



Refugee Young People

The experiences of young people with refugee backgrounds can affect their transition into adulthood. An awareness of relevant issues will help workers to provide appropriate care and support to these young people.

A young person from a refugee background may have arrived in Australia

- through the humanitarian migrant program
- via family reunion, or
- as an asylum seeker but now with refugee status.

Their background may include persecution, psychological trauma, violence and social unrest, periods spent in camps or in exile, and even torture.

Some refugee young people may have arrived in Australia without any family members, and are termed "unaccompanied minors". They are usually under the responsibility of state authorities and may have increased need for support.

Different issues may exist for second-generation youth whose parents fled their homeland as refugees.

Where are refugee young people from?

Over 5,000 young people arrived in NSW as humanitarian entrants over the last five years. Approximately 70% of these settled in the Greater West of metropolitan Sydney.

In recent decades refugees have come to Australia from countries such as Vietnam, Laos, Cambodia, Chile, Peru, Serbia, Croatia, Bosnia, Middle Eastern countries such as Iraq and Iran, Afghanistan, and smaller numbers from some African countries.

According to the Department of Immigration and Multicultural and Indigenous Affairs (DIMIA), up to 70% of newly arriving refugees will be from African nations, including Sudan, Somalia, Ethiopia, Eritrea, Sierra Leone and Liberia.

Refugee young peoples experiences

Common experiences of refugee young people include:

- Being forced to leave their homeland because of conflict and human rights abuses

- Exposure to life threatening events
- Being separated from family and friends
- Witnessing the death of loved ones and/or the destruction of their home
- Disruption to childhood and schooling
- Insecurity, with risk of sexual and physical abuse
- Not knowing what the future holds
- Spending prolonged periods in countries where basic services such as health care and education are poorly developed.

In addition, some young people may have been directly involved in conflict against their will as child soldiers.

These experiences can impact on young peoples' development and identity formation. At a time when young people are working out their values and beliefs, refugee young people may be confronted by profound human cruelty and injustice.

Like all young migrants, refugee youth need to resolve the values and expectations of adults from their culture with those of their new peers in Australia. Learning a new language and new systems whilst struggling with the impact of traumatic experiences adds to the level of stress.

Physical Health Issues

Health problems in refugee young people can include:

- Poor oral health due to poor diet, disruption to oral hygiene and lack of access to dental services. Past torture to the mouth may also be a factor.
- Nutritional deficiencies
- Untreated injuries from exposure to violence
- Parasitic and infectious diseases (eg intestinal parasites, hepatitis B)
- Limited past access to preventative health programs such as immunisation, vision and hearing screening, and health information programs.
- Sexually transmitted infections and unwanted pregnancies from sexual assault.

Prior to receiving a visa to travel to Australia, all intended arrivals over 10 years of age have a chest x-ray to exclude active tuberculosis, and those 15 years and above are tested for HIV

infection.

Screening of youth in two Intensive English Centres in Sydney found that a third were not immune to measles, and around one in ten girls was susceptible to rubella (German measles).

Finally, young women from some countries may have undergone Female Genital Mutilation (FGM). This can have long-term physical, psychological and social effects.

Psychological health issues

Common responses to refugee trauma include: depression, anxiety, distrust and feelings of guilt, anxiety and post-traumatic stress, which may persist long after settlement in Australia (DIMIA: 2003).

These may require referral to a general or specialist counselling service. However good settlement support in terms of acquiring English, reaching education goals and gaining employment are particularly important.

Social Issues

Experiences of trauma can also have an impact on the social development of young people; for example:

- Disruption to coping skills
- Altered capacity to trust and build healthy relationships with family, teachers, peers and community
- Low self esteem
- Disrupted schooling in country of origin
- Disruption to traditional roles within the family
- Loss of family support due to fragmentation of family through war and conflict or the impact of trauma on their parents.

There may be an increased risk of

- Aggression and other behavioural problems
- Inter-generational conflict and homelessness
- Suicidal thoughts and risk taking behaviour
- Developing addictive behaviours.

Barriers to accessing services:

- Difficulty communicating physical and mental health concerns due to language barriers
- Lack of familiarity with concepts such as healthy lifestyle or preventive health care
- Unfamiliarity with services which have no equivalent in their country, such as youth services and counselling
- Fear and distrust of people perceived to be in positions of power (such as doctors) due to previous experiences
- Parents reluctant to let their children use services with which they are not familiar

- Low awareness amongst workers in working with refugees.

Considerations when working with refugee young people:

Acknowledge their experiences: validate and acknowledge experiences, and help them to understand that their reactions are normal responses to trauma, so that they can then seek help to deal with them.

Respect diversity: have an understanding of different cultures, values and cultural beliefs.

Be flexible: clearly explain what you can and can't provide. This allows for a clear understanding of services and expectations. Being creative and flexible allows for services to be responsive to refugee young people.

Communication: allow extra time to clarify and explain aspects of necessary care; do not make assumptions. The use of professional interpreters is highly recommended.

Focus on trust: ensure time to develop rapport and a trusting relationship, to encourage a positive interaction and outcome.

Set boundaries: working with refugee young people can be intensely demanding and draining. Be aware of your own boundaries and seek help and support when needed.

Use a strengths-based approach: build on their strengths and allow them to build upon their resilience and increase their coping and life skills.

Old Program of Assistance to Survivors of Torture & Trauma

Relevant Services

NSW Refugee Health Service	8778 0770
STARTTS' Youth Program	9794 1900
YAPA	9319 1100

Youth Health Services, check local phone books

References and resources

- DIMIA (2003). "Strategy for Refugee Young People" <http://www.immi.gov.au/settle/publications/rys03.htm>
- Corner Youth Health Service (2003). *Beyond Survival: Working with young people from a refugee background- A Guide to get you Started* .
- Victorian Settlement Planning Committee (2004). *Good Practice Principles Guide For Working with Refugee Young People*.
- The health of the people of New South Wales – Report of the Chief Health Officer, 2004. Available at: http://www.health.nsw.gov.au/public-health/chorep/rfg/rfg_immun.htm

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