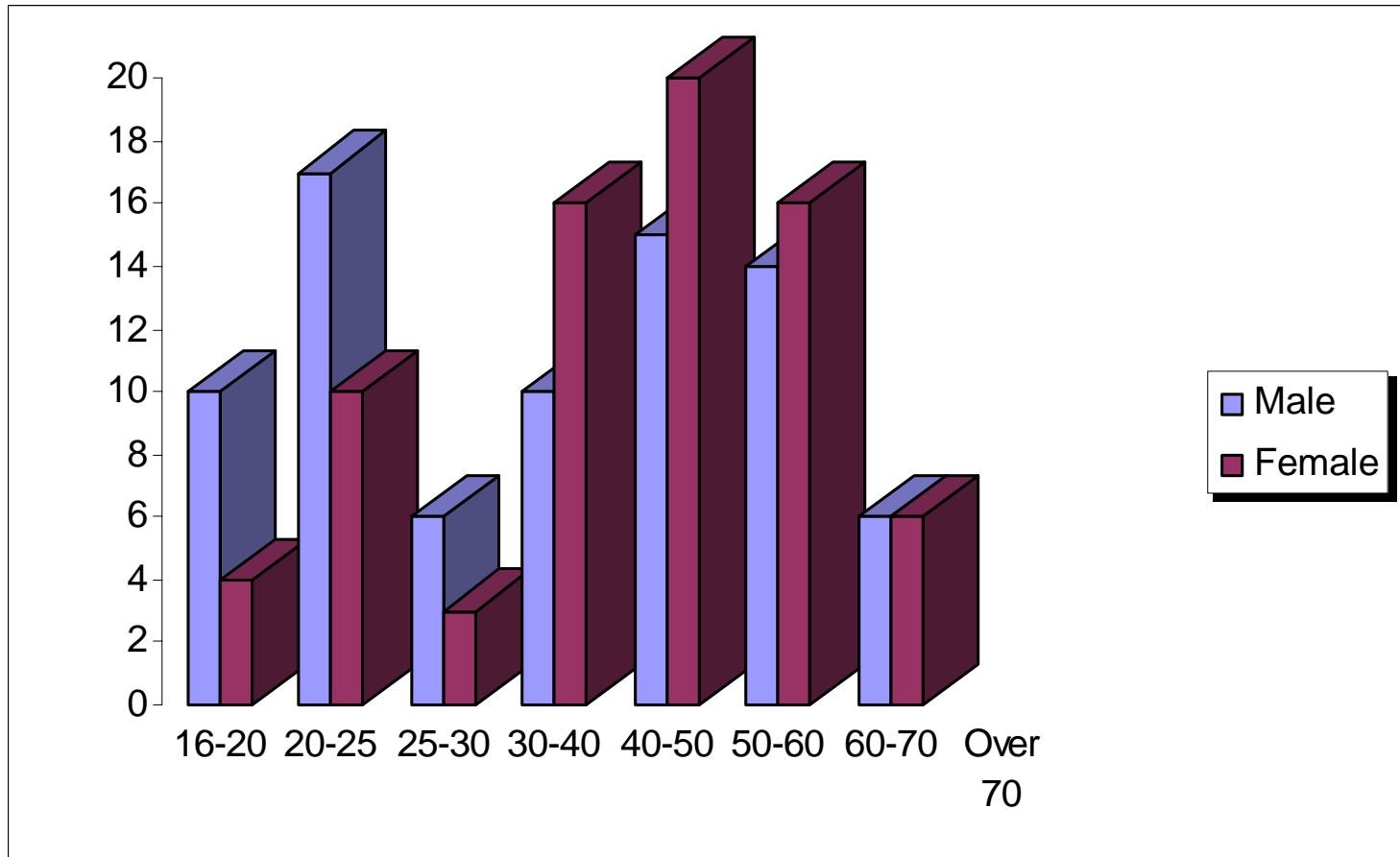
Clients (demographics - place of origin) Mental Health Services (in 2006)



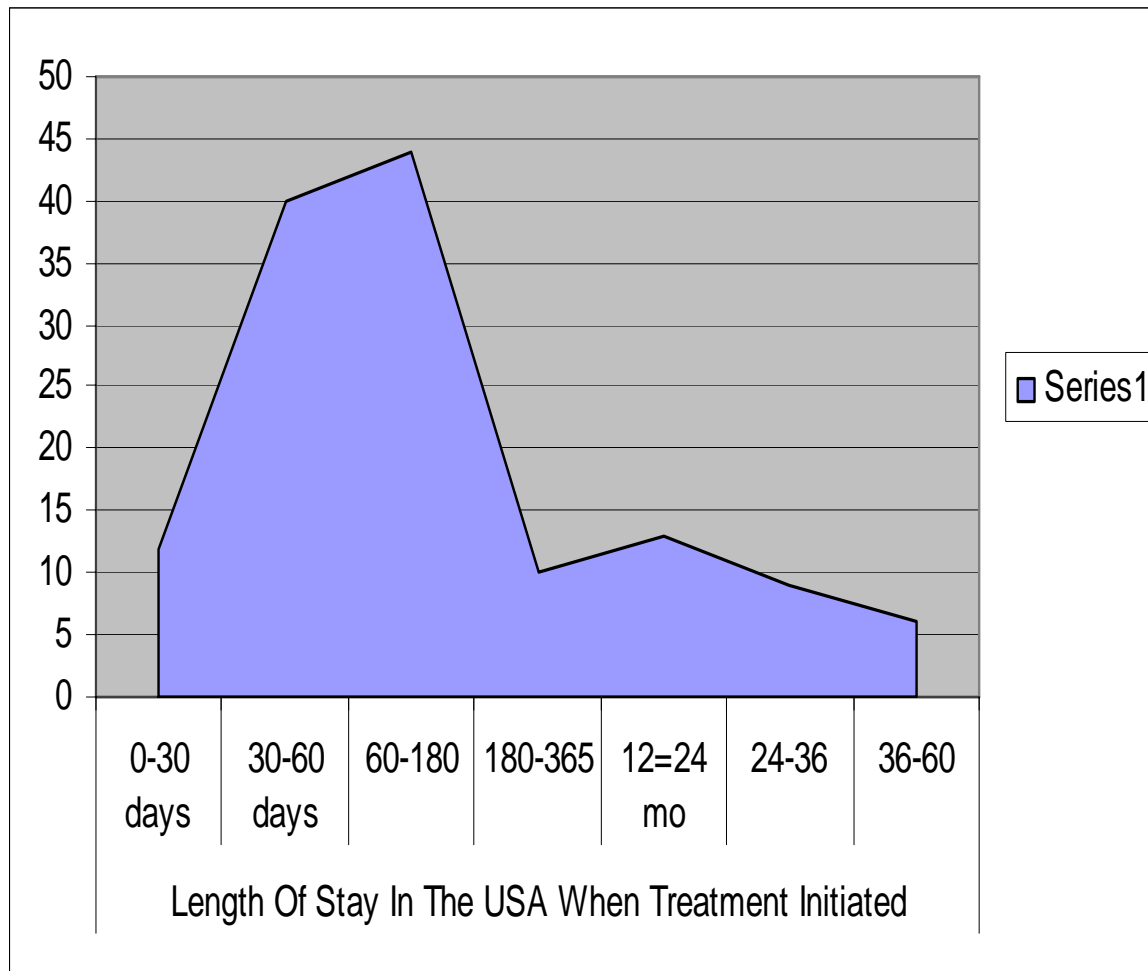
Referral Sources - 2006 annual report)



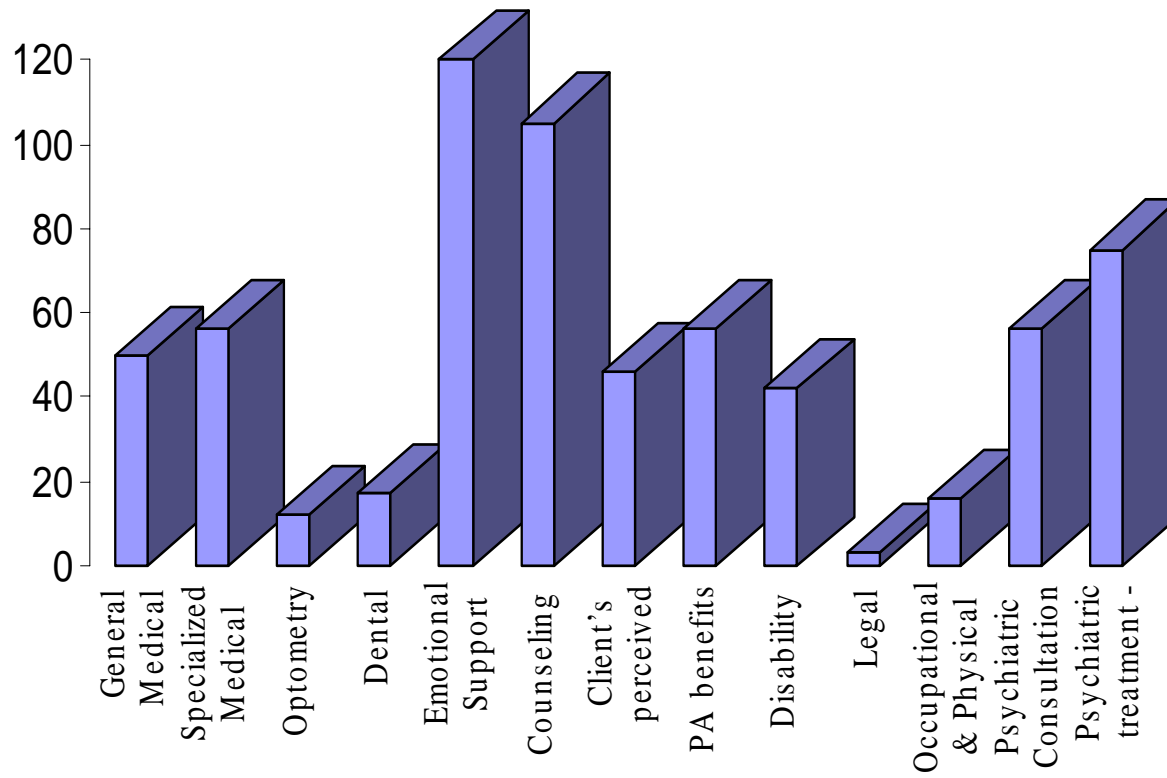
Gender and Age of Clients



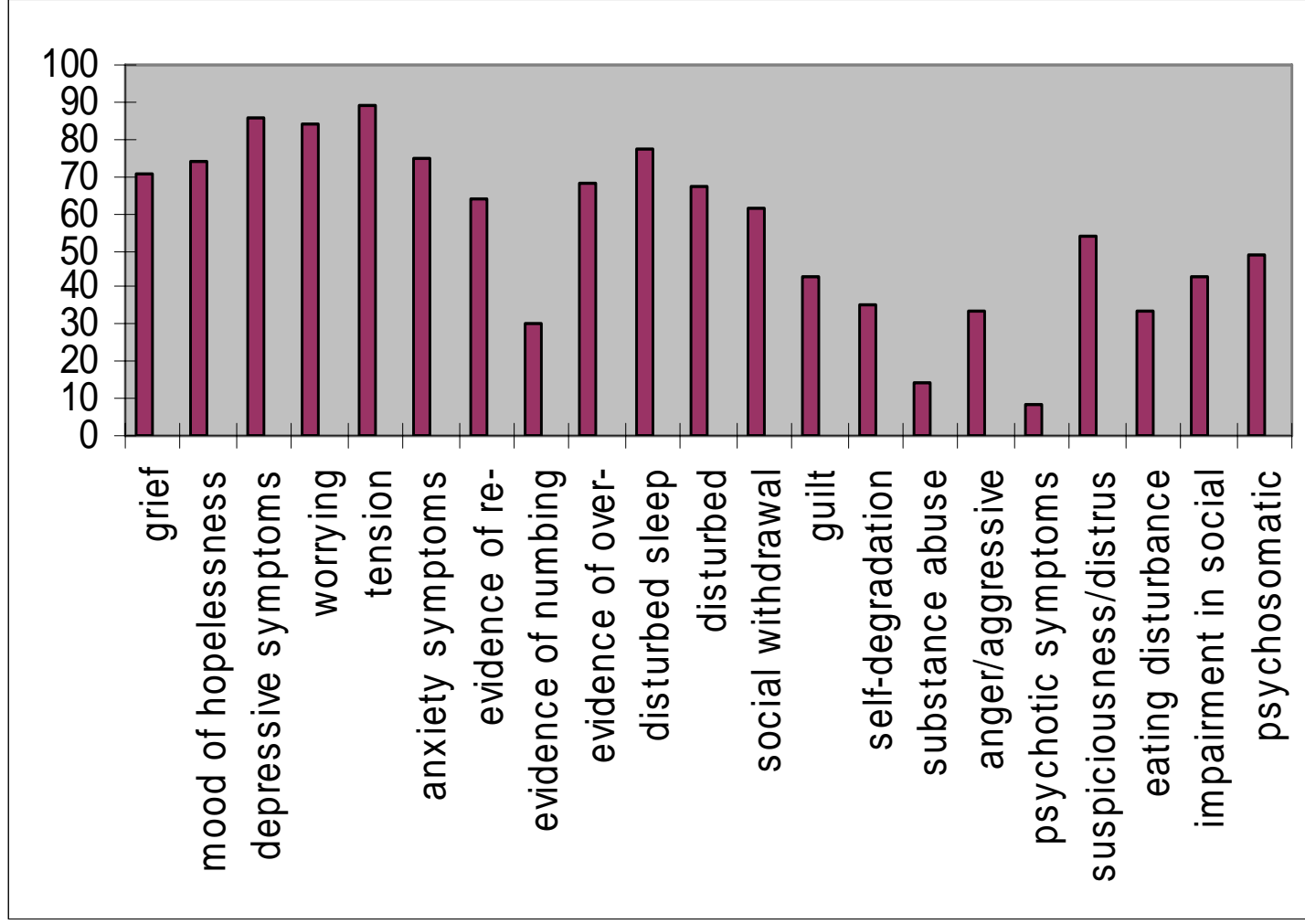
Length of stay in the USA



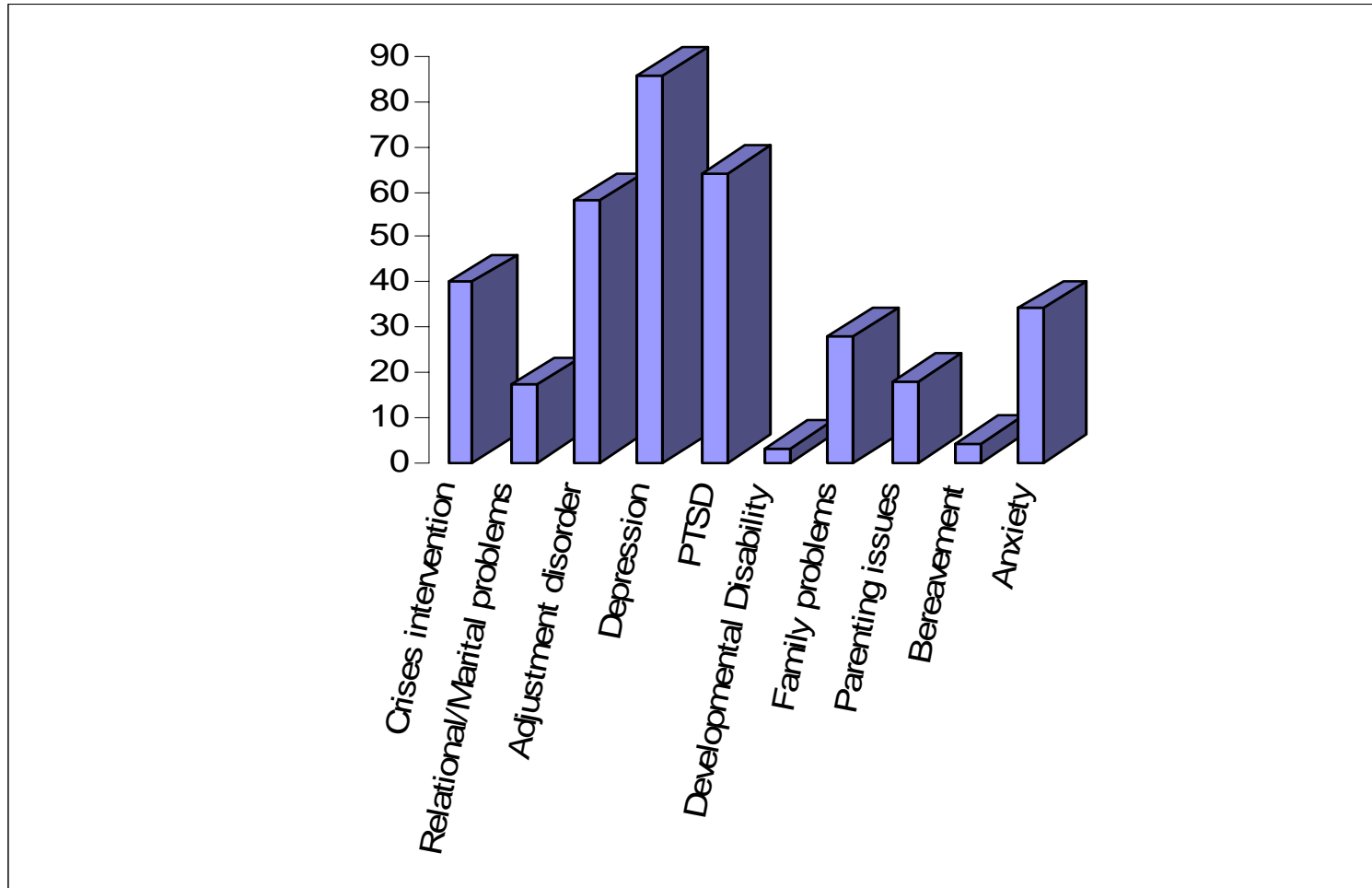
Needs



Psychological symptoms



Focus of treatment



Traumatic experiences

