

VOICES OF STRENGTH AND PAIN

IMPACTS OF SEPARATION, LOSS AND TRAUMA ON HEALTH AND WELLBEING OF REUNITING REFUGEE FAMILIES

Research report

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ACKNOWLEDGEMENTS

We are very grateful to the families who agreed to share their experiences for this research. Without them and the interpreters who helped with the interviews this report would not have been possible.

The research was conducted within the TCN Family Integration Service project and the team gave invaluable support: Phil Arnold, Geraldine O'Neill, Aelfred De Sigley, Tina Loewe, Yvonne Baillie, Emma Cursley and, especially, Catherine Harris who assisted with the data collection; project colleagues at Scottish Refugee Council, especially integration advisors Stephen McGuire and Annie Audsley; and colleagues at WEA Scotland, especially ESOL tutor Andrew Parfitt.

We thank Kathleen Van De Vijver and Roy Farquharson at Freedom from Torture for enabling us to participate in the group sessions they facilitated with families and for all their guidance and contributions to the research. We are grateful to the project's Research Steering Group - Dr Alison Strang, Kathleen Van De Vijver, Dr Gareth Mulvey, Dr Kye Askins and Dr Syed Rohullah Naqvi - for providing strategic guidance and valuable advice. Thanks to the GRAMNet research network for their engagement and inspiration especially to Professor Alison Phipps,

Professor Rebecca Kay and Dr Benjamin White.

The Refugee Support team in Glasgow offered expertise, insight and unceasing inspiration in their dedication, professionalism and commitment to care for people at points of crisis. With thanks to the wider team: Lilian Rose, Frank Higgins, Sarah Zadik, Jillian McBride, Ahlam Souidi, Ciara McBride, Claire Tindale, Cadi St John, Farida Elfallah, Gesya Salih, Jennifer Symington, Karen Phillips, Miana Badd, Saliha Anjum and to all our amazing volunteers. Within the wider organisation, many thanks to Vanessa Cowan and Fiona Macleod.

We thank the European Integration Fund for co-funding the project. We hope this report will contribute to understanding health and wellbeing experiences amongst refugee families and enable reflection on organisational and community responses.

1. INTRODUCTION

When he left life became not easy, he was very far away. It was a very sad feeling. Because of the terrorists, we couldn't be together and it was dangerous and unsafe for everyone. (Daughter, Pakistan)

Family reunion is an aspiration that many refugee families live with for years, as they endure periods of extended separation and uncertainty. For those fleeing violence and persecution, it is common that one family member is specifically targeted and forced to leave the rest of the family behind. In other cases families who initially flee together are later forced to separate. The journey is full of risks, as legal routes to countries of exile have closed down.

Currently, the world is experiencing the greatest refugee crisis in history. This has had an effect on the refugee experience with many more people forced to flee their home countries, and now often transition countries. As a result there are increasing numbers of refugees across the world. The journey they have to make is now arguably more dangerous, and recently Europe has witnessed increasing numbers of people dying at sea while trying to reach its shores. For many families they have to make the forced decision to separate either because they simply cannot afford for everyone to make the journey together; or they decide not to expose all family members to the risks, hoping to find safer ways to reunite later.

This research explores women, men, young people and children's descriptions of how experiences of separation and loss have affected their health and wellbeing. Although the details of each person's experiences are diverse, the research recognises common factors that are widely experienced as being risks or supportive factors for health and wellbeing.

Reunited families usually describe joy in being together and immense relief that they are finally safe.

At the same time, they often experience anxiety about family members and friends who remain in situations of danger and grieve for loved ones who have been killed. There is also wider grief for the loss of homes, communities and the lives they used to live. Rebuilding relationships and settling into life in the UK brings both opportunities and challenges and stressors that can affect health and wellbeing.

By reflecting on families' experiences, this report aims to increase understanding of the stressors families experience during periods of separation and whilst re-establishing relationships after reunion. We hope this report will contribute to:

- > **stronger and more holistic responses to support health and wellbeing for reuniting refugee families**
- > **steps to reduce the risks to health and wellbeing after arrival**

RED CROSS ROLE IN SUPPORTING FAMILY REUNION

RESTORING FAMILY LINKS

The International Committee of the Red Cross (ICRC) has a mandate under the Geneva Conventions and additional protocols to trace and reunite people who are separated from their families or without news of them following conflicts and other situations of violence, natural or man-made disasters, or migration as well as in other situations of humanitarian need¹.

¹ www.familylinks.icrc.org/en/Pages/AboutUs/Icrc.aspx

Across the world, the ICRC works alongside National Red Cross and Red Crescent Societies to trace family members and restore family links wherever possible.

FAMILY REUNION SUPPORT AND TRAVEL ASSISTANCE

In the UK, the British Red Cross supports refugee families who have been separated. In Scotland, the Red Cross has supported families going through the family reunion process since April 2011. The Refugee Family Reunion Support programme was set up to provide assistance to people applying for family reunion visas, supporting them through the application process as they gather evidence to make a claim. The Travel Assistance programme was taken on by the Red Cross after the joint scheme with the UK Government and United Nations High Commission for Refugees (UNHCR) ended. It provides tickets for people granted family reunion visas that are not able to afford the costs of the flights.

Red Cross caseworkers supporting refugees through the family reunion process became increasingly concerned about the stress and risks separated families face and the challenges for reuniting families setting up a home and rebuilding relationships after reunion. In response, the Red Cross piloted a project in Glasgow to support reuniting families.

THE FAMILY INTEGRATION SERVICE

From December 2013 to June 2015, the Red Cross in Glasgow worked in partnership with Scottish Refugee Council and Workers' Educational Association (WEA) Scotland to deliver the Third Country National (TCN) Family Integration Service, co-funded by the European Integration Fund, for people arriving on family reunion visas joining refugee sponsors in Scotland. It was operational between April 2014 and June 2015 and provided support to more than 150 new arrivals in over 60 families.

Arriving family members were offered a package of support. A caseworker in the Red Cross provided advice and support with health and wellbeing, education, and social integration, and an Integration Advisor at the Scottish Refugee Council provided advice and support on housing, welfare and employment. Both organisations responded to emergency destitution needs and helped signpost to other relevant agencies according to families' specific needs and interests. This support helped to reduce the stress of dealing with practical arrangements on arrival and ensure that basic needs were met as soon as possible. Caseworkers advocated for families who were homeless or destitute and provided emergency support where needed.

As well as advice and support on practical arrangements, caseworkers offered psychosocial and emotional support. This included reflective listening, helping family members understand options and referring to counselling services, social support, health services and specialist trauma services where relevant.

The service included a group programme, with twice weekly ESOL and IT classes offered by WEA Scotland and weekly Life Skills sessions providing orientation and educational support for integration run by the Red Cross. In addition the Red Cross provided a programme of social activities for the whole family. The group programme and social activities gave opportunities to learn new skills, gain information about life in the UK, explore the local area and develop knowledge of rights, entitlements and responsibilities. They enabled connections with others who were new to the city and helped arriving family members establish patterns of daily activity and routine.

In addition, a Welcome Booklet was developed to provide information on what to expect in Glasgow and to present information on rights and entitlements. Its purpose was to enable people to be more informed, in order to help reduce stress and uncertainty on arrival.

² This was a difficult process as caseworkers identified more families they believed would benefit from FFT support than the project was able to provide.

FFT GROUP SESSIONS

Freedom from Torture was commissioned to pilot a series of psychoeducational group sessions. A list of families was identified by caseworkers and discussed with the therapists². A decision was taken to focus on families with children. Ten families were invited and eight chose to participate in the groups, which ran in two series of five-week sessions with four families in each.

The sessions were modelled on a group witnessing process. They provided a space for participants to discuss their experiences including what happened in their home country that led to the sponsor having to flee and experiences during the period of family separation. The final session included discussion on coping with past experiences in the present. The sessions enabled families to reflect back on what was shared in a structured format.

STRUCTURE OF REPORT

The following section sets out the policy context for family reunion, outlines problems with the application process and summarises other Red Cross research

on these issues. Section Three describes the research objectives and methods, and provides an overview of the families involved. Section Four presents background to key health and wellbeing issues that emerge in the report.

Section Five presents the research findings on risk factors and supportive factors, and highlights the health issues that people reported during the pre-flight, separation and post-reunion periods. Section Six moves on to explore changes in roles and responsibilities within the families and how these affected health and wellbeing. It focusses particularly on changes in gendered roles and responsibilities within couples and changes for children and young people.

Section Seven provides overall analysis of the findings, outlines learning about layers of risks and supportive factors, and highlights pertinent points to consider after families are reunited in the UK. Finally, Section Eight summarises recommendations for short, medium and long-term responses to help prevent further risks to health and wellbeing and build supportive factors that foster longer-term wellbeing and resilience.



2. BACKGROUND: FAMILY REUNION

FAMILY UNITY AND WELLBEING

UNHCR's Refugee Resettlement Handbook highlights the important benefits of family support for health and emotional wellbeing, as well as the broader benefits to society:

- > **Family support can have positive influence on physical and mental health**
- > **Family units provide practical and emotional support during the integration process that otherwise may lead to additional requirements and ultimately investment by governments**
- > **Intact families have better chances of achieving economic sufficiency through pooling of resources (UNHCR 2002: 85)**

Wider research has shown that family reunification is an important priority for the wellbeing of refugee family members who are separated, and often a significant step towards successful integration (Rousseau, Rufagari, Bagilishya, & Measham, 2004; ECRE & EU Red Cross, 2014; Connell, Mulvey, Brady, & Christie, 2010; White & Hendry, 2011; Law, 2013; Strik, De Hart & Nissen, 2012).

A range of international and European legal instruments acknowledge the importance of the family and its right to protection.³ UNHCR's Executive Committee conclusions have included several commitments to the principle of family unity and the importance of facilitating reunion:

In application of the Principle of the unity of the family and for obvious humanitarian reasons, every effort should be made to ensure the reunification of separated refugee families. (No. 24 (XXXII) – 1981; 1)⁴

FAMILY REUNION: RESTRICTIONS AND ENTITLEMENTS

In the UK, family reunion is an immigration route available to close family members of people with refugee status or humanitarian protection.⁵ The rules about which family members are entitled to family reunion are given under Part 11 of the UK immigration rules (paragraphs 352A-FI)⁶. They include the spouse or partner (including civil partner or unmarried partner and same-sex partners), and dependent child under 18 years old who were part of the family unit before the sponsor left their country of habitual residence.

In the UK, family reunion rights do not extend to the parents and siblings of unaccompanied asylum seeking children. Neither do the rules cover family members who became part of the family unit after the sponsor has left the country of habitual residence to claim asylum.

Family members can be granted visas on humanitarian grounds "on the basis of exceptional compelling compassionate circumstances outside the Immigration Rules"; however, the numbers granted such visas are small and have steadily decreased from 77 in 2011 to 12 in 2014.⁷

³ The Universal Declaration of Human Rights (article 16); The Refugee Convention (1951) (article 12); the European Convention on Human Rights (1950) (Article 8); the International Covenant on Civil and Political Rights (1966) (23); International Covenant on Economic, Social and Cultural Rights (1966) (article 10); the Convention on the Elimination of All Forms of Discrimination against Women (1979) (article 9, 16); and, the Convention on the Rights of the Child (1989) (article 9, 10, 20, 21, 22).

⁴ <http://www.unhcr.org/uk/excom/exconc/3ae68c43a4/family-reunification.html>

⁵ There are certain concessions for family reunion visas compared with other family settlement visas: the refugee sponsor does not have to meet the income threshold necessary for family settlement visas, nor do family members have to fulfil language requirements pre-arrival or take the Life in the UK test.

⁶ www.gov.uk/guidance/immigration-rules/immigration-rules-part-11-asylum

⁷ www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Lords/2015-11-26/HL3957



Other family members can apply under appendix FM of the immigration guidelines; but the fees make this prohibitive to many.⁸

The legal provisions are based on normative ideas of the nuclear family, which do not reflect the diversity of family composition and experiences of family life, nor different cultural understandings of who belongs to the family unit⁹. Examples of those who may be excluded include:

- > **children who have been informally or de facto adopted (often by extended family members);**
- > **dependent parents or adult dependent siblings who may have shared the same household;**
- > **children who have just turned 18 who are still living within the family unit.**

These restrictions lead to families having to make very difficult choices and face further family separation and guilt about leaving some family members behind. In some instances children who are adopted or who have just turned 18 have been left behind in areas experiencing war or in transition countries where they have no stable connections, which have led to further

protection risks for these children and young people and anxiety for their families.

Family reunion visas give entitlements that mirror those of the sponsor, with regards to access to housing, education, healthcare, language classes, employment and benefits. However, these entitlements are entirely dependent on the relationship with the sponsor. In cases of family breakdown, those on family reunion visas lose their visa entitlement and have to make further applications for leave to remain in their own right if they wish to remain in the UK.

FAMILY REUNION APPLICATION PROCESS

Family reunion applications are usually made out-of-country for 'leave to enter'¹⁰. If there is a British Embassy or High Commission in the family's country of residence applications can be submitted there. Otherwise, family members have to travel to another country to submit applications. This can be dangerous and costly and present a significant barrier or delay to applications (Law, 2013; Beswick, 2015). As an immigration route,

⁸ www.gov.uk/government/uploads/system/uploads/attachment_data/file/257465/familyreunion.pdf

⁹ The literature on family reunion highlights the mismatch between legal definitions of the family unit and diverse cultural experiences of the family (e.g. ECRE, 2000; Staver, 2008; Hawthorne 2007; Connell et al. 2010; McDonald-Wilmsen & Gifford, 2009).

¹⁰ There are possibilities for in-country applications for 'leave to remain' in cases where family members are traced and found to already be in the UK applying for asylum.

family reunion does not recognise the protection needs of family members, or take into account the risks involved in gathering the necessary documentation and travelling to submit applications.

The experiences of families in this research resonate with previous Red Cross studies, highlighting problems accessing embassies and difficulties gathering the paperwork required as evidence that can create significant delays in submitting applications. Further delays occur when submitted applications are sent to visa processing centres in other countries, and when families initially receive a rejection which is then overturned on appeal. As a result the family reunion application process can be lengthy, leaving families to live with extended periods of uncertainty and anxiety.

BRITISH RED CROSS RESEARCH ON FAMILY REUNION

Building on earlier Red Cross research on support needs for family reunion (White & Hendry, 2011) and difficulties in the application process (Law, 2013), two reports were published in 2015. The first report, *Not so straightforward: the need for qualified legal support for refugee family reunion* (Beswick, 2015), detailed the complexities of the family reunion application process and highlighted the need for families to have access to legal support¹¹. It provided evidence about humanitarian and protection needs and highlighted security risks for family members submitting applications. Key findings included that:

- > **Half (51%) of applicants were exposed to security risks**
- > **In more than a third (36%) of applications involving children, children were living in uncertain living arrangements without a permanent carer/parent;**
- > **Almost a quarter (23%) of cases involved stepchildren, adopted children, de facto adopted children or younger siblings for whom the refugee sponsor had become the main caregiver, which involved advocating for family reunion on compassionate grounds and entailed procedural and legal challenges (Beswick, 2015).**

Because of these protection concerns, the report recognised that family reunion is not a straightforward immigration matter and recommended that it should be considered more closely with asylum policy.

Using evidence from the *Family Integration Service* piloted in Glasgow, the Red Cross report, *We started life again: Integration experiences of refugee families reuniting in Glasgow* (Marsden and Harris, 2015) explored reuniting families' experiences of integration across several broad domains and identified common barriers and structural obstacles for reunited families. Key findings highlighted that:

- > **More than half of families faced housing challenges on arrival, either having to present as homeless immediately (28%) or experiencing serious overcrowding for more than a month (26%)**
- > **90% of families experienced destitution on arrival with 72% qualifying for destitution grants and a further 14% needing food bank referrals. Families were on average without any financial support for arriving family members for at least a month**

The research showed that families needed support to navigate complex bureaucratic systems in order to avoid further hardship. In relation to health and wellbeing, it observed that integration difficulties such as unemployment, language difficulties, poor housing, poverty and financial difficulties after reunion affected health and wellbeing.

In turn, poor health and wellbeing hindered access to work, language learning, education, and social activities that foster wider integration. The research reported that:

- > **30% of families required advocacy from caseworkers or referrals on health issues**
- > **32% of families required support in registering with a GP**

In the sections which follow, this report will build on the previous report to present expanded analysis of the findings on health and wellbeing.

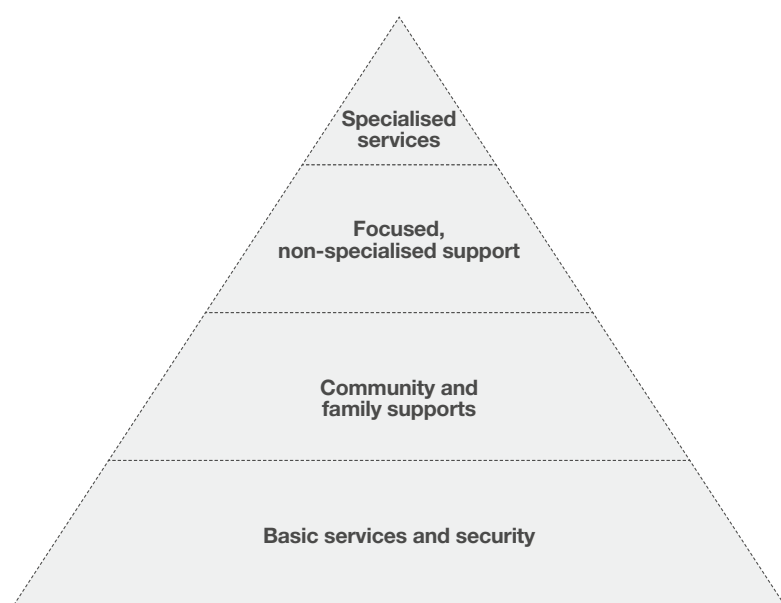
¹¹ The research involved a sample of 91 cases (including 219 family members) who received support for family reunion from the British Red Cross in Leeds, Manchester, London and Glasgow between spring and September 2014.

3. BACKGROUND

This research draws on approaches to health and wellbeing developed in international humanitarian work with communities who have experienced conflict or disaster. Psychosocial wellbeing provides a holistic lens through which to consider positive wellbeing as well as ill health, and social as well as individual aspects of wellbeing.

INTERVENTION TRIANGLE

The following intervention triangle was developed by the Interagency-Standing Committee (IASC) of the UN for work with populations affected by disasters and emergencies. It is endorsed by WHO and forms the basis of International Federation of Red Cross's (IFRC) approach to psychosocial intervention (IASC 2007; IFRC, 2009; p. 34). It identifies different levels of need amongst affected communities, and suggests appropriate responses for each level. These range from help to re-establish basic services and security which are relevant to everyone; to social interventions at a community level to help re-establish connections and routines of community life; to more tailored emotional and psychological support for individuals, families or communities; to specialist professional services.



Source: Inter-Agency Standing Committee (2007) Guidelines on Mental Health and Psychosocial Support in Emergency Settings.

Figure 1:

Psychosocial Intervention Triangle

This intervention triangle can be adapted to develop an approach which frames the interventions and levels of support needed to assist newly-arrived refugee families to adapt to their new life and rebuild their relationships after periods of separation.

From our work with reunited refugee families we know that many have fled from crises. They need safety, basic security of a home and access to financial support to meet their basic needs such as adequate food – the first layer of the triangle. Without this their health and wellbeing will be acutely affected.

However, it could be argued that this layer on its own is not sufficient to enable individuals and families to overcome ➔

the crises they have experienced and adjust to the new surroundings they find themselves in. If this is not addressed it can negatively impact on people's mental health and wellbeing. Indeed as this report will show, many individuals and families draw strength from their community and family, who often offer emotional and social support – the second layer of the triangle. However, this layer of support cannot automatically be assumed to exist, particularly for newly arriving families whose lives and relationships have been disrupted. Arguably, in the post-reunion phase the environment to develop community and family supports must be cultivated and opportunities created to foster connections and develop the relationships which can provide this type of support.

In some cases there will be individuals and families who, even with the first two layers of support, require a slightly more intensive tailored response. It may be the case that the experiences they have faced have caused a level of distress which prohibits their ability to engage with daily life. In some cases arriving family members may experience new triggers within the new context they are now living. Examples of this could be racial discrimination within their new environment. Such experiences could begin to undermine the safety and security that they felt upon arrival in a country they believed they would feel safe in. However, some targeted, non-specialised support (level three of the triangle) such as individual counselling and family therapy would give them the help and resources to overcome their trauma and begin the process of recovery.

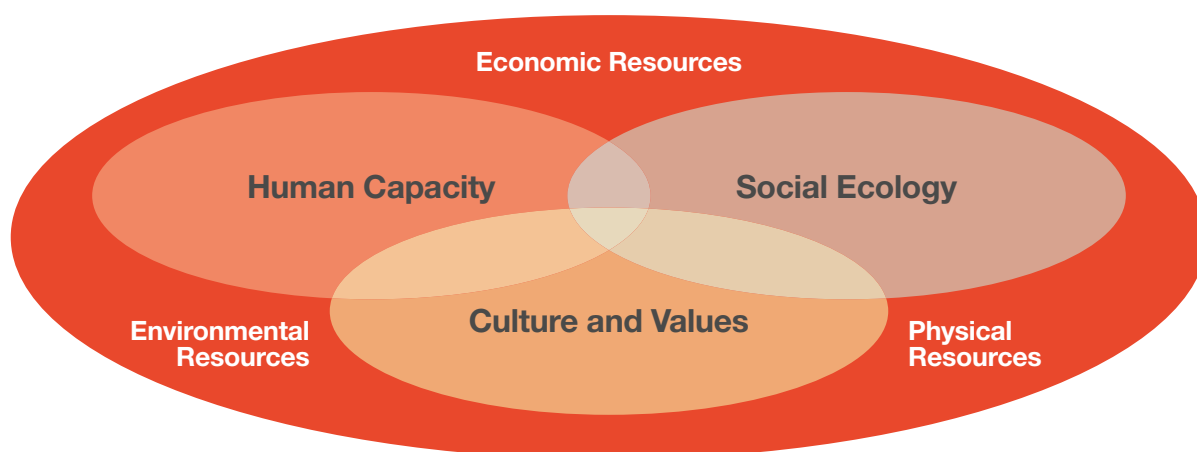
The findings of this report indicate that many reuniting refugee families have experienced traumatic events which negatively affect their health and wellbeing and impact on their ability to rebuild their relationships and lives in a new context. While the criteria for families participating in this part of the research did focus on those with the most acute needs, it could be argued that all newly-arrived refugee families would benefit from some level of non-specialised support targeted at rebuilding their relationships after separation.

The final layer of the triangle is focussed on those who required specialised support, which in this context will likely be of a clinical nature. In theory, if support is well established at all other layers of the triangle, the level of demand for this type of acute specialist help should be small. However, given the level of trauma that this population of people experience it is clear that some will develop severe mental health illnesses which will require professional medical treatment and support.

PSYCHOSOCIAL WELLBEING FRAMEWORK

The Psychosocial Wellbeing Framework (2003) was developed by a consortium of humanitarian agencies and academics to support practitioners and policy makers:

Figure 2:
The Psychosocial Wellbeing Framework



Each individual's ability to withstand and recover from disasters, emergencies and traumatic events varies, as does their ability to cope with persistent daily challenges and disruptions to their lives. These factors are also affected by the inner circles of the framework. However interventions on both a policy and practice level can have an impact and support the individual through the crisis and in the recovery. This framework demonstrates how access to economic, physical and environmental resources can affect human capacity, social ecology and cultures and values in such a way that supports individuals and communities to recover and rebuild. It recognises the importance of social factors to health and wellbeing. Supportive relationships within families, wider social networks, and broader cultural resources within communities can contribute to improved health and wellbeing.

Adapting this to the context of separated and recently reunited refugee families provides a helpful lens through which to examine the different resources that individuals and families need to overcome challenging experiences, which when not adequately addressed, negatively impact on health and wellbeing.

Later in the report these frameworks will be used to demonstrate how supported and structured interventions, such as the ones used within the delivery of the Family Integration Service, helped reunited refugee families to cope with trauma and difficult experiences and reducing the impact that this can have on their mental health and wellbeing.

RISK FACTORS AND SUPPORTIVE FACTORS

In order to assess the interventions that best support reunited refugee families, this research studies factors which participants themselves stated were both risks to their health and wellbeing and supported their health and wellbeing. Risk factors and supportive factors can act at an individual, family, community or societal level.

Exposure to violence, for example, is a risk factor which has devastating effects on individuals, families, communities and societies. It causes physical and

mental health injuries in individuals; devastates family life through loss and forced separation; destroys trust in social relations; and damages the infrastructure and environment of a society in a way that can have long term impacts on health and basic life security.

Contrastingly, family reunion and stable settlement are supportive factors with positive influences on individual wellbeing as well as broader impacts on wider communities and society, as family members, with the right support systems, are better able to engage in community life, work and education.

The literature on mental health often refers to risk factors and protective factors. In this research we have chosen to use the term 'supportive factors', because the term 'protection' has specific meaning in the context of refugee experiences. Factors that gave people support through difficult experiences could not protect them from these experiences occurring but gave some strength and resilience to endure them.

ISSUES AFFECTING HEALTH AND WELLBEING OF SEPARATED AND REUNITED REFUGEE FAMILIES

STRESS OF SEPARATION: UNCERTAINTY AND LACK OF SECURITY

Family separation is a significant cause of anxiety that can have debilitating psychological impacts which hamper settlement and integration (RASNZ, 2012; Schweitzer, Melville, Steel & Lacherez, 2006; McDonald-Wilmsen & Gifford, 2009). Long-term stress and feelings of powerlessness and depression can stem from not knowing what has happened to loved ones (Rousseau, Mekki-Berrada, & Moreau, 2001). A number of studies have shown that the longer the period of separation, the poorer the outcomes when the family reunites (Derluyn, Mels, & Broekaert, 2009; Smith, Lalonde, & Johnson, 2004).

TRAUMA

Trauma : A deeply distressing or disturbing experience. (Oxford English Dictionary)

When a person is confronted with extreme situations, these can overwhelm their ability to cope and in some

instances threaten the physical and psychological integrity of the person. Traumatic events can be sudden and unexpected, which can leave people with no time to prepare psychologically. They are often unfamiliar, so people cannot draw on past experiences for response strategies.

Trauma can have devastating impacts on long-term health and wellbeing; however, in some instances it can also become an impetus for psychological growth (Tedeschi & Calhoun, 1995). People can gain strength from perceiving themselves to be survivors as well as victims.

LOSS AND GRIEF

All who have had to flee their countries experience some form of loss. Through the research, attention is given to different kinds of loss. All the families involved in the research had to leave their homes and some witnessed their homes being destroyed. Many lost material wealth and important possessions. All had to leave family members and close friends behind, and some had experienced loved ones being killed. Many grieved for the loss of aspects of their cultural background and familiar community. The way in which people process loss often has significant impact on emotional wellbeing.

AMBIGUOUS LOSS

Families whose relatives have disappeared or gone missing experience a distressing uncertainty described by psychologists as ambiguous loss (Boss, 1999). Ambiguous loss is the absence of a loved one, where the individual's situation, location and condition are unknown. Uncertainty about the whereabouts and fate of a loved one leaves families living in limbo between hope and despair. Relatives who are missing are physically absent, but can still be psychologically present. Families can hold on to the sense that they might walk back through the door or find them again one day. They continue to actively seek or think about them (IFRC, 2014). Some families receive information that relatives have died but have no knowledge of where bodies are. This means there can be no funeral, which creates a disrupted and incomplete grieving process.

Experiences of 'ambiguous loss' can create greater distress than more defined, or definite, loss of a loved one because of the distress caused by not knowing and living in this permanent state of uncertainty (Boss, 1999).



4. RESEARCH APPROACH AND OVERVIEW

RESEARCH AIMS AND METHODS

The aims of this research were:

- > **To consider the range and extent of risk factors experienced by refugee families going through family reunion that present risks to health and wellbeing;**
- > **To explore supportive factors that helped families cope as they have lived through traumatic experiences, separation, loss and displacement.**¹²

Data collection within the project included a series of steps:

- 1. Semi-structured interviews with 14 families (45 people) about experiences of family separation and integration in the UK.**
- 2. Follow up focus group discussions on integration and sources of practical and emotional support with family members from 6 families (18 people).**
- 3. Participant observation at five FFT family group sessions involving 4 families (20 people).**
- 4. In-depth follow up interviews on health and wellbeing with 2 of these families (12 people).**
- 5. Interview with FFT therapists.**

The first stage of the research involved interviews and focus groups with a sample of families receiving the Family Integration Service who were selected to reflect the range of nationalities and family compositions of those families arriving and receiving the service. For full details see the report *We started Life* again that presents the broad range of findings on

integration experiences of families after being reunited (Marsden & Harris, 2015).

The second stage of the research focussed in more detail on health and wellbeing, which was covered only briefly in the first report. Many families spoke in detail in the interviews and focus groups about the impacts of their experiences on their health and wellbeing and on family life. This material was reanalysed for the second report. Additional data was collected specifically from families participating in group sessions facilitated by Freedom from Torture in the spring of 2015. Four families, who reunited in the UK between two and a half and six months earlier, attended these sessions. Researchers explained the purpose of the research beforehand and emphasised that participation was voluntary and would not affect participation in the FFT sessions. Comments of those who consented were noted during the sessions. At the end of the sessions, families were invited to in-depth, semi-structured interviews. Interviews were conducted with two families, including two sponsors, two spouses, and eight children. Following the end of the group sessions an expert interview was conducted with the FFT therapists.

Overall, the research draws on the experiences of seventeen families¹³. The majority of interviews were conducted through interpreters in the family member's primary language and most families chose to speak in their homes rather than the office. The researcher and research assistant typically interviewed adults and young people individually and children in sibling groups, but were guided by each family.¹⁴

¹² Risk factors include those sometimes referred to as 'stressors' in the literature on wellbeing and mental health, and supportive factors overlap with those referred to as 'protective' or 'resilience' factors.

¹³ It is important to note that this is not a large enough for figures to be extrapolated.

Visual research approaches were used with children including an emotions chart and a mapping exercise of the child's current locality (Marsden & Harris, 2015; p.79-80). The chart used a simple scale from 'very happy' to 'very sad' to allow children to compare how they felt during different periods: before separation, during separation and on arrival in the UK.

This activity was designed so that children could engage to the level they wanted, either simply plotting the marks, speaking about the different points in more detail, or choosing not to engage (one girl drew a picture instead). In total charts were collected from 14 children. It was as important to listen to what children said during these activities, as observe the actual points they plotted. Some chose to add other points, distinguishing the time living in a transition country during the separation period, or adding when they started school in the UK as significant points with distinct emotions.

The research data has been analysed and presented in detail in this report to encourage discussion and allow for further analysis.

ETHICS

An important ethical element of the research design was that researchers were embedded in a project team so that if any immediate issues emerged during the interviews these could be referred on to caseworker colleagues.

The researchers explained to each family member what the research involved and how information would be used and anonymised, emphasising that participation was voluntary and choosing not to participate would in no way affect access to service provision. The research included as many members of a family as were willing to participate, in order to listen to individual family members' perspectives and enable sensitivity to the diversity of experiences within families.

A Research Steering Group was established to guide the research which included: academic researchers from a range of disciplines with expertise in work with

refugees and people seeking asylum; an experienced therapist from FFT; and a representative from the families.

SCOPE AND LIMITATIONS

The research studied people's accounts of their experiences and insights into how these affected their health and wellbeing, using qualitative methods that provided the opportunity to understand health and wellbeing in the context of wider narratives of life histories and through people's own conceptualisation of health and wellbeing.¹⁵ Many people had broad concepts of health where emotional and spiritual wellbeing were interconnected with physical health; and the wellbeing of an individual was integrally linked with the wellbeing of others in the family. It is important to be aware that, because the timescale of this research was short and this methodology relied on self-reporting, there may be health and wellbeing issues people chose not to discuss.

Whilst impacts on physical health were noted, the research primarily focuses on wellbeing and mental health related directly to experiences of separation, loss and traumatic experiences. Health issues that related to other conditions were not explored in detail, other than to check access to health services (Marsden & Harris, 2015).

Interviewing individuals within families gave insight into some gendered differences in experiences; however, this study had limited capacity to study these in detail. The research would have benefited from longer-term engagement and the capacity to follow up with families at different intervals.

OVERVIEW OF FAMILIES

The Family Integration Service supported more than 150 individuals in over 60 families (Marsden & Harris, 2015). Families came from a diversity of ethnic, religious and class backgrounds. The most common countries of origin were Sudan, Syria and Iran, followed by Eritrea and Pakistan. It is significant that 88% of new arrivals were either women or children

¹⁴ In one family the husband requested to speak together with wife. Another family chose to speak in two groups with the father and sons together in one group and the mother and daughters in another group.

¹⁵ This contrasted from questionnaires based on standardised mental health scales used in diagnostic settings.

under 18¹⁶. Overall, there were more children (59%) arriving than adults (41%). With regards to gender, there were considerably more adult women (85%) arriving than adult men (15%).

The composition of families was diverse. Family size varied from two to nine people. Children were included among arriving family members in two-thirds of families. There were three broad types of family composition amongst reuniting families accessing the Family Integration Service:

- > **Couples with one or more children (including children who were adult dependents) (48%)**
- > **Couples only, the majority of whom were women coming to join husbands (35%)**
- > **Children coming to join a parent (who in some cases had a new partner or new children) (17%)**

Typical profiles of the families involved in the research included:

- > **Men who were directly targeted and had to flee suddenly, leaving behind a wife and children, and sometimes dependent parents and other family members. These family members often remained in situations of danger and struggled without the social, practical and financial support of the family's main provider.**
- > **Children and young people, who had been cared for by extended family members, and were reuniting with a mother who they had not seen for several years, in some instances also meeting new siblings or step-parents.**
- > **Couples who had been separated for several years because of the long migratory journeys of husbands. Some wives had been uncertain about whether they would ever be reunited and on arrival described needing to get to know a partner again.**

LENGTH OF SEPARATION

The length of the separation varied considerably amongst families. Detailed information was available for 16 families. Of this sample all had been separated for at least a year, and a quarter had been separated for between six and ten years (see table 1). The separation period was recorded from when family members last saw each other to when they were reunited in the UK. Some families experienced periods of separation within their home country before fleeing because a family member was disappeared, arbitrarily detained without families being informed or went into hiding (see Section 5).

Table 1: Length of separation of refugee families

LENGTH OF SEPARATION	NO. OF FAMILIES	PERCENTAGE
1 - 2 years	1	63%
3 – 5.5 years	2	12%
6 - 10 years	4	25%

Length of separation was influenced by the duration of the sponsor's migratory journey; the time taken for the sponsor to claim and be granted asylum; and the time taken for family members to apply for and be granted family reunion visas. These stages were affected by political situations and experiences of bureaucratic obstacles and delays. Our research showed that length of separation was also affected by the practical difficulties of collecting the necessary evidence and logistics of accessing the embassies¹⁷.

¹⁶ The Red Cross report *Not so straightforward* noted a similarly high proportion of 95 % women and children amongst Family Reunion applicants.

¹⁷ Our findings reinforce those of the *Not so straightforward* (Beswick, 2015) report about difficulties and delays in the family reunion application process.

5. RESEARCH FINDINGS: HEALTH AND WELLBEING - RISKS AND SUPPORTIVE FACTORS

The research findings presented in the following sections cover families' experiences pre-separation, during separation and post-reunion in the UK. Within each of these periods, interview responses have been analysed according to experiences that can be identified as risk factors and supportive factors to health and wellbeing.

Families have often lived through harrowing experiences. Many people experienced violent disruption to their everyday lives and attacks on their communities and families. Being forcibly uprooted from one's home involved multiple kinds of loss. All families were separated from wider family and close friends, and many had relatives or close friends who had been killed. Several families experienced complex and multiple traumas. The accounts given by families highlighted the impacts of this loss, trauma, separation and changing family dynamics on their health and wellbeing.

Risk factors to health and wellbeing are strongly articulated in their responses. Nevertheless, family members also identified supportive factors and resources that helped them to cope and hold on to hope as they lived through dangerous and difficult experiences. Extended cases studies of two families' experiences are traced through the different stages.

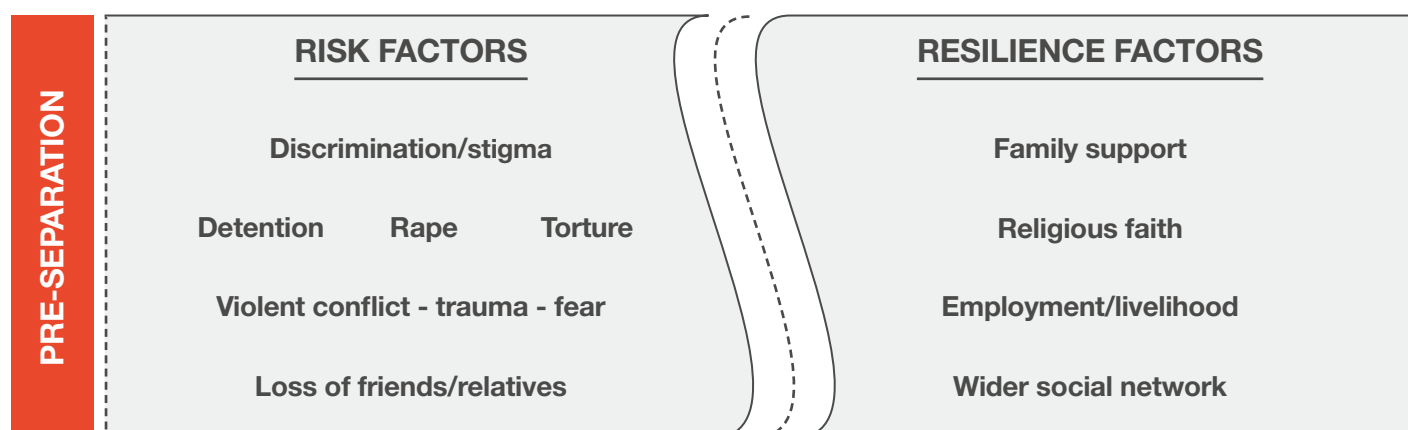
5.1. RISK FACTORS

A: PRE-SEPARATION EXPERIENCES

PRE-SEPARATION PERIOD. SUMMARY OF RISK FACTORS:

- > Insecurity of everyday life and daily activities
- > Insecurity of access to basic needs – food, shelter
- > Direct exposure to violence
- > Direct threats to family members
- > Violent death of family members and friends
- > Detention
- > Torture
- > Disappearances and ambiguous loss
- > Genderbased violence
- > Stigma, rejection and isolation

Pre-flight experiences were characterised for many families by deteriorating political situations,



an increase in violence and growing insecurity of everyday life. Some families were persecuted because they belonged to a minority ethnic group or religious community. Others were targeted because individuals in the family had become politically active in protest movements. The risk factors for health and wellbeing related to these pre-flight experiences are outlined below.

INSECURITY OF EVERYDAY LIFE

– EXPOSURE TO VIOLENCE AND FEAR

Twelve families described how their everyday life became insecure and they witnessed their living situations deteriorate because of increased violence. For some, this was when political protests began which escalated through cycles of repression and further violence; for others, this came with a change of regime or as they were targeted by violent movements which spread to their area:

I had a good life there and a happy childhood. [...] It started getting bad 7-8 years before we left but was really bad from 4-5 years before we left. It was difficult to go to school and my dad had to leave his job [...]. We all had a very bad feeling. It was very difficult; I don't have the words to describe it.

(Daughter, Pakistan)

Her father gave more details of what happened:

By 2009-10 the situation was really terrible. [...] There were two or three big blasts in our area. There were 200-300 victims. The crossroads is called the martyrs' crossroad now.

(Father, Pakistan)

In response to this violence, security check points were set up and they were confined to their area:

Whenever we go to other areas we had to identify ourselves. We had ID cards. It was a camp for us.

(Mother, Pakistan)

Travelling outside the area became dangerous and they were cut off from health services.

Many other families too described how everyday life became severely disrupted and activities such as shopping, attending school and going to work became dangerous:

We were living in Mogadishu. It was a very difficult time, with the civil war going on. It was difficult even going out to the shops to get food.

(Mother, Somalia)

Another father described how they did not let their children go out of the house because of fear for their safety:

We didn't even let them out of the house because of the situation. I used to go out to get bread and food, but it was rotten. When I left my wife did this.

(Father, Syria)

Basic needs to sustain life were threatened as families were left without safe food, shelter and adequate clothes.



Conor Ashleigh © British Red Cross

Another Syrian father offered a disturbing metaphor about the prevalence of violence in his country and the extent to which it had saturated the everyday:

Killing in my country is like having a cup of coffee in the morning, or having a shower in the morning. It's happening daily.

(Father, Syria)

Living in situations where everyday life became so insecure put immense stress on individuals and families:

Waiting for death is very hard. Standing there and rockets just coming over. Not knowing if it's going to be you or another person.

(Mother, Syria)

This woman described how exposure to the devastating violence of aerial bombing created a hypervigilant state of living with a sense that the threat to life was imminent.

Another man described how the escalation in violence in his area created pervasive fear in their community:

It's difficult even to express how we felt. Every day, every hour was filled with bad news wherever you went. You wanted to escape from the issues with friends, but conversation was always, 'Have you heard they killed X people'. Wherever you went you couldn't escape from these things.

(Father, Pakistan)

He described how this fear about security affected social life and led to widespread depression:

They didn't have the spirit and morale to go to the bazaar or take part in recreational activities. People were all depressed, seriously.

The risks to physical and mental health and wellbeing in these situations where basic safety and security had been compromised by violence were severe. Family members experienced physical injuries, witnessed relatives and friends being killed, and lived with persistent fear and anxiety. These were experiences which families brought with them to the UK, and while almost all families welcomed the safety and security which they had upon arrival in Scotland, some continued to be affected by the violence they had witnessed prior to arrival. When left unaddressed, these experiences had the potential to overwhelm individuals and families, negatively affecting their health and wellbeing and as a result their ability to settle into their new life.

DIRECT THREATS AND TARGETED KILLINGS

Eleven families reported targeted threats and violence, usually against one family member. One man described how he was targeted because he spoke out publicly against the ruling regime in his country:

I just told the truth of what I was seeing and the crimes I had witnessed; and because of that they tried to assassinate me five times. I had to live in hiding moving from house to house for six months until I left the country.

(Father, Syria)

Another man was targeted by the Pakistani Taliban because he was a public figure within his community. There had been a series of targeted attacks and one day his best friend was shot dead by the Taliban in a targeted killing. He described the impact of this and the distress of not being able to go immediately to his friend's shop to pay respects:

We could not go to the shop to bring back the dead body. It had happened many times that [the Taliban] targeted more people [after an initial killing]. I couldn't go and my family members wouldn't let me go.

(Father, Pakistan)

When people were able to retrieve his friend's body, he had seen it. He recalled: "it's not easy to see these things in life." He described how he had lost many friends, some in targeted killings and others in explosions.

Around this time he came to know that his name was also on a list of those the Taliban wanted to target. Families experiencing such threats lived through periods of intense fear and uncertainty. His wife described this time:

All over our country doctors, engineers and professors were being killed by terrorists. It's continuing until now. I asked my husband to leave his job. But a job is also necessary for life.

(Mother, Pakistan)

It was not easy for her husband to leave his job because the family needed an income. However, she felt extremely worried every time he went to work:

Whenever [my husband] went to [work] I was feeling upset. I couldn't do anything at home, cook or anything because my mind was with [him].

She described being unable to go about daily tasks or concentrate on anything.

Even where parents tried not to express their fears and concerns in front of their children, the children were aware of their emotions:

**My mother didn't express her feelings in front of me but she was very worried about my father.
(Daughter, Pakistan)**

One morning this mother did not hear that her husband had reached work safely. She described being paralysed by fear. She had hesitated to turn on the TV, desperate for information but also fearing the worst:

I could not put on the TV. I was thinking the terrorists had got [my husband].

Eventually he contacted her to tell her he had been drawn into a meeting. Reflecting back on that time, he highlighted how this stress and anxiety was not an isolated occurrence but a persistent experience for this family at that time:

**On days I had to go to [work] in 2011 and 2012 it was seriously dangerous. When I went she said some prayers. She didn't know if I would come back home or not. When I came she was happy. But the next day it was the same thing. It wasn't just for a week, a month. It went on and on.
(Father, Pakistan)**

He continued to work because he felt strong obligations to stay and support his community, and not give in to the forces opposing them. However, he also grew increasingly worried about the impact of his situation on his family. One day he went to work and found that the words "Shia kafir (infidel), they should all be killed" written on his office door.

After this, his colleagues, family and even the police told him he should leave: **"Everyone told me if you remain it means you're committing suicide."**

He described how the security forces told him they were no longer able to protect him and he finally conceded to leave. The mental and emotional pressure he and his family experienced making decisions in the face of direct threats were immense. These resonated with what other families in similar situations expressed. There came a point where those targeted realised the risk to their life was too great and they had to flee; yet at the same time they struggled with the guilt of leaving family members in situations of danger and without support.

The often prolonged nature of insecurity and threats appears to have had a cumulative impact on each member of the family's health and wellbeing. Often at the point when the family is reunited in a safe country, they have experience many years of stress and worry, which has had an impact on their resilience and the mental health and wellbeing. While for some the fact that they are now in a safe and secure place will be enough to help them overcome and rebuild, others will need additional support over a period of time after arrival to restore their health and wellbeing.

DETENTION AND TORTURE

There are specific risks to health and wellbeing for individuals who were detained and their families. In six families, husbands reported being detained by armed forces in their country of origin¹⁸. They were detained without formal arrest or judicial process and their relatives were not informed. Most were detained for between one and eight weeks, and some on more than one occasion. One man was detained for more than four years before managing to escape and flee his country.

Three men reported being tortured whilst in detention¹⁹. They described brutal experiences. In one case the torture stopped only when the torturers believed the man to be dead. This man recounted:

¹⁸ The total number may be higher as we relied on self-disclosure.

¹⁹ Again, the total number may be higher, as we relied on self-disclosure rather than direct questioning.

One day on the way to work at 7 am I was stopped by intelligence. They asked questions and detained me for seven days. I was tortured brutally. I have marks all over my body. I was tortured so badly that I lost consciousness. Just before I heard them say, 'Leave him. He's dead.' I was taken to hospital. After three days a doctor I knew smuggled me out illegally to a 'free' area.

(Father, Syria)

This man described how he kept away from his children when he was released because he did not want them to be affected:

After getting out of prison I didn't let the children see me as I didn't want them to see me in that situation.

Torture is designed to inflict lasting physical and mental scars on a person and affects not only the immediate victim but the victim's family and communities (Das, 2007; Kelly, 2015). Torture is used to terrorise whole communities and cause social relations to break down through fear and stigma.

This same man described how his eldest daughter was affected, and what had happened to family members of others who were detained and tortured by state security forces:

My daughter was not allowed to continue university. They were asking students to confirm why their fathers were being tortured. Some were raped and even killed.

(Father, Syria)

The case study below describes in more detail a family's experiences of detention and disappearance.

CASE STUDY:

MARIAM'S FAMILY (ERITREA) – DISAPPEARANCE AND DETENTION

"The reason I left my country was my son here," Mariam's husband began, pointing to his second son. The family were afraid he was going to be forcibly conscripted into the army. Mariam's husband explained:

They will take someone into the army for 15, 16 years, sometimes 18 years, and anyone that tries to escape they will be executed as a punishment.

Mariam's husband managed to help his son escape, but the situation was dangerous as the government of Eritrea see leaving the country without approval as a crime. He described how there were informers everywhere and people regularly disappeared:

You are walking in the street one time and one time you end up in a prison... then you don't know what's [the] fate of you after that.

He and his son successfully crossed the border but before he could make further arrangements Mariam's husband was picked up by the authorities and taken to a place of secret detention:

They had some kinds of trees or plants with thorns [...] then after these plants, when you went in, you would see barbed wires all around. [...] you have to go down some kind of a tunnel and there would be two rooms under the floor. The whole place was surrounded with military and armed people.

The treatment wasn't bad [with] those people, until they led us to a guy. We didn't know his name, but usually they called him after a famous wrestler. [...] Anyone who goes into prison there, they will know that person, because he is a big guy, muscular and you can't talk to him because he is violent and powerful.

Mariam's husband was held in this place for two months:

At the beginning no-one said anything. I don't know why I was there; they didn't mention anything. But after a week they said, "We know that you smuggled away your son. Why did you do that? You know we can keep you here. And we can get to you so easily, or to him."

[...] I was scared and I could not sleep while I was there.

His family did not know where he had been taken and were extremely frightened. Mariam explained:

Prison in our country was very bad. Whenever someone gets jailed, no-one knows what happened.

Eventually Mariam's brother, who had connections in the government, was able to track down his brother-in-law's whereabouts and pay a bribe to have him released. Mariam's husband immediately fled the country.



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DISAPPEARANCES AND LIVING WITH MISSING RELATIVES

Like Mariam's family described above, six other families lived through incredibly distressing periods of not knowing the whereabouts of a family member who had disappeared and forcibly detained or had gone into hiding without being able to notify them. They reported not knowing for weeks or months the fate of missing relatives. Some families experienced more than one family member being disappeared and two families still do not know about a relative's fate.

In one family the father went into hiding in fear of his life. The mother was unable to make contact with him for eight months, by which time she was in the UK applying for asylum with her children. Living with this kind of uncertainty about the fate of a loved one who has disappeared or gone missing has been described as ambiguous loss, and is known to have particular emotional and psychological impacts including the fluctuation between hope and despair (Boss 1999, IFRC 2014: 43).

In another family, the husband was detained for protesting against the abuses of the regime. His wife described the terrifying experience of not knowing what had happened to him:

I used to be in very bad, bad mood - stressed, depressed, anxious - because I didn't have any news about him. I didn't know if he's still alive or not. [...] I couldn't ask anyone anything.

(Mother, Syria)

When he was released, the security forces came again to look for him. On one occasion she had been terrified because that same day they had killed another of his friends: "I was worried that he might be killed, or kidnapped or executed." She pleaded with him to leave the country. At first, he was reluctant: "I am working for my country, for my people, for my family and I can't leave them alone." But after he had been detained three times she eventually persuaded him to leave. Days later the intelligence services came to their home again demanding to know where he was. She and her children moved house to try to avoid this harassment and intimidation but the intelligence services persisted in calling her mobile phone. She and her children then also fled the country.

Wives of men who disappeared described the effects within their families. An Eritrean mother described how difficult it had been to look after her children, whilst not knowing what had happened to her husband. She was visibly upset as she recalled that time:

**It's very hard because he's in the prison.
You don't know where he is. You don't have
any contact with him.**

She described the anguish she felt in responding to her children's questions:

**The children used to ask me "Where is my dad?
He's not coming, when is he coming?"**

**I don't want to let them feel bad, to stress them,
because I don't want to tell them that he is in
prison. They used to ask me, "Does he love us?
Does he know us?" They used to ask me those
kinds of questions.**

Her heartache as a mother trying to protect and reassure her children while at the same time as living with intense fear for her husband's welfare, placed incredible mental and emotional strain on her. She repeatedly described that time as "very, very hard".

Again, this has an impact on an individual's level of resilience and ultimately their mental health and wellbeing which does not always dissipate simply through the process of reuniting with the family in a safe place. It can be the case that people require additional support to rebuild and recover. This could come from family and community supports, but often this can be complex for people who have arrived in a new country after, at times, considerable periods of separation. As a result opportunities to develop these supports need to be created in a way which makes them accessible and helpful to arriving refugee families.

DISCRIMINATION, STIGMA AND REJECTION

Some families experienced insecurity in their home countries as a result of longer-term, persistent discrimination. One family had not been legally recognised as citizens in their home country because of the ethnic group they belonged to. This led to them having no right to work and being excluded from

accessing government schools and hospitals. Another family was rejected by their relatives and community after they converted to another religious group (see Rekha's family story below). In both of these families the rejection of wider family and society led to social isolation and difficulties in meeting their basic needs.

CASE STUDY: REKHA'S FAMILY (PAKISTAN) – CONVERSION AND FAMILY REJECTION

Several years previously, Rekha's husband had converted to a particular religious community that was perceived to be heretical by other Muslims. At first he told no-one, but later she and the children also joined this new religious community.

It was not only members of the local community, but also their family who criticised them for converting. When they ignored their relatives' appeals to reject their new religious community, their relatives rejected them.

Rekha's husband began to receive threats. At first they did not take these seriously. However, over time the threats increased, as Rekha's daughter explained:

In my dad's office there were two persons, very orthodox persons, who kept on threatening my dad. They were saying, "What is the reason? Why did you convert from your religion to this one? You're not supposed to do that."

Her father eventually decided to leave the country after one of these people assaulted him very badly.

GENDER-BASED VIOLENCE

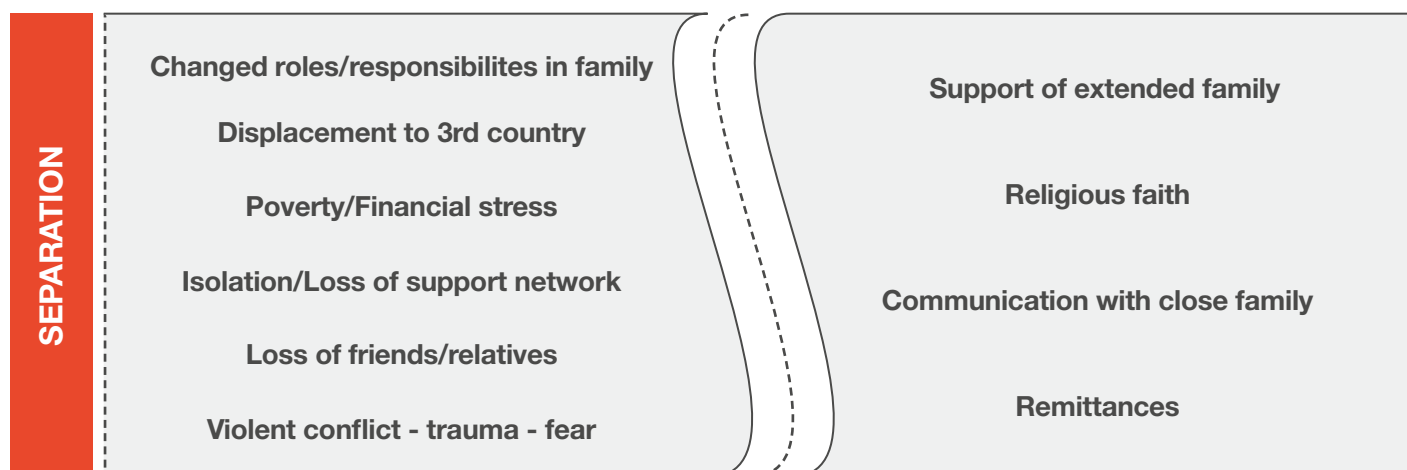
Some people experienced trauma and stigma because of violations that were committed against them. Some of those who had experienced torture described stigma from wider society. Women who were perceived by their communities as having been abandoned by their husbands were also in some cases stigmatised. In one family a mother reported stigma and trauma as a result of gender-based violence. She had been raped as a school girl and was stigmatised and excluded by her community because of this. She explained that they were not interested to hear what had happened to her and described feeling much loathing.

They were not accepting me as a someone [...] they didn't even want to know what was happening from me. I was young, I was raped. They didn't even ask what had happened to me.

(Mother, Zimbabwe)

Because of the community reaction her parents decided to send her to stay with relatives in a distant village. Her child was separated from her and brought up by her mother. At her uncles' house she was badly treated by her aunt because of the stigma of her rape. For many years she remained isolated in dealing with the trauma she had faced and confused about being blamed for what had happened to her, whilst seeing the man who had committed this crime against her go free. She commented: "I'm okay right now; but it wasn't clear when I was growing up, the way it will go."

B. SEPARATION PERIOD



SEPARATION PERIOD: SUMMARY OF RISK FACTORS

For remaining family members:

In country of residence:

- > **Exposure to violence – bombs and indiscriminate violence**

In transition country:

- > **Protection risks**
- > **Living with grief/loss**
- > **Isolation and difficulties living in a third country**
- > **Delays and challenges in family reunion application process**

For sponsors:

In transition country:

- > **Anxiety about safety threats of family remaining in home country**
- > **Living with grief/loss**
- > **Isolation**

In UK:

- > **Anxiety about safety threats of family remaining in home country**

- > **Living with grief/loss**
- > **Guilt at not being able to support family**
- > **Isolation**
- > **Uncertainty of asylum and family reunion processes**

This section highlights risk factors to health and wellbeing during the period of separation. It identifies risks both for the family member(s) who fled first (the refugee sponsor) and for the family members who were left behind.

The diagram below shows where families were during the separation period. In most families the sponsor fled the country of residence first, although in one case the family fled together to a neighbouring country and separated there. Many sponsors and some remaining family members stayed in transition countries during their period of separation. In the table below where the colour varies between Sponsor and Other family members, this represents a period of time when the family was separated.

TABLE 2:
PERIOD OF SEPARATION BETWEEN SPONSOR AND OTHER FAMILY MEMBERS

	FAMILY MEMBER	LOCATION			
Pattern 1. (6 families)	Sponsor	Country of residence	Transition country/countries	UK	
	Other family members	Country of residence			UK
Pattern 2. (5 families)	Sponsor	Country of residence	UK		
	Other family members	Country of residence			UK
Pattern 3. (5 families)	Sponsor	Country of residence	Transition country/countries	UK	
	Other family members	Country of residence		Transition country/countries	UK
Pattern 4. (5 families)	Sponsor	Country of residence	Transition country/countries	UK	
	Other family members	Country of residence	Transition country/countries		UK

Country of residence

Transition country/countries

UK

REMAINING FAMILY

Remaining family members were often left with limited support and resources. Many continued to live in dangerous and insecure situations, exposed to the risk factors described above. In several instances they too had to go into hiding or leave the country themselves to find security. In five families, remaining family members had to leave their country of residence and stay in a transition country until their family reunion applications were processed.

The majority of remaining family members reported high levels of stress and difficulties during the period of separation. The exception were four families in which remaining family members were living in relatively stable, longer-term arrangements with supportive wider family, for example children and young people who had already been living with grandparents or aunts, a woman with no children living with her in-laws, and another woman with young children who moved back to her natal home. These people still experienced difficulties in being separated from loved ones, but they did not report stress and anxiety to the same extent. They were not exposed to persistent or increasing insecurity in their living situations and other risk factors were mitigated by having resources from family and strong supportive relationships.

However, for others with less safe and stable environments, stress and anxiety became very acute. These participants described how this affected their physical health, for example causing weight loss, or psychosomatic body pains. Some described how they became overwhelmed and lost their ability to function and carry out daily activities during certain periods because of intense fear or anxiety.

In visual exercises with children, ten out of fourteen emotions charts showed a distinct dip during the period of separation.²¹

Again, the experiences during separation have an impact at both an individual and family level. Once reunited the individuals then have to address this on their own and collectively with their families. Often the level of insecurity faced during the period of separation has a clear correlation with the levels of stress, anxiety, mental health and

wellbeing. In cases where the situation has been unsafe, unstable or prolonged, it may be that additional support, particularly family therapy, is required to help families work through the impact of this once reunited in a new country.

The feeling of being safe and secure is arguably critical to this; therefore ongoing work to create a supportive and welcoming environment in the receiving community is essential to maintaining a feeling of safety and security for families in this situation. Factors which may reduce the feeling of security, such as changes to the way in which sponsors legal status is reviewed, multiple house moves, or racial discrimination, may impact on the individual and family's ability to recover and rebuild their lives.

SAFETY THREATS AND CONTINUING VIOLENT DISRUPTION IN HOME COUNTRY

As suggested above, during periods of separation, the majority of family members left behind continued to live in situations of violence.

In Syria, the conflict meant that some families were at imminent risk. One family experienced their neighbour's house being bombed a few weeks before they left to be reunited with their father. Three of their children were injured, as their youngest son recounted:

I got burnt. My sister got injured in her nose; and my brother on his teeth.

Some of the family are still there. His father explained:

His sister and two cousins were left behind. My brother was martyred so we were looking after them.

In two families, parents whose adult siblings were killed took on informal adoption of nieces and nephews. Both families had to leave these children when they were reunited and were still deeply concerned about their safety. This illustrates that even when families are reunited they often remain separated from loved ones due to the restrictive family reunion criteria applied in the UK. This can impact on an individual's emotional wellbeing as they try to settle into life in a safe new country, while other close family members remain at risk in violent and unsafe environments.

²⁰ This figure includes families where the sponsor did not share in detail about their journey and no comments from their family indicated that the sponsor spent time in a transition country; however there is a chance that sponsor's did stay in a transition country and this was unreported.

²¹ The other four were more ambiguous, either omitting the separation period, or marking both positive and negative feelings during the separation period.

In another family, violence against their community continued to escalate during the period of separation and included threats against schools. A young woman from Pakistan explained:

My school was threatened two times because it was a girls' school. They did not allow girls to get educated. It was really difficult. I used to go to school every time, but my mother and father were very worried, and I myself, that would I come back alive or not?

She explained how this fear affected her and her classmates:

It was very depressing and everyone around me had the same feeling, my friends and my family. We would talk about it at school and everyone would say that we didn't know what to do. We were scared that we wouldn't be able to continue our education. I had some friends that lost their family members and friends. There was a girl in school who was engaged and her husband was martyred in a bomb blast. It made everyone feel very sad.

One day a bomb exploded near her school:

We were in class and we heard a bomb blast. At home we learnt that it had killed 100 people and injured 150 other old people, children and lots of people. We were very scared and afraid.

I had a lot of tension when I heard the bomb blast. I had headaches, but not for too long. [...] It would affect my sleep sometimes but I tried to rest as I didn't want it to affect my health. I felt stressed but it was more mental than physical.

Her mother spoke about how afraid she had been for her children and how difficult it was not being confident that she could protect them:

It was very difficult because the children used to go to school and it was very dangerous.

There had also been incidents in their area of children being kidnapped and groups demanding ransoms to have them returned, which increased her fears:

In 2013, they kidnapped a child. They got the money, but they had taken out the child's kidney. I was afraid of this.

Knowing these dangers she was afraid to let her son play outside with his friends, but also did not want to transfer her fears to him:

I can't tell him we're still in danger. I can't tell him, someone might kidnap you.

Being separated from her husband and facing such challenges and fears alone only added to the stress.

DIRECT INTIMIDATION OF FAMILY AFTER RELATIVE FLED

It was common for families to face questioning and intimidation from authorities after their relatives fled.

My family's life was in danger, because they were looking for me. They were going to the house, putting pressure on my family and asking about me. [...] every time they went to the house they used to ask my family where I was. But my family never told them where I was. Each time they came up with an excuse, for example, I was outside, I was in hospital...

(Father, Kuwait).

His daughter described how they had experienced these encounters and the fear they felt:

We were already in a bad situation, so it became worse because [my father] wasn't there. Sometimes they would come looking for him because he was wanted. And when they didn't find him they would say, "Okay, we'll take one of the daughters." So my mum decided that everyone stays in their room, not to leave the rooms, and she will deal with them.

(Daughter, Kuwait)

Other families had to move, go into hiding or flee because of the dangerous repercussions they faced after their relatives fled. One Eritrean family had to move immediately from their home the day after the father escaped detention and, soon after, they too fled to Sudan.

Several families tried to hide the difficulties the family were facing from their children, but in most cases there came a point when this was no longer possible, as in the case of Rekha's family below.

CASE STUDY: REKHA'S FAMILY

– LOSS OF A SON AND ISOLATION

After Rekha's husband fled the country, her son started going to their community's mosque. People began threatening him in the same way they had threatened his father. One year later he was murdered. Rekha's daughter recalled:

We never expected this incident will take place in our life. They just kept on giving threats - that was happening from 2004. But this big sudden incident changed our life.

It had been even more difficult because not only had they been separated from her father but none of their relatives supported them: "Even at the time of the funeral there was nobody."

Their wider family instead blamed them for what had happened:

This big incident has happened because of this, because you have converted. [...] It is better you come back [to mainstream Islam], the family will be safe. Otherwise you will face more problems.

After Rekha's son's death women from their religious community visited their home to offer condolences. At this time a cousin visiting from overseas arrived. He interrupted the gathering and threatened Rekha, beating her and speaking very badly of her in front of everyone. The community women tried to stop him and shouted, "How dare you do that when we are women here."

Having no male relatives to support them was a specific difficulty and placed Rekha and her daughter at greater risk:

Really I was so much worried when my husband came down to this country. I had a fear like, what [do] I have to do? How am I going to manage with the small children because the head of the family has gone away now? And then later on I tried to convince myself, '[It's] okay, your son is there, he will look after [you]'. I had that hope. But when my son was lost, I was completely shattered.

The grief and trauma she suffered after her son's death affected her deeply: "Whatever you ask me I will just say 2010 because that is the thing that's stuck in my mind." She described the years after his death as "intolerable" and did not want to speak about them in any more detail.

Her daughter explained that it was an incredibly difficult time and they became very isolated. They moved to another town, to live with members of their religious community. She described how they faced many problems:

We were so much scared to go out [...]. We never used to go anywhere; just to get the essential things from the market.

Rekha took on sewing work for their neighbours to provide an income. She explained how work became a distraction to keep her mind from the grief she was suffering:

For 24 hours I was doing the stitching, because I just wanted to divert myself. If I am just idle for little time, I just think about my sons' incident. That was going on in my mind.

Rekha's daughter explained that both she and her mother suffered serious effects on their health:

We both have lost our health. That is the major impact we have. I was very healthy, but after my brother's death I have lost so much weight. Until now I am not able to manage that.

As well as these physical symptoms she had problems concentrating: "I used to be a very good student, but after that I lost even the studies." She took a break from studies for a few months, but then resolved to go back and put her efforts into completing the course. She managed but did not get the grades she had been expecting.

Rekha's husband's asylum claim was initially refused and he had to wait several years before he received refugee status and could apply for family reunion. The family deeply regretted that his asylum decision was not granted more quickly. Rekha's daughter commented:

If they had given the asylum status at that time itself, then the whole family would have been united, before the murder of my brother.

Rekha's husband had been deeply affected by shock and grief. He described not being able to think about anything and then having "a rush of thoughts, debates with God" when he questioned his religious beliefs and the meaning of life. He received counselling and support from friends but found it incredibly difficult being away from his wife and daughter.

The family remained separated for more than five years. When the family reunion visas were processed Rekha's daughter's visa was initially rejected, because she had already turned 18 and was therefore not within the UK family reunion rules. It took another year until she was eventually granted a visa on compassionate grounds.

This case illustrates how delays in decisions in the asylum process and family reunion process can prolong exposure to serious danger and suffering for remaining family members, resulting in greater experiences of trauma upon arrival in the UK.

DELAYS AND DIFFICULTIES IN FAMILY REUNION PROCESS

Five families reported challenges with submitting family reunion applications and/or needing to appeal initial decisions²². A Syrian family living in very difficult conditions in a third country waited for over a year because their family reunion visa application was initially refused and had to be appealed. The mother almost lost hope when this happened:

To be honest I didn't expect to be accepted after it had been refused. I said to my husband I want to take my children and go back to Syria and he stopped me and he said to me "no just wait I want to appeal it".

Her husband explained that the original application had been refused because the embassy official "didn't believe that they were my kids". This decision was then withdrawn and a positive decision given but only after lengthy delays which had serious impacts on the family:

The separation was only supposed to be for three months, but it lasted a year and a half because of the court procedure. And that was [the reason for] the financial difficulties and the other difficulties we had because of the separation. Plus the kids lost a year of their education. We got to a stage when my family told me, forget about family reunion and just come back and live with us. But thank God we were patient.

Another Syrian family had problems because they did not have documentation or legal status in the transition country:

They would specify a certain location for the interview for family reunion, so we would go there but the treatment wasn't good, maybe because we were in [transition country]. The kids were left for hours in the sun. [...] The lady there was asking for passports and several times they told me we needed passports; but we didn't have passports because we ran away and we left everything and came.

The family fled Syria after receiving extortion threats. They did not have time to make arrangements to get their passports renewed. It was only with further advocacy that the Embassy accepted the family's application.

A family living in Kuwait got as far as the airport before they were refused to travel:

I sold everything and we went to the airport [...] they didn't accept the visa [from] the UK and said there is a special document that you need from the Government to leave the country.

Her daughter described how it felt: "I was worried that I would never see my father again and we would never be reunited." They went back home and there was nothing in the house except for some very old blankets which they slept on. She bought a small single-ring stove which they relied on for the next four months.

Her husband commented on how difficult this time was for all the family:

It was harder than hard I would say. Yes, it was hard for my family and it was hard for me as well. Because we all thought because they got the visa they would just go to the airport and just get on a plane and get here.

In another case, a Somali family were only partially reunited after the visa applications for their adopted children were not accepted. The appeals around this were a source of ongoing stress for the family.

An Iranian family had to make three attempts to apply for family reunion visas. The mother described this:

[We] sent all documents to the embassy in Tehran but in the middle of processing they closed the embassy, because of the occupation of the embassy of London in Tehran.

²² The actual number of families facing delays and problems may well be higher as this relied on self-reporting and not all families spoke in detail about the visa process.



Conor Ashford / British Red Cross

She and her daughter then travelled to the British embassy in Turkey to submit their applications:

One year after that, we had to go to the embassy in Turkey and they said that it would take one or two weeks. We were there for one month and it was very hard for us and very expensive. I was under pressure then. I got sick and my daughter got sick there and we had to go back to Iran.

Her daughter commented:

It was very stressful and I got sad because we tried a lot to get the visa and we made all the arrangements to go to Turkey; but when I understood that we couldn't stay longer there and we had to go back to Iran without the visa it bothered me.

The third time there was a new rule that they could submit their application and documents in person in Turkey and return home, asking someone else to collect their visas later. After three attempts the family were stressed about whether they would get the visas, as the mother explained:

I was stressed and worried. And I didn't believe I would go this time until I was on the plane.

The uncertainty and seeming unpredictability of decisions on family reunion that the families experienced meant that they were subject to long periods of stress with little control over their future. Families who had hopes raised that they would be reunited and then learned that their applications were initially rejected or faced further delays in departure spoke of feelings of hopelessness at this time. Sponsors described not believing they would be reunited until their families actually arrived at the airport.

Yet again these experiences continued to take a toll on the individuals and families health and wellbeing. From a sponsor's perspective, this period was both stressful and frustrating, and often impacted on their ability to adequately focus on elements of their daily life, making it more challenging to progress on their 'integration pathway'.

STRESS OF FAMILY SEPARATION: UNCERTAINTY AND WAITING

One of the biggest strains on families was not knowing if or when they would be reunited. An FFT therapist interviewed observed: "The emotional toll of separation is immense."

In some cases, families did not know that a relative was leaving. Children in particular were not always informed:

She came in 2008 and I didn't know she was coming here. [...] My grandma told me your mum is in London and I was like, "What? Why didn't you tell me?" I just cried at that time.
(Daughter, Zimbabwe)

Another woman described not knowing that her husband was leaving:

I didn't know and I don't have any idea in advance that this was his plan that he wanted to leave.... When he [went into] hiding, I knew that he was hiding with his friends; but no idea that he will leave, where he will go, nothing...
Mother, Kuwait)

She added:

Of course I was upset, because all the hard work was falling on my shoulders, all the responsibility for the children falling on my head. He left everything easily and went away without even telling.

In these cases children and partners were left with a feeling of being abandoned, having had no part in the decision of their family member to leave.

Many families described the stress of not knowing if, or when, they would be reunited:

We really did not know when we would be reunited again. Thank God that we were reunited in a short time. It was a very hard time. I thought many times, will I meet my husband after 5 years, 10 years? We didn't know. (Mother, Pakistan)

Children too found this period of separation extremely difficult, as a Syrian mother described:

The hardest time they put it in their hearts. My eldest daughter she used to write at night about her dad,

because she missed him. You know they are very clever. [...] the youngest boy, he is eight years old, he used to sit and say, "Oh, I don't like this life". She asked "why?" He said, "Because we don't have our dad with us".

She described the heartache as a parent of hearing her youngest son's despair, and admitted how at times they had all lost hope that they would meet him again.

An Iranian mother also described the strain of knowing that their children missed their father:

The most important problem at that time was that the children wanted their father and they missed their father. They had some needs that I as a mother couldn't provide for them. Just there were some nights that they didn't tell me anything but I knew that when they went to bed they were crying for their father. When I'm talking about it I get upset.
(Mother, Iran)

A young boy in another family described what separation had felt like in his family, and his confusion about what was happening:

At first it was like something that was a whole, or complete. Then after that it was as if something was missing. [...] I did not know what was going on. I knew that [my father] left and then my brother wasn't there. I didn't understand much, but then after time I began to understand what happened.
(Son, Eritrea)

This highlights particular concerns for children who may not clearly understand, or have been told, what was happening to their family and why they were separated from some family members. This boy gives a clear description of only understanding fragments of what was happening and slowly, over time understanding more.

At the point of reunion, families have to work through these complex and at times competing emotions. The sponsors have feelings of guilt at leaving their family, while also believing that the decision to leave was made with the best interests of the family in

mind, whereas the families, as outlined above, can have feelings of abandonment, confusion, and anger. These emotions are then mixed with the complex and lengthy asylum and family reunion process which can prolong the separation period and add further strain to family relationships, which can have impacts on the health and wellbeing of individuals and the nature of relationships post-reunion.

LIVING IN TRANSITION²³

Living in a transition was identified as the hardest period for all six families who experienced this, with most families having to move several times. One mother from Somalia commented:

We had to move around a lot from place to place. We suffered a lot. We had to move to different places. [...] We went to Ethiopia and rented a house there. We didn't know anyone there. We stayed there for about two years.

A Syrian woman, who lived with her children in a transition country for several months whilst waiting for their family reunion visas to be processed, described how difficult this time was:

These are the bad days in my life, because I didn't know anyone there. I didn't have my husband or relatives or friends. I am on my own with my children. It's a big responsibility. It's the saddest days in my life.

Her husband described how after he left for the UK the landlord of the tenancy he secured for his family put pressure on them to leave. The family had to move four times during their time in Jordan which was very unsettling.

Of the families we spoke to, none of the children who lived in transition countries attended school during this period. Children described feeling bored and sad that they were not able to play with others because they did not know people and did not know the language. They spoke about having to stay at home because parents were concerned about safety and

²³ The Red Cross's report on the family reunion application process provides analysis of a larger number of families: In 30% of cases, applicants had already moved to a third country because of protection reasons before submitting applications; and of these less than half (44%) reported having legal status in that country (2015: 27). In 20% of cases, applicants did not have access to a British embassy in their country of residence and so had to travel across borders to submit an application (Beswick, 2015: p. 8).

sometimes being left alone because parents had to go out for work or to buy food. A Syrian boy reported feeling scared and worried when left alone: “It was like a prison that house; and [we] had to stay there for long time and [we] felt quite lonely.”

This boy and his siblings missed three years of school in total, because of the disruption to their schooling in Syria and in the transition country where they had not enrolled because of language differences and uncertainty about how long they would be there. Missing substantial periods of schooling is concerning for the longer-term educational impact for children as well as more immediate impacts of having no supportive routines and activities to engage in and a safe space to go during times of uncertainty and change. Re-establishing schooling is seen as a key priority in terms of children and young people’s psychosocial wellbeing in humanitarian emergencies, giving structure, routine and activity, as well as providing a safe space for them to be.

The feeling of transitional living can extend for a prolonged period of time for many families and appears to place limitations on their ability to build routines, structures and supports which could positively impact on their health and wellbeing during this period of separation. Again this can result in reduced resilience upon reunion. It also highlights the need to ensure that families, where possible, are not placed in transitional or temporary arrangements upon arrival in their new country, specifically temporary housing. This ongoing feeling of being unable to settle, particularly post-reunion, could keep undermining their health and wellbeing as they remain unable to build more permanent and sustainable homes, relationships and routines which we know can be supportive factors from the health and wellbeing frameworks outlined earlier in the report.

CASE STUDY: MARIAM’S FAMILY – LIVING IN TRANSITION

After Mariam’s husband escaped from detention, he and his son stayed in a neighbouring country in transit for several months whilst making arrangements to leave. He worked as a labourer doing any work he could. He was not able to contact his family in Eritrea because of the risks:

It’s recommended that you don’t make contacts [...]. The danger was on my family more than myself.

Mariam heard no news from her husband until he contacted her to tell her he had reached the UK almost a year later.

Mariam’s husband and son had become separated on the journey. His son described how it felt to arrive in a new country alone:

You know separation is not a good feeling. At the beginning, I didn’t know where I was, or what I was doing or what was happening, because I was just put there. So I was just trying to get used to everything slowly, and then [...] I started feeling little by little longing for family, longing for home, longing for my friends, the school because time was passing so I felt like I was longing for everything.

Because he was under eighteen, he was supported by social work. He gradually began to settle into language learning and college. Meanwhile, in Glasgow, Mariam’s husband was granted refugee status, and started the process of applying for family reunion.

It had been a very difficult time for the family members left behind who had gone into hiding and then had to leave the country. Mariam’s daughter described how it felt:

It was very hard and strange because we had to go illegally to escape. Hiding is not easy.

They lived for several months in a neighbouring country in order to prepare all the necessary evidence and submit the family reunion applications. Mariam explained how difficult this time was:

To be honest it was a very, very hard journey. When we arrived in [the neighbouring country] we didn’t know anybody there. We didn’t know how to rent a flat or anything.

Even though they spoke the same language, their accent was different: “People noticed we were foreigners and would increase the prices.”

Mariam felt the pressure of being responsible for everything and it affected her mental health:

It was a very hard feeling and I was under big pressure. I couldn't speak as tears were always coming and I had no control over them. I had to do everything on my own.

Mariam worried about the safety of her children. When she went out she left the younger children with her eldest daughter and told them to stay in the house and not open the door.

Mariam tried to cope by drawing strength from her faith:

At the beginning it was OK. I would wake up at 5 am to pray and then I would feel active. I would teach my children to pray throughout the day too. But by the end I felt weak and tired. I could still do things but it got harder and was tiring. I felt that my body changed [...] I lost weight and felt unwell from stress.

Over time, the stress of the situation affected Mariam's physical as well as mental health. Mariam also noticed effects on her eldest daughter's wellbeing, but had no option but to continue relying on her for support: She was emotionally affected and I needed to look after her. I would have to tell her too to look after her siblings if anything ever happened to me when I was outside.

Her daughter commented that she felt worried for her mother because she had to do everything on her own, and also worried that she would never see her father and brother again.

A moment of hope came when the family were granted an appointment at the British embassy for their family reunion visa applications, but this was short-lived:

When I got an appointment at the embassy it gave me new life; but when the embassy said we would have to wait at least three months for our visas I lost hope.

At this point, Mariam's eldest son became very frustrated and doubted whether that they would ever be reunited. "One day he left and never returned", Mariam said. "I had refused to let him go and he didn't tell me that he was going to leave."

Mariam searched for him and asked her brother for to help trace him. Her brother discovered that he had been detained. They searched for him in different

places and thought they had tracked him down, but they believe he was then moved. He advised Mariam to escape immediately for her own safety, assuring her that if he heard anything more he would help her son.

LACK OF COMMUNICATION

During the separation period families were able to keep in touch to varying degrees. Overall, five families reported having frequent communication, four less frequent communication and six long gaps in communication²⁴. Several families were able to keep in touch using internet communications (**see section 5.2**). However, difficulties were common whilst the sponsor was travelling. It was sometimes dangerous to contact family (see Mariam's case study) and at other times costs were prohibitive:

I was calling my family to make sure they're okay, sometimes every second day, sometimes every three days. It was just from time to time, whenever I had money to buy a card to phone them.

Father, Kuwait)

Interviewees mentioned difficulties when they were in detention immediately after arrival in the UK, due to the cost of call cards and the lack of internet communication possibilities:

When [I] arrived in the UK and the police put [me] in detention, it was the hardest time because [I] didn't know how to communicate with family. [I] used to pay £10 to put in those phones, and the £10 goes very quick. I didn't mind at that time; the most important thing was to hear their voices and check they're alright.

(Mother, Syria)

Even when families were able to communicate, some family members did not want sponsors to know how dangerous the situation was when they were unable to do anything about it. One woman described how stressful this was and how it affected her health:

Whenever I talked to [my husband] on the phone, I told everything was OK, don't worry, because he was alone here. If I tell him the problems [...].

²⁴ Information on communication was not known for two families.

He knew the problems, but I didn't repeat for him every time. So my mind was under pressure. It affected my health. I can't tell what happened... I couldn't eat food; I didn't digest food well.

(Mother, Pakistan)

FINANCIAL DIFFICULTIES:

WORK CHALLENGES, REMITTANCES AND WIDER FAMILY SUPPORT

In a small number of families, women were employed. During the separation period four families reported that the sponsor sent money when they were able. Often they were not in a position to do this and the remaining family members had to find other means to support themselves. In eight families those left behind received support from wider family. In four families remaining family members had to find work to provide for themselves and their children.

One mother spoke about how distressing it had been during the asylum process when she did not have money to send home:

I had a daughter in Zimbabwe; she needed my support but I couldn't do anything. I couldn't even send money to her for school fees. I remember my mum, sometimes she used to ask me, 'Could you do something?' But I couldn't do anything.

(Mother, Zimbabwe)

In several cases families relied on their extended family for financial support. Where this support was not available, families looked for work to survive. One mother had started sewing for neighbours (see Rekha's case study). Another had organised her children to take over the informal jobs her husband had previously done - selling goods on the street, and collecting bottles to recycle.

A mother from Iran described the financial difficulties and challenges after her husband left:

I had a very hard time without him with three children. [...] Life was expensive and I couldn't do that with for example the expense of the living and with renting a house, so I went back to my mother's house and lived there.

Thus, even without the rent costs it had been difficult as she needed to cover the school fees for her children. She worked as a hairdresser to provide for her family.

The strain of having to manage all the responsibilities for her family alone affected her health:

All those problems have impact on my physical body. I have problem in the bones of my hand and [when] I carry something I feel numbness in my hand and my legs; I feel pain.

Children were aware of the strain on their parents who remained and shared their concerns. A Syrian boy, whose mother had travelled to the UK first, commented:

It was a big responsibility for Dad because he had to go and work for a few hours and we had to stay at home. So he was a bit stressed and yeah it was really hard for him.

In another case siblings witnessed a time when the strain on their mother became too overwhelming:

When we were separated, all the burden fell on my mum. One day she fell apart. She didn't know what was happening to her but she still tried to talk normally. I was really worried about her. She had had to carry everything for two years.

(Daughter, Kuwait)

[T]here was a lot of stress and pressure on my mother. It was visible on her physically, but every time we asked her whether she was ok she used to always say yeah she was ok and everything will be fine.

(Daughter, Kuwait)

This example illustrates both the extremity of stress that some family members experienced, and how this affected the whole family. It gives an indication of the post-reunion issues that families often have to work through as they seek to understand and acknowledge the challenges each faced, and the impact that separation has had on them.

RISKS FOR SPONSOR

The family member who fled first faced new risk factors, in addition to the often intense anxiety about family members who remain in situations of danger or difficulty. All fourteen sponsors involved in the research reported suffering from stress and anxiety during the period of separation, both about the security of family members back home and about the uncertainty of the asylum and family reunion processes.

The FFT therapists emphasised the serious psychological impacts of uncertainty for those living apart from their families. Among sponsors they had observed depression, suicidal thoughts, and witnessed people expressing that it was unbearable to carry on living with such uncertainty. People reported low mood, sleeplessness, nightmares, intrusive thoughts and memories, and flashbacks. After living through the asylum process, experiencing another period of waiting and uncertainty for family reunion put a huge strain on refugee sponsors and their family members. The therapists observed, "People can find it so hard to keep going on."

SPONSOR'S JOURNEY

Many of those interviewed did not speak in detail about their journeys but indicated that it had been very difficult, mentioning lack of food, lack of shelter, dangerous travel, and abuse by authorities in transition countries.

In almost all families men fled first. However, in one case a Syrian woman had been picked out by those arranging travel to come ahead of the rest of her family. She spoke about her fear having never been away from her children and never travelled alone, which an interpreter explained:

[I]t's very hard for a lady to travel all through that things. Especially for her, she has never left home, never worked; she doesn't have all that contact with people so she was really scared. So she thanks God that she was safe. She was really scared and the language barrier was really hard.

She was glad and found courage when she met other women in Calais. They made the last part of the journey to the UK together in the back of a truck.

STRESS OF ASYLUM SYSTEM AND ARRIVING IN A NEW COUNTRY

Some family members were granted asylum very quickly. Others waited for several years, going through initial refusals and appeals.

One man described his fear on arrival, but even when he was reassured he could not stop thinking about his family:

When I was first arrived I was very scared because I was spoken to by the police. And from my experience, speaking to the police it can be a scary experience. But the interpreter there assured me that everything was ok and that I'd be taken care of. I know that my life started being safe as soon as I arrived, but I was always thinking about my family there.
(Father, Kuwait)

For sponsors who had lived in large family groups, isolation and disconnection from family after arrival in the UK was particularly distressing and disorientating:

The biggest thing was the language barrier. It took me some time to make contact with people. Sometimes I stayed at home for a week. Also because it was very cold outside.
(Father, Somalia)

An interpreter recounted another woman's experience:

She was always crying. And she couldn't stay at home because she was alone. She used to go to all community things, and foodbank etc. It was not to go there for food but just to do things.
(Mother, Syria)

This woman was able to find support and build connections in Glasgow. She was very grateful, especially to those who helped her through the family reunion process. Another man had found it difficult to make connections:

I've been in Glasgow for one year. I've been feeling very isolated, totally isolated. [...] Most Scottish people make a 'gap' with the foreign people. It's not easy, not easy to break that barrier. [...] It's very tough. It's a challenging challenge to integrate.
(Father, Sudan)

SPONSOR'S ANXIETY FOR FAMILY

Several sponsors left family members in situations of violent conflict or facing threats from the authorities. Sponsors were incredibly anxious and worried for their loved ones safety:

What was my family thinking when I was here? For [my wife] it was very difficult being responsible for the safety of the children. She was under pressure mentally. They had to go to school, but the situation was even worse than before.

(Father, Pakistan)

Living in a safe place whilst family members remained in danger could produce feelings of guilt. A father from Sudan commented:

I'm feeling worried because, whilst I am living in the UK, in a peaceful place, my family are still in Sudan.

He described other symptoms stemming from his stress:

It has affected me. Sometimes even I don't like to eat. I eat just one meal a day. Psychologically I'm not willing to eat.

[...] Sometimes I can't concentrate. For example, if I'm trying to read something, suddenly I find myself thinking about my wife and my kid. It's something psychologically and emotionally affecting.

Other sponsors reported sleeplessness due to fears for their family and fearing they may never see their relatives again:

If, God forbid, something happened to them I couldn't stop blaming myself...

(Father, Syria)

Living with high levels of uncertainty and stress for long periods was a significant risk factor for sponsors and compounded other traumatic and stressful experiences.

Sponsors also suffered guilt and anxiety because they were unable to fulfil family roles and responsibilities. A father from Kuwait described this:

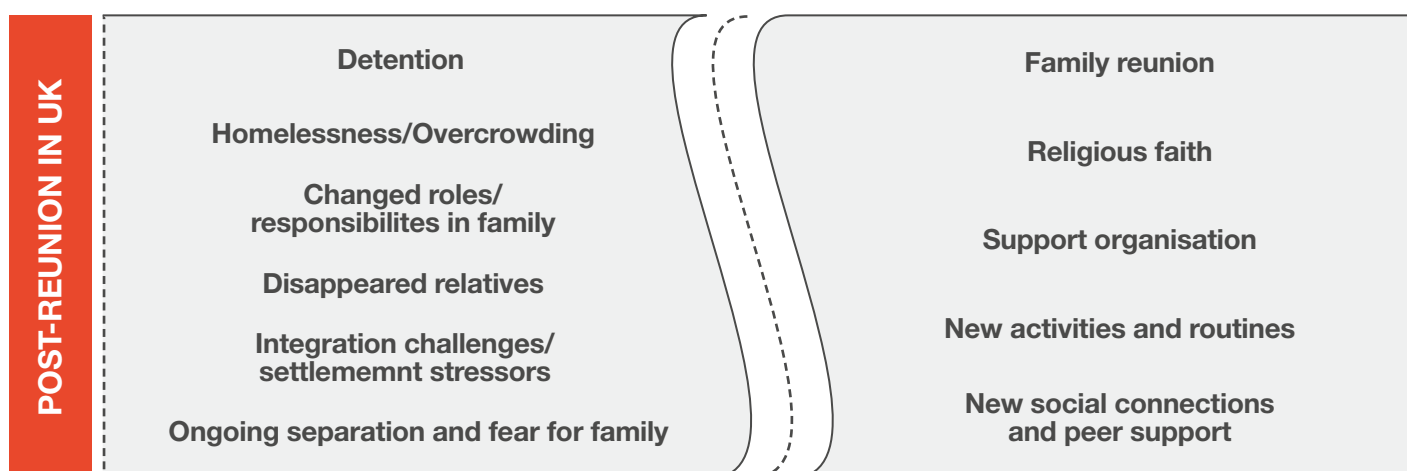
It was very hard because I left my family with nobody to provide for them.
[...] They were there; I knew that they were going through financial difficulties.

FFT therapists emphasised that being unable to respond to the needs and expectations of family members at home was a significant source of stress for sponsors they worked with. However, within the asylum process and refugee journey, there is little formal recognition of the impact that being separated from your family can have. Indeed, throughout the asylum process people are treated as individuals, not as people who have been forcibly separated from their family.

In reality, many people coming through the asylum process will be people who have been forcibly separated from their family, and much more could be done to support them to manage the stress and anxiety that this causes. This could include exploring peer support models which link people who are either going through similar experiences, have been through those experiences, or are receiving communities, to provide individuals with opportunities to benefit from sharing their experience in a relationship which is more equal and reciprocal.

When focussed on developing stronger links within a community-based setting, involving members of the receiving communities, there is the added value of increasing the community understanding and relations, creating social connections and increasing the community impact that refugees and families arriving through family reunion can have on the community they settle in.

C. EXPERIENCES AFTER REUNITING



POST REUNION PERIOD: SUMMARY OF RISK FACTORS

- > Complex grief
- > Multiple loss
- > Problems with housing and financial difficulties or destitution on arrival
- > Integration challenges - language, finding work, access to services
- > Having fewer social connections
- > Suffering ongoing impacts of trauma or torture from past experiences
- > Separation from close family living in dangerous situations
- > Living with disappeared relatives
- > Having fewer relationships and social connections beyond the immediate family that offer emotional and practical support
- > Suffering from the ongoing impacts of trauma or torture from past experiences
- > Ongoing separation from other children, parents, siblings or close relatives
- > Renegotiating roles and responsibilities within the family

Many of the people interviewed described reuniting with families and rebuilding their lives together in the UK as a new beginning, with new possibilities. However, many also described more difficult aspects of having to 'start again'.

There are several reasons that the period after reunion can bring new challenges and place strains on family relations.

- > Experiencing problems with housing and financial difficulties or destitution on arrival
- > Experiencing integration challenges of getting to know a new place and environment, learning a new language, and finding work or training

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- > Experiencing problems with housing and financial difficulties or destitution on arrival
- > Experiencing integration challenges of getting to know a new place and environment, learning a new language, and finding work or training
- > Having fewer relationships and social connections beyond the immediate family that offer emotional and practical support

- > **Suffering from the ongoing impacts of trauma or torture from past experiences**
- > **Ongoing separation from other children, parents, siblings or close relatives**
- > **Renegotiating roles and responsibilities within the family**

LOSS OF HOME, OF POSSESSIONS AND STATUS

Families had experienced many different kinds of loss. Several families mentioned a sense of loss for their homes, the lives they used to live, and all that they had built up there:

I had nothing. I left everything, everything that I had before. I had to leave it to come here.

(Mother, Zimbabwe)

I lost many things, I lost my business, I lost my friends, I lost my community...

(Father, Pakistan)

We left everything behind. We all had a house, had furniture. We all had to leave this. It's a very difficult feeling.

(Mother, Eritrea)

Some things that you've worked hard to get and have become yours, then one day it's just gone, someone takes it, that all is not easy. You've established roots, built up to a certain state. Then everything is gone.

(Wife, Iraq)

I had two houses back home. Both have been demolished to the ground. We had to sell the land the houses were built on just to leave the country.

(Father, Syria)

Most families held on to hope that one day they would be able to return to their country, even if they were unable to at the moment. Others believed they would never be able to return, and grieved this.

When they fled their home country people lost jobs, status and roles within families or local communities:

My husband, he used to be lawyer, he used to have his own office, a well-known lawyer. And I am a [...] teacher and we were both working.

(Mother, Syria)

It was very difficult to decide to leave the country. It was a great loss. I knew there would be no job, no income, no status. Really this is pressure to the highest degree that has forced me to come here.

(Father, Pakistan)

These changes in roles and status can affect a person's sense of purpose and identity. Re-establishing roles in the UK is difficult and takes time (see also Marsden & Harris, 2015). Work experience, educational qualifications and achievements from other countries are not equally recognised, and barriers of English language competence can delay possibilities to re-establish careers.

Changes to roles and identities can have an impact on an individual's health and wellbeing, particularly if the current situation and opportunities to regain the status that existed prior to fleeing appear at the very least challenging, if not wholly unlikely. This feeling can be intensified after the period of reunion when the real or perceived expectations of other family members can feel more present.

SEPARATION FROM WIDER FAMILY AND FAMILY TRADITIONS

Reunion with relatives in the UK can occur alongside separation with other close relatives who remain in the home or other transition countries. Separation from natal family was difficult for women who had been staying with these family members for long periods after their husbands left. Some women spoke about family reunion as reliving the break with the natal family that happened on their marriage. For those who had experienced long separations and had not felt certain that they would ever be reunited with their husbands, this break with their natal family had been difficult.

Families were worried about elderly parents who were ill and struggled with not being able to care for them:

My parents, they are both old. They say, "Thanks God that you are safe", but, especially my mum, but, "Now is the time we need you, we need our children". She has pain in her knees. I think that I need to be there to help them. But I cannot be there.

(Father, Pakistan)

This man also commented on the loss of his parents' role in his children's lives:

My children learned many things from my parents. My children are alone here. There were things that they had to learn and be trained in. I was relaxed a bit, knowing that many things would be taught by my parents to the children. Now I have to bear that pressure [of taking them away from their grandparents]. But I cannot substitute for them. These things seem small but they are not small.

(Father, Pakistan)

The sense of loss at the forced separation from intergenerational relationships was particularly strong for families who had cohabited with grandparents, or for children whose grandparents had been their main caregiver for a period of their lives. Overall ten families commented on separation from wider family, with children and young people frequently mentioning missing extended family members.

INTEGRATION DIFFICULTIES

The integration challenges that refugee families arriving through family reunion face are fully discussed in the previous report *We started life again* (Marsden & Harris, 2015). However, it was clear that challenges to integration did have an impact on some of the participants' mental health and wellbeing.

Once we were reunited three-quarters of our worries just vanished. But we are still suffering because we are in a foreign country and people speak a foreign language to us, and adapting to a different way of life here is also difficult. We are doing our best to adapt to this society and to this culture.

(Father, Syria)

For several families the adjustment to living in a completely new culture, not knowing how life worked and not having any close connections was stressful:

We don't know anything, don't know to go out. The general life, the social life, the people – we don't know about any of these things. We don't know people here, don't have any relatives.

(Mother, Eritrea)

Being in a new community and society is still difficult and still my mum is not as relaxed as she used to be.

(Daughter, Kuwait)

One girl mentioned that although she felt safer, she still had some fears about her safety here:

We might feel safer than in our country, but we don't feel secure especially when we hear stories about racism.

(Daughter, Kuwait)

Several families faced challenges with housing. One family faced practical difficulties because their house was too small and the teenage daughter had to share a room with her two younger brothers.

The mother had been trying to move for several months but with no success. The family also experienced financial difficulties because of long delays in setting up child benefits and tax credits. Both of these factors placed additional stress on the family which impacted on the mental health and wellbeing of each individual to varying degrees.

Another family settled well in a temporary house in Glasgow which they liked, but several months later were told that they had to move:

It's hard when you put people in a place and they start to adapt, like the kids go to school and [feel] like this is my school and start making friends. And whether it's half a year or a whole year and then you take them out and then you're moving out. Even the children are like, "what's going on?" try[ing] to make sense of it all. "How am I going to go through it again and go through the same experience again?"

(Husband, Eritrea)

The uncertainty of their housing situation and the prospect of another move added another layer of change and stress for the family.

Others described the impacts of linguistic isolation and the stress of not being able to communicate with people. Many people had lost the linguistic competency to manage everyday life as they spoke limited or no English on arrival.

Another woman explained how she felt depressed after she arrived:

I felt lonely here in this country. In Sudan the neighbours would come and knock on the door and say hello. Here people stay in their houses. I have to accept the situation. This is the reality. I'm more alone, more isolated here.

(Wife, Sudan)

Some people like this woman accepted their new situation and tried to adjust. Others found adjustments more difficult.

Here it's like everyone is busy, they have their own life, it's hard to interact.

(Father, Syria)

All these factors, combined with past experiences, impact on each individual differently. From the statements made it would appear that there are interventions which could mitigate the negative impact of integration challenges and better support people to overcome feelings of isolation.

CHILDREN AND YOUNG PEOPLE

Overall children were very positive about school; however, some had experienced problems. In one family both a sister and brother had experienced bullying, which added additional strain to the challenges of settling into a new school after their previous experiences:

Some people were laughing at [my sister]. They noticed that she didn't speak the language and had some issues so they would ridicule her. So she felt that and she knew and sometimes she would feel hurt.

(Daughter, Kuwait)

Sometimes there were four to five guys annoying him [my brother] sometimes and they will be like, "Oh you don't speak English, you don't understand." And one time one came and held him so he had to hit him back to defend himself. There had been an issue and the teachers got involved but then everything was resolved. One time one guy said 'I can kidnap you and take you somewhere you can't be found'.

(Son, Kuwait)

Some children had to wait for months to be enrolled in school and mentioned feeling sad and frustrated about this. One young woman commented:

I like to come to the UK because my father was here and he couldn't go back to Iran. [...] Otherwise I prefer to stay in Iran and go to university there because it was easier for me and I didn't need to learn English.

(Daughter, Iran)

Young people were particularly stressed about missing education and having to start again on their qualifications:

I had graduated from engineering school/college. [...] When I came here I've had to start from the beginning.

(Son, Iraq)

Overall young people struggled more to adjust to the new environment and find opportunities to make new connections and pursue hopes than younger children (see also Marsden & Harris, 2015).

Parents worried about how their children would engage with the new culture and values in the UK, and about how they as parents could deal with bringing them up in this unfamiliar environment:

Parents always worry about their children: about their education and future. I worry about their friends, and that they are doing something wrong. [...] The traditions and customs are different here. There is more freedom which makes me worried. Back home we can control our kids more as our neighbours have the same views.

(Mother, Syria)

Another mother expressed similar concerns:

I am worried about my kids being in a new culture and how they will cope. Here it is very open minded and I worry more here than I do back home.

(Mother, Iraq)

LACK OF WORK

Adults in these families had previously worked as drivers, teachers, lawyers, businessmen, artists, professors, medical technicians, hairdressers and beauticians, salespersons, psychologists and small traders.

Several people spoke about the stress of having to start again professionally:

This was a new country, with new rules. I was establishing life from zero [...] A job is key for integration into society. [...] When you're on benefits your plans are never quite trusted. [...] As a refugee you're not familiar with the system. Until you've learnt how to find a job, naturally you are not relaxed.

(Father, Pakistan)



Another man described the frustration of being out of work in the UK and how this affected his health:

Sometimes when I'm sitting alone now in the UK, it's difficult to find a job, it's difficult to study, I feel the future is gloomy. And then you need to encourage yourself. It's very difficult; it's not easy. To be a successful person here in the UK, have to work very hard. If you step back you can lose your life to drink/drugs. So you have to be very strong.
(Father, Sudan)

From the contributions outlined above it is apparent that finding employment is a key aspiration, however the comments show that there are clear challenges that can impact on an individual's confidence and self-esteem, and after time potentially their health and wellbeing too. Securing decent and fulfilling employment may take some time for many refugees and their arriving family members, and individuals may require additional support to retrain, adapt their skillset, learn English and build their confidence to work in a different country. This type of intervention may help to redefine their identity and offer new opportunities which will have a positive impact on their integration experience and potentially their health and wellbeing.

SEPARATION FROM DE FACTO ADOPTED CHILDREN AND CHILDREN OVER 18

The family reunion process can separate families along new lines. One father had to leave his informally adopted children in a transition country:

They are my brother's children. He was killed and I have brought them up. Their mother lost both her legs and is in a coma. I love them and my own children equally. We're still waiting to hear from the court about the appeal [for their visas].
(Father, Somalia)

It is important to note that in circumstances where children become separated from carers, they may be more vulnerable and at risk of abuse or exploitation, particularly when they are in a transition country. For children who have been informally or de facto adopted there have been legal obstacles that have created separation from their caregivers for a second time, having already lost their birth parents.

FEAR FOR RELATIVES STILL IN DANGER

Many families had close relatives who were still living in very dangerous situations:

I feel safe here but I still worry for my family back home. I don't speak with all of my friends, just one or two of them. I feel very worried about them, it's a bad feeling. [...] It sometimes means that I can't concentrate.
(Daughter, Pakistan)

Another family had left their 18 year old daughter and other children living in an extremely dangerous situation:

My daughter, grandchild and niece and nephew all live in a basement now. They've [been] attacked another two times [...] with chemical weapons. To protect [themselves], what they do is wet a blanket and put it over them so they don't breathe in the chemicals. The world forbids using chemical gas in war. Yet it is being used. One barrel landed 200m, the second landed 120m from the house.
(Father, Syria)

Not only had they experienced continued attacks, but their daughter's husband had been threatened directly:

My son-in-law was kidnapped about 40 days ago. A letter wrapped around a piece of stone was thrown where my daughter lives asking for £3000. They don't have money to live and they asked [for this].

This father's deep distress for his family extended to an intense grief for his country and fellow Syrians:

This is what happened with me, just what happened with me and my family. There are lots and lots of stories like this. I was lucky enough to be able to leave. A lot of people are still in Syria. We're trying to lie to ourselves by smiling, but it's not true. We're just kidding ourselves. In reality our heart and soul is back home.

His wife agreed: "A big part of us is still there." She was anxious about her daughter and described feeling that even when she slept she did not fully rest and often woke in the morning feeling tired. This woman's younger daughter recognised that her parents' were "tired worrying about things". She observed that this had effects on the whole household: "When her mum is unwell the rest of the house is unwell too."

Continuing separation from loved ones, even after family reunion, was a significant theme for all the families. This may suggest that building people's capacity to manage the emotional, mental and at times physical impact that this separation has is an area that should be further developed in order to minimise the negative impact that it may have.

MEDIA REPORTS OF ONGOING VIOLENCE IN HOME COUNTRY

In addition to knowing that relatives and friends were still in danger, families spoke about the impact of news about violence in their home country:

Even now when I hear about violence in my country I feel pain. [...] that day I was crying because there was a terrorist attack on a school.

(Wife, Pakistan)

Some parents attempted to shelter younger children from this:

I try not to discuss the situation in my house, especially when my children are there, because my son is 12 years old and he has a long life in the future. If we discuss these things there is a bad effect on their minds. It is not good for them.

(Wife, Pakistan)

However, many found that they were unable to do this and were worried about the effects on their children:

Sometimes we try to keep some things away from our children, but the TV is just there, and they're exposed. They know what's going on.

(Mother, Syria)

We get all the information through Facebook. My son is watching what is going on through Facebook, for example today ten people were killed, a school was attacked. Maybe he will see his friend. I don't want him to see this, but unfortunately it is inevitable.

(Father, Syria)

Several families used social media to keep in touch with their relatives and the interspersed feeds made it difficult for them to avoid seeing news and images from the conflict in their countries.

LOSS OF FAMILY MEMBERS IN VIOLENT ATTACKS

Families grieved for relatives who had been killed. After arrival in the UK, some continued to hear news of violent deaths of relatives. The scale of loss some families experienced is overwhelming:

Two of my brothers died as a result of shelling. Each had three kids. About eleven days ago my mother and another 7 members of my family were killed. The total deaths in my family is 17 until now [...] The more we talk... it's too much to contain in any way.

(Father, Syria)

Another Syrian father blamed the deaths of family members on the fact that the Syrian authorities were searching for him:

Seven members of my family were killed just because the Government couldn't find me, as they were looking for me. My mum was killed, my brother, my sister-in-law, their kids, my sister and their kids. Obviously they said they were killed by random bullets.

(Father, Syria)

Those who have taken an active political stance place themselves at greater risk and sometimes this risk extends to their family members. When something happens to family members, the guilt the person then experiences can be heavy and deaths of relatives are interpreted as being related to their activism, whether or not the violent acts were directly related.

Individuals have to live with these feelings and without adequate support or safe spaces to process their emotions it can have a significant impact on their mental health and wellbeing. While it is the case that there is little that can be done to prevent the events in home countries, or prevent further loss of life, it may be that better support and understanding of situations can be given to sponsors and arriving family members to increase their capacity to cope.

LIVING WITH DISAPPEARED RELATIVES

Several families lived without news of a relative and suffered from the ongoing uncertainty of their ambiguous loss (see page 16). The case study below describes this in more detail.



CASE STUDY: MARIAM'S FAMILY – AFTER REUNION

When Mariam's family were reunited, they found relief and support in being together again, as her husband commented:

I can say that of course us being here, this is something very good and we are very happy about it.

However, the family continued to be very anxious about their son:

I would say that we are happy 70%, because we still miss our son and sometimes we reflect back and we think of him.

For my wife, whenever she's alone she is always upset and will cry, because she still longs for him. I myself I will be hurt from this side but I'm the man so I will not show it, but I still have pain inside me.

This uncertainty affected the whole family. Mariam's daughter commented:

It's very hard to forget, especially when we left my eldest brother back home. We don't know anything about him. It's very hard to forget, we still remember about him.

As well as the deep sadness and anxiety about her missing son, Mariam was concerned about her brother and his family and felt guilty about not being able to help them:

I feel very worried now for my brother. He put himself at a lot of risk to help us and now we can't help him.

Mariam continued to experience anxiety and mental tension, and physical symptoms which had begun in her home country also persisted:

I had numbness in my shoulders and arms and swelling in my stomach. I couldn't sleep for more than two hours a night. I came to the doctors in the UK but they said they couldn't find anything wrong with me.

Mariam's husband described how his experiences continued to affect his health and wellbeing:

Yes, they do affect greatly, especially psychologically. [...] Maybe it affects my body or something if I'm hurt; with time, time will heal your pain or if you are disabled maybe you will accept it. But psychologically it feels

like it just stays there; you can't get rid of it, it just stays... and you can't cope with it. It's harder than if it's physical pain. [...] Maybe you are busy or something and you forget about it, but then it comes back to you and it's harder.

PHYSICAL AND PSYCHOLOGICAL EFFECTS OF PAST TORTURE

As illustrated in the case study above, the physical and emotional scars and pain of torture continue to affect people. Another father spoke of the physiotherapy and treatment he needed for the pain. He also discussed the mental health impacts and how these were exacerbated by separation from his family:

I am undertaking mental treatment because of the brutal... because of the brutal torture I received in my home country. Also because of all the pressure that was on me and the longer the separation went for, the harder the pressure became on me. It was a very hard time. I'm still recovering from it.

(Father, Syria)

These health impacts hindered his integration, for example he stopped attending college ESOL classes:

It affects my concentration a lot, and it's not just the headache, the backache as well. And it prevents me from going to a lot of places that I need to be.

Another father spoke about how mental images stay with you and became embedded in the mind:

When someone watches a horror movie, whether an adult or a child, then that image stays in your mind. It is embodied in a certain way. Some of the things that we experienced cannot be forgotten. What [my son] went through cannot be forgotten.

(Father, Iraq)

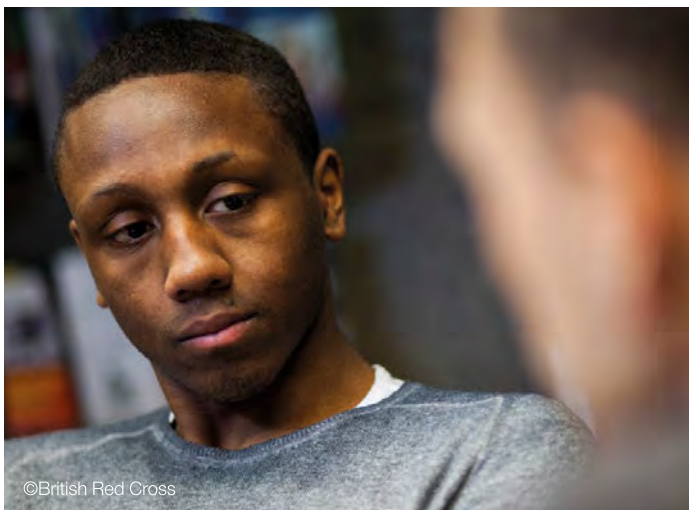
Each of these cases demonstrate why it is important that the impact of family separation is better recognised in the refugee context to deliver increased support to individuals experiencing stresses and pressures that are exacerbated by separation.

IMPACTS OF PAST TRAUMA AND GRIEF

Several family members spoke of how the cumulative stress and strain of their experiences still troubled them, both emotionally and physically.

A Syrian mother described how the house they moved into on arrival had been close to the airport and how hearing aeroplanes triggered memories of being bombed: “I would be checking on the children that they were okay.” She was very anxious for her children after all they had witnessed:

When he sees blood, maybe it will remind him: that person had blood here, and died. Once you’ve seen that image you can’t just forget that.



Another woman described her fear of going outside when she first arrived in the UK:

In our town in Pakistan we’ve seen bomb blasts and targeted killing. Now here I am afraid of going outside, I am afraid that someone is following. [...] I feel insecure and unsafe. Although my husband says that here there are no problems, you are safe here. I don’t know why I feel this way.

(Mother, Pakistan)

Several people reported continuing problems with sleep:

We’re trying our best to forget what happened to us and concentrate on learning language but it’s very difficult and we can’t concentrate. Can’t sleep until 12, thinking ...

(Father, Syria)

Some, including children, suffered from nightmares:

He has nightmares of someone trying to hold him and he is trying to get away.

(Interpreter speaking in third-person about Son, Iraq)

Because my family’s been through a lot, even now my sons wake up at night time screaming. And that is tearing me apart. I know that the separation was very hard for them. As well as it was hard for myself.

(Father, Syria)

Rekha’s case study illustrated the impacts of traumatic grief. The shock of her son’s death had placed immense mental and emotional strain on her, which had been exacerbated by her sense of isolation. Rekha’s daughter observed:

Even right now, she can’t understand things properly. She was affected so much. She forgets things very often. She can’t concentrate on anything. She can’t understand anything. She didn’t come out from that.

The stress of her husband leaving and then the devastating loss of her son had affected her deeply. The effect of this on her health and wellbeing had persisted. In cases like Rekha’s, arriving in a safe country and being reunited with her family was not enough to heal the wounds of her past experiences. Indeed, it may be argued that the experiences she had been through had impacted significantly on her mental health that a more specialist intervention was needed.

Others were in a similar situation, describing ongoing suffering from what they had lived through:

We are still recovering from what we have been through.

(Father, Syria)

You can forget some small things but not the big ones.

(Mother, Syria)

It is very hard to forget the past, because the past is on our mind and in our soul.

(Mother, Pakistan).

These comments illustrate that many of the people arriving through refugee family reunion have a number of the same protective characteristics as the refugees who have been granted international protection. It is clear that for many they will have brought experiences of trauma

with them which may impact on their ability to rebuild their family relationships, build new relationships, and settle into a new life. Without adequate support and

assistance, navigating their new environment and rebuilding their family life while processing their potentially different past experiences can become overwhelming.

5.2. SUPPORTIVE FACTORS

SUPPORTIVE FACTORS: SUMMARY

- > Religious faith
- > Supportive relationships
- > Social and emotional support
- > Community connections – local and with own linguistic or religious communities
- > Meaningful activity and routines
- > Volunteering
- > Adequate financial/material resources

PRE-FLIGHT	SEPARATION	POST REUNION
Family support	Support of extended family	Family reunion
Religious faith	Religious faith	Religious faith
Employment/Livelihood	Communication with close family	Support organisation
Wider social network	Remittances	New activities and routines
		New social connections and peer support

Supportive factors are those which have given people strength whilst living through difficult situations or resources that have helped to mitigate additional burdens. Access to these factors changed during different periods.

Two supportive factors mentioned frequently were: **supportive relationships and religious faith.**

People who reported being taught from childhood to expect that **life is difficult and you need to be strong** or who saw themselves as **part of a struggle for their wider community** found strength and support from these factors.

A woman who had suffered a series of traumatic experiences referred to three supportive factors: her faith in God; having supportive relationships nearby; and what she had been taught about life as a child.

She described how she had prayed every day to be reunited with her family and explained that this kept her going through the long periods of uncertainty and waiting.

She described forgiving people that harmed her in the past, and explained that this helped her not to be caught in her past and to move on:

The way she treated me wasn't nice. But I forgive her. That's it. Now life goes on [...] I can't keep things in my life, because if I keep it I can't do anything.

She explained that what she had been taught by her mother as a child had helped her not to give up hope when things were very difficult:

I remember my mum used to tell us that you don't get things easy. You get things the harder way.

During her long asylum claim, reconnecting with a sister and meeting a new partner provided emotional and material support that kept her going:

[I had] no money. And I need to go and sign at the home office every month. If my partner was not there and my sister was not there I was not going to survive that life.

This woman had lived through multiple adversities. She had drawn strongly on both the internal resources of her faith and upbringing, and social resources. She volunteered during the asylum process which gave her meaningful work and interaction with people; and she had supportive close relationships which had sustained her emotionally and materially.

RELIGION

Religious faith could give individuals both inner strength and belonging to a wider community, for many people giving them a strong sense of identity and meaning to their lives. People drew strength from their religion's teachings in times of suffering:

Many things are included in [our imam's] teachings that teach us to be strong in tough times. [...] If we revere these teachings we remain strong as well. Spirituality gives strength to everyone. (Father, Pakistan)

A. PRE-FLIGHT

WORK IDENTITY AND SENSE OF VOCATION

Adult family members described how having a professional working life, identity or sense of vocation had been a supportive factor for them during difficult times before the decision to flee. Many had worked as lawyers, teachers, full-time carers, tradespeople, academics, businesspeople and psychologists in their home countries. Some described a sense of vocation in their work which motivated them to stay, even as their situation became more dangerous.

This provided a purpose to their life prior to fleeing, despite the challenges they faced. However, for all individuals, despite this supportive factor the situation that they were in became at some stage untenable.

While this was a supportive factor pre-flight, in many ways it could become a risk factor upon arrival in the new country where their work identity and sense of vocation may be limited due to constraints placed upon them in the asylum process, or because of language or training differences. Building supports and interventions which can help people regain this as quickly may enable this to be developed as a supportive factor in their new country.

SUPPORTIVE RELATIONSHIPS

During the turbulent events which unfolded in people's home countries, family members relied on one another for emotional and practical support:

You can say thank God we are fine, we love each other, we have a home and we help each other. (Mother, Syria)

Until they had to flee their homes they were embedded in networks of local relations. Most people had broader support networks of family and friends in their home country.

Yet again, it is important to be aware that this layer of support may be somewhat diminished upon arrival in a new country. Therefore, creating opportunities for people to build new supportive relationships, often with people who may have experienced similar situations, may be a way of recreating this supportive factor in the new context.

B. SEPARATION

COMMUNICATION WITH SPONSOR

Being able to maintain communication whilst apart was a key factor that helped maintain the bond of emotional support during separation. Some families were able to keep in close contact through internet communications and support each other whilst apart:

Communication between me and my family never stopped. We were talking together on skype on a daily basis.

(Father, Syria)

It was reassuring to talk to our father as we knew he was still there, as I know many people who had lost their family members. I was sad that he was far away but happy at the same time that he was safe.

(Daughter, Pakistan)

Families who communicated regularly described how their emotional connection remained strong. However, the desire to support each other could sometimes produce additional strain when family members felt they needed to keep positive for each other. Those families who were unable to be in regular and frequent contact appeared to face more challenges in their relationships after reunion.

SUPPORT FOR SPONSOR DURING ASYLUM AND FAMILY REUNION PROCESS

As discussed earlier in the report, the separation period is challenging for all members of the family. However, given that the sponsor is living within the UK, there is arguably much more that can be done to reduce the negative impact of separation on the sponsor.

While the delivery element of this project did not extend to providing support to sponsors in the context of coping with separation early in the asylum or refugee process, the findings illustrate that many sponsors felt isolated, anxious and stressed during this time as a result of being separated from their loved ones.

It may be that developing more supportive interventions early in the asylum process would build both individual and community capacity to help people through this time and reduce the negative impact that this can have on their mental health and wellbeing, as well as their ability and capacity to engage with the legal processes around both seeking asylum and applying for family reunion.

FAMILY SUPPORT: FINANCIAL AND EMOTIONAL

Some people received support from extended family members during the separation period. In some instances these were other relatives they were already living with, such as grandparents, or uncles and aunts. In other instances women returned to stay with their birth families or were supported by their siblings. These extended family networks provided emotional, practical and material support, including food, shelter and financial support. In contrast, families who had been ostracised from their wider family had particular difficulties during the separation period.

Some families drew together during this period of crisis. One mother spoke about the support she had from her children during the time they were living in a transition country:

They start to be supportive and responsible with the mum. Because I want them to help me as well, to stand beside me. They start to cook and [...] if we have any visitors they start to help.

(Mother, Syria)

Siblings spoke about their relationships becoming stronger as they had to support each other more.

STRENGTH OF CONVICTIONS

One young woman echoed the convictions of her father in her determination to continue with her education and support her community: “It was very dangerous to go to school but I kept going as I love education.” She explained further:

I was able to function through support from my family. I didn't feel weak, I felt strong and that I had to go to school. I was determined to have an education. I want to be a good person in society and to help others. I want to achieve my goals.

(Daughter, Pakistan)

VOLUNTEERING AND KEEPING ACTIVE (SPONSORS)

Several sponsors mentioned taking up volunteering since arriving in the UK. One woman described how attending college courses and volunteering placements through the uncertainty of the asylum period had helped her to keep active and keep a positive outlook:

I tried by all means to stay positive, that things would happen one day. [...] The first days I used to cry, like what am I doing? Why did I come here? [...] But then I start thinking that if I go back I'm going to put myself in danger, so I don't want to do that. And I just say, okay, if I've managed to come here, all this way [...] I think one day it's going to happen, I'm going to be free, to do whatever I want to do.

(Mother, Zimbabwe)

Creating opportunities and supporting sponsors to build active lives and have daily routines during the separation period could play a key role in preserving their mental health and wellbeing at a time when there is substantial strain on the individual. However, it is important that this is carried forward in a supportive context which recognises the challenges and complexities present in their life, including separation from their family and loved ones.

C. POST REUNION

Reuniting as a family usually enabled supportive factors. For the arriving family members, reunion in the UK brought relief about reaching a safe place and finally being back together again as a family. For the sponsor, it reduced anxiety, stress and guilt about family members living in situations of danger and reconnected them with supportive relationships. Critically, family reunion gave families a new start and the opportunity to re-establish family life and a home.

TOGETHER AGAIN: REDUCED ANXIETY

Many families reported that worries and problems decreased once they were reunited:

The best thing is that we are back together as one family. The children they are so happy with their dad and thanks God the children they started school. Everything has changed for the better thank God. Our life is much better.

(Mother Syria)

This woman described how her relationship with her husband had grown closer and even more supportive since they were reunited; giving an example that when she is tired he tells her, "Just sit down, don't do anything, just relax". She explained that sometimes now he goes to the kitchen and prepares food for the whole family.

In re-establishing relationships, families had opportunities to reconsider how they shared roles. Some men took on more responsibilities for tasks in the house and with the children than they previously had, especially in families who used to rely on support from grandparents or other family members. Some women took on more activities outside the house than they had previously, such as language learning and college classes. Several women shared that they hoped to find work eventually.

A Syrian man described how he felt reuniting with his wife and children:

Things changed when they came. At least I know that they are ok. At least I know that they are going to school. And I hope that they will regain what they've lost in their life because of what happened...because of the war, and because of them living in Jordan for a while. But when we were reunited, of course most of the worries just vanished.

A Syrian mother described her feelings on being reunited with her children:

It's a big feeling, especially as I'm a mum and I didn't see my children for over a year. It's a new gift for me. It's like my kids are born again. [...] it was like a place which was really dark in [our] mind, but then when [we were] here all together it was like a big light and all the doors were open!

Many families echoed this sentiment of reunion bringing a new start and hope for rebuilding family life:

**[I]t was just like this, starting afresh, starting a new life.
(Mother, Zimbabwe)**

It is important that the strains of integration, past experiences and navigating family roles and relationships again do not diminish the positive impact of reunion. Supporting families during the post reunion phase to understand and explore their emotions during this transitional period could play a key role in maintaining the positive outlook that the joyous moment of reunion brings.

SECURITY AND SAFETY

A mother described tears of happiness and relief for her children when their family reunion visas were granted and she knew she could bring her children to safety. Many families mentioned relief at being safe:

**We feel safe, we are settled. Thanks God that the country, they accept us.
(Mother, Kuwait)**

**We were separated for one year so it was a big change to be reunited. It was a really happy feeling. I was happy to see my father alive and happy and healthy.
(Daughter, Pakistan)**

A woman who had initially been afraid to go outside described how her fears decreased as she built more trust and confidence in her new environment:

**When I arrived here in the early days I was very much afraid. When I went outside I thought someone was chasing. I didn't open the door for anyone. [...] I was afraid that it might be a terrorist. Now it's much better. I'm feeling that I'm safe here.
(Mother, Pakistan)**

Within the IASC health and wellbeing triangle, safety, security and basic services were noted as the first layer of need for individuals and communities affected by disaster. When applied to family reunion, it could be argued that this same layer is a key supportive factor for arriving families. However, on its own it is

unlikely to be sufficient in helping families overcome the effect that trauma and separation has had on them. That said, without it the other supportive factors are unlikely to develop, therefore it is critical that all families achieve safety, security and basic services that meet their needs as quickly as possible, in order to maximise the positive feelings that often come with family reunion, while minimising the stresses that can also be associated with the immediate post reunion period.

OPPORTUNITIES TO BUILD NEW CONNECTIONS

People clearly articulated ideas of what they needed to overcome isolation and adjust to life here:

**I think we need to step out and go somewhere where we can meet up with Scottish people just to interact and say a few words here and there. Maybe because one word here or there will help something. If we just go and meet and speak to Arabs we're not moving on.
(Father, Eritrea)**

He recognised that his wife who recently arrived needed to build connections with both her own linguistic community and with the local Scottish community:

**Maybe if there is a place for [my wife] to go to meet Arabs and maybe some Scottish people it will help her just to get to know the society. I think we need that. [...] Even for example for a voluntary job if she can go and just start something. If you do something slowly you will build up relationships, you will learn a few words here, there, you will get to know the society, instead of sitting here on our own or we will argue more.
(Husband, Eritrea)**

Others too reported that building connections with others in their religious or linguistic communities had been supportive. One woman commented on the sense of connection and belonging she had felt meeting others from her religious community:

I have met our community members here.
All of us love our country, but we are not
able to live in our country.
(Mother, Pakistan)

Developing opportunities for these interactions to take place are key to helping families and individuals begin to adjust and settle into their new life. However, for many newly-arrived family members this is a daunting process. Interventions which could promote and support opportunities to build new connections may strengthen this supportive factor which, when working alongside other necessary supportive interventions, could play a role in improving the mental health and wellbeing both of the individual and the family as a whole.

CASE STUDY: REKHA'S FAMILY – AFTER REUNION

Although Rekha and her mother still suffered from problems, their situation improved considerably after being reunited in the UK. Her daughter explained:

Now we are with my father, united together, the whole family. That's a very big happiness in our lives. And more over we are just trying to forget everything that happened back in the country and try to live a new life.

She explained further:

I feel personally that Glasgow is a very good place. And here I'm feeling like I am independent. I can go out easily any time. There is security for the women.

Being able to settle in a place where they were secure and where the family could be together again had positive effects on their health and wellbeing:

Over there we always used to have a fear in our self. The fear is gone. We are sure that nothing is going to happen over here. And even my mum is trying so much to help herself. She's started going to the English classes.

Both Rekha and her daughter became actively involved in the group work and life skills programmes offered through the Family Integration Service. Rekha said she learnt many new things and was

feeling proud. It had been an important opportunity to meet new people. Having been so isolated living in her home country and rejected by her family and the wider community, the possibility to build new relationships was very important, as was the fact that people seemed to respect the privacy and choices of other families:

Everybody has their own life over here. Nobody troubles to no-one. [...] There's no trouble from the neighbours. They are busy with their own life.

The case study above illustrates how anonymity and freedom to live without interference from neighbours was a positive thing for Rekha. This contrasted with other people, for whom disinterest from their local communities was experienced negatively. A factor which is supportive for one person can be experienced very differently by another because of their diverse experiences and individual characteristics.

OPPORTUNITIES TO PLAN FOR FUTURE

Many people spoke of hope for the future and new opportunities when they arrived in the UK. For adults, having the right to work was important, even if there are obstacles of language or skills translation to taking up work:

In Jordan, refugees are not allowed to work but they have to provide for themselves. At least here you can work and provide for your family.
(Father, Syria)

Several women in the life skills programme shared that they aspired to find work, including some women who had not worked in their home country.

A group of siblings spoke with excitement about the new opportunities provided by school:

[Our youngest brother] comes and he never stops talking, Ray, Jack whoever.... and this happened, and this, whatever. He talks too much and sometimes [we] can't shut him up!
(Daughter, Kuwait)

Going to school everything is ok, education is good, teachers are good, everything is perfect.

(Daughter, Kuwait)

For parents, seeing their children settled in school was a significant sign of hope:

Considering that they have only been here for six months his English is very good. His sister got her marks and she is at the top of the class, so hopefully they will regain what they have lost in their life. I am hopeful that a good future is waiting for my kids because they deserve it. They have nothing to do with war or revolution.

(Father, Syria)

Other people enjoyed the opportunity to get to know a new place and discover a new culture. A small example of this was a group of siblings who spoke about celebrating mother's day for the first time:

For mother's day everyone went to Poundland and bought something simple and if it was earrings or whatever it was we put it in a box and [we] covered it and then when we saw her we were like 'Happy mother's day!' It was the first time we celebrated mother's day, and we were very happy and she was very happy.

(Daughter, Kuwait)

DREAMS, OPPORTUNITIES AND HOPE FOR THEIR CHILDREN'S FUTURE

For many parents, focussing on their children became an important goal and way of looking to the future:

Everything we lived through. It's passed. It's passed for them. Some already have forgotten, it's good. I think the way to do it is to look at our kids, because they would give us some hope.

(Mother, Syria)

I think we should think about our future, our children.

(Mother, Pakistan)

When we arrived here we were very, very happy. We were thinking about education and everything for them.

(Wife, Eritrea)

Some parents felt that their own opportunities had faded, or they were too old to start again and placed hope in their children instead:

I wanted to work in the commercial field, or I was thinking of becoming the director of a company, but now I'm old and everything has become different; the situation is different and now my concerns are around my kids.

(Father, Syria)

The days that my sons get their own certificates that is like me getting my graduation.

(Mother, Syria)

As well as being supportive for the parents, there was a risk that this put considerable pressure on children.

Nevertheless, many children and young people were positive about new opportunities and possibilities for the future, whilst recognising that they could not completely forget the past:

We have started a new life and I want problems to gradually fade away. Memories can never die but they can become smaller. I need to concentrate on this life.

(Daughter, Pakistan)

These comments demonstrate the importance of enabling children and young people to achieve their potential and have aspirations for their future. Quick enrolment in schools and further education may be another supportive factor as it provides opportunity for the future. This can have a positive impact on the mental health and wellbeing of the children but also the parents, who take great pride in witnessing their children's development and achievements.



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6. CHANGES IN FAMILY ROLES AND DYNAMICS

Separation results in significant changes to family roles and dynamics of relations. The effects of changing roles and responsibilities can impact on health and wellbeing. Re-establishing family relations after reunion involves re-negotiating roles and responsibilities. This can bring changes which are experienced both positively and negatively.

COUPLES REUNITING AFTER LONG SEPARATION

Re-establishing family relations was challenging for couples who had been separated for significant periods of time. In some cases people felt as though they did not know the person they were being reunited with.

A long absence may lead to a reconfiguration of roles within the family (Rousseau et al., 2004). Parents may face difficulties in re-establishing relationships with their children. Some studies have shown that the longer the period of separation, the poorer the outcomes when the family reunites and the harder it is to regain its balance (Derluyn et al., 2009; Smith et al., 2004; Barudy, 1989).

A woman from Sudan explained she was both scared and happy to be reunited with her husband after ten years of separation:

I thought, am I in a dream or is this real?
Physically I thought is this my husband
or not, he'd changed. My heart was beating...
(Wife, Sudan)

Several women mentioned that they were happy about being reunited but nervous about how their relationships would be.

In terms of wider health needs, in four of the seventeen families there were new pregnancies within the first year of being reunited. This highlights the importance

of access to health services on arrival and information about family planning and antenatal services.

CHANGING ROLES FOR MOTHERS

A recurring theme in interviews was about the burden of women having to take on all the responsibilities for their families after their husbands left and the sense of being left alone with these responsibilities:

It was really difficult when my husband was not there.
I had to do everything to bring up the kids on my own.
(Mother, Somalia)

Life is hard when everything comes on the
shoulders of a woman, when the husband
is not there to take some of the burden.
(Mother, Iraq)

Some husbands also recognised this:

I left my wife to be the father and the mother
for the kids.
(Father, Kuwait)

Being left with all the responsibilities for the family was even more stressful when families were living in dangerous situations:

We had faced a hard situation, a dangerous
situation. Before my husband left our
responsibilities were divided. But after
he left I was responsible for everything.
(Mother, Pakistan)

I felt inside that all the responsibilities were on my head, all the pressure was on top of my back, because he's not here. [There was] no one else to take any responsibility, all the children were with me.
(Mother, Syria)

Mariam (**see case study p. 55**) described how she became physically weak under these pressures, losing weight and experiencing pain in her body.

In many communities, women's difficulties were exacerbated because they were compelled to take public roles that were usually taken by men:

It was very hard time for me, because in our country, in our city [...] women cannot go out without a [male] family member - father, husband, brother, adult son. When I had to go out for shopping people would question, "Why this woman is alone, with no male family member?" My father-in-law is very old and couldn't help with going out.
(Mother, Pakistan)

This woman experienced obstructions and delays in the family reunion application as a result of having to deal with officials alone.

An Iranian woman spoke about the social stigma she experienced living as a single mother because her wider family and community perceived that she had been abandoned by her husband. Not being able to share problems with others added to her stress and she linked this with long term impacts on her health:

Just at that time I had a lot of problems, but when I met people and friends just I was laughing and pretending that I was happy and I had no problems. And also my children were proud and didn't want to show they have problems.
(Mother, Iran)

Nevertheless, she was glad that despite having to take on all the responsibilities for them on her own, they had grown up well:

I had problems, but now I am happy with these difficulties I could bring up my children well and they have good life now.

After reunion, parents had to renegotiate parenting roles again:

[B]ecause I was caring for the children without their father, I was teaching some things in some ways and he doesn't know that.
(Wife, Eritrea)

It was also difficult for children and young people to adjust to having two parents again, as one young woman described:

[U]ntil now, if we need something, even if we need something from Dad, we don't go to Dad, we just go to Mum, "Mum, can you tell Dad this and that", because we lived with her for a long time.
(Young woman, Kuwait)

CHANGING ROLES FOR FATHERS

In one family the mother had taken the journey to the UK first. The father, who was left to look after the children alone, also felt the strain of being left alone, but in a different way:

I became a woman, because I started cooking for them and everything. And I know how rearing my sons or my kids, what it involves. [...] In my culture the man, his main role is to bring money for the family and the woman does everything else in the house.
(Father, Syria)

He had to take on new responsibilities that he felt were specifically gendered. It took time not only for him but for his children to get used to him taking the main parenting role:

My sons I noticed they changed a little because Mum was the head of the family in the house, so they listen to her. [...] But when she was not there and I come into the picture they were like "hmmm", not 100% listening to me. Sometimes they withdraw a little bit.

But my daughter she helped me a lot, she was always there for me, she helped me with the cooking and without her I would have been very sad or getting too much irritable. But she was always there for me and helped me a lot.²⁶

²⁶ Given his understanding of gender roles, it is interesting to note that it was his daughter who took on extra responsibilities.

In contrast to the women described above who felt little control over their husbands leaving, this man described arranging for his wife to “go first”:

[It] is true that she was the one to move first and lead the way and then we followed. But I’m the one who facilitated everything for her...

By the time they were reunited his wife had grown in confidence and independence, having navigated the journey and arrival in a new country alone and started college:

Our roles are different from what they were in Syria, because she is now going out, she is going to college, she is learning, going to appointments and stuff. I am staying home, looking after the kids and cooking.

He experienced this change as threatening to their relationship:

Now because she led the way she is independent, and because I’m here now she doesn’t need me. In this country the woman is powerful and she can do everything she can. So she believes that she can do anything she wants, she is capable of doing anything on her own.

Their situation illustrates the challenges families face, especially related to culturally gendered norms of responsibilities, as they renegotiate relations in a new context after having to take on new roles during the separation period. This case also suggests that these adjustments may be more difficult for men whose wives have travelled first, but more research would be needed to explore this further.

These contributions may show that almost all families who have had periods of separations would benefit from family therapy. Such sessions can help participants self-identify when they are showing symptoms of distress and provide coping mechanisms and strategies that the individuals and families can use when/if required. This type of intervention could also support families to explore the new dynamics that exist and identify positive approaches of understanding, accepting and adjusting to how different members of the family have changed during the separation period. It may also help them process how the separation period has in some ways forced them to change in a safe and managed environment.

THERAPISTS’ REFLECTIONS ON PARENTING AND SEPARATION

As a parent you have an instinct to protect, and so it’s hard when you can’t do that.
(FFT Therapist)

FFT therapists highlighted the emotional and psychological impacts they witnessed affecting parents living through periods of enforced separation:

- > **Not being able to protect children from violence and effects of war - experiencing despair because of this.**
- > **Not being able to comfort their children - experiences of children crying on the phone and sometimes not taking their calls because they cannot cope with hearing this.**
- > **Having no control or certainty about when they will be reunited- struggling to respond to their children’s ‘Why’ questions and children’s different sense of time: “Why can we not come now?”**
- > **Not being able to provide for their children- children relying on parents sending money to carers for school fees and food (in effect paying the carer for the child’s expenses) and not being able to provide these because of financial difficulties. Some parents recounted instances of children being used as domestic helps.**
- > **Worries regarding effects of their anxiety about children they are separated from on their ability to parent children living with them in the UK.**

Some children had gone missing or disappeared and their parents were trying to trace them through local networks and the Red Cross International Family Tracing service. For those who were not able to trace children they lived with the heart-breaking uncertainty of not knowing whether they were still alive or not.

CHANGING ROLES FOR CHILDREN

In several families, children took on new roles and responsibilities after their parent left:

Responsibility was on me because I was the oldest child in the family. [...] I was staying at home looking after my younger brothers, my younger siblings, while my mother and my brother who is now 15 used to go out. My brother was selling watermelons. She wanted to be with him just to check that he is safe.

(Daughter, Kuwait)

In some families children had to work to help secure enough money for the family. Children spoke of taking on new responsibilities both inside and outside the home. A young Syrian boy said:

I started to be very responsible. Mum wasn't there anymore so we had to manage ourselves. I've grown up.

(Son, Syria)

Parents were concerned about the effects of these added responsibilities on their children:

He [eldest son] was looking after the children, and waiting at home. The children were taking responsibilities for themselves. They are children, not supposed to [take responsibilities]...

But now they are changed. They are happy and they know that they are children.

(Mother, Eritrea)

This mother was grateful for the freedom her children had to be children again after being reunited and that they no longer had to take on added responsibilities and concerns.

However, some adults also became more dependent on their children after arrival:

If we want to be realistic, my mum now in this country is dependent on me, because my English is better.

(Daughter, Iran)

CHILDREN REUNITING WITH PARENTS AFTER LONG SEPARATION

A mother who was reunited with her daughter after six years observed that it took time to get to know each other again:

It's actually hard when you're separated from your child then later on you meet. By the time you meet, sometimes it's hard to click. It takes time obviously. I'm not saying we're not clicking, but it takes time.

(Mother, Zimbabwe)

Another mother who had been separated from her children for a long time had similar experiences:

Even when the flight came, people are coming, but when I see them I am very happy, and when they see me they are just looking at me. Because they don't see me for nearly 8 years, that's so long.

(Mother, Gambia)

Connections had to be re-established and this was not always easy. The research observed particular challenges for teenagers being reunited with parents they have not lived with for a long time **(see Elise's case study below)**.

FFT therapists observed that parents face different expectations and rules about how to respond, and have to make decisions about how to parent when their children's friends might be parenting very differently. It can be difficult also for children navigating these differences. Additionally, families can struggle with the faster pace of integration for children than for adults.

CHANGES IN FAMILY COMPOSITION

The shape of the family may have changed either with the loss of family members, or with new additions to the family. Some children met new siblings or a parent's new partner in the UK, and some parents were reunited with children who had been too small when they left to remember them.

In two child-only cases their mothers had started a new relationship in the UK and had subsequently had another child. For the children arriving, they had to adapt to having a sibling in their lives. One newly arrived boy explained:

When I met [youngest brother] he was just like getting toys round him and saying, "it's mine, it's mine". But now my mum say you need to share with him. And I share with him now too.

(Son, Gambia)

Children and young people had to adjust to new parenting techniques. A young person, who had been raised by her aunt and uncle, mentioned:

For me I am used to my aunty. But the one who just came in [younger brother], he's used to my uncle. So my uncle, the bad behaviours he was happy, my uncle accepted. [...] So my parents are, my mum is trying to change that
(Young woman, Gambia)²⁷

Others enjoyed meeting new family members. A young person described how she appreciated the new relationship with her mother's partner and her aspirations for this relationship:

It's good to be with Dad. It's a new relationship for me, because I've never seen my dad before. [...] I see him like my father because he can always take care of us, me and my brother, he can always love us.
(Young woman, Zimbabwe)

The following case shows the need to understand more about individuals' experiences within families. It highlights how reunion with relatives in the UK can mean separation from other significant relationships, an important reminder of the complexity and diversity of family relationships.

CASE STUDY: ELISE'S SICKNESS

Elise, a young woman from West Africa, arrived in Scotland with her younger siblings to join her mother. When her mother had left eight years previously, her aunt became their main caregiver. Elise in particular had a strong connection with her aunt.

While her younger siblings settled quickly in school and reported being happy, Elise faced obstacles continuing with her education. Before leaving her home country she had taken exams, but her family had been unable to pay the final school fees and so she had not received the certificates for her qualifications. She was finding the adjustment to living in the UK difficult. She mentioned that she was sick and had a pain in her leg and over the course of the interview she kept returning to this. From the start

of the interview, Elise was subdued and spoke quietly.

Elise described having pains in her legs and also in her chest and stomach sometimes. Tests had not identified any physical reasons for her pain and the medications the doctor had given her to reduce the pain had not helped. Elise confirmed that she had not had an injury and that the pains only started when she arrived in the UK. When I asked if she had any idea why she was feeling this pain, she responded, "It's because of coming here", adding:

You know I came here for holidays once with my aunty, and those memories are in me...that's my problem that I also get sick and stressed.

A few years after her holiday with Elise, her aunt had visited the UK again and on this visit had died. Her aunt's death had a devastating impact on the family. Elise seemed to have connected these memories to her own sickness.

Elise's mother explained:

When she passed away things were very hard because I was here, I don't have paper, I don't have anything. I was struggling with everything, so life was very hard [for] me here. [...] They know my sister, she was taking care of them, taking them to good school, doing a lot of things for them. So when just, one day she was gone... So it was very hard, it was very hard.

Elise's aunt's death prompted her mother to submit an asylum application and later apply for family reunion to bring Elise and her siblings to the UK.

Elise associated sadness, stress and difficulties with being here, but clarified that it was not about relationships with her mother or family here:

Here I always feel that I'm always sad. I...I...I want to stay with my parents but, I...it's always hard for me. Everyday I'm always having too many difficulties with me, stress. But I'm happy seeing my parents, my mum ...and being together with her.

Elise had repeated a few times during the interview that she felt she needed to go home to receive treatment,

²⁷ Studies have found that adjusting to new relationships can become more difficult the older a child is (Gindling & Poggio, 2012).



because she cannot find the treatment she needs here:

I went there and did a blood test. There's nothing wrong with me: it showed was positive. But I'm waiting for my x-ray. I did x-ray too. So I'm waiting for...but I think...for...it's not a treatment that should be done here. It should be done in Africa.

She believed that she needed the herbal medicines that traditional healers in her home country could provide. The pains in her leg and chest had been getting worse and she did not like going out:

These days it's disturbing me all days.
At times my chest and other days my leg.

Elise had spoken to her mother about needing to return to her home country: "I told her, 'You know I'm sick and I have to go, I need treatment'". But returning to her home country was not a straightforward option.

She had participated in a short-term course with other young people. She said: "I enjoyed it a bit...but I didn't make friends". These feelings of distress affected her ability to engage and to make new connections. She mentioned that going to classes sometimes triggered her sadness even more: "It disturbs me more there sometimes."

More recently she had also experienced panic attacks and sleepless nights. Her health problems were becoming increasingly debilitating.

In this case study, Elise's psychological and emotional response appeared initially like acute homesickness, but she made the specific link between her sickness and her aunt's death. Complex or unfinished grieving processes can have significant impacts and can be complicated by dislocation from the usual context of the relationships (Boss, 1999).

7. ANALYSIS

Family members reported various health and mental health difficulties related to experiences in their home countries including:

- > **severe psychological distress or trauma**
- > **physical and mental health problems following experiences of torture**
- > **physical injuries and trauma from bombings**
- > **chronic health conditions, exacerbated because of lack of access to health services.**

Some people experienced triggers or new challenges that affected their emotional and psychological wellbeing after arriving in the UK. In half of the families, at least one person reported psychological or emotional health issues that had persisted. These included: anxiety, stress, depression, psychosomatic pain and complex grief.

SUMMARISING RISK AND SUPPORTIVE FACTORS

The following diagram summarises the risk factors to health and wellbeing and supportive factors experienced by families pre-separation, during separation and post reunion.

Figure 3: Table of risk and resilience factors

	RISK FACTORS	SUPPORTIVE FACTORS
Pre-seperation	<ul style="list-style-type: none"> > Insecurity of everyday life and daily activities > Insecurity of access to basic needs – food, shelter > Direct exposure to violence > Direct threats to family members > Violent death of family members and friends > Detention > Torture > Disappearances and ambiguous loss > Gender-based violence > Stigma, rejection and isolation 	<ul style="list-style-type: none"> > Religious faith > Employment/vocation > Wider social networks > Family unity > Wider family support > Strength of belief in standing against injustice
Seperation period	<ul style="list-style-type: none"> > Changed family roles/responsibilities > Displacement to third country 	<ul style="list-style-type: none"> > Support of extended family (remaining family) > Religious faith/community

Table continues ➔

Figure 3: Table of risk and resilience factors (continued)

	RISK FACTORS	SUPPORTIVE FACTORS
Seperation period (continued)	<ul style="list-style-type: none"> > Poverty/financial stress > Not knowing where relatives are > Isolation/loss of support networks > Lack of extended family support > Lack of communication with family members 	<ul style="list-style-type: none"> > Communication between separated family members > Financial support > [Utilising new skills]
Post reunion	<ul style="list-style-type: none"> > Integration challenges > Adapting to changed roles/responsibilities > Isolation/loss of support networks > Poverty/destitution > On-going separation from other family members > Homelessness/overcrowding > Loss of livelihood/unemployment > Trauma triggers in new environment 	<ul style="list-style-type: none"> > Reunion with family > Religious faith/community > Safety and security > New opportunities and routines > Social connections > Support from organisations

There were different layers of experience that affected health and wellbeing. The following are the experiences occurring pre-arrival in the UK:

- a. Impacts of persecution and trauma**
- b. Impacts of family separation**
- c. Impacts of different kinds of loss**
- d. Impacts of the journey to the UK**
- e. Impacts of experiences in transit countries**

Those which occur after at least one family member has arrived in the UK are the ones in which we can take action to prevent or minimise the negative impact. They include:

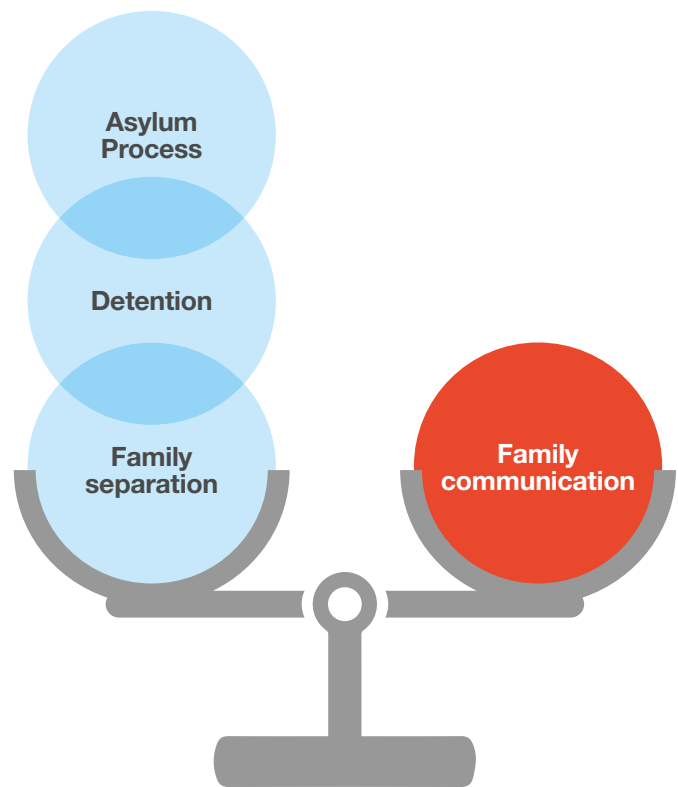
- f. Impacts of uncertainty and stress of asylum process**
- g. Impacts of uncertainty and stress of family reunion process**
- h. Impacts of changes in relationships when reunited**
- i. Impacts of adjusting to living in a new culture and environment**

THE BALANCE OF RISK AND SUPPORTIVE FACTORS

Where a person has experienced cumulative stressors or traumatic experiences and has lacked supportive factors, their health and wellbeing are more likely to suffer.

Figure 4: Balance of risk and supportive factors [Note the weights will be different for each person at different times... e.g. sponsor during period of separation]

An individual's responses are related to a variety of different individual, family and cultural resources. Responses to stressful situations are specific to each person and that particular individual's characteristics, life experiences, family context and social connections, amongst other things. One person will find ways to cope with difficult experiences, whilst another will become so overwhelmed that they are unable to cope with their daily activities, either for a short-period, or in some instances, for a longer time. A factor which is supportive for one person can be experienced very differently by another because of diverse experiences.



SEPARATION PERIOD

To be honest with you, my life in Syria without my husband - with the hard time, with the civil war, with everything – [was] still much easier and supportive because [I had] support and sympathy from my family. My friends are there, I know the area, I know where to go, how to sort everything out, it's much, much less hard for me than Jordan... compared to Jordan I didn't have any help at all. I didn't have any relatives or friends to be there to support me. There is no one ready to help you.
(Mother, Syria)

The separation period presents specific risks and vulnerabilities for different people, for example for:

- > **Unaccompanied separated children – who are at increased risk of exploitation, trafficking**
- > **Parents (mainly mothers) left behind with children – who can be overwhelmed by responsibilities and often face ongoing risks**

> **Isolated sponsors (mainly men) in the UK during asylum and family reunion processes**

During the separation period supportive factors and resources were often depleted.

REUNION

Reunion with family members usually reduced stress and enhanced emotional support and coping resources. However, some families faced specific problems renegotiating relationships, both in couple relationships and in parent/child relationships. In a small numbers of cases these problems threatened family break-up.

LEVELS OF NEED

As outlined earlier in the report there are good practice guidelines on psychosocial support and mental health interventions humanitarian work with displaced communities affected by war or disaster. Drawing on the earlier part of the report, this section further reflects on how this could be applied to work with refugee communities in the UK. Key points include:

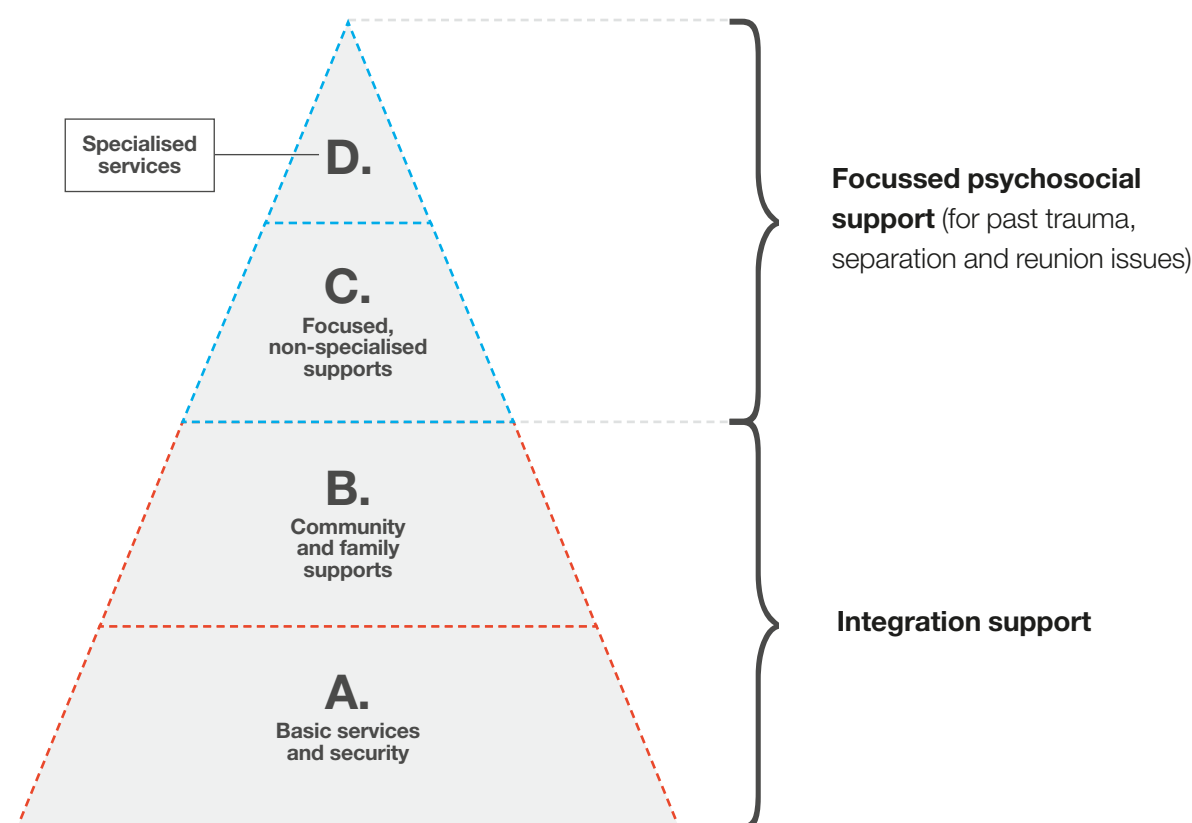
- > the need for different types of and levels of support
- > the importance of recognising and building supportive factors and resilience

The guidelines suggest that core principles to guide interventions are:

- > **Human rights and equity**
- > **Participation**
- > **Do no harm**
- > **Building on available resources and capacities**
- > **Integrated support systems**
- > **Multi-layered support (IASC, 2007; p. 9-11)**

The following diagram again shows the IASC intervention pyramid for mental health and psychosocial support with reflections on how this corresponds to broader integration support and more specific psychosocial and mental health support services for refugees in the UK.

Figure 5: IASC intervention pyramid for mental health and psychosocial support



A. BASIC SERVICES AND SECURITY

This level recognises the importance to health and wellbeing of re-establishing security, safety and basic needs including food, shelter and access to basic

health care. The full report on integration experiences, *We started life again* (Marsden & Harris, 2015) explores in detail how effectively reunited families were able to

exercise their rights and access necessary and appropriate services. The findings from both the integration report and the research conducted for this report indicate that challenges in accessing appropriate housing, financial support and other basic services can negatively impact on people's health and wellbeing.

In the UK, refugee families are entitled to access housing to prevent homelessness on arrival. Families are also entitled to the same mainstream benefits to avoid destitution. They should be able to access the NHS free at the point of need in the same way as any other resident. Our research on integration experiences (Marsden & Harris, 2015) demonstrated that many families experienced challenges in accessing these statutory entitlements on their own and they required support on arrival to navigate both the housing and benefits system to mitigate risks of homelessness and destitution.

The IASC guidelines suggest that interventions at this level include:

- > **advocating that services are put in place to meet basic needs**
- > **documenting the impact of this provision on mental health and psychosocial wellbeing**
- > **guiding delivery of basic needs “in a way that promotes mental health and psychosocial wellbeing”**
- > **ensuring that these processes protect dignity, strengthen local social mechanisms and mobilise community networks where available (IASC, 2007; p. 11-12).**

However, from the research that has been undertaken it would appear that inappropriate housing, delays in accessing benefits, destitution as a result of this and several housing moves can make it a much more challenging time for families who are trying to rebuild relationships after surviving often traumatic experiences and enduring forced separation. Depending on the level of resilience within the individual and the family unit, this can then impact negatively on their mental health and wellbeing at a critical point in their reunion. Further research is required on the ways in which services are delivered can impact positive or negatively on mental health and wellbeing.

In the case of family reunion, the sponsor is aware that their family has been granted a visa many weeks before they arrive. In the integration report it was recommended that during this period, earlier planning and preparation for the family's arrival could be undertaken to reduce or minimise the challenges they face in the immediate post reunion period. If this approach was developed, it would arguably reduce the stress and uncertainty of this period, and therefore reduce the negative impact it currently has on people's health and wellbeing.

Currently the Scottish Government is exploring ways to prevent families arriving through refugee family reunion experiencing destitution. This development, alongside improvements made to the processing of mainstream benefits with the Department for Work and Pensions and HMRC, may reduce the period of financial strain and destitution for families, which again could have a significant impact on the stress families feel during the immediate post reunion period.

B. COMMUNITY AND FAMILY SUPPORT

Within this level of support it is recognised that community and family support can have a positive impact on an individual's ability to engage with everyday life and cope with stresses and strains they experience.

When applied in the international humanitarian emergency context this type of support is described in the following way:

...people who are able to maintain their mental health and psychosocial wellbeing if they receive help in accessing key community and family supports. In most emergencies, there are significant disruptions of family and community networks due to loss, displacement, family separation, community fears and distrust. Moreover, even when family and community networks remain intact, people in emergencies will benefit from help in accessing greater community and family supports. Useful responses in this layer include family tracing and reunification, assisted mourning and communal healing ceremonies, mass communication on constructive coping methods, supportive parenting programmes, formal and non-formal educational activities, livelihood activities and the activation of social

networks, such as through women's groups and youth clubs. (IASC, 2007; p. 12-13)

Applying this concept to the refugee family reunion context would suggest that many people should be able to maintain their mental health and wellbeing with access to community and family supports. Family reunion in and of itself can provide some of the family support, but due to its restrictive application in the UK, it often results in separation from other wider family members who may have offered strong support prior to and during separation.

That said many participants in the research spoke of family and community connections as supportive factors. This was the case both during separation and post reunion. As part of the delivery of the programme families were offered group work opportunities, social activities and community-based ESOL activities.

Individuals themselves often spoke about the positive benefits of volunteering, having daily routines and building connections. While the programme focussed on delivering these elements post reunion it would arguably be beneficial to develop these types of supportive opportunities for individuals who are separated from their families as soon as they arrive in the UK. Currently, we fail to recognise family separation within the asylum process and often focus on family only after rights to family reunion are secured through gaining refugee status. Better recognition that individuals are separated from their families in the asylum process could deliver an improved model of support for individuals, positively impacting on their resilience and enhancing their capacity to engage with the asylum process itself and daily life.

Developing resources within the community to deliver this type of activity has the potential to offer a number of positive outcomes for individuals, families and communities themselves. They are accessible and encourage co-production and active engagement. It is already well recognised within the broader health and wellbeing debate that locally based active communities can contribute to improved health and wellbeing within populations.

In addition, given the learning from the international humanitarian context, it is clear that this type of approach is particularly relevant to people who have experienced disruption. Within this context it has been demonstrated that:

Community-based psychosocial activities enable people to:

- > **actively participate**
- > **re-establish everyday routines**
- > **build networks of emotional and practical support are beneficial for a majority of families**

Drawing on resources within communities enables:

- > **peer support from those with similar background or those who have gone through similar experiences**
- > **interventions to promote wellbeing that draw on cultural and religious knowledge and social meaning**

Creating the environment and supporting the development of community based activities which develop social capital and build connections could have a significant impact on the ability of sponsors and families arriving through family reunion to self-manage and build their own resilience and capacity to overcome the trauma and challenges they have experienced. It may reduce the reliance on higher level support and provide individuals and families with mechanisms and opportunities to foster these supportive factors, positively impacting on their health and wellbeing.

Within the statutory framework this can also be achieved through formal provision such as school enrolment and other educational opportunities. This was often viewed as a key milestone for children and families.

C. FOCUSED NON-SPECIALISED SUPPORT

This section of the triangle deals with those individuals who have persistent issues that are having an impact and disrupting their daily life, but which are not severe mental health disorders requiring a clinical intervention. They require more focussed interventions and support to help process their experiences, recover and rebuild.

The IASC framework defines this level of need as:

...people who additionally require more focused individual, family or group interventions by trained and supervised workers (but who may not have had years of training in specialised care). For example, survivors of gender-based violence might need a mixture of emotional and livelihood support from community



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workers. This layer also includes psychological first aid (PFA) and basic mental health care by primary health care workers. (IASC, 2007; p. 13)

In the case of reunited families, this could be provided through a number of interventions including group work, counselling, family therapy and therapeutic work.

Group work settings can often be an effective way of promoting resilience and communicating some of the common challenges facing this group. This could include exploring the impact that past experiences have on mental health. It can provide a safe environment for families to learn about symptoms of distress, how to self-identify risks, and how to adopt appropriate coping strategies, tools and mechanisms to work through issues either on their own or with additional help.

Within the context of this project a select number of families were offered this type of group therapy intervention through a partnership with Freedom from Torture. While all participants acknowledged the benefits of this, given the higher level of need within the families selected there was a feeling that group therapy without additional family therapy was not wholly sufficient. The participants reported that they would have benefitted from more sessions and would have preferred meeting for family sessions rather than as a group. Freedom from Torture therapists confirmed that group therapy was not a sufficient alternative to family therapy, particularly for those who have a higher level of need.

Casework interventions also fit within this level of need, enabling people to understand and exercise their rights and entitlements upon arrival. The findings of the integration report *We started life again* (Marsden & Harris, 2015) showed that many families required assistance to access services and financial support. Participants reflected that delays in accessing these did have an impact on the mental health and wellbeing of the family. Arguably, providing casework-based advocacy not just to the arriving families but to sponsors throughout the family reunion process could help mitigate this as a risk to mental health and wellbeing.

As stated in the *We started life again* (Marsden & Harris, 2015) family reunion is arguably another transition or crisis point within the refugee journey. Developing a model of non-specialised focussed

support, such as the model developed within the project, did provide assistance to families navigating this process, and arguably minimised the negative impact that this transition period could have on their mental health and wellbeing.

D. SPECIALISED SUPPORT

Specialised support from professionals is needed for people “whose suffering, despite the supports already mentioned, is intolerable and who may have significant difficulties in basic daily functioning”. (IASC, 2007; p. 13) The IASC guidelines suggest:

This assistance should include psychological or psychiatric supports for people with severe mental disorders whenever their needs exceed the capacities of existing primary/general health services. Such problems require either (a) referral to specialised services if they exist, or (b) initiation of longer-term training and supervision of primary/general health care providers. (IASC, 2007; p. 13)

Within the context of family reunion this type of intervention would likely be required in a minority of situations, particularly if all other levels of the triangle of support were suitably developed and accessible.

Some of the participants in this research displayed signs of requiring a more specialised, and potentially clinical, intervention. Often in these cases the participant had experienced severe levels of trauma and no longer had the strength or resilience to cope. This can be seen from the two extended case studies which have been referenced throughout this report.

In both cases, persistent risks to the safety and security of the individual and the family, a lack of family or community support and the loss and grief experienced work to continually undermine the individual's and family's ability to function. The stresses and strains of daily life, which in the circumstances of family separation, asylum and reunion can be extreme for the sponsor and the family members, compounded this and served to increase the risks to their mental health and wellbeing, and in effect push their needs further up the triangle of support.

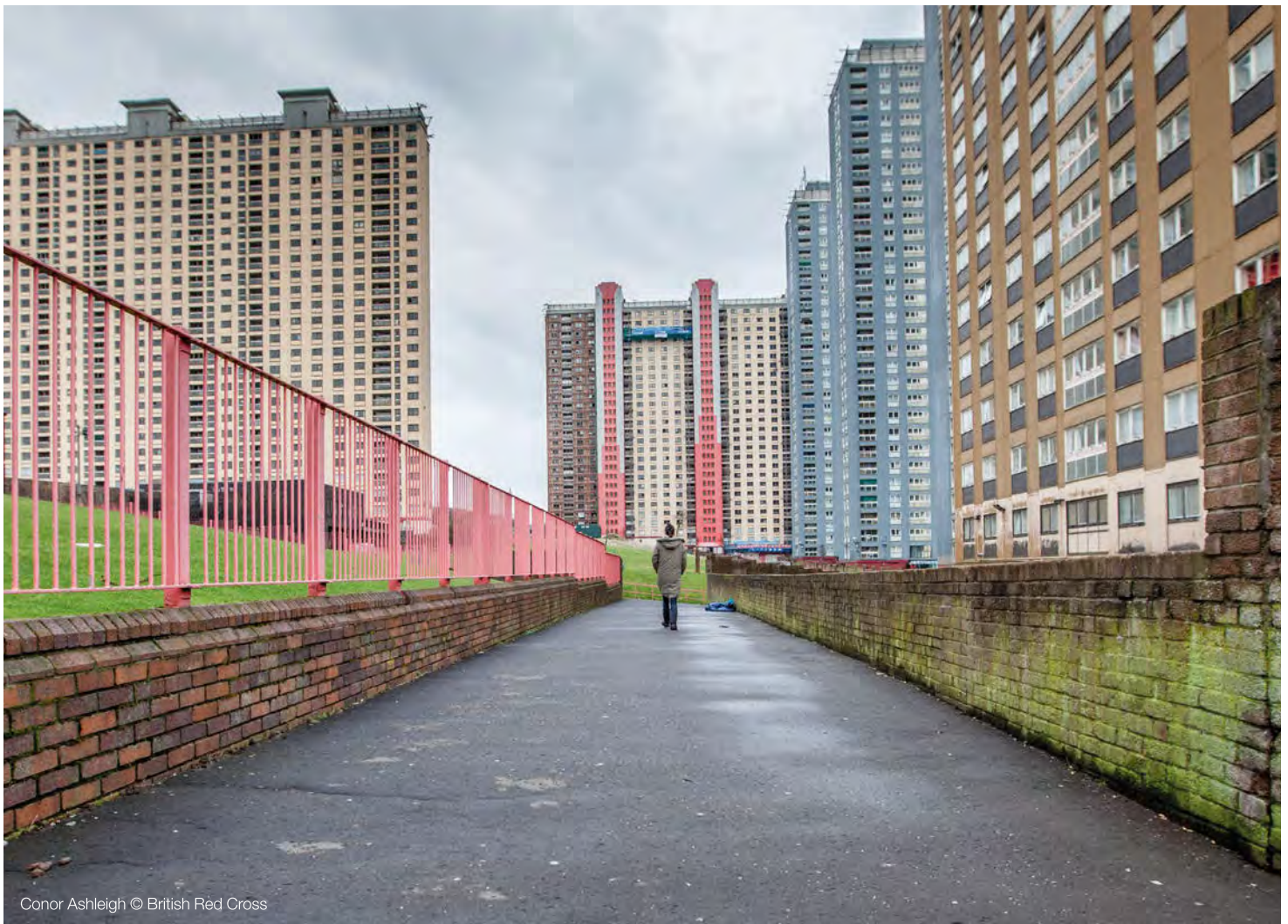
As a result, by the time the family was reunited, the levels of distress had spiralled and required a more specialist intervention in order to support the individual and family to cope with the trauma and recover. Within the context of this project there were a select number of specialist services for refugees and asylum seekers in Glasgow. These include:

- > **ANCHOR, a multi-disciplinary mental health team including clinical psychologists within NHS Greater Glasgow and Clyde, who provide specialist, culturally-sensitive mental health support to asylum seekers and refugees who have experienced trauma.**
- > **Freedom from Torture (FFT), which is an organisation that has a team of therapists who provide therapy specifically to survivors of torture and their families.**

From the experience of this project and other services which are provided to refugees and asylum seekers, it would appear that these specialist services are

chronically over-subscribed. It may be the case that the need for this type of specialist service is higher because there is not sufficient support on offer at the lower levels of the triangle. While this would need further exploration, it is likely that when a person's needs are not met and they continue to experience disruption and distress, their level of need will escalate and in return a higher level of intervention will be required.

Applying this to the context of family reunion, it is clear that people arrive at the point of reunion often having faced significant challenges, which may continue. Rebuilding family relationships at this point can be difficult, particularly if members within the family are unable to effectively engage with daily life. In these such circumstances families may need specialist support to work through the ongoing challenges they face, at the same time as trying to re-establish their family relationship.



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8. CONCLUSION AND RECOMMENDATIONS

This research report has explored the experiences of families who have been separated and then reunited through refugee family reunion. It has sought to analyse the factors which affect their mental health and wellbeing at each stage in the refugee journey including pre-flight, during separation and post reunion.

The report was based on the experience of families who had lived through significant disruption to their lives and in some cases had endured trauma. Using their experiences, the report explored factors which had both a positive and negative impact on the lives of families in this situation.

Finally, it used conceptual frameworks from the international humanitarian field to explore how refugee families could be better supported through the separation and reunion phases. The aim of this was to identify ways to minimise the impact on their mental health and wellbeing and promote resilience and capacity within families to support each other through what is arguably another transition or crisis point within the refugee journey.

Using the findings from the research the report will now set out recommendations, which if implemented, could improve the experience of families forced into periods of separation and then finally reunited.

Currently family separation is not well recognised within the refugee and asylum journey in the UK. This has led to poor policy, limited understanding of the impact of separation and reunion and little support for individuals and families. Greater transparency in the data collection around family separation and reunion could be a starting point for increasing awareness and understanding of the levels of family separation within the asylum system and the number of family members arriving to the UK through refugee family reunion.

Refugee family reunion is not viewed through the same protection lens as asylum and refugee policy. As a

result, refugee family reunion in the UK is overly complex, lengthy and restrictive. This ultimately leaves many families in dangerous or unstable situations for longer than is necessary. From this research, and the wider project within which this research was conducted, it is evident that for many families the length of separation is a key factor. Generally, those families who have had longer periods of forced separation have poorer outcomes upon reunion. This report would echo the findings of previous reports on the process of family reunion in the UK, including **Not so straightforward** (Beswick, 2015), which highlighted the need to reduce the complexity of the process in order to minimise the length of time for which the family is separated.

Indeed, one could argue that family is only recognised within the refugee journey at the point in which individuals gain the right to family reunion, i.e. when they receive refugee status. However, for the individuals going through the UK asylum system, family separation is a key concern and at times impacts on their capacity to undertake routine daily activities. It may be the case that for some individuals it limits their ability to effectively engage in the asylum system, although it should be stated that more research in this specific area would be required before any conclusions are drawn.

Recognising the impact that family separation has on an individual much earlier in the refugee journey could be one way of developing better support for individuals who are separated and worried about their loved ones. While this project did not provide this element

of support, developing a model which prioritises early intervention and support for individuals could minimise the negative impact on mental health and wellbeing and increase resilience and capacity within the community affected.

In Scotland, the New Scots Refugee Integration Strategy (2017) could be a vehicle for embedding an early intervention approach which recognises family separation and the challenges of reunion from “day one of arrival” for both the sponsor and the arriving family members. As the next strategy develops family could be considered as a key theme to develop.

This could include developing a model of support which recognises and responds to the different levels of need within separated and recently reunited families. In line with the analysis of this report, it is evident that families have different levels of resilience, and as a result require different levels of support to recover, adjust, and rebuild during this transitional phase. For some, assistance to access their rights and entitlements such as housing, financial support, food and other basic needs will provide enough support for them to overcome the disruption they have experienced thus far and start building their new life in a new country. Providing advocacy and casework support to sponsors and arriving family members could assist with this process and ensure that families do not experience unnecessary stress and worry during the critical immediate post-reunion period.

However, for others, the disruption to their lives may have had a greater impact on their resilience and ability to function and thrive in their new life. Short-term advocacy and casework support to access rights and entitlements, while helpful, will not effectively support these families through this transition and potential crisis point. At present there is no formal recognition that many arriving family members may have some of the same protective characteristics as those people who sought asylum and have been granted refugee status. The level of disruption in their lives, and the likelihood of having experienced trauma, will be a factor affecting those arriving family members. Currently, there is little recognition that this need exists among the newly arrived family members; therefore there is limited tailored support available to them. From this research, it would appear that arriving family members, who have experienced significant disruption to their lives, would benefit from enhanced and tailored support post arrival to overcome the challenges they have faced, rebuild their relationships within the family unit and increase their resilience and capacity to engage in daily life.

Within the final Freedom from Torture session that was held with the participants of the research, a list of factors that helped or hindered them in settling into life in Glasgow was produced:

Table 3: Settling into life in Glasgow: what helps and what hinders

WHAT HELPS	WHAT HINDERS
<ul style="list-style-type: none"> > Time meeting with families who understand me > Good standard of living > Reuniting with family makes me happy > Respect of other people > Sharing with people about all their situations – happy and sad > The environment and long holidays 	<ul style="list-style-type: none"> > Language most difficult > Doing things that make me angry > Problems with accommodation > Problem with my leg > Hard to forget past > Worried about [disappeared] son’s future



WHAT HELPS	WHAT HINDERS
<ul style="list-style-type: none"> > English language > Fast access to accommodation > Relief > Faith and worshipping God > Belief that I will reunite with my family and succeed in my studies > Hope to return home and to friends 	<ul style="list-style-type: none"> > Job Centre – doesn't give time to arrange future > People teasing about wearing scarf, our religion and past > Worried about losing parents > When can't understand other people in school > School and homework

Any future model of support should build on the direct experiences of families. This will help to build the evidence base required to better understand the needs of families who have been separated and reunited. It will ensure that practices which are developed are rooted in the experience of families, and can demonstrate and evidence the impact that they have.

This report makes the following recommendations:

- 1. Family reunion policy should be revised to reduce its complexity, length and restrictive nature in order to minimise the period of separation and reduce the time family members are exposed to potential risks in either their home or transition countries.**
- 2. People who are going through the asylum system and are separated from their families should be better supported to cope with the impact of separation on their health and wellbeing. This should include building capacity within host communities to support people separated from their families, and offering focussed non-specialised interventions such as casework or independent advocacy, group work and therapy where appropriate**
- 3. In line with the recommendations made in the previous report We started life again there should be much better planning and preparation before family members arrive through family reunion, recognising that ongoing stress in the immediate post reunion period can contribute to a deterioration of health and wellbeing (Marsden & Harris, 2015). The New Scots Strategy 2018-2022 should be used as a vehicle to drive this forward.**
- 4. Families who have been separated and then reunited in Scotland should be offered support to help them overcome the disruption they have experienced**

to their lives. This should be offered upon arrival, and needs should be assessed as they settle into life in Scotland. The type of support that should be available should include:

- > help to access their rights and entitlements
- > opportunities to build social connections with both people who have had similar experiences to themselves and those living within their communities
- > focussed interventions such as group work and family therapy to assist families to re-navigate roles and responsibilities and rebuild relationships
- > where necessary, specialised support to help those who have experienced trauma to overcome and rebuild their lives

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FURTHER RESOURCES

Red Cross Restoring Family Links services - familylinks.icrc.org/en/Pages/Countries/united-kingdom.aspx

Mental Health and Psychosocial Support (MHPSS) website - mhpss.net - library of resources, guidelines and resource people

Psychosocial Working Group,
A framework for practice -
www.forcedmigration.org/psychosocial/papers/PWGpapers.htm/A%20Framework%20for%20Practice.pdf