Settlement Experiences of Syrian Refugees

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Abstract

Statistics Canada (2017) reports that over 40,000 Syrian refugees have arrived in Canada since November of 2015. This large influx of refugees, some with psychological trauma, poses a great responsibility to service providers to ensure services meet the needs of their new clientele. One service provider in Midsized City, Ontario, which will be referred to as The Resource Center, has taken a new and culturally informed approach to providing service. This center has held multiple “Welcome Neighbour” events across the city to invite newcomers to form a closer community and give them the platform to express their needs as refugees. Open-ended questions focused on settlement experiences included: “What causes you to feel settled?”, “What causes you to feel unsettled?”, and “What would help you feel more settled?”. Open-ended questions focused on experiences with community services included: “What do you like about the services?”, What don’t you like about the services?” and “How well do the services serve you and your family?” The researcher reviewed all questionnaire responses, coded individual statements into general topics, and finally, categorized coded topics into overarching themes. Four themes emerged, including: needed skills and resources, community feelings, present adequate resources, and positive feelings of the future.

Keywords settlement, community, Syria, refugees, qualitative
# Table of Contents

Abstract

Table of Contents

List of Appendices

Chapter 1: Introduction

Chapter 2: Literature Review

Chapter 3: Methodology

Chapter 4: Results

Chapter 5: Discussion

References

Appendices

Curriculum Vitae
List of Appendices

Appendix A: Charts and Tables 67
Appendix B: Ethics Certificate 71
Appendix C: Survey Questions 73
Chapter 1: Introduction

Over 40,000 Syrian refugees have arrived in Canada since November of 2015 and are now integrating into Canadian society (Statistics Canada, 2017). Those arriving from abroad represent a small proportion of the 4.8 million who have left the country since the conflict began following anti-government demonstrations as part of the Arab Spring in 2011 (Lifeline Syria, 2016). Each arrives with stories of family hardship, sacrifice, and trauma that have yet to be unpacked.

The notion of “settlement” is often used to describe a physical relocation. The formal definition includes both place and process. Refugee resettlement programs in the UK and Australia refer to the process as two-way; that is, for each community receiving members of refugee groups, both the refugees and the community adapt (Refugee Council of Australia, 2017; Refugee Council of the UK, 2017). This is a politically charged topic because in some nations refugees are expected to assimilate while in others there is a spirit of integration. In Canada integration is official policy and formally stated in the 1971 Multiculturalism Act.

While settlement necessitates access and means to meeting basic needs for food, clothing and shelter, integration requires a level of social inclusion that is comparable to others in the community within which one resides. Some basic preliminary ways that both physical and social needs can be met are referenced in government documents such as the “Settlement Plan” for privately sponsored individuals or families (Citizenship and Immigration Canada, 2017). Requirements specify that there are plans in place to meet and take to a residence, arrange transportation to appointments, arrange for interpreter service, be shown around, enroll adults in language training, assist with finding employment, linking to community activities, plan for seeing health care professionals, including a family physician and dentist, application for
provincial and interim federal health care, enrollment of children in school, child care arrangements and application for the child tax benefit.

There has been little attention to the settlement needs that the newcomers themselves identify. In order for the receiving community to be receptive and accommodating, refugees’ experiences should be recognized and reflected in both formal and informal ways and at a level that allows for not only basic needs but for social equivalence in order to promote full inclusion. It is recognized that settlement is a process as well as an outcome. Timing for the Syrian refugees in Midsized City is opportune, given that the first of those to have arrived are at the time of the study were nearing the 1 year mark. For Government Assisted Refugees, federal government housing and income support end after year 1. Therefore, many are looking to change their places of residence and move forward on employment goals.

Refugee families bring significant and unique mental health care needs. In particular, they require culturally sensitive services that Canadian infrastructure has not been built to support (Bhui, 2015). Cultural sensitivity is noted as the most important factor in raising service quality (Bhui, 2015). Another important factor is the support that mental health care professionals provide, based on an understanding of the journey that started before their Syrian departure and Canadian arrival (Bhui, 2015). The purpose of this study is to identify the settlement experiences of recent Syrian refugees including both their needs and challenges. These data will provide direction for development and support of culturally sensitive mental health practices by counselling professionals.

Migration from Syria

Syrian anti-government protests began in support of democracy. Government responded to these protests with force causing an increase in protests across the country and a calling for
President Assad’s resignation. Violence ensued and protesters acquired weapons to protect themselves. Rebel forces formed as a result of this conflict and fought to obtain control of parts of the country (Rodgers, Gritten, Offer, & Asare, 2016). As of August 2015, the United Nations reported that approximately 250,000 people had been killed as a result of this conflict. The United Nations further reports that there is clear evidence that all parties involved in this conflict have committed war crimes (United Nations Human Rights Office of the High Commissioner [UNHROHC], 2012) such as unlawful killings and torture (Amnesty International, 2016).

It is reported that approximately 4.5 million people have fled Syria since the conflict began and have now settled in neighbouring countries such as Turkey, Lebanon, Jordan, and European countries such as Serbia, Germany, and Sweden (United Nations High Commissioner for Refugees [UNHCR], 2017). The journey by one family from Syria to Canada has been described in a series of news reports (Merrifield, 2016) and is briefly presented here. These reports describe the Farwan’s as a family of 10 who fled Syria to Jordan and resided there for 3 years. The Farwan’s struggle financially, as many Syrian refugees do, without the ability to officially work. They found an apartment close to an olive grove, like the one they owned on a small plot of land in Syria. The Farwan’s youngest child, Kawther, 2, has never seen their Syrian home. The Farwan’s eldest child managed to find work as a mechanic and the small amount of income from working in the olive grove allow the family to clothe their youngest children.

**Refugee Camp Experiences**

There is compelling evidence that poor living conditions, similar to conditions reported by Syrian refugee camp residents, lead to high levels of psychological distress, especially in children (Mollica, Donelan, & Tor, 1993). Reported conditions include food insecurity, leaking
tents, lack of education for children, cold temperatures and the inability to work and earn income. (UN News Centre, 2015).

Hany al Moulia describes their experience in a refugee camp in Lebanon.

“I fled alone to Lebanon, but then after a month, my family followed me to the same camp. We spent three years in the same place. I don’t remember a lot of happiness, to be honest. But I remember a lot of things that bothered me. Like, time. I don’t care about time in that refugee camp because I lost everything. I lost my education and my chances and my dream. Well, I didn’t lose the dream because it’s my dream, but I did lose opportunities to achieve them. Also, the privacy. I missed my privacy. It’s a small space and everybody’s there. If you want to talk to someone, have a private conversation, everybody will notice that and they will hear you wherever you do it. So, basically, there’s no privacy. It’s an unhealthy life for any family.” (Davis, 2015)

In addition to the daily struggle of food insecurity and lack of privacy, many Syrian refugees are also struggling with their mental health (Alpak et al., 2015). Psychological distress was found to be increased by environmental (financial limitations, lack of appropriate housing, and inability to achieve employment) and psychosocial outcomes of living in a refugee camp (interruption of family roles, social support, and general inactivity) (Wells et al., 2016).

Arrival in Canada

In November of 2015, the Farwan’s, a Syrian family, submitted their application to come to Canada. The Farwan’s were scheduled a meeting with Canadian immigration officials, which was devastatingly put on hold due to a minor clerical error. After this error was corrected, many security and health checks began and the family remained hopeful for several weeks as they awaited news. In January 2015, the family boarded a plane for their first time. They have
enrolled all 8 children in school and the parents have begun English classes. The Farwan’s experience is that of many refugees; there is a lot of waiting and hoping involved, as well as numerous health and security checks prior to arrival (Merrifield, 2016).

**Syrian Refugees in Canada, Ontario and Midsized City**

In the wake of US President Donald Trump’s Anti-Muslim immigration policy, Canada has remained welcoming to Syrian refugees (Government of Canada, 2017). Some refugees, approximately 13,997 are supported financially via private sponsorship, while just over 20,000 are supported by the Canadian government (Government of Canada, 2017). There are an estimated 17,912 applications at this time (January, 2017), and an additional 1,993 individuals who are approved but have yet to travel to Canada (Government of Canada, 2017).

With the influx of Syrian refugees coming to Canada, it is important to understand who they are and the value they bring to Canadian culture. The majority of government-sponsored Syrian refugees are of Islamic faith (Halevi, 2016) and speak Arabic, with Assyrian, Armenian, Turkmen and Kurdish (Immigration, Refugees and Citizenship Canada, 2017). Approximately half are under the age of 18 (Immigration, Refugees and Citizenship Canada, 2017) and aid their parents in learning English (Fong, 2004). It is estimated that 18,770 Syrian refugees have less than a high school education and about 2,100 have graduated from university (Immigration, Refugees and Citizenship Canada, 2017).

Since the conflict, Ontario has brought in an estimated 18,000 Syrian refugees, which is approximately four times higher than the provinces annual average (Ministry of Citizenship and Immigration, 2016). Over 40% of all Syrian refugees who have arrived in Canada have settled in the province of Ontario (Ministry of Citizenship and Immigration, 2016). The most concentrated arrival cities for Ontario include the Greater Toronto and Hamilton Area, Ottawa, Midsized City,
Waterloo, and Windsor (Ministry of Citizenship and Immigration, 2016). Ontario also continues to show their support for incoming Syrian refugees as they lead the country in their private sponsorship which financially supports refugees throughout their first year in Canada (Ministry of Citizenship and Immigration, 2016).

Mid-sized City, Ontario, in particular, has officially “opened its heart” to Syrian refugees (City of Mid-sized City, 2017). Mid-sized City’s Mayor has issued a letter to Syrian newcomers, stating, “you will embark on a new adventure. I hope that you do not feel alone: there are thousands of people right here in Mid-sized City that are here to support you. I have witnessed the generosity of residents as we prepared for your arrival. I have no doubt that you will find what you need.” (City of Mid-sized City, 2017). A teacher at an elementary school in Mid-sized City that has welcomed more Syrian refugees than any other school in Southwestern Ontario, has stated “[The children are] just so eager to take advantage of everything here and learn.” (Carruthers, 2016).

Benefits of a Settled Refugee Population

Some Canadian citizens are upset about the amount of funding being spent on supporting Syrian refugees (a projected $1 billion) (The Canadian Press, 2016). This may seem like a large amount of money now, however, evidence shows that Syrian refugees may provide a country with an economic boost (Cassidy, 2015). This boost has already been seen in countries such as Turkey; there has been an increase in their economy by 3% and a projected 4% in the following years (Organization for Economic Co-operation and Development [OECD], 2016). In support of the idea that incoming refugees may have a positive impact on a country’s economy, Wong & Yohani (2016) found that approximately 85% of Canadian Post-Secondary sponsored refugees accomplished a bachelor’s degree, despite the difficult psychosocial demands that they face.
In addition to the economic benefits that Syrian refugees may create for a country, they also introduce motivation to form a strengthened community. “Residents band together to take in displaced Syrian refugees,” a story in the Dallas morning newspaper reports on Canadian refugee community support, showing Canadian efforts to welcome refugees has been noticed across the border (Kantor, & Einhorn, 2016). Stories of community support can be seen all over the country and are encouraged by Canada’s Prime Minister, Justin Trudeau, who posted on Twitter, “To those fleeing persecution, terror & war, Canadians will welcome you, regardless of your faith. Diversity is our strength,” in swift response to Donald Trump’s “Muslim ban” (Uechi, 2017).

In addition to the financial capital that refugees will bring to Canada, the individual stories of strength that they bring may be valuable to the Canadian image. Refugees are resilient and determined to integrate into their new communities to begin contributing to society in any way that they can. For example, many are still in the process of learning English. It is these refugees, with low English capabilities, that are accepting high risk and physically demanding employment opportunities, despite having much higher qualifications for employment (Smith, Chen, & Mustard, 2009).

Statement of Research Problem

While there is a considerable international base of literature on the transition and adjustment experiences of refugees, relatively little is known about the settlement experiences of Syrians in Canada. Over 1400 Syrian refugees settled in Midsized City during 2016. However, little is known about their first year of residence and what has helped and hindered their experiences of settlement.
A large community outreach effort, called “Welcome Neighbour”, included group meetings accessible from within each postal code across the city for Arabic speaking newcomers who had arrived within the past year. During these meetings, which were advertised to over 1000 individuals from over 250 families, landlord and tenant issues were discussed as well as transitions to employment. The participants’ experiences of settlement, including what has helped and what has made it difficult were invited through open-ended questions. Responses to these questions were accessed and analyzed to identify areas of strength and challenge for both refugees and their communities.
Chapter 2: Literature Review

Settlement experiences of Syrian refugees are both enhanced and hindered by forces that are personal and contextual. The research on refugees’ experiences of settlement vary depending on the definition used to characterize that outcome of the process. One potential contribution of the study is the use of a participant defined conceptualization of settlement. However, for purposes of this proposal it is necessary to identify some existing standards for successful outcomes of settlement and how settlement may also be viewed as a process.

A definition of settlement can include aspects of full functioning within one’s family and community similarly to the way the World Health Organization defines mental health: “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.” (World Health Organization, 2017).

In this chapter, research on settlement is presented beginning with pre-migration and migration experiences of refugees and their families. These experiences inform the review of strengths and challenges that exist to settlement, both within and external to individuals.

Migration Experiences

Since the beginning of the conflict in Syria, current refugees witnessed the breakdown of their communities. They were not passive by-standers, however, as they fell victim to the absence of health care, breakdown of social fabric, and forced displacement which caused an unfolding of community separation (Taleb et al., 2015). In addition to the stress caused by inaccessibility to healthcare, education, and social services, each Syrian faced the decision of when to leave and where to seek safety for themselves and their family. This decision involved unknown factors such as safety of travel, where loved ones were and if they were alive, and how
to seek refugee status. The multi-faceted transition of life in Syria throughout the conflict demonstrates the extent to which it effected all aspects of a Syrian’s life (Taleb et al., 2015). Even those not living in areas directly affected by war experience chronic war stress (Rijavec et al., 1996). The distance from the conflict can also affect how child development is impacted by war, however, other determinants, such as quality of life, can mitigate this detrimental outcome of conflict. (Mougrabi-Large, 2016).

Refugees’ camp experiences have also been challenging. McCallin (1993) studied Vietnamese children living in refugee camps and found that the factors associated with higher levels of psychological distress were longer lengths of stay in the camp, and caregiving arrangements, with unaccompanied children having higher levels of distress than children accompanied by their families. In addition, Mollica (1993) found high symptomology of depression and posttraumatic stress disorder reported in the context of poor living conditions such as lack of food, water, shelter, and medical care. Syrian refugees who stayed at refugee camps have reportedly experienced similar living conditions to that in Mollica’s 1993 study of Cambodian refugees (Lum, 2015). Alpack et al. (2015) looked into the prevalence of posttraumatic stress disorder symptomology amongst Syrian refugees in a camp in Turkey and found that women were most affected, as well as, those who had experienced 2 or more traumatic events before arriving at the camp, and those with a family or personal history of psychiatric concerns. Syrian refugees are coming to settle in Canada and the above studies suggest the importance of providing supportive mental health care to support them in their transition to their new lives.
Stressors and Trauma

There is some degree of debate in the literature concerning the extent to which refugees, should, based on the frequencies of life-threatening circumstances present within their countries of origin, be considered by definition to have been traumatized (Arthur & Ramaliu, 2000). The importance of this for settlement concerns degree of sensitivity and vulnerability to stress as well as personal resources for coping. These differences appear to center on the perceived needs of a population versus perceived needs of a particular community, family or individual. For example, there is clear evidence that refugees are, relative to immigrants, significantly more likely to experience onset of a psychotic disorder (Anderson, Cheng, Susser, McKenzie, & Kurdyak, 2015). In terms of coping, pre-migration experiences of life as having modest importance, lack of meaning and purpose in a context that appears devoid of same, affects feelings of personal control and value of relationships (Mabaya & Ray, 2014).

An alternative view is that the nature of pre-migration as well as migration experiences prior to arrival in destination country vary considerably (Beiser, 2006). Research tracing the types and timing of pre- and migration experiences that are life threatening range between civil war, genocide, escape, (George, 2013), as well as maltreatment for youth within their families of origin (Alessi, Kahn, & Chatterji, 2016). Indeed, among children from who’s families arrived as refugees, their socioemotional adjustment as observed within school varied considerably based on the degree of pre-migration trauma experienced (Persson & Rousseau, 2012).

Family Experiences of Settlement

There is relatively little literature concerning the settlement experiences of entire families. To some extent, this is characteristic of the definition of “family” from individualistic compared to collectivist cultures. In a collectivist culture, “family” is a broader and more
encompassing network of relationships extending into one’s community. For example, a commonly reported psychosocial stressor is noted as the worry for other family members whom they have separated from amid finding safety (Hall, 2017; Eastern Mediterranean Public Health Network (EMPHNET), 2014).

In contrast, the north American literature tends to focus on “family” as a nuclear family, including parents and children. The experiences of refugees’ nuclear families have been generally characterized as sources of strength, helpful and positive contributors to settlement for all members. Indeed, families who arrive together, despite levels of challenges experienced, did fare better in terms of managing the losses they endured, than individual refugees (Rousseau, Mekki-Berrada, & Moreau, 2001).

Families who express emotion, caring and support, as well as possess good collaborative problem-solving were more likely to perceive challenges encountered in ways where they could take meaningful action to either change or accept circumstances (Merali, 2005). Children who are responsive to parents’ efforts to maintain cultural traditions in the short term were appreciated by their parents, (Rousseau, Drapeau, & Rahimi, 2003). However, adaptation, through introduction to the language and increasing familiarity with the language as facilitated by their children, was an asset as time went on (Faas, 2010); for the children and youth, their school experiences were significant forces in their feelings of settlement. Bridging cultural differences between the children’s encounters with peers in their schools and parent’s knowledge and interest in their culture was easier when the cultural differences between country of origin and country of arrival were more similar (Beiser, Puente-Duran, & Hou, 2015). Greater differences between the cultures were more challenging to overcome (Stewart, Gagnon, Merry, & Dennis, 2012).
Personal Strengths

**Resilience.** Although many have experienced trauma, it is vital that we begin to see this trauma as a potential hardening factor which builds grit in a new context of increased safety. In addition, pre-migration trauma varies with consideration of the departure, country of origin, and migration experience (Beiser, 2006). Resilience among refugees includes the following factors: formal and informal support of social and community resources, maintenance of hopefulness, and habits of perseverance. Most notably, being able to make meaning out of stressful events helps refugees to manage the trauma they have experienced (Alessi, 2016). Although trauma is not a chosen or positive experience, the processing of traumatic events can lead to the development of individual grit and sense of purpose, all which can improve the journey of migration and adaptation to their new home country (Denov & Blanchet-Cohen, 2016). As mentioned, the utilization of community and social supports is important and it plays a role in engaging the positive development of strength in processing traumatic events. Therefore, the community services that are accessible to newcomers must aim to support refugees in this process of settlement with knowledge of trauma and strength of newcomers (Alessi, 2016). Newcomers do not only bring diversity of experience and culture, but also, serve as examples of perseverance, adaptability, and resilience (Marshall, Butler, Roche, Cumming, & Taknint, 2016).

**Fitting in.** There is a considerable literature on the integration styles of refugee and immigrant youth and adults suggesting that the best outcomes are associated with an integration style (retain culture of origin and host culture), relative to isolation (reject host culture and retain culture of origin), marginalization (reject culture of origin and host culture) or assimilation (reject culture of origin and retain host culture) (Kuo, 2014). While integration and assimilation have been found to associate with the most positive mental health benefits (Berry & Hou, 2016),
the greater the cultural distance (perceived differences between host and origin culture) experienced, the less optimal the mental health outcomes over both short and long term (Beiser, Puente-Duran, & Hou, 2015).

While the social determinates of health, such as housing, education, employment and income have been identified as essential (Edge, Newbold, & McKeary, 2014), belongingness is a fundamentally important resource for wellbeing during settlement among refugee youth and is associated with sociopolitical processes such as collective resistance and resilience the desire to create sense of belonging (Caxaj & Berman, 2010). Benefits included positive identity and sense of control or self-determination.

**Coping.** Coping with the challenges experienced prior, during and following migration necessitates the achievement of stability, notably in the interpersonal relationships and interestingly, income through employment (Beiser & Wickrama, 2004). Women in particular who connect with one another find that the group security experienced (Abdi, 2014) made it possible for them to increase confidence in and apply their own self-care strategies (Donnelly et al., 2011). When these group supports are experienced in religious context, the self-care and care for others embraced within the values and teachings of the religion are additional assets for their own and others’ coping (Talebi & Desjardins, 2012).

**Environmental Strengths**

**Preventive support.** Studies documenting the benefits of early preventive and transitional support to refugees have found promising results. For example, among female refugee youth, the first two years following migration are a particularly important period for which support is needed and benefitted from in relation to enhanced potential for good mental health (Khanlou, 2008). Preschoolers who participated in unstructured but monitored play with
other newcomer children developed social skills at an advanced rate (Rousseau, Benoit, Lacroix, & Gauthier, 2009).

**Ethnic community.** The familiarity and connection with others of the same ethnicity provides an important basis (Beiser, 2006) for making connections within the host culture. However, the social and political landscapes of the host country relative to the refugees’ experiences and histories have a substantial role in sense of safety (Lee & Brotman, 2011). Policies as well as community agency mandates and support, including funding, can promote or detract from sense of worth to the host culture (Michalski, 2002). The degree to which geographical location of refugees as they transition into a new country and culture is self-determined and proximal to others (Simich, 2003) as well as needed resources has a very strong effect on sense of community, including cultural, linguistic and migration similarities (Simich, Beiser, & Mawani, 2003).

**Systems that communicate.** There is evidence that the setting into which refugees are accepted and supported carries more influence than the contexts from which they left and experienced, including traumatic events (Briggs, 2013). A supportive political and policy environment of openness and acceptance is highly influential to refugee adjustment, settlement and mental health. Research into schools, for example, indicates that for refugee children and families communication across health and social services can be very helpful to facilitate needed services and supports (Akamatsu & Cole, 2000). When the school is receptive to parents’ involvement and recognizes their concerns and fears involved professionals can be very helpful to families (Dumbrill, 2009).

**Knowledgeable service providers.** For both general and specialized health and mental health issues, professionals within the health and community services systems can be most
helpful by contributing to a sense of safety and trust (Arthur & Ramaliu, 2000). While Western trained doctors and mental health professionals are important, so too are those who have an understanding of the language and culture. It is also essential to recognize that traditional healing can be the most culturally appropriate and effective means to treat and promote wellness (Fenta, Hyman, & Noh, 2006, 2007). Gender-based services can also be very important and helpful for women (Yohani & Hagen, 2010).

**Personal Challenges**

**Language and employment.** Among the most salient experiences that refugees carry into their host culture are the feelings of persecution and fear for safety (Riaño-Alcalá, 2008; Rousseau & Drapeau, 2004). These concerns weigh into all other challenges experienced in the new country. Of the new challenges, communication using the dominant language and relevant employment experience and skills are fundamental challenges experienced by most (Briggs, 2013). While one may have held a very high level position with significant responsibilities prior to relocation, the opportunities given language, training and cultural differences make it very difficult for a refugee to assume a similar position in the short term and possibly into the longer term.

**Environmental Challenges**

**Barriers to health services.** The difficulties associated with obtaining health care services including a primary care physician, family doctor or the complications of an emergency room visit are compounded by language differences (Campbell, Klei, Hodges, Fisman, & Kitto, 2014). Those who have the greatest success obtaining professional health services are those who have the greatest familiarity with both a Western model of health care and the language (Donnelly et al., 2011). However, the services can be made more open and accessible to
members of refugee groups with language services as well as cultural brokers who have cross-cultural experience and can interpret. This is particularly pronounced for children who often require involvement by different professionals in the health care system (Akamatsu & Cole, 2000). In addition, women who are refugees and pregnant have the most professionally-identified health care concerns, but lowest rates of utilization relative to immigrants or Canadian born mothers (Gagnon et al., 2013). Indeed, refugee health needs are higher but utilization lower (Fenta, Hyman, & Noh, 2006, 2007).

**Discrimination.** Public attitudes among members of the host country toward refugees are influenced by media portrayals (Esses, Medianu, & Lawson, 2013). These portrayals are often negative and inaccurate, leading to perceptions that incorrect as well as harmful. For example, post-migration experiences of discrimination based on visible status are strongly associated with mental health (Beiser & Hou, 2016). Among gender minority youth who were also refugees, challenges to their mental health were associated with the housing and employment difficulties they faced (Alessi, 2016).

**Education and income.** Language learning is a basic need for settlement. Access and progression through language learning programs can make a substantial difference to employment and income potential both directly, and indirectly through additional education (Marshall, Butler, Roche, Cumming, & Taknint, 2016). The greatest social isolation was experienced by refugees who had achieved the lowest levels of language proficiency (Pottie et al., 2011; Quallenberg, 2000). Despite language skills, oftentimes the first positions held by individuals who were refugees were physically demanding and high safety risk (Smith, Chen, & Mustard, 2009).
Mental Health Service Implications

The question of where we should start in developing quality mental health care services for Syrian refugees has been the question of few studies in today’s literature, perhaps due to the rush of refugees and the urgency of response needed for such a large population; quantity has been the focus over quality (Abou-Saleh & Hughes, 2015). As we prepare to welcome more Syrian refugees, we must improve our services to ensure a positive integration experience and create an environment which fosters independent thriving. According to Maslow’s hierarchy, this requires the establishment of physiological and safety needs in order to reach an ability to engage in love and belonging (Maslow, 1943). Marshall, Butler, Roche, Cumming, & Taknint support the theory of Maslow’s hierarchy in their 2016 research review showing that refugees face more barriers than their non-refugee counterparts. These barriers include having a focus on “other priorities,” or basic needs, instead of mental wellness. How Syrian refugees meet these needs may look different than individuals already immersed in Canadian culture. This makes it important for research to focus on baring witness to the voices of Syrian refugee strength and hardship within their communities to build effective social services to support them in their transition to Canadian culture. The constructivist approach values the population of interest as the holders of knowledge which must be explored and heard through a position of mutuality between both the participant and the researcher (Mills, Bonner, & Francis, 2006).

Barriers to helping. Hassan & Ventevogel (2016) recently completed a thorough case study as an attempt to inform future research on the most prevalent barriers to mental health care for incoming refugees. Hassan & Ventevogel (2016) looked at numerous academic journals and publications as well as a potentially problematic source; the media. Although the researchers looked at English, French, and Arabic media, it is not stated how a media source was determined.
to be reliable. However, Hasan & Ventevogel (2016) hold the media responsible for many of the misconceptions about “helping” behaviours and thus have included these sources in their review. Hassan & Ventevogel found a common barrier to mental health services for refugees to be a prevalence of “helping” behaviours which increased the power differential between the refugee and the employee providing the assistance. Hassan & Ventevogel (2016) note that the behaviours were found to be primarily unconscious and suggested that improving recognition of “helping behaviours,” might be helpful in reducing this barrier. In addition to this barrier, it was also found that limited cultural knowledge in the informing of mental health services served as another primary barrier to refugees wanting to access care (Hassan & Ventevogel, 2016). The methodology of performing a case study seems to be ironic to the issues that were found in Hassan & Ventevogel’s (2016) study; unconscious “helping behaviours” and an absence of cultural knowledge. It seems apparent that the removal of ones self from the population being researched is the primary issue.

The constructivist approach holds that one must approach the group of interest themselves, in this case Syrian refugees, to obtain knowledge about their lived experience. Hassan & Ventevogel (2016) took an in depth look at an important topic, the notion of “helping” and found that it is more helpful to obtain cultural sensitivity and knowledge in creating an effective support system for Syrian refugees. Unfortunately, their study also included a removal of personal contact with Syrian refugees and lacked the cultural sensitivity and knowledge that they found to be important.

**The service provider perspective.** An alternative and valuable perspective to explore is that of those in a service provider role. Dufour, Lavergne, Gaudet, & Couture (2016), acknowledged the value of this perspective when they surveyed 22 family caseworkers who
work with immigrants and refugees. Dufour et al. (2016) interviewed each caseworker about the most difficult and the most exemplary, or least difficult, case they worked on in the past 3 years including a family who was of a visible minority. It was found that most caseworkers reported their most exemplary, or least difficult, case to be with a family who shared more similar values to themselves (Dufour et al., 2016). Most case workers also reported that their most difficult case in the past three years was with a family who held few similar values to themselves (Dufour et al., 2016). These findings call into question the importance of cultural sensitivity training and the negative effects that power-dynamics in support services can have on both the service provider and their clients.

**Negative framing.** In contrast to Hassan & Ventevogel’s (2016) impersonal approach to informing research, Shannon, Wieling, Simmelink-McCleary, & Becher (2015) contacted displaced Syrian’s in attempt to understand why there is a hesitancy to access mental health care services. Shannon et al. (2015) found that stigma was the most commonly noted barrier to access. Shannon et al. (2015) created 13 focus groups of over 100 refugees from various countries of origin, creating a mutually respectful and diverse setting which seemed to foster information gathering and open discussion. In addition to stigma, it was found that political repression, lack of knowledge about mental health, avoidance of symptoms, shame, and culture all played a pervasive role in preventing refugees from accessing mental health services (Shannon et al., 2015). Although Shannon et al. (2015) make the recommendation to empower and educate refugees, the focus of their study was on the negativity surrounding the refugees and what was wrong with their situation; quite the opposite focus of the recommendation they are making. Although this study includes refugees from many different countries of origin, it does not include Syrian refugees, which could bring about a different response due to the immense
and unique trauma that has been experienced by this population. In summation, focusing on the negatives of an individual’s experience is not fostering of empowerment, although it does serve as a starting point for how to improve services as we welcome more Syrian refugees to Canada.

In Shannon et al.’s (2015) study, there was more of a constructivist approach that was employed as refugees themselves were consulted as experts of their own experiences. Shannon et al.’s (2015) short-coming was the focus on problem reduction rather than providing open questions that could lead to either positive or negative responses. In formulating future research, there must be a consideration of the strengths that refugees hold in their transitions to Canadian culture. In understanding Syrian refugees, research must search for both positive and negative experiences to best represent and co-construct the voices of Syrian refugees.

**Conclusions and Aims**

Informed services require input from Syrian refugees. Settlement experience is central to adjustment. This study aims to understand the experience of settlement from the perspectives of government-assisted Syrian refugees who have relocated to Midsized City since 2015. The results will be viewed in terms of their implications for mental health and counselling services.
Chapter 3: Methodology

Participants were primarily government-assisted refugees who attended an event as part of the “Welcome Neighbour” project. The purpose of the project was to connect with refugees and for families to connect with each other, learn about rights and responsibilities as tenants and, as requested by participants, information about transition into the job market. Project funding was provided by a community agency.

After one year of federal income support Government Assisted Refugees are expected to become more financially independent. Some families face a transition to provincial income support and, for those who are ready, employment. Many families wish to move from the residences into which they were initially placed, but have limited knowledge of tenant rights and responsibilities. It was noted that the children are enrolled in neighborhood schools across Midsized City and have begun to make connections with other children and youth, but adults have not had as many opportunities to gather to discuss issues of common interest and build connections both within and outside of their communities.

The project was a collaboration between four Resource Centres. Advisory committee membership for the Project included the four agency directors, a representative from the City of Midsized City Recreation Department, the Midsized City Police Force Diversity Officer, a Housing Initiative representative from the Midsized City and Local Immigration Partnership, a Housing Project representative from one agency, a former client and local resident associated with another agency as well as a project coordinator and assistant. The writer and her advisor provided in-kind evaluation assistance.

Event attendees were recruited via Settlement Workers in Schools (SWIS) Workers within the school system and Settlement Counsellors identified families. Invitation Calls,
Confirmation Calls, and Posters were posted and digitally circulated. Invitations were extended to individuals and families who arrived in Canada within the past year, live within one of Midsized City’s postal codes, and spoke Arabic. Participants were invited to the event knowing these criteria.

**Event Creation and Structure**

There were two community meetings held in each area of the city with intent to reach all Syrian government-assisted refugees who migrated to Midsized City during the previous year. Terms of funding as well as information from the Advisory Committee, in addition to the feedback of residents informed the choice of locations and content for the events.

Each event began with a community gathering for all members of each family to share a meal together. This gathering allowed family members to become comfortable in the new environment and begin to connect with other families in their neighborhood. Following this meal, children were divided into age groups to participate in age-appropriate activities. Early Age Agencies worked with children under age 6 in childminding and imagination guided crafts while the City of Midsized City Recreation Department provided children between the ages of 6-11 in touring the community space and focused on safety in public spaces. Older youth worked with Resource Centre staff and explored self-interests in volunteering and safe cooking skills on a grill. Each family brought home a grill and, for parents with children under the age of 6, a home safety kit was provided.

While children were occupied with their designated activities, adults engaged in an information session on landlord and tenant rights and responsibilities, a topic identified as helpful in previous engagement sessions with residents. In addition to the seminar information (provided in Arabic), each adult was provided with a booklet containing: (a) information on
Tenants and Landlords Responsibilities and Rights in both Arabic and English (authored by Midsized City & Local Immigration Partnership), (b) a Letter of Information explaining the Home Safety Program Community Event (authored by Children’s Hospital, Health Science Centre), with a product description sheet and Home Safety Checklist, (c) a welcoming post card from a Canadian citizen in another community wishing them a safe and enjoyable stay in their new home, and (d) business cards for the Project Manager and the Project Assistant.

**Procedure**

Forty-six participants, including men and women and above the age of 18 who resettled in Canada during the past year participated. Participants from each postal code participated in the “Welcome Neighbour” events. An initial event was held for feedback and planning purposes. Based on the success of the first event, they were planned across the city. Two events were held in eight communities. A total of 19 separate “Welcome Neighbour” events were held between August 16th, 2016 to March 7th, 2017. The total number of different residents invited was 1202.

There were resource limitations that affected recruitment for the present study. The intent was to ask every 10th person to enter each event to participate. In some cases, there was not an interviewer available at the time. However, there were very few refusals. Individuals who had already participated in the study at the first event in their community were not asked to participate again at the second event.

**Materials**

A questionnaire was administered by program staff in Arabic and responses were later translated into English. The data was collected for the purposes of quality improvement and released to the writer after collected and anonymized for evaluation purposes. Copies of correspondence with the institutional Research Ethics Board are included in the Appendix.
The interviews included both demographic and open-ended questions. Demographic questions included age, sex, ethnicity, date of arrival in Canada, places lived before Canada and time in each place. Two closed-ended questions were asked including: “How settled do you feel in Midsized City?” and “How helpful are the services in Midsized City?” Open-ended probes to each closed-ended question were asked. Regarding settlement, participants were asked: “What causes you to feel settled?”, “What causes you to feel unsettled?” and “What would help you feel more settled?”. Regarding services, participants were asked: “What do you like about the services?”, “What don’t you like about the services?” and “How well do the services serve you and your family?” For purposes of analysis responses to the open-ended questions about settlement were combined, as were open-ended questions concerning services.

Analysis

This was a qualitative exploratory study, using data from interviews conducted by project staff to examine the settlement experiences of refugees attending community events. All English translations of surveys were anonymized and printed. Demographic data was analyzed with descriptive statistics and meaning units were extracted from the qualitative data. The meaning unit extraction and analysis was performed in accordance with Creswell’s (2007) qualitative content analysis procedure. In the first step of this procedure all responses were reviewed to obtain an overall sense of the data. In the second step, meaning units – verbatim responses – that represented contents of the interviews were identified by the writer. In the third step, meaning units were reviewed and coded to identify the essential meaning of each. In the fourth step, codes were reviewed and organized into themes. Finally, the themes were constructed, described using codes and exemplified using direct quotes (meaning units) from the interviews.
Demographics of the Sample

The majority of participants in this study arrived in the first two months of 2016 and came from countries they had been displaced to, including Lebanon and Jordan most commonly, but also, Turkey, Egypt, Saudi Arabia, Qatar, Kuwait, and the United States of America. Forty five of the 47 families in this sample were originally from Syria, while 2 families reported Jordan being their home country. The number of children in each family within the sample ranged from 0-8. The average family included 2 parents, 3 children under the age of 15 and 1 child over the age of 15 years. The age of parent from each family that participated in the interview was 35 years.
Chapter 4: Results

A sample of community participants who attended “Welcome Neighbour” events were asked to complete a short interview. Interviews included demographic questions, two closed-ended questions, three questions focused on participants settlement experiences and another three on their experiences with services in Midsized City. Responses to these questions were written down verbatim in Arabic and later translated to English. The writer had access to the anonymized English translations. One closed-ended question was “How settled do you feel in Midsized City?” with responses on a six-point Likert scale from “very settled” to “very unsettled”. The other closed-ended question was “How helpful are the services in Midsized City?” with responses on a six-point Likert scale from “very helpful” to “very unhelpful”. The open-ended questions focused on settlement included: “What causes you to feel settled?”, “What causes you to feel unsettled?”, and “What would help you feel more settled?”. The open-ended questions focused on services included: “What do you like about the services?”, What don’t you like about the services?” and “How well do the services serve you and your family?”

A content analysis was performed to identify themes from participant responses (Creswell & Clark, 2007). The researcher reviewed all questionnaire responses, coded individual statements into general topics, and finally, categorized coded topics into overarching themes. Direct comments from participants have been translated into English and are noted by use of quotation marks.

Settlement Experiences

When asked how settled each felt at the time of interview, there was variation. On a scale from 1-6 with 1 being “very unsettled” to and 6 being “very settled” the average score was 4.7
suggesting that across participants they felt “a little” to “somewhat” settled. It is important to note that 14 of the participants rated their settlement at the highest level of “very settled” and only 2 rated their settlement at the lowest level of “very unsettled”.

To learn more about what settlement meant to them and the contributors or detractors from it participants were asked additional questions of what causes you to feel settled, what causes you to feel unsettled and what would help you feel more settled? Probes for each question queried about their experiences of feeling included or excluded, involved or uninvolved, and respected and disrespected.

**Needed skills and resources.** Participants were asked to provide details about what contributed to them feeling settled or would help them feel more settled. The nature of these experiences centered on employment attainment and English language skills. One individual stated, “I can’t find happiness without finding a job” and from another that they would feel more settled if “I could get back to normal life as a professional”. A participant indicated a barrier they faced in finding employment; “We cannot equivalent our certificates easily. It takes such a long time. We would feel more settled if we were back to ordinary life as professionals.” It was also stated that it would be important to “earn an income and maybe complete my own education” and there was a need for “more information about how to find a job”.

English language classes were commented on. It was stated that “The classes are mixed levels which causes boredom to higher level students.” Many participants noted a main benefit of the English classes as aiding in their social lives; “Meeting new friends in English school [has helped me to feel settled] and “I am able to meet new friends in English school”. They also noted that they would like to reduce the language barrier they experience in their lives. One participant
depicted this desire well when they stated, “If I could leave home without my husband because of the language barrier, [I would feel more settled].”

Other reported needs were government documents (such as a Social Insurance Number card) and health care (“Long waiting periods,” “No family doctor yet.”). Participants noted the importance of having an appropriate housing arrangement with the responses “We are 7 people in 2 rooms and cannot afford a bigger house.” and “if I had a suitable house as mine is not very clean and...because I am pregnant and I cannot take the smell anymore”. Participants also expressed the desire for family members to relocate to Midsized City. One participant expressed, “We left our daughter back in Jordan and she is sick. When we applied for coming to Canada, she was not accepted. This might force me to leave here and go back, even if it is dangerous.”

While there were some mixed reports on availability of culturally familiar foods and clothing, it was reported consistently that female clothing was difficult to find and expensive to purchase. One man in the sample noted that he drives as far as 190 kilometres to purchase clothing for his wife and daughter.

As well, a concern about the different answers received from different agencies about general inquiries was raised, along with the need for translation services in order to navigate the services as not always available. One individual provided a suggestion for improvement, suggesting, “a trip through the city to get acquainted to the services, buildings, and cultural sites.”

A “lack of leisure” or “recreational opportunities” was noted by participants which could include activities for their adolescent children as well as younger children or for the entire
family. While participants noted that “public parks” were accessible and utilized, the limitations of these spaces due to seasonal changes including daytime lighting and weather limits them at different times of the year. Perhaps as a potential cause of this limitation in resources, participants also noted they “had not gone anywhere” and noted a limited awareness of options. Financial concerns could also be an impacting factor as participants noted “I need to find a job,” and “government assistance is not enough.” One participant stated, “[Ontario Works] Is enough only until the 15th of the month.”

While newcomers reported feeling supported by community agencies, they also expressed relying on their Settlement Workers in the Schools (SWIS) workers for information and guidance as well as a desire to “hear from SWIS workers” more frequently. One participant reported knowing about resources “through settlement agency only,” which could be problematic to only have one source of information, but nonetheless, comforting that participants knew where they could ask questions.

**Community feelings.** In contrast to some participants feeling they lacked close by family members, other participants reported having their family members close by, or living “close to other refugee families.” It was reported by both privately sponsored and government sponsored families that their relatives lived close by. Reported by participants were agreeance to the following prompts: included in community, respected in community, and safe in community. Having a sense of community was an overarching theme for each participant, regardless of being geographically close or far to family members.

“Welcoming people,” and living in a “safe neighbourhood,” or a “family city” that lacks “drug/crime problems” were noted reasons for this feeling of settlement. “Safety in school” was
another noted factor contributing to feeling settled, both for parents and individuals, as well as the description of services in the community as “wonderful” and helpful in “saving time and energy”. One participant noted that they simply have a “settlement feeling.” One participant who felt included in the community expressed a desire to “continue to be included” in their community, perhaps surpassing the “end” of settlement, in the community’s view. Other participants reported feeling that “newcomers are respected in the community,” and are “free, with no discrimination” within the service provider environment.

**Experiences with Services**

When asked how helpful each felt services in Midsized City were for newcomers, there was little variation. On a scale from 1-6 with 1 being “very unhelpful” to and 6 being “very helpful” the average score was 5.5 suggesting that across participants they felt services were “very” to “somewhat” helpful. It is important to note that 27 of the participants rated the services at the highest level of “very helpful”, and only 2 participants rated services as unhelpful (1 participant rated services as “a little unhelpful” and another rated them as “somewhat unhelpful”).

To learn more about their experiences with services participants were asked what they liked, did not like, and how well they served their families. Probes for the questions included costs and hours, registration and staff attitudes. Additional probes for types of services asked about food, clothing, transportation, recreation, income, education and health care.

**Present adequate resources.** Participants gave higher levels of detail when it came to praising the services and resources that Midsized City offers them than when asked for lacking resources. Participants tended to focus on the positive educational experiences that their children
are afforded in this city as well as personal educational options such as English classes. Parents tended to comment on “safe schools” and the helpfulness of settlement workers in schools. One participant stated “When we first came, we felt like strangers, but now, after enrolling in education, we feel more settled.” It was noted that their connections to schools through their children was a very positive factor in accessing services. It was noted that “I feel that my lack of English language is a barrier for me in accessing services... because of the children's education, their english is getting better very quickly...we always need to use an interpreter”. For another participant who did not have children in school, a limitation was reported: “I don't have children at school and I feel that limits me in knowing how to obtain services and know how they work”.

Also noted was the availability of transportation and ease of access in addition to the “friendly service [providers]”. Health care was noted as adequate by many participants and was also mentioned as “free” multiple times with accessible services. Health care professionals were referenced by a participant as “angels” (“The hospital staff were angels with my language difficulty”). One participant noted having a “female Muslim doctor,” and another commented on the presence of “women’s rights” and being able to “drive freely.”

A positive review of housing was noted as safe and adequate. Halal foods were noted to be widely available and at a reasonable price in the city, with many choices available. With regard to recreation and leisure activities, while options may be limited, there was a reported awareness and anticipation of participating in “recreation programs for women only.” One participant stated that they have a son with special needs who is “taken care of 100%” and can now “go out and enjoy being with people.”
In addition to settlement services and SWIS workers assisting newcomers in feeling welcome in their community, participants reported being able to access these services without needing English language, a large barrier when it comes to accessing other non-settlement related services. As well, one participant appraised the services as having “clear information,” while another stated, “everybody cares.”

**Positive feelings of future.** Participant responses elicited comments on future aspirations and opportunities that families felt they had now that they are living in Midsized City. For example, retirement outlook and opportunities for self and children in the educational system and their eventual employment. A participant stated they wanted to “see my children successful at school and find a job,” and, more generally, hoped for the “future of children.” Other participants discussed their goals of getting “back to ordinary life as professionals,” while others simply aspire to “get a job, any job”.

One participant who did not have children reported being “still young and single,” and wanting to “build a home” for herself. As well, one participant noted that they wish to “move away” from Midsized City after saving money, while others mentioned they had only just arrived in the city and awaited appraising the city’s services. Alternatively, some participants reported feeling settled and said, “I would like to do volunteering.” Participants often referenced their own education and language attainment with goals to “learn English”, “attend ESL classes,” and even, “try sewing school.”
Participant Data Summary

In summary, the individuals in this sample mostly arrived in Midsized City, Ontario within the first couple of months in 2016 from multiple countries in which they were displaced to since being in their home countries. Overall, the size of the refugee families who have arrived in Midsized City are larger than the average Canadian family, yet they live in homes or apartments that are not suited to fit their familial size. The educational levels of the adults in these families have varying degrees of education with men having diverse past careers and women mostly having a past career as homemaker. Perhaps a reflection of their recent arrival dates and minimal knowledge of the English language, the majority of individuals in this population were unemployed.

At a “Welcome Neighbour” event, participants answered questions geared towards understanding how settled they felt and what they felt about the services for newcomers. Questions about settlement and services reflected high levels of positive experiences. Following the content analysis four themes emerged; needed skills and resources, community feelings, present adequate resources, and positive feelings of future. Comments focused on positive experiences and present feelings of satisfaction with Midsized City’s resources with minimal responses providing details on needed resources. Participants noted the access to education for their children and the safety of these institutions and their desire to find employment.

Researcher Reflections

Before being exposed to the gathered interview data, I expected to see a high volume of complaints about the issues with the support services that refugees have received. This expectation was formed by my previous experience in community support services and the lack of preparation for a large number of incoming refugees that I saw in this role as a support
worker. I also saw a lack of cultural knowledge and limited resources, especially time, to obtain the necessary knowledge to support refugees in a responsible and culturally sensitive way. After viewing the interview data, I was surprised by the praise of services that was present in almost every participants interview. It became increasingly obvious that the collaboration of multiple community support agencies and their efforts in welcoming and fully supporting incoming refugees was the reason for the raving reviews. I felt a sense of relief and pride as a professional and as a Midsized City community member that the refugees in this sample feel supported and respected here. Additionally, in working with the The Neighbourhood Resource Center, I have a renewed respect for the cultural competency of the program coordinators and conscious planning that went into developing the “Welcome Neighbour” program. It was rewarding to attend one of the “Welcome Neighbour” events and witness the response of participants at the event, and then see the interviews that came from participants.

Throughout working with the data, I became reflective of my own transitionary experiences and how they vastly differ from the experiences of the individuals in this sample. While I may have the personal experience of settling in a new country with a language and cultural barrier, I arrived through the privilege of choice and not through displacement. I also brought with me a theoretical backpack of resources which I recognize as white privilege. However minimal, I appreciate having the knowledge of how it may feel to be in a completely new environment and having to navigate it and how difficult this can be. Further, I have the highest respect for the incredible resilience displayed by Syrian refugees. This reflection has reminded me of the importance to be kind to everyone you come across as you may not be aware of the barriers they face on a daily basis.
My involvement in this research has furthered my understanding and appreciation of the vast differences that can exist between expected outcomes and actual outcomes in research studies. It has also taught me that research can serve as an important tool in creating a platform for those who need their voices to be heard. As well, I have increased my knowledge of the settlement processes that individuals experience and have a deeper understanding of the shared resilience of individuals engaged in this transition.

The knowledge that I have gained in engaging in this research has been validating in my practice as a therapist. It has motivated me to ask more questions and make less assumptions. I have also become more conscious of the strengths and resources that each client brings with them into the counselling room and the power that recognizing them can have in counselling outcomes.
Chapter 5: Discussion

Although this study did not make any specific hypotheses, it was anticipated that the results would describe the lived experiences of settling refugees and inform social service agencies in identifying opportunities for improvement in assisting refugees in their settlement process. Of the four themes that emerged (needed skills and resources, community feelings, present adequate resources, and positive feelings of the future), the theme of needed skills and resources was an outcome that was wished for as it would serve as a guide for future services in the settlement sector. The overwhelming response of needing assistance with employment obtainment and English language development could point to an area of opportunity within the settlement services sector.

The theme of community feelings was an uplifting and surprising finding as it indicates a sense of belonging among refugees within their new community, even before a feeling of settlement has occurred. Briggs (2013) indicates that the setting into which refugees are accepted and supported can be more influential in the settlement process than the contexts in which they left and experienced, including traumatic events. This finding, then, suggests that the refugees in this study are well equipped with the highly protective factor of community support and inclusion.

The theme of present adequate resources that emerged within participant responses can be seen as effort confirming on behalf of the service providers who prepared to welcome the quickly arriving newcomers. As discussed in previous chapters, the number of children within the families of newcomers is substantially more than the average Canadian family. It is no surprise then, that the refugees in this sample focused heavily on appraising the educational opportunities for their children that were present in their new communities as safe and
welcoming. In addition, the high degree of regard from participants about Settlement Workers in Schools (SWIS) and how they aided in their settlement process highlighted the necessity of providing information through the children’s primary service access point.

Lastly, the theme of positive feelings of the future was a finding which the researchers did not expect to find due to the nature of the interview. For example, the interviews focused on an evaluation of how settled individual’s felt at the given time of the interview and what services and resources in their new city has contributed to this feeling. Perhaps in discussing the positive experiences they have had within their new communities and the adequate resources they have accessed on their journey of settlement, they began to reflect upon their futures in Canada with positive regard. For example, many responses focused on the potential careers of their children and the educational opportunities they will have in the future. This feeling of hope for their children does not go unfounded; in a study by Rousseau et al. (2009), it was found that preschool children who participate in unstructured play with other newcomer children developed social skills at an accelerated rate. In witnessing their children learn and develop in this way, it is certainly understandable how this would elicit a positive regard for their children’s future in Canada. As well, many individuals recognized that they have not been living in Canada for very long and that they look forward to being ready and able to “build a home” for themselves.

In sum, the themes that emerged from this study provide a basis for understanding how newcomers are evaluating the services and resources that they have been surrounded by in their settlement process. This evaluation does not stop at simply noting what has been going well and what has been missing from newcomer experiences, but it includes a sense of meaning making of their individual experiences and suggests a sense of hope in their narratives of settlement.
Social Services Role in Facilitating the Feeling of Settlement

As almost all of the participants in this study depicted the support of social service workers in the settlement process as invaluable. Individual workers can make a difference in the settlement process as they can promote both individual refugee resilience and community resilience (Vasilevska, 2014). Although individual support workers have the potential to promote resiliency in the settlement process, the worker must have a supportive organization behind them (Vasilevska, 2014). Just as importantly as supporting individual workers, the policies and mandates of a community agency can either promote or detract from the sense of worth to the host culture (Michalski, 2002). This puts pressure on social service agencies to ensure they are supporting both their employees and their clients from a culturally sensitive and celebrative perspective. As discussed earlier, Hassan and Ventevogel (2016) suggest that obtaining cultural sensitivity through knowledge will allow service providers to effectively support refugee populations. “Welcome Neighbour” accomplished this goal by educating their employees on the experiences that refugees may have had prior to arriving in Canada and by asking the refugees they service for feedback on how to serve them better. The understanding of a refugee’s journey can improve services as it aides in increasing empathy responses in service providers (Bhui, 2015). In addition, the “Welcome Neighbour” events encourage refugees to share information amongst themselves through gaining social capital. This gives a voice to the newcomer population in their own services and promotes a shared resiliency through information sharing within their own community.

Due to the degree of time sensitivity in preparing to welcome newcomers, there was a large amount of hesitancy or confidence from the service provider networks that they would be equipped to serve such a large influx of individuals. It may be surprising to community service
agencies then, that so many newcomers reported feeling supported by SWIS workers and the community agencies they accessed. However, considering the amount of effort that went into ensuring the services offered were culturally sensitive in nature and aimed to promote community resilience, it should not be a surprising finding. For example, it has been shown that the amount of psychological distress present in newcomer populations is increased by a lack of appropriate housing, general inactivity, and an interruption in social support (Wells et al., 2016). Service providers in the settlement sector made it a priority to facilitate conversations between landlords and tenants in order to reduce environmental stressors, created events which had activities tailored to each individual in the family regardless of age, and encouraged the development of social connections through the same events through the sharing of a meal. In addition, most refugee families settled in Midsized City in close proximity to other refugee families, assisting in the information spread about these events, and allowing these families to meet each other in a more formal setting in order to facilitate community building.

In sum, the issue that Bhui (2015) put forth, that refugee families bring significant and unique mental health care needs which Canadian infrastructure has not been built to support, has been overcome through the use of multiple community agencies coming together, the creation of community through the building of social capital, and by valuing and using the feedback that the refugee newcomers provided.

**Our Opportunities for Improvement**

There were few noted areas of improvement by participants in this study, but the areas noted were mentioned by almost every individual. For example, participants seemed to be more willing to discuss areas of strength and adequate resources that have been present for them in their settlement journey, however, almost every participant noted their desire to learn English
and their desire to become employed. Many participants also noted a lack of health care opportunity such as the struggle they have encountered in obtaining a family doctor. As well, some participants have found that their monthly income is not enough to sufficiently support their family. Perhaps most distressing for some families was the absence of all of their family members with some still abroad in dangerous living situations. Although participants were less detailed in their reviews on what could be improved in their settlement environment than they were about the aspects of their experience that were going well, there was a predominant theme of desiring more English knowledge, employment opportunity, health care accessibility, sufficient monthly funding, and bringing family members to Canada.

**English language.** Although many participants in this sample noted English language acquisition as a missing component of their settlement experience, it is also important to consider the limited amount of time that the individuals in this study have been in Canada and the immense challenge that learning a new language can be. The Neighbourhood Resource Center, for example, offers an English as a Second Language course for newcomers. However, the offering of information and classes may not be enough to facilitate English language learning as there are many factors at play. For English as a second language learners, practicing one’s knowledge is imperative and the main barrier that tends to prevent practicing conversations is the fear of others judgement for carrying an accent (Wang, 2015). As indicated by the participants in this study, they are often living in communities with other refugees nearby. This has been noted as a highly helpful factor in their settlement, however, it could also reflect an ability to speak one’s own language. As well, with the high influx of Syrian refugees since 2016, the classes that were offered sometimes had a wait list attached to them. To properly address the issue of language acquisition among newcomers to Canada, we must first understand the importance of
the issue. The greatest social isolation experienced within the refugee population tends to be experienced by those who have achieved the lowest levels of language proficiency (Pottie et al., 2011; Quällenberg, 2000). In summary, if we can find a way to improve the development of language acquisition among this population, it could be an effective approach to reducing the experience of social isolation.

**Employment.** At the first “Welcome Neighbour” event, many individuals indicated that they had enjoyed and benefited from knowing more about tenant rights and responsibilities, but that they would like to know more about obtaining employment. The second “Welcome Neighbour” event facilitated community conversation between employment help agencies and refugees. This event was well attended and many individuals reported that they found it helpful, however, the employment numbers of refugees in this sample is low. One study sought to explain the differences in barriers to employment for the refugee population and found that various ethnic groups face unique barriers to entering the workforce with ethnic minorities facing the most barriers (Garcia & Harris, 2001). Relative identified factors in Garcia and Harris’ (2001) study were discrimination against the applicant and perceived English language abilities. Therefore, it is important to view the identified opportunities for improvement in the settlement experience of employment and English language learning as one unified issue to be improved upon as they are heavily related.

**Health care.** Individuals in this study identified a need for accessing a family doctor on a regular basis. It has been found that individuals with the greatest success in accessing professional health care services are those who are the most well versed with both how the Western model of health functions and language abilities (Donelly et al., 2011). This is troubling because it means that since the majority of refugees in this study are struggling with English
language acquisition, they will also experience another barrier to accessing health care, as they have identified. Learning a language takes a significant amount of time and dedication, and should not need to come first in order to receive quality health care services.

**Income support.** The first two years following migration are a particularly important period for which support (financial and otherwise) is needed and benefited from in relation to enhanced potential for good mental health (Khanloui, 2008). Unfortunately, their income support transfers to provincially mandated income support, which is often not enough for the number of individuals in each family that need to be supported. Many participants discussed not having a social insurance number yet and being unable to find work in order to support their family. Others reported that they have not yet received the Child Tax Benefit and need to use credit cards in order to make it through the month. In addition, many social service agencies cease their support after newcomers first year in Canada as this is the timeline they have been funded to support. This means that at the end of their first year, newcomers will have a monthly funding change and be cut off from their means of social support. Thankfully, federal settlement services only cease services when a client states that they feel settled and allow that client to change their mind as their circumstances change. This allows a flow of resources to continue throughout their settlement experience and provides a means of support in finding needed resources like food banks, rental payment support, etc., in their own language.

**Family members at a distance.** As discussed previously, individuals from a collectivist culture may define the term “family” as a broader and more encompassing network of relationships which may extend into one’s community (Hall, 2017; EMPHNET, 2014). Many individuals in this study reported feeling unsettled because they had a family member far away; some mentioned having family members such as daughters and husbands and others stated they
have more extended family that are still living in a dangerous environment. One individual stated that they would be willing to risk their own safety in order to visit their loved one. Fearing for the safety of a family member is a large psychosocial stressor that the participants in this study have identified as detrimental to their settlement process.

**Newcomers’ hope for the future.** If we consider Maslow’s hierarchy of needs (1943) and look at which needs have been met for the individuals in this sample, we can see a solid base of physiological needs and safety needs. As indicated by individual’s in this sample, they have a sense of belonging and inclusion within their communities, adding another base from which to work from. Of course, environmental and social support needs may adapt and change. The hope for this population is that the basis of forming one’s social capital has come through both individuals who are similar and those who are different, leaving one with multiple resources should they be needed. Since the families in this study may have a solid basis from which to work on esteem needs and maintain their physiological and belonging needs, it is important to consider the resources they have that will assist them in this journey. Families who express emotion, caring and support, as well as good collaborative problem solving have been found to be more likely to perceive challenges they encounter in ways which they can take meaningful action to either change or accept circumstances (Merali, 2005). If these families are more likely to see challenges as an opportunity to take meaningful action to change or accept the situation, it would make sense why they provided far less detail when it came to “complaints” about their settlement experience. Perhaps they have not perceived challenges in a way which would make them noteworthy, or they were able to problem solve the circumstance at hand which has left the situation inapplicable at the time of the interview.
As many of the refugees in this sample attested to, they are seeing the hope that they have in their future here in Canada. As Alessi (2016) suggested, resilience among refugees must be fostered through both formal and informal supports. “Welcome Neighbour” was a series of formal events to provide support in a manner which encouraged individuals to share resources and experiences amongst themselves, therefore, creating a means of informal supports in their community. It is from this base of formal and informal supports that the ability to maintain hopefulness and habits of perseverance may grow and help refugees to manage the trauma they may have experienced (Alessi, 2016). Newcomers to Canada bring diversity of experience and culture, but they also serve as examples of perseverance, adaptability, and resilience for both Canadians to bear witness and learn from and newcomers to know they are not alone (Marshall, Butler, Roche, Cumming, & Taknint, 2016).

As mentioned, the hope that many refugee families hold in high regard is the hope that they hold for their children’s futures. At “Welcome Neighbour” events, refugee children participated in monitored play with other newcomer children, and this is occurring in many of the schools who have welcomed newcomer children. It has been found that preschool age children who participated in unstructured but monitored play with other newcomer children have developed their social skills at an advanced rate (Rousseau, Benoit, Lacroix, & Gauthier, 2009). In seeing their children develop their social skills in a safe and welcoming environment, families have begun to feel a sense of settlement. Those who have reported feeling more settled have reported more hope for their future. For example, one individual stated that they look forward to re-developing their own career, while many others stated that they look forward to volunteering in their communities.
The World Health Organization defines mental health as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.” (World Health Organization, 2017). This sense of hope for the future that refugee families are bringing with them to Canada is truly a benefit to all Canadians. This hope is guiding newcomers to realize their own potential as they understand what their new level of normal stress looks like and as they begin to give back to their communities through employment or volunteer work. As for now, they seem to be providing a sense of community to one another as they begin to settle into their new lives in Canada.

**Implications for Settlement Support**

Current settlement efforts have been valuing the input of refugees in their own settlement process and facilitating a sense of community through the sharing of resources and resilience. This study sought to identify areas of opportunity for the settlement sector, however, it also brought to light the many present resources in settlement that deserve to be celebrated. Primarily, the shared community which refugees in this sample identified as welcoming and inclusive. This allowed refugees to be more active in their communities and reduce the risk of social isolation, despite language barriers. Secondly, current settlement supports emphasize the value of the individuals they serve and what they have to say about their own settlement experience. This allows community service agencies to made adjustments to their services based upon the individuals they serve and their changing needs. The refugees in this study noted the high degree of support they received from the support workers they received services from. Thirdly, current settlement efforts include the gathering of refugees and the facilitation of community building. This includes the sharing of experiences which, as Marshall and colleagues (2016) describe,
facilitates a sense of shared resilience. These factors in the settlement sector are working for today’s newcomers and this study highlights the positive impact that these efforts have had on refugee’s settlement experience.

As identified by the refugees in this study, there are a few areas within their settlement experience that would benefit from improvement. Firstly, reducing the impact of the language barrier that refugees experience on a daily basis with effects in a health care context, and as a barrier to entry in the workforce. Secondly, monthly income and the troublesome changes that occur past the first year of settlement mark.

This study has highlighted the need for further assistance with English language development among refugees. With a lack of language knowledge being the most influential factor in social isolation (Pottie et al., 2011; Quallenber, 2000), social service agencies need to make support readily available in order to improve the settlement journey for newcomers. As discussed, language barriers and a lack of understanding about Western health care, can be a large barrier to accessing health care services (Donnelly et al., 2011). This means that social service agencies and the funding to provide services need to be made a priority in order to facilitate English learning, but also to provide information sessions on Western health care. For example, Canadian health care wait periods could be longer than would be expected in the newcomer’s home country. Educating newcomers on the differences in health care systems could be helpful in mitigating frustration or misunderstanding. This could be used as an aid alongside translation services to help newcomers navigate the health care system and receive the services that they require, before learning English. As we know, this process can take a long period of time and health care emergencies need to be mitigated. Access to health care should not depend on the level of English language skills a newcomer possesses. In addition, funding to improve
the rate at which English language learning occurs within the refugee population would be helpful in aiding newcomers in their job search as language barriers can be a preventative factor in the job search. In turn, this could improve the number of families depending on governmental assistance each month.

Finally, the results of this study suggest that some government-assisted refugees are struggling to support their families with the amount of funding they are provided with each month. One particular issue seems to occur at the end of their first year in Canada when their funding changes over to public assistance, which in the province of Ontario, is Ontario Works. This change in funding requires a period of time where newcomers must apply for and wait for the Child Tax Benefit to come into effect. With many newcomers relying on credit cards to make it through the month, we must consider how we can support them better. We must question how much information they have been given about local food banks and not-for-profit services that are available to them. If this information has been provided, has it been provided in their own language? If so, we must further understand the hesitancy of newcomer families in utilizing these services and how accessible they are for the refugee population.

**Implications for Counselling Practitioners**

Among the implications for counselling practitioners is the struggle to get refugees into the counselling setting. Throughout the entirety of this study, not one participant noted anything about mental health care needs, which could point to a presence of stigma attached to accessing counselling services among the sample. This presents the need for outreach and de-stigmatizing messages to incoming and settling refugees.

Due to financial constraints highlighted in many participant’s surveys, subsidized or fully funded counselling services for refugees is of utmost importance. The barriers to accessing
counselling services need to be reduced in any way possible to be sure that we are supporting refugees in their settlement process. This should include making Arabic speaking counsellors accessible wherever possible and translation services in lieu of an Arabic speaking counsellor.

In addition to accessibility, we need to understand more about the most effective methods for counselling newcomers to Canada. This requires counselling in a culturally informed and sensitive way and future research on effective counselling interventions with this population.

**Further Research**

There is limited knowledge on the settlement experience of refugees to Canada, specifically the Syrian refugee community. Further research on the strengths and resilience that Syrian refugees bring to their new Canadian communities is needed. As well, an understanding of how accessible services are to refugees after the one year mark in their settlement experiences is necessary.
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Appendix A: Charts and Tables

Figure 1. Number of refugees arriving in Canada by month. Data represents the refugees who accessed services from The Neighbourhood Resource Centre and the months they arrived in Canada in the year 2016.

Figure 2. Countries lived in after displacement from home country. This chart represents the various countries that participants lived in throughout their journey to settlement in Canada.
Note. Some participants noted more than one previous country.

Figure 3. Number of children per family. These figures represent the number of children in each participant’s family.

Note. 15 families did not report the number of children in their family and have not been reflected in the chart above.
Figure 4. Education level. This chart shows the number of individuals in each educational range for the newly settling (in the past 2 years) refugee population in Midsized City, Ontario by gender.

Figure 5. Employment rates by gender. This chart depicts the number of employed versus unemployed refugees who have settled in Midsized City, Ontario in 2016 by gender.
Figure 6. Self-reported English language skill level by gender. This chart depicts the overall population of refugees who have settled in Midsized City, Ontario in the year of 2016 and their self-reported skill level out of 10 in their English language skills.
Appendix B: Ethics Certificate

February 8, 2017

Western University
London, Ontario

Dear [Name],

Re: [Project]

Thank you for your email dated January 23, 2017 regarding the [Project]. Based on the form you completed for Distinguishing Between Quality Assurance/Improvement & Research it would appear that your project would be considered a Quality Improvement project.

As this checklist indicates that this project is being done strictly for quality improvement to improve this program, this project does not require approval of a Research Ethics Board. The Tri-Council Policy Statement 2: Ethical Conduct of Research Involving Humans Article 2.5 indicates that quality assurance and quality improvement studies when used exclusively for management or improvement purposes, do not constitute research and do not fall within the scope of REB review.

If there are any changes to the current project or the project no longer fits within this checklist as quality improvement, please contact our office to discuss.

I wish you the best of luck with your work.
Good Afternoon,

Thank you for your follow up.

If the data that your student is receiving is strictly anonymous and there is no way she can link it back then no approval would be needed as this would be secondary use of already collected anonymous data.

I hope this is helpful,
Appendix C: Survey Questions

Welcome Neighbor Event Adult Evaluation and Feedback

Interviewer Name:
Date of Interview:
Participant’s age:
Participant’s sex:
Ethnicity:
Language of Interview:
  o Arabic
  o English
  o with the help of an interpreter

Date of Arrival in Canada:
Places lived and time in each before Canada:

1. How settled do you feel in Midsized City?
   o Options: Very settled, Somewhat settled, A little settled, A little unsettled, Somewhat unsettled, Very unsettled

2. What causes you to feel settled?
   o Probes: Feel included? Feel involved? Feel respected?

3. What causes you to feel unsettled?
   o Probes: Feel excluded? Feel uninvolved? Feel disrespected?

4. What would help you feel more settled?

5. How helpful are the services in Midsized City?
   o Options: Very helpful, Somewhat helpful, A little helpful, A little unhelpful, Somewhat unhelpful, Very unhelpful

6. What do you like about the services?

7. What don’t you like about the services?

8. How well do the services serve you and your family?
   o Do you feel like you know how to obtain them? Do you understand how they work?
    Do you feel like you know what the services can do for you?

Notes:
Jennifer Perkins
Working knowledge of American Sign Language and Spanish

EDUCATION HISTORY

Western University 2016-Present
London, Ontario
In pursuit: Masters of Counselling Psychology

King’s University College at Western University 2009-2014
London, Ontario
Honors Specialization in Psychology with a Minor in Thanatology
Awarded entrance scholarships and Dean’s Honor List status

RELEVANT EXPERIENCE

Intern in Personal Counselling September 2017-Present
King’s University College at Western University, London, Ontario

Employment Specialist November 2015-October 2017
Leads Employment Services, London, Ontario

Intervenor/Developmental Service Worker March 2015- Present
Deafblind Ontario Services, London, Ontario

GROUP FACILITATION EXPERIENCE

Choosing Change Group Co-Facilitator 2017- Present
King’s University College at Western University, London, Ontario
A psychoeducational group which utilizes cognitive dissonance as a tool for motivation in goal achievement

Transition Supports to Employment Group Facilitator 2015-2017
Leads Employment Services, London, Ontario
A psychoeducational group which focuses on building self-esteem and assertiveness skills with an end goal of obtaining rewarding employment

RESEARCH EXPERIENCE

Neighborhood-based Community Development to Enhance Housing Support November for Syrian Refugees: An Academic Perspective 2017
This research was presented at the Pathways to Prosperity 2017 National Conference

Targeting Personality Characteristics in the Workplace September-April 2014
King’s University College at Western University, London, Ontario
This research focused on the interaction of extraverted and introverted personality characteristics within a workplace atmosphere.
This research was published by the Western Undergraduate Psychology Journal Volume 2 pg 126-137 (Peer-reviewed)

PRESENTATIONS

Trauma Responses in the Clients You Serve June 2017
Leads Employment Services, London, Ontario
Co-Presented with Amy Hatcher, MA candidate in Counselling Psychology