

Report of a survey of the
Vietnamese and Bosnian refugee
communities in Ireland

102882



**Report of a survey of the Vietnamese and
Bosnian refugee communities living in Ireland**

Report by:
Written by:
Date of Publication:
Contact Address:

Refugee Resettlement Research Project
Cathal O' Regan
June 1998
The Refugee Agency,
9 Marlborough Court,
Marlborough Street,
Dublin 1
Tel. (+353 1) 8787200
Fax. (+353 1) 8787232

Acknowledgements

The Refugee Resettlement Research Project was advised, assisted and facilitated by a large number of individuals and organisations. Our gratitude is due in particular to the following:

The members of the Bosnian and Vietnamese communities in Ireland, who gave generously of their time to advise on or be interviewed for the survey.

The staff of the Refugee Agency; the staff of the Department of Psychology, Eastern Health Board; the staff of the Bosnian Community Development Project; the staff and Council of the Vietnamese - Irish Association; the staff and management of Cherry Orchard Reception Centre; the principals and teaching staff of the various primary and secondary schools who participated in the survey, and the English Language Support Unit staff; Ms. Lam Vuong, Ms. Iskra Kelly, and Ms. Lan Nguyen, who ably translated much of the documentation; Ms. Katherine Bogdanovic of Refugee Action, U.K.

CHAPTER 1.....	1
BACKGROUND TO THE PROJECT.....	1
1.1 INTRODUCTION.....	1
1.2 ORIGINS OF THE PROJECT.....	2
1.3 PROJECT MANAGEMENT AND STAFFING	2
1.4 PROJECT TIMETABLE.....	3
1.5 TARGET GROUPS OF THE RESEARCH.....	3
CHAPTER 2.....	4
PROGRAMME REFUGEES IN IRELAND	4
2.1 INTRODUCTION.....	4
2.2 DEFINITIONS AND TERMS.....	4
2.3 GOVERNMENT DECISIONS PERTAINING TO PROGRAMME REFUGEES	5
2.4 STATUS OF PROGRAMME REFUGEES IN IRELAND.....	6
2.4.1 CURRENT STATUS	6
2.4.2 REFUGEE ACT, 1996	6
2.5 FAMILY REUNIFICATION.....	7
2.5.1 BOSNIAN FAMILY REUNIFICATION SCHEME	7
2.5.2 VIETNAMESE FAMILY REUNIFICATION SCHEME	7
2.6 CITIZENSHIP FOR PROGRAMME REFUGEES.....	7
2.7 THE REFUGEE AGENCY.....	8
2.8 THE VIETNAMESE AND BOSNIAN COMMUNITIES IN IRELAND	9
2.8.1 DEFINITION OF TERMS	9
2.8.2 PROFILE OF THE VIETNAMESE COMMUNITY	9
2.8.3 PROFILE OF THE BOSNIAN COMMUNITY	10
CHAPTER 3.....	11
LITERATURE REVIEW.....	11
3.1 INTRODUCTION.....	11
3.2 STAGES OF THE REFUGEE EXPERIENCE.....	11
3.2.1 PRE-FLIGHT	12
3.2.2 THE PERIOD OF FLIGHT	12
3.2.3 THE PERIOD OF ARRIVAL AND RESETTLEMENT	12
3.3 CHALLENGES IN A NEW ENVIRONMENT	13
3.3.1 SPHERES OF CHANGE	13
3.3.2 LANGUAGE - NEW AND OLD	13
3.4 THE IMPACT ON THE INDIVIDUAL.....	14
3.4.1 STRATEGIES OF ADAPTATION.....	14
3.4.2 COPING WITH THE STRESS OF A NEW ENVIRONMENT	15
3.4.3 INDIVIDUAL COPING FACTORS	16
3.5 ACCULTURATION.....	17
3.5.1 MODEL OF ACCULTURATION.....	17
3.5.2 ACCULTURATION AND RESETTLEMENT POLICY.....	18
3.6 PROGRAMME REFUGEE CHILDREN.....	19

CHAPTER 4.....	20
RESEARCH DESIGN AND METHODOLOGY	20
4.1 INTRODUCTION.....	20
4.2 ADULT SURVEY.....	20
4.2.1 RESEARCH DESIGN.....	20
4.2.2 SAMPLING.....	22
4.2.3 RESEARCH MATERIALS	22
4.3 RESEARCH PROCEDURE	24
4.3.1 FIELDWORKERS.....	24
4.3.2 MAXIMISING PARTICIPANT RECRUITMENT	24
4.3.3 ANALYSIS OF DATA	26
4.4 SURVEY OF CHILDREN'S SOCIAL AND ACADEMIC ADAPTATION.....	27
4.4.1 RESEARCH DESIGN.....	27
4.4.2 SAMPLING.....	27
4.4.3 RESEARCH MATERIALS	27
4.4.4 SURVEY PROCEDURE	28
CHAPTER 5.....	29
ADULT SAMPLE PROFILE.....	29
5.1 INTRODUCTION.....	29
5.2 PARTICIPATION RATES	29
5.3 FACTORS INFLUENCING PARTICIPATION RATES	30
5.4 IMPLICATIONS FOR SAMPLING AND FIELDWORK	31
5.5 CONCLUSIONS.....	32
CHAPTER 6.....	33
BACKGROUND INFORMATION ON PARTICIPANTS.....	33
6.1 INTRODUCTION.....	33
6.2 PLACE OF ORIGIN - URBAN / RURAL PROFILE.....	34
6.3 AGE AT TIME OF DEPARTURE.....	35
6.4 EDUCATIONAL BACKGROUND	35
6.5 EMPLOYMENT HISTORY	37
6.5.1 TYPES OF EMPLOYMENT EXPERIENCE	37
6.5.2 DIFFERENCES BETWEEN BOSNIAN AND VIETNAMESE SAMPLES	37
6.5.3 GENDER AS A FACTOR IN PREVIOUS EMPLOYMENT HISTORY	37
6.5.4 SCHOOL-LEAVING AGE AS A FACTOR IN EMPLOYMENT HISTORY	38
6.6 REASONS FOR LEAVING COUNTRY OF ORIGIN	38
6.7 CAUSES OF CONCERN AT TIME OF LEAVING.....	39
6.8 STATE OF READINESS FOR DEPARTURE	40
6.9 EMOTIONAL PERCEPTIONS OF DEPARTURE	41
6.10 TRANSIT TO IRELAND	43
6.10.1 SAFETY OF SELF AND FAMILY	43
6.10.2 SAFETY OF FAMILY DURING DEPARTURE	44
6.11 INTERIM DESTINATIONS	45
6.11.1 BOSNIAN MOVEMENTS.....	45
6.11.2 VIETNAMESE MOVEMENTS	45
6.12 CONCLUSIONS.....	45

CHAPTER 7.....	46
ARRIVAL AND RECEPTION IN IRELAND	46
7.1 INTRODUCTION.....	46
7.2 CIRCUMSTANCES AT ARRIVAL.....	46
7.3 INITIAL HOST	46
7.4 SOURCES OF SUPPORT AND INFORMATION UPON ARRIVING IN IRELAND.....	48
7.5 CONCLUSIONS.....	49
CHAPTER 8.....	50
HOUSING.....	50
8.1 INTRODUCTION.....	50
8.2 ACCOMMODATION ARRANGEMENTS	51
8.3 RESIDENTIAL ADDRESSES	52
8.4 TYPES OF ACCOMMODATION	54
8.5 SATISFACTION WITH ACCOMMODATION.....	54
8.6 RELOCATION / MOVEMENT PATTERNS.....	55
8.7 CONCLUSION	56
CHAPTER 9.....	57
SOCIO-ECONOMIC PROFILE OF PARTICIPANTS	57
9.1 INTRODUCTION.....	57
9.2 PARTICIPANTS IN PAID EMPLOYMENT.....	57
9.2.1 BOSNIAN PARTICIPANTS	57
9.2.2 VIETNAMESE PARTICIPANTS	58
9.3 PARTICIPANTS NOT IN PAID EMPLOYMENT	58
9.3.1 BOSNIAN PARTICIPANTS	58
9.3.2 VIETNAMESE PARTICIPANTS	59
9.4 MAIN DAY-TO-DAY ACTIVITIES.....	59
9.4.1 BOSNIAN SAMPLE	59
9.4.2 VIETNAMESE SAMPLE	60
9.5 OTHER ISSUES AFFECTING SOCIO-ECONOMIC STATUS	61
9.5.1 GENDER.....	61
9.5.2 AGE	63
9.5.3 REFUGEE ADMISSION CATEGORY.....	63
9.5.4 OTHER COMPARISONS BETWEEN THE SAMPLES.....	64
9.6 SOCIAL WELFARE PAYMENTS.....	64
9.6.1 BOSNIAN RESPONSES	64
9.6.2 VIETNAMESE RESPONSES.....	64
9.7 HOUSEHOLD INCOME AND STANDARD OF LIVING	65
9.8 CONCLUSIONS.....	68
CHAPTER 10.....	69
EDUCATION AND TRAINING.....	69
10.1 INTRODUCTION.....	69
10.2 ENGLISH LANGUAGE ACQUISITION.....	69
10.2.1 MEASUREMENT	69
10.2.2 ENGLISH LANGUAGE SKILLS AT TIME OF ARRIVAL IN IRELAND.....	70
10.2.3 ENGLISH LANGUAGE SKILLS AT TIME OF SURVEY	71

10.2.4	ENGLISH LANGUAGE PROGRESS	72
10.2.5	FACTORS IN ENGLISH LANGUAGE SKILLS DEVELOPMENT	75
10.3	PARTICIPATION IN EDUCATION OR TRAINING SINCE ARRIVING IN IRELAND	77
10.3.1	FULL-TIME STUDENTS BEFORE ARRIVING IN IRELAND	77
10.3.2	THOSE WHO HAD LEFT FULL-TIME EDUCATION OR TRAINING	78
10.4	RECOGNITION IN IRELAND OF OVERSEAS QUALIFICATIONS	78
10.5	CONCLUSION.....	80
CHAPTER 11.....		81
NATIONALITY AND IDENTITY		81
11.1	INTRODUCTION.....	81
11.2	PERCEPTIONS OF ETHNIC IDENTITY	81
11.3	NATIONALITY AND NATURALISATION.....	82
11.4	THE FAMILY REUNIFICATION SCHEME.....	84
11.4.1	CLARITY OF UNDERSTANDING OF FRS CRITERIA	84
11.4.2	PERCEIVED ADEQUACY OF THE FAMILY REUNIFICATION SCHEME IN MEETING DEMAND	84
11.4.3	PERCEPTIONS OF FAIRNESS IN THE FAMILY REUNIFICATION SCHEME	85
11.5	FUTURE PLANS.....	86
11.6	CONCLUSION.....	87
CHAPTER 12.....		88
SOCIAL INTERACTION AND SOCIAL SUPPORT		88
12.1	INTRODUCTION.....	88
12.2	SOCIALISATION PATTERNS.....	88
12.2.1	INTERACTION WITH THE WIDER COMMUNITY	88
12.2.2	GENDER-BASED DIFFERENCES.....	89
12.2.3	ROLE OF ENGLISH LANGUAGE SKILL.....	89
12.2.4	PARTICIPANT'S DAY-TO-DAY OCCUPATION AS A FACTOR IN SOCIALISATION.....	90
12.2.5	PARTICIPATION IN CLUBS AND ORGANISATIONS.....	90
12.2.6	CONTACT WITH COUNTRY OF ORIGIN.....	91
12.2.7	RELIGIOUS PARTICIPATION.....	91
12.2.8	SOCIAL PARTICIPATION.....	91
12.2.9	EXPERIENCES OF RACISM.....	94
12.3	'FEELING OF BELONGING' TO THE COMMUNITY	95
12.3.1	DIFFERENCE BETWEEN SAMPLE GROUPS.....	95
12.3.2	GENDER DIFFERENCES.....	95
12.3.3	LENGTH OF TIME IN IRELAND	96
12.3.4	FUTURE PLANS.....	97
12.3.5	FINANCIAL WELL-BEING.....	97
12.3.6	ENGLISH LANGUAGE SKILLS	97
12.4	CONCLUSION.....	98
CHAPTER 13.....		99
PHYSICAL AND PSYCHOLOGICAL HEALTH		99
13.1	INTRODUCTION.....	99
13.2	HEALTH INSURANCE COVER.....	99
13.3	UTILISATION AND PERCEPTIONS OF HEALTH SERVICES	100
13.4	THE GENERAL HEALTH QUESTIONNAIRE.....	102
13.4.1	INTRODUCTION	102

13.4.2	GHQ RELIABILITY	103
13.4.3	INTERPRETATION OF DATA.....	103
13.4.4	DISTRIBUTION OF GHQ SCORES	103
13.4.5	FURTHER ANALYSIS OF GHQ SCORES.....	106
13.5	CONCLUSIONS.....	111
CHAPTER 14.....		112
SURVEY OF CHILDREN		112
14.1	INTRODUCTION	112
14.2	ADAPTIVE FUNCTIONING.....	112
14.2.1	MEASURING THE CONSTRUCT OF 'ADAPTIVE FUNCTIONING'	112
14.2.2	OUTLINE OF RESULTS	113
14.3	ACADEMIC PERFORMANCE	114
14.3.1	SCORING AND NORMS	114
14.4	BEHAVIOUR PROFILES.....	116
14.4.1	TOTAL T-SCORES.....	116
14.5	LANGUAGE PROBLEMS AMONG CHILDREN.....	118
14.5.1	MEASURING LANGUAGE PROBLEMS	118
14.5.2	ANALYSIS OF DATA.....	118
14.6	CONCLUSIONS.....	120
CHAPTER 15.....		121
KEY CONCLUSIONS.....		121
15.1	OVERVIEW	121
15.1.1	ROLE OF RESEARCH IN POLICY DEVELOPMENT	121
15.1.2	ROLE OF THE REFUGEE RESETTLEMENT RESEARCH PROJECT	122
15.2	OVERVIEW OF FINDINGS	122
15.2.1	MAINTAINING LINES OF COMMUNICATION	122
15.2.2	SOME PERSONAL AND SOCIO-ECONOMIC IMPLICATIONS	122
15.2.3	RESETTLEMENT AND HEALTH ISSUES	123
15.2.4	LANGUAGE AND EDUCATION ISSUES FOR REFUGEES	124
15.2.5	RESETTLEMENT AND HOUSING STRATEGY	124
15.2.6	EXPERIENCES OF RACISM IN IRELAND	125
15.2.7	RESILIENT AND VULNERABLE GROUPS.....	125
15.2.8	CHILDREN OF THE PROGRAMME REFUGEE COMMUNITIES	126
15.3	FRAMEWORK FOR RESETTLEMENT.....	127
15.3.1	INTEGRATION AND EMPOWERMENT - KEY PRINCIPLES OF SUCCESSFUL RESETTLEMENT	127
15.3.2	RESETTLEMENT AND IRISH CITIZENSHIP	127
15.3.3	RESETTLEMENT AND THE FAMILY REUNIFICATION SCHEME	128
15.3.4	RESETTLEMENT AND THE ROLE OF THE RECEPTION CENTRE	128
15.3.5	LANGUAGE, EDUCATION, TRAINING AND EMPLOYMENT	128
15.3.6	PRIORITY TARGET GROUPS AND SERVICE DELIVERY.....	129
15.3.7	THE NATIONAL ANTI-POVERTY STRATEGY	130
15.4	CONCLUSIONS.....	131

List of Figures

Figure 1	Some Important Elements of Successful Resettlement	11
Figure 2	Hierarchy of Needs	16
Figure 3	Model of Acculturation (Berry, 1986, 1991)	18
Figure 4	Target Adult Sample Size for Bosnian Community	21
Figure 5	Target Adult Sample Size for Vietnamese Community	21
Figure 6	Admission Category	29
Figure 7	Population, Target, and Sample Sizes (Bosnian Adults)	30
Figure 8	Population, Target, and Sample Sizes (Vietnamese Adults)	30
Figure 9	Participants' backgrounds - urban / suburban / rural	34
Figure 10	Estimated Population of Interviewee's home town / village	35
Figure 11	Bosnian Refugees Education Levels prior to arriving in Ireland	35
Figure 12	Education Levels prior to arriving in Ireland (Vietnamese Participants)	36
Figure 13	Chi-square Analysis: Previous Employment Status of Bosnian participants	37
Figure 14	Chi-square: Employment Status of Vietnamese participants	38
Figure 15	Chi-square: Employment Status of Bosnian participants x School-leaving Age	38
Figure 16	Main causes of concern to Vietnamese participants at time of leaving home	39
Figure 17	Main causes of concern to Bosnian participants at time of leaving home	40
Figure 18	State of Readiness to Leave Home x Sample Group	41
Figure 19	Main feelings at time of leaving home - Bosnian Responses	42
Figure 20	Main feelings at time of leaving home - Vietnamese Responses	42
Figure 21	Perceptions of Personal Safety - Bosnian Responses	43
Figure 22	Perceptions of Personal Safety - Vietnamese Responses	43
Figure 23	Perceptions of Safety of Family Members - Bosnian Responses	44
Figure 24	Perceptions of Safety of Family Members - Vietnamese Responses	45
Figure 25	Accommodation Types of Vietnamese and Bosnian participants	51
Figure 26	Vietnamese Residential Addresses	53
Figure 27	Bosnian Residential Addresses	53
Figure 28	Accommodation Type	54
Figure 29	Expressed desire to relocate from present accommodation	56
Figure 30	Bosnian Responses to the question: "Do you feel that you have the skills or qualifications to do a more demanding job than the one you now have?"	58
Figure 31	Self-Description of main day-to-day activity (Bosnian sample)	60
Figure 32	Self-Description of main day-to-day activity (Vietnamese Sample)	61
Figure 33	Employment x Gender	62
Figure 34	Responses to the Question "Thinking of your household's total income, would you say that your household is able to make ends meet?"	65
Figure 35	Progression of Living Standards	66
Figure 36	Comparison of Standards of Living	67
Figure 37	Chi-Square Analysis of English language skills at time of arrival x Sample	70
Figure 38	Chi-Square Analysis of English language skills at time of arrival x Gender	70
Figure 39	English Language Skills at time of survey x Sample	71
Figure 40	Chi-Square: English language skills x Age group of participants	71
Figure 41	Satisfaction ratings with English Language progress	72
Figure 42	Chi-square analysis of Language Progress x Satisfaction with Progress	72
Figure 43	Cross-tabulation of number of English language skills at time of arrival x English language skills at time of survey (Bosnian sample)	74
Figure 44	Cross-tabulation of English language ability at time of arrival x E.L. ability at time of survey (Vietnamese sample)	74
Figure 45	Chi-Square Analysis of Number of language skills acquired x Length of Time in English Language Training	75
Figure 46	Length of time spent in English Language Training x Community	75
Figure 47	Role of Initial destination in take-up of English Language Training	76
Figure 48	Chi-square analysis of Number of Language Skills acquired x Length of time in Ireland	76
Figure 49	Chi-Square Analysis of Number of Language Skills Acquired x Age of Leaving School	77
Figure 50	Reasons given for not returning to education or training	78
Figure 51	Possession of Qualifications prior to coming to Ireland	79

Figure 52	Formal Recognition of Qualifications by relevant Irish authorities	79
Figure 53	Perceptions of Ethnic Identity: Bosnian Sample (n=71)	81
Figure 54	Perceptions of Ethnic Identity: Vietnamese sample (n=25)	82
Figure 55	Citizenship of participants at time of survey	82
Figure 56	Satisfaction ratings with application process for naturalisation	83
Figure 57	Clarity of understanding of Family Reunification Scheme criteria	84
Figure 58	Perceptions of the adequacy of the Family Reunification Scheme	85
Figure 59	Perceptions of the fairness of the operation of the Family Reunification Scheme	85
Figure 60	Indications of future intentions	86
Figure 61	Occasions on which participants talk with community	89
Figure 62	Role of Contact with neighbours x desire to move accommodation 'at some stage in the future'	89
Figure 63	Chi-Square analysis of socialising x age group	92
Figure 64	Chi-Square analysis of socialising x number of English language skills	93
Figure 65	Chi-Square analysis of socialising x Civil Status	93
Figure 66	Experiences of Racism x Community	94
Figure 67	Distress caused by Racial Abuse	95
Figure 68	Feelings of 'being part of the community' x participant's country of origin	95
Figure 69	Feelings of 'being part of the community' x participant's country of origin	95
Figure 70	Bosnian Community - Feelings of 'being part of the community' x Length of time in Ireland	96
Figure 71	Chi-square table: Feeling of belonging in the community x future plans	97
Figure 72	Chi-square table: Feeling of belonging to the community x ability to manage on income	97
Figure 73	Chi-square table: Feeling part of the community x English language skills	98
Figure 74	Correlation matrix for GHQ scores and sub-scale scores (Vietnamese sample)	103
Figure 75	Correlation matrix for GHQ scores and sub-scale scores (Bosnian sample)	103
Figure 76	Chi-square of threshold position on GHQ-28 x Group	104
Figure 77	GHQ-28 Frequency Distribution	105
Figure 78	Distribution of GHQ-28 scores (Vietnamese and Bosnian samples)	106
Figure 79	Position relative to GHQ Threshold x Admission Category (Bosnian Sample)	107
Figure 80	Position relative to GHQ Threshold x Admission Category (Vietnamese Sample)	107
Figure 81	Position relative to GHQ Threshold x Age Category (Bosnian sample)	107
Figure 82	Perceived economic strain x % above GHQ threshold	108
Figure 83	Percentage of Combined Samples above and below threshold x employment status	109
Figure 84	Chi-Square Skills of English Language Skills x GHQ score (Combined Samples)	109
Figure 85	Chi-Square Analysis of GHQ position x Recent Participation in Social event	110
Figure 86	Chi-square Analysis of Future Plans x GHQ position (Combined Samples)	111
Figure 87	Adaptive Functioning scores for Boys aged 5 - 11	113
Figure 88	Adaptive Functioning scores for Boys aged 12 - 18	113
Figure 89	Adaptive Functioning scores for Girls aged 5 - 11	114
Figure 90	Adaptive Functioning Scores for Girls aged 12 - 18	114
Figure 91	Academic Performance scores for Boys aged 5 - 11	115
Figure 92	Academic Performance scores for Boys aged 12 - 18	115
Figure 93	Academic Performance scores for Girls aged 5 - 11	115
Figure 94	Academic Performance scores for Girls aged 12 - 18	116
Figure 95	Total t-scores for Boys aged 5 - 11	116
Figure 96	Total t-scores for Boys aged 12 - 18	117
Figure 97	Total t-scores for Girls aged 5 - 11	117
Figure 98	Total t-scores for Girls aged 12 - 18	117
Figure 99	TRF Subscale iii by language problem indications	118
Figure 100	Gender by language problem indication	119
Figure 101	Internalising T-scores x Language Problem Indications	119

Chapter 1

Background to the Project

1.1 Introduction

"The decision to uproot and leave one's country is one of the most difficult decisions a person can make over the course of his or her life. When it stems from the conclusion that life is no longer bearable, or even possible, in one's homeland, it becomes an involuntary decision in that, by definition, one sees no other alternative."

(Ben-Porath, 1987, p.3)

One of the defining characteristics of 20th Century global migration patterns has been the mass movement of refugees. Those who flee their homelands as refugees do so largely because they find themselves in harsh or intolerable environments. These flights often involve great masses of people, the exodus of the entire population of a town or region. Sometimes the numbers involved are not so dramatic, but the reasons behind the flight are nevertheless just as compelling. The periods prior to and subsequent to leaving one's home as a refugee often entail a co-incidence of several major events, any one of which would on its own be considered a major life event under normal circumstances. The decision to leave one's home is never borne lightly, and those who do so rarely have a choice in the matter.

A refugee is broadly defined as *someone who seeks refuge in a foreign state because of a fear of persecution within his or her country of origin*. Over the past three decades, groups of people of several different nationalities have been invited by the Irish Government to resettle in Ireland. 'Primary admissions' refers to refugees admitted into Ireland under the initial Government Decisions made in response to a set of circumstances. 'Secondary admissions' include family members who arrive in Ireland subsequently, admitted by Government Decisions made under the Family Reunification Scheme. Groups have arrived from Hungary (during the 1950's), Chile (during the 1970's), Vietnam (in 1979), Iran (in 1986), and the countries of the former Yugoslavia (beginning in 1992). Of these refugees, the vast majority of those who remain living in Ireland originated either from Vietnam or from the former Yugoslavia.

Programme refugees are people who have come from troubled lands to build a new life for themselves and their families in Ireland. They arrive in this country with their own identities, rich in history, tradition and cultural diversity. This diversity emanates not only from their origins on different continents and in different countries, but also from the different regions within these countries. They also bring with them personal stories, rich in their telling, with accounts of hardship and suffering, great personal losses and tragedies, and inspiring accounts of an unquenchable hope for the future, and a determination to survive and prosper in the face of adversity.

This report describes some of these stories, and looks at the factors, which influence the resettlement process for those who have come to Ireland to begin their lives anew.

1.2 Origins of the Project

The Refugee Resettlement Research Project first emerged as a proposal in a collaborative initiative between the Refugee Agency and the Department of Psychology, Eastern Health Board. The primary aim of the proposal was to examine the resettlement patterns of Vietnamese and Bosnian programme refugees and their family members in Ireland. The research was to inform policy makers and service providers, thereby facilitating the continuing development of services to the refugee communities. The initiative evolved into an inter-Departmental project, and received support and funding from the following Government Departments:

- ☐ Department of Education and Science
- ☐ Department of the Environment and Local Government
- ☐ Department of Foreign Affairs
- ☐ Department of Health and Children
- ☐ Department of Social, Community and Family Affairs

The present document is a report of the activities and research outcomes of the project. It is the most substantial piece of research that has been carried out to date in Ireland on the programme refugee population. It does not claim to be a definitive account of the lives of the programme refugee communities. Rather, it is a statistical profile of some of their experiences, feelings, and plans for the future. The hope is that this research will provide a reference point for much needed future research into the refugee population in Ireland.

1.3 Project Management and Staffing

The project was managed by a committee comprising of one representative from each of the participating Government Departments, along with the Director of the Refugee Agency and the Director of Psychology, Eastern Health Board. The members of the Management Committee were:

Mr. John O' Neill (Chairperson)	The Refugee Agency
Mr. Jim Cantwell	Department of the Environment and Local Government
Mr. Brian Glanville	Department of Psychology, Eastern Health Board
Ms. Mary Lally	Department of Social, Community and Family Affairs
Mr. Seán MacGabhann	Department of Education and Science
Ms. Noreen O' Sullivan	Department of Health and Children
Mr. Tom Wright	Department of Foreign Affairs

From time to time, Mr. Seán Bell and Mr. Frank Brosnan deputised on behalf of the Department of Foreign Affairs, and Ms. May Carroll on behalf of the Department of Social, Community and Family Affairs.

The day-to-day running of the project was the responsibility of the Project Director, supported by an expert Steering Group. This group met at regular intervals to review progress and deal with any issues that arose during the project. The members of the Steering Group were:

Mr. Brian Glanville	(Chairperson)	Director of Psychology, Eastern Health Board
Mr. Joe Moran		Senior Resettlement Officer, Refugee Agency
Mr. John O' Neill		Director, Refugee Agency
Ms. Maeve Stokes		Psychologist, Eastern Health Board

Staff employed on the project were:

Mr. Cathal O' Regan	Project Director
Ms. Bairbre McCann	Secretary
Mr. Sakib Podgoric	Field-worker / Native Language Interviewer
Mr. Tran Thanh Thuan	Field-worker / Native Language Interviewer
Ms. Lam Vuong	Consultant / Field-worker / Native Language Interviewer

1.4 Project Timetable

The following are some of the significant dates during the lifetime of the Refugee Resettlement Research Project:

June 1996	Establishment of Project Management Committee
September 1996	Employment of Project Director
January - March 1997	Deployment of Field Workers
January 1998	Submission of Draft Report to Project Management Committee

1.5 Target Groups of the Research

The research was specifically targeted at the Vietnamese and Bosnian refugee communities who have been admitted into Ireland under Government Decisions and who continue to reside in Ireland. This includes programme refugees, their family members who have been admitted into Ireland under the Family Reunification Scheme, and their family members who have been born in Ireland.

Chapter 2

Programme Refugees in Ireland

2.1 Introduction

This chapter opens by defining the various categories of refugee, including 'programme refugees', so that a clear distinction can be made between persons falling into each of these categories, particularly with reference to the administrative and legislative situation prevailing in Ireland during the research period.

At this point in time, the status of programme refugees in Ireland is not dealt with in any specific legislation, and to date all issues regarding their status have been determined by Government Decisions. The various Decisions relevant to the admission of Vietnamese and Bosnian programme refugees are presented in section 2.3.

The third part of the chapter provides a brief overview of the status of programme refugees in Ireland, and the potential significance of the 1996 Refugee Act.

This chapter defines what a programme refugee is, and provides definitions of other categories of refugee so that a clear distinction can be made between them.

This is followed by a summary of the key elements agreed under the various Government Decisions that deal with family reunification. The issue of citizenship is also discussed and the role of the Refugee Agency is described. Finally, the chapter ends with a profile of both the Vietnamese and Bosnian communities in Ireland.

2.2 Definitions and Terms

The term 'refugee' in normal usage in Ireland does not distinguish between the different categories of people who are included in this all-embracing term. From the point of view of this study, and in many other respects, the differences between the various categories are extremely important, particularly as a different legal status is conferred by the legal and administrative definitions of the terms. Consequently, individuals who fall within these categories enjoy different rights and entitlements. The different categories are set out as follows:

Programme Refugee – A person who has been invited to Ireland on foot of a Government Decision, in response to humanitarian requests from bodies such as UNHCR.

Asylum Seeker – A person who seeks to be recognised as a refugee in accordance with the terms of the 1951 Geneva Convention relating to the Status of Refugees.

Refugee / Convention Refugee – A person who fulfils the requirement of the definition of a refugee under the 1951 Geneva Convention, and is recognised as a refugee.

Leave to Remain – Permission to remain in the State granted at the discretion of the Minister for Justice. This permission may be given, for example, to a person who does not fully meet the requirements of the definition of a refugee under the 1951 Geneva Convention, but who the Minister decides should be allowed to remain in the State for humanitarian reasons.

For the purposes of this study, unless otherwise stated, the terms 'programme refugee' and 'refugee' will be used interchangeably to refer to the Vietnamese and Bosnian programme refugee communities who are the focus of this research.

2.3 Government Decisions pertaining to Programme refugees

From time to time, and in response to specific emergencies, various Government Decisions allow for a certain quota of persons to be admitted into the country as 'programme refugees'. Over the past two decades, groups of programme refugees have been admitted from Chile, Iran, Vietnam and the former Yugoslavia.

The two largest groups of programme refugees to be admitted to Ireland have come from Vietnam and Bosnia. The specific Government Decisions relating to these groups are outlined below*:

- ☐ **July 1979** - Government Decision to admit 212 refugees from Vietnam.
- ☐ **January 1981** - Government Decision to admit quota of relatives of Vietnamese refugees.
- ☐ **November 1985** - Government Decision to admit quota of relatives of Vietnamese refugees.
- ☐ **October 1987** - Government Decision to admit quota of relatives of Vietnamese refugees.
- ☐ **April 1991** - Government Decision to admit quota of relatives of Vietnamese refugees.
- ☐ **July 1992** - Government Decision to admit up to 200 refugees from former Yugoslavia. Following discussions between EU member states concerning a response to the refugee crisis arising out of the situation in former Yugoslavia, the Government agreed in July 1992 to receive programme refugees from that region. The first group of 178 Bosnians arrived in Ireland on 2nd September 1992.
- ☐ **June 1993** - Government Decision to admit quota of relatives of Vietnamese refugees.
- ☐ **June 1993** - Government Decision to admit up to 200 additional refugees from former Yugoslavia, with priority to be given to close relatives of previously admitted refugees, and with the possibility of particular hardship cases being admitted. (In August 1993, the first 10 medical evacuees and their relatives were admitted under the June 1993 Decision).
- ☐ **February, April, June, and July 1995** - Government Decisions to admit four small groups of medical evacuees from former Yugoslavia (between 10 and 13 in each group) and their close relatives.
- ☐ **August 1995** - Government Decision to admit a further group of 250 refugees and their family members from former Yugoslavia. In consultation with the United Nations High Commissioner for Refugees (UNHCR), it was agreed to bring these refugees to Ireland in three groups. The first group of 78 arrived in December 1995 with other smaller groups continuing to arrive in 1996 and 1997.

(*Source: Refugee Agency Information Bulletins, February 1997)

2.4 Status of programme refugees in Ireland

2.4.1 Current Status

The legal status of Bosnian and Vietnamese programme refugees in Ireland is somewhat complex. Both groups have been admitted under powers available to the Minister for Justice. While both groups are known as 'programme refugees', they enjoy slightly differing legal status. The Vietnamese admitted under the Government Decisions of 1979 were granted *de facto* refugee status in accordance with the 1951 Geneva Convention (and 1967 Protocol). Those admitted into Ireland from former Yugoslavia were not given formal refugee status, but were effectively admitted on the same terms as the Vietnamese.

Thus, both groups were given rights that essentially guarantee the same treatment as Irish nationals in terms of access to education, health, social welfare, housing, employment and training opportunities. In addition, both Bosnian and Vietnamese programme refugees enjoy the right to remain in Ireland for as long as they wish, and the right to apply for Irish citizenship after three years of residency here.

2.4.2 Refugee Act, 1996

To date, the Refugee Act 1996 has been implemented only in part. Five sections have been implemented. These include sections 2, 5, and 22, which give effect to the definition of a refugee, the principle of *non-refoulement*, and the Dublin Convention. Although none of these sections refer to programme refugees, it is important to acknowledge the Act and its potential for enshrining into Irish law of the principles and administrative practices that heretofore have been followed in relation to programme refugees.

Under section 2 of the Refugee Act, 1996, a refugee includes

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

Generally, refugees are people who arrive in Ireland initially seeking political asylum, undergo the process of having had their claim for asylum heard and assessed, and who subsequently have their claim granted. Programme refugees, on the other hand, arrive in Ireland on foot of a Government Decision which would have already decided the terms and conditions of their status before they arrive.

Section 24 of the Refugee Act, 1996 defines a programme refugee as:

'...a person to whom leave to enter and remain in the State for temporary protection or resettlement as part of a group of persons has been given by the Government...whether or not such person is a refugee within the meaning of the definition of "refugee" in section 2 [of the Refugee Act, 1996].'

Under Section 3 (2) of the Refugee Act 1996, a person who has been granted refugee status under the laws of the state is legally entitled to many of the same rights and

privileges as Irish citizens. In particular, a refugee is entitled (subject to the same terms and conditions as Irish citizens) to seek and enter employment, to have access to education and training, to receive the same social welfare benefits, medical care and public services to which Irish citizens are entitled. Programme refugees are conferred with the same rights under Section 24 (4) of the Act. Both Sections 3 and 24 have yet to be implemented.

2.5 Family Reunification

The Family Reunification Scheme for programme refugees allows for certain family members to join their relatives in Ireland. The scheme has slightly different criteria of operation for Bosnian and Vietnamese applicants, due to the specific needs of each community. Generally, a fixed number of visas are made available to applicants under the Family Reunification Scheme. The scheme, whose criteria are outlined below, offers priority admission to certain categories of relatives (Refugee Agency Annual Report, 1995, pp.14 - 15).

2.5.1 *Bosnian Family Reunification Scheme*

Three categories of relatives are designated, in order of priority of admission:

- (a) Spouses and unmarried children;
- (b) Parents and unmarried brothers and sisters;
- (c) Other relatives, whose main family link is with refugees already in Ireland or who, for humanitarian reasons, are deemed to require admission to Ireland to join family members.

2.5.2 *Vietnamese Family Reunification Scheme*

Under this scheme, spouses of Vietnamese refugees have an automatic entitlement to come to Ireland to join their family. This is in recognition of the difficulties faced by such a small community in finding potential marriage partners from within their own ethnic group in Ireland, should they so wish. Relatives other than spouses are categorised as follows in order of priority:

- (a) widowed daughters or sisters in Vietnam or in a refugee camp, and their unmarried children;
- (b) families (parents, unmarried children and unmarried siblings) remaining in Vietnam or in a refugee camp
- (c) other cases of exceptional hardship whose sole family links are with refugees who have been resettled in Ireland.

2.6 Citizenship for programme refugees

Persons not born in Ireland may, in certain circumstances, become Irish citizens by means of a 'certificate of naturalisation', granted by the Minister for Justice. Under section 15 of the Irish Nationality and Citizenship Act (1957), as amended by the Irish Nationality and Citizenship Act (1986), any person who has resided in Ireland for a specified period of 5 years during the preceding 8 years, including one year's continuous residence immediately prior to the date of application, is entitled to apply for Irish citizenship.

Section 16 of the Act provides, *inter alia*, that the Minister for Justice may, in his / her absolute discretion, grant an application for a certificate of naturalisation for persons granted refugee status. In practice, the Minister for Justice exercises this discretion granted under section 16 by considering applications from refugees who have three years legal residence in the State (provided that other specified criteria are met).

To date, all valid applications received by the Minister for Justice from Vietnamese programme refugees have been granted. The first applications from Bosnian programme refugees are currently being processed.

2.7 The Refugee Agency

The Refugee Agency was established in 1991 under the aegis of the Department of Foreign Affairs to co-ordinate arrangements for the admission, reception and resettlement of refugees admitted into Ireland under Government Decisions. Prior to the establishment of the Refugee Agency, the Refugee Resettlement Committee fulfilled many of the same functions. The remit of the Refugee Agency, as outlined in its terms of reference, is:

- (a) to develop policies for the reception and integration of refugees in Ireland;
- (b) to make any necessary preparations for the arrival and reception in Ireland of groups of refugees;
- (c) to arrange, directly or in consultation with the relevant authorities, non-Government organisations, churches and charitable groups for the provision of temporary accommodation, orientation courses, and, where necessary, language training courses to refugees upon arrival in Ireland;
- (d) to liaise between refugees and Government Departments, local authorities and other bodies in ensuring the provision of services to which refugees would be entitled;
- (e) to facilitate the integration of refugees, *inter alia*, by mobilising and nurturing community support on a local basis, particularly during the early stages of resettlement;
- (f) to monitor the progress towards the integration of refugees;
- (g) to draw up a written report for submission to the minister for Foreign Affairs, on the progress of the resettlement programme on an annual basis;
- (h) to facilitate the repatriation of refugees in cases where the demand arises and where circumstances permit.

(Government Decision, 1991)

The Refugee Agency is managed by a Board that is comprised of an independent chairperson, and representatives of those Government Departments most involved with refugee issues (Department of Foreign Affairs, Department of Justice, Equality and Law Reform, Department of Health and Children, Department of Social, Community and Family Affairs, Department of Education and Science, Department of Enterprise Trade and Employment, and Department of the Environment and Local Government). The United Nations High Commissioner for Refugees (UNHCR) and a number of independent members have observer status on the Board. All Board members are appointed by the Minister for Foreign Affairs.

The Refugee Agency is funded solely by way of grant-in-aid from the Department of Foreign Affairs and is staffed by a Director, a Resettlement Team, and administrative / secretarial staff.

2.8 The Vietnamese and Bosnian Communities in Ireland

The following section presents information on the Vietnamese and Bosnian programme refugee communities, based on data from official records as of 31st October 1996. It includes information on primary programme refugees, persons admitted under the Family Reunification Scheme, and children born in Ireland of programme refugee parents.

2.8.1 Definition of Terms

Broadly speaking, programme refugee groups are initially admitted into Ireland on the basis of Government Decisions made in response to particular events. Provision is generally made for the subsequent admission of certain family members for the purposes of family reunification. For the purposes of analysis and clarity of presentation, the specific Government Decisions granting permission to Bosnian and Vietnamese programme refugees to enter and remain in the country have been classified into three separate categories:

'Primary programme refugee admissions' is the term used in this report to refer to those persons who belong to groups of people granted admission into Ireland under initial Government Decisions (taken in 1979 for the Vietnamese community, and between 1992 and 1995 for the Bosnian community).

'Family Reunification Scheme admissions' is the term used in this report to refer to those persons who were admitted into Ireland subsequent to the above primary admissions, generally under the Family Reunification Scheme.

'Medical Evacuee' and 'Medevac' are terms used in this report to refer to those persons who were admitted into Ireland specifically in order to receive medical attention for injuries sustained during the war in the former Yugoslavia. 'Medevac relatives' refers to their family members who received permission to come to Ireland with or subsequent to the medical evacuees themselves.

2.8.2 Profile of the Vietnamese Community

- ☐ At the time of survey, in October 1996, there were 582 persons connected to the Vietnamese programme refugee scheme living in Ireland, including 123 of the 212 Vietnamese originally admitted into Ireland under the Government Decision of 1979.
- ☐ The majority (66%) of Vietnamese adults in Ireland at present came here under the Family Reunification Scheme. The majority of Vietnamese children (70%) were born in Ireland. The remaining 30% of children are here under the Family Reunification Scheme. All those who came as children during the 1979 / 1980 intake have now reached adulthood.
- ☐ 148 Vietnamese have left Ireland since being admitted. The majority (61%) have gone to the United Kingdom. Other popular destinations include the United States, Australia, and Canada. A total of 29 Vietnamese who arrived in Ireland are now deceased.
- ☐ The Vietnamese community ranges in age from newly-born infants to people in their 90's. The population is predominantly young in age, with 50% of the population being under 23 years of age. The average age of the Vietnamese population in Ireland is 27 years. Less than 5% of the population are over the age of 66.

- ☐ Within the community, 15% are of primary school-going age, 10% are of secondary school-going age, while 50% are within the workforce age range.
- ☐ The majority of Vietnamese children (70.8%) were born in Ireland. As yet, none of those born in Ireland have reached adulthood. However, considering that the first arrival of Vietnamese refugees was in 1979, it can be expected that the first births to that early group will shortly reach 18 years of age.
- ☐ The proportion of males to females among the Vietnamese community is approximately 50:50, for both children and adults.
- ☐ There has been a steady but very gradual growth in the numbers of Vietnamese in Ireland over the past decade.
- ☐ In 1990, the Vietnamese-Irish Association was established by the Vietnamese community to promote their culture, language and traditions in Ireland. The association owns premises in central Dublin, where a range of activities takes place. These include classes in English language and in Vietnamese mother tongue and culture funded by the Department of Education and Science through the City of Dublin Vocational Education Committee, and the provision of recreation facilities for young people. The centre operates a FAS Community Employment Scheme which involves both Vietnamese and Irish participants.

2.8.3

Profile of the Bosnian Community

- ☐ At the time of survey, there were 614 Bosnian programme refugees and family members living in Ireland. 16% of the Bosnian group are either family members or members of the Medical Evacuee group. The majority of people are either primary admissions, or those admitted under the Family Reunification Scheme.
- ☐ There is a large age range among the Bosnian group, from young infants to elderly people aged over 80. The population is predominantly young in age, with 50% being under 29 years of age. The average age of the Bosnian population in Ireland is just over 30 years of age.
- ☐ The proportion of males to females among the Bosnian community is approximately 50:50, for both children and adults.
- ☐ Within the Bosnian programme refugee population, approx. 10% are of primary school-going age, approx. 10% are of secondary school-going age, while 55% are within the workforce age range. Less than 5% are over the age of 66.
- ☐ The Bosnian Community Development Project was established in January 1995 by the Refugee Agency, with the support of the Irish Refugee Council, Refugee Trust, and a number of interested individuals. The role of the project is to provide community services and a resource centre for the Bosnian community in Ireland, and to assist them in gaining access to training and employment. A FAS-funded Community Employment Scheme was established, and was subsequently enhanced through funding under the E.U. Horizon-Integra Programme. There is now a wide range of services available to members of the Bosnian community, and plans are being made for further development of the project.

Chapter 3

Literature Review

3.1 Introduction

The refugee experience has wide-ranging social and psychological repercussions for all parties concerned, including family and friends remaining in the country of departure, the host country which receives the refugees, and the international, national and local agencies and services which become involved at the various stages of flight and resettlement. However, the primary implications are for the refugees themselves, and their families. Under any circumstances, leaving one's home to commence life in a new culture is a major life event. Under the circumstances experienced by many refugees, when 'flight' is the only viable option for survival, and the pervasive theme is the loss of what is familiar - family, friends, home, livelihood, social status, and ease of communication - the implications can indeed be profound.

One of the stages at which these implications are made manifest is during the resettlement process in Ireland. Resettlement is a complex process that requires consideration at the physical, psychological, and social levels. The process, illustrated in Figure 1, can be conceptualised as a dynamic interaction between the *opportunities* available in the new country, the individual's *personal capacity* to cope with the new set of circumstances, and the *adaptation strategy* which is chosen by individuals and their cultural groups.

Figure 1 Some Important Elements of Successful Resettlement

Successful Resettlement	Is a function of...	Availability of opportunities and support within host society	+	Appropriate Adaptation Strategies	+	Personal Capacity to cope and adapt to new circumstances
----------------------------	---------------------------	---	---	---	---	--

The present chapter further describes the resettlement process in the context of the overall refugee experience. An outline is firstly presented of the various stages of this experience. The resettlement phase is then examined in some more detail, and an outline presented of some of the sources of stress for the refugee. This is followed by an examination of two of the factors outlined above in Figure 1- **Adaptation Strategies** and **Personal Capacity**. Finally, the resettlement process is considered in terms of possible outcomes - the different types of **Acculturation** that can occur.

3.2 Stages of the Refugee Experience

The issues that determine the well being of refugees and the extent to which each individual will successfully resettle do not simply begin when the person arrives in the host country. Each person's resettlement is influenced by the impact that the entire refugee experience has had on that person. It is worthwhile to consider at this point the research literature on the various stages of being a refugee, and to examine some of the social and psychological factors that can influence the well being of the refugee during

these stages. While the Bosnian and Vietnamese groups which are the focus of the present research have become refugees in different decades, and in very different parts of the world, their experiences can be summarised using the same temporal model.

3.2.1 *Pre-Flight*

There are many reasons why refugees flee their homes and countries. For example, in the context of Ireland's programme refugees, some have left their home countries due to the life-threatening circumstances of conflict. Others have fled as a result of political or religious oppression, while still others have left their homes to come to Ireland under the Family Reunification Scheme.

Considering this diversity of pre-flight circumstances, it is important to remember that in most cases, whatever the objective conditions might have been, they were perceived subjectively as unbearable, and resulted in the refugee's ultimate decision to leave. Such circumstances may include medical difficulties, death of family members and friends, destruction of the family unit, threats to physical safety, lack of basic necessities of survival, destruction and loss of property, and ethnic cleansing, among others. Ben-Porath (1987) indicates that the circumstances that are experienced by refugees prior to departure are in many cases sufficient to cause major adjustment difficulties in and of themselves. Of course, leaving one's home is merely the first step in a sometimes-treacherous journey to eventual safety.

3.2.2 *The period of flight*

Experiences during this period obviously vary depending on the prevalent political and social circumstances. For some, it involves boarding a flight directly to Ireland. For others, it can involve long and hazardous journeys in difficult circumstances. These journeys may take hours, days, weeks, or even months before the refugee finally arrives in Ireland. It may require travelling through zones of conflict or other danger. It can involve long periods spent in hospitals, prisons, or refugee camps. It may involve forging documents, bribing officials, spending one's life savings, hiding and concealing, and generally employing one's survival resources to the limits.

3.2.3 *The period of arrival and resettlement*

Again, refugees have a wide variety of experiences during this period. Some may be arriving to a country of which they know nothing, whose language they do not speak, and whose social, political and cultural ways are alien to them. Others may be well informed about Ireland, may be already familiar with the culture, the language, or the general social systems. Some may benefit from practical and emotional support provided by family members already living here, while others arrive in Ireland on their own, knowing nobody.

3.3 Challenges in a new environment

Refugees resettling in a new country face many complex changes in order to adjust to their new situation. This section briefly describes the nature of some of these changes, and looks at the impact that these can have on the individual.

3.3.1 *Spheres of Change*

Berry (1991) has identified seven primary spheres within which change can be experienced:

- (a) *Physical changes* - including, for example, a new climate, a new living environment, exposure to new levels of urbanisation, often with greatly differing infrastructures and technologies from what were previously familiar.
- (b) *Biological changes* - these may occur due to new nutritional status, as a result of different basic foods; the encountering of new diseases; new medical technologies and drugs, etc.
- (c) *Political changes* - these may involve exposure to new political ideologies, systems, and organisational structures, along with changes in one's legal status.
- (d) *Economic changes* - consisting of people moving away from traditional pursuits towards new forms of employment, often necessitating further education and training, or re-skilling. Upon arrival in the host country there can often be substantial changes (in either direction) in standard of living for the refugee.
- (e) *Cultural changes* - whereby social norms, taboos, and lifestyles change, along with the diminishment or replacement of original linguistic, religious, educational, and technical institutions.
- (f) *Social relationships* are altered, involving changing inter-group and inter-personal relationships.
- (g) *Psychological changes*, at the individual level, almost inevitably take place, including changes of identity, changes in values and attitudes, abilities, motives, and goals.

3.3.2 *Language - New and Old*

One of the greatest challenges facing refugees during resettlement is that of living in a society which speaks an unfamiliar language. This particular area of need for programme refugees in Ireland has been researched more than others have. In a comprehensive review of the language needs of refugees, Little and Lazenby-Simpson (1996) identify that refugees may experience greater difficulties in second-language acquisition because of their experiences. This includes possibilities of traumatic experiences and disrupted education before coming to Ireland, and issues such as disorientation, family concerns etc. after arriving here. Quinn (1995) identified that within the Bosnian community in Ireland, women and the elderly were particularly vulnerable due to their difficulties in attending classes and learning English.

Those children who have been born in Ireland into families where the language used in the home is predominantly or exclusively the parental mother tongue also experience difficulties in second-language acquisition. Little and Lazenby-Simpson (1996) identify that such children will frequently exhibit incorrect language structure, a limited

vocabulary, and incorrect pronunciation. Consequent difficulties may also arise in understanding native speakers of English. For children in particular, this will prove to be quite detrimental to their progress in school, and frustrations can manifest themselves behaviourally either through 'acting out' or through withdrawal from teacher and peer interaction.

Since age is an important factor in language acquisition, it often happens that a younger family member will develop proficiency in English much more quickly than older members of the family will. This can lead to role reversals within the family structure (Matsuoka, 1990) where a young person will take on a significant level of responsibility. Another relatively common experience occurs when family members without adequate command of functional English develop a dependency on those more able in the language. This can lead to an unbalance, and resultant tensions, in the dynamics of family relationships.

Matsuoka (1990) identified another prominent issue involving language and culture acquisition. Differential rates of change will often result in the younger generation acquiring the language and social norms of the new society much more rapidly than the older generations. This may lead to significant inter-generational tensions when the younger generation is perceived as neglecting or abandoning traditional values and norms, and the mother tongue. Little and Lazenby-Simpson (1996) identify the maintenance of mother tongue and traditional culture as being of vital significance in defining identity, and facilitating communication with other members of their community. The issue of maintaining the ability to relate to and communicate with one's culture of origin holds particular relevance for refugees when they are considering the prospect of voluntary repatriation. Older family members in particular are often aware of the changes in attitudes expressed towards refugees or migrants by those who remained in the country of origin. In Vietnam, for example, the term '*Viet-Q*' holds a powerful social meaning as a term for differentiating those living abroad in the Western world from those who stayed at home.

3.4 The Impact on the Individual

3.4.1 *Strategies of Adaptation*

Upon arriving in Ireland, programme refugees face the challenge of having to adapt, on many levels, to a myriad of new circumstances. Adaptation to a new environment can be either positive or negative, and depends to some extent on the attitude of the person to having to accommodate to new circumstances and culture. There may be many reasons for liking or disliking the new environment, and these reasons will generally tend to be subjective. According to Westermeyer, there are three quite distinct types of adaptation for any migrant:

1. **Resistive Reaction**; occurs when an individual reacts against the new environment.
2. **Adjustment**; occurs when an individual changes in order to accommodate the new culture.
3. **Withdrawal**; a removal from the adaptive arena, through either forced exclusion or voluntary withdrawal.

The strategies of *resistive reaction* and *withdrawal* very often necessitate the presence of a viable alternative to the host country's dominant culture. The smaller the culture of the host society is in relation to the culture of origin, the more likely it is that adjustment will be the chosen strategy of adaptation. In the case of programme refugees in Ireland, who form a tiny numerical and cultural minority within a largely mono-cultural society, it is safe to claim that the predominant strategy of adaptation is adjustment. The level of

adjustment, of course, varies greatly from individual to individual and from group to group. As we will see later, it also depends very much on the individual being able to maintain his or her own traditions or culture, at least to some extent. In this sense, Irish society has a hugely important role in facilitating the adjustment of programme refugees.

3.4.2 *Coping with the Stress of a New Environment*

No sphere of the individual's life is left untouched by the physical, social and psychological demands of adjusting to a new environment. Having considered the particular demands that are made of the individual during acculturation, it is worthwhile to look at how the individual might cope with such demands.

It is reasonable in the first instance to imagine that demands of this magnitude are to a greater or lesser extent stressful. Cox (1997) suggests that stress can best be understood as 'part of a complex transaction between the person and his environment'. Lazarus states that 'the intensity of the stress experience is determined significantly by how well a person feels he/she can cope with an identified threat. If a person is unsure of his/her coping abilities, they are likely to feel helpless and overwhelmed.'

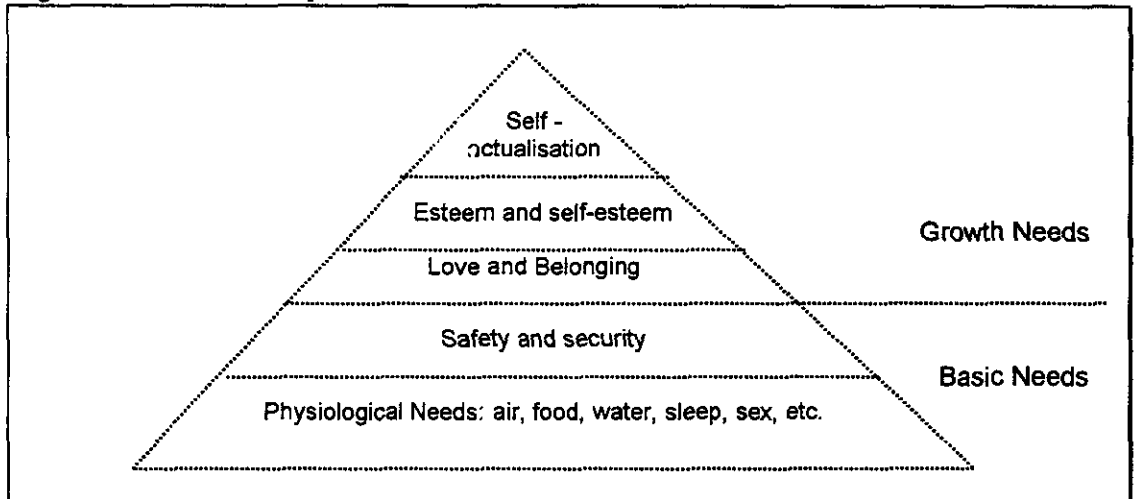
Modern stress theories emphasise the interaction of the person and his or her environment. Cooper and Cummings (cited in Earnshaw and Cooper, 1996) explain stress using the following equilibrium model:

- (a) Individuals for the most part try to keep their thoughts, emotions, and relationships with the world in a 'steady state'.
- (b) Each factor of a person's emotional and physical state has a 'range of stability' in which that person feels comfortable. On the other hand, when forces disrupt one of these factors beyond the range of stability, the individual must act to restore a state of comfort.
- (c) An individual's behaviour, aimed at maintaining a steady state, makes up his 'adjustment process' or coping strategies.

Stress is defined as any force that puts a psychological or physical factor beyond its range of stability, producing strain within the individual.

Maslow originally developed his model of motives (Figure 2) as a means of explaining human behaviour on a macro level. While considered somewhat over-simplified, the model is still widely used to outline the levels of needs which individuals have. It may be particularly useful to conceptualise the resettlement needs of refugees using this model.

Figure 2 **Hierarchy of Needs**



The most basic needs are represented on the lowest level of the hierarchy. These include physiological needs, medical needs, and security and safety needs. In the circumstances which refugees find themselves during times of conflict, these basic needs are very often unmet. The fundamental tenet of the model is that while the basic human needs are not being met, there is little chance that the person can meet higher-level needs. Such higher-level needs include one's psychological and emotional well-being, education, training and employment needs, social and personal relationship development, and ultimately, 'self-actualisation', which is an idealistic state of personal development.

This model is relevant in the context of resettlement policy, where the refugees' first needs to be dealt upon arrival in the host country are generally the basic health and accommodation needs. It is clear that these are the priority needs of any group of people, migrant or otherwise. In reference to those who continue to live in war-torn societies, Summerfield (1995, p.365) states that "it is pivotal to recognise that the social fabric is a core target of modern warfare and in its damaged state remains the context in which large numbers of people must manage their distress and cope with their fractured lives. A basic task is to help them to sustain some social 'space' within which they can foster their collective capacities for endurance and creative survival." In terms of the support and opportunities that become available for refugees resettling in a stable society such as Ireland, it is equally essential that these fundamental needs are met, before further personal and social development and empowerment can occur to a meaningful extent.

3.4.3 *Individual Coping Factors*

Some of the main factors that contribute to individual differences in resettlement include:

- ☐ **Age** - this is consistently identified as a factor that contributes to an individual's ability to adjust.
- ☐ **Educational Background** - there is considerable evidence to suggest that those with a higher level of education are generally more capable of taking on board the change and accompanying stress.
- ☐ **Expectations** - the expectations which the individual has of the new society, and the extent to which they are met.

- ☐ **Family Support** - research shows that the support that a family system can provide is a strong buffering factor in coping with the stressors involved in acculturation.

The final two factors, below, introduce the concept of acculturation, which is described in detail in the next section.

- ☐ **Mode of acculturation** – this depends on the dynamics between the individual's wish to maintain his or her own cultural identity, and the wish to adopt cultural traits of the larger society.
- ☐ **Rate of acculturation** - there is considerable evidence to show that younger people in general acculturate more rapidly than older people. One result of this is sometimes the emergence of inter-generational conflict between parents and children, or between grandparents and grandchildren (Matsuoku et al, 1989).

3.5 Acculturation

The end result, or outcome, of the interaction between the person and the environment can be described using the model of **Acculturation**. Conceptually, acculturation incorporates the psychological aspects (such as personal capacity and adaptation strategy) and the social aspects (such as availability of opportunities and support) of adjustment by refugees to their new environment.

Celano and Tyler (1990) describe acculturation as 'the learning process through which at least some of the cultural patterns of the host country are adopted'. Redfield, Linton, and Herskovits (1936) define it as 'a cultural exchange that results from continuous, first-hand contact between two distinct cultural groups'. While originally conceived of as a group-level phenomenon, there is now also wide recognition of the individual-level phenomenon of *psychological acculturation* (Graves, 1967, in Berry, 1991, p.21).

3.5.1 Model of Acculturation

While it was previously considered that the longer a person spent in a new host country, the more characteristics of the host country he or she adopted, it is now accepted that *acculturation is a considerably more complex process than that*. In Berry's (1981, 1986) widely-utilised model of acculturation, the process begins by the immigrant gradually adopting host cultural patterns in a given domain (for example, cognition, language acquisition, etc.), until a point of conflict is reached. It is at this stage that an adaptation is made in order to resolve the conflict. The adaptive process follows one of four directions:

- ☐ **Assimilation** - this is the continuous move towards the dominant culture, whereby one's original cultural identity is relinquished. The concept of the 'melting pot' can be used to illustrate the outcome of assimilation, whereby non-dominant groups are absorbed into established dominant groups, creating a new society.
- ☐ **Integration** - this is a balanced synthesis of the two cultures, whereby there is some adjustment to become part of a larger societal framework, while at the same time there is some maintenance of the cultural integrity of the original group. In this case, ethnic groups retain a distinguishable identity, while co-operating within a larger social system.
- ☐ **Rejection / Separation** - this is a process whereby the traditional culture is reaffirmed, at the expense of the host culture. Depending on which group has the power to

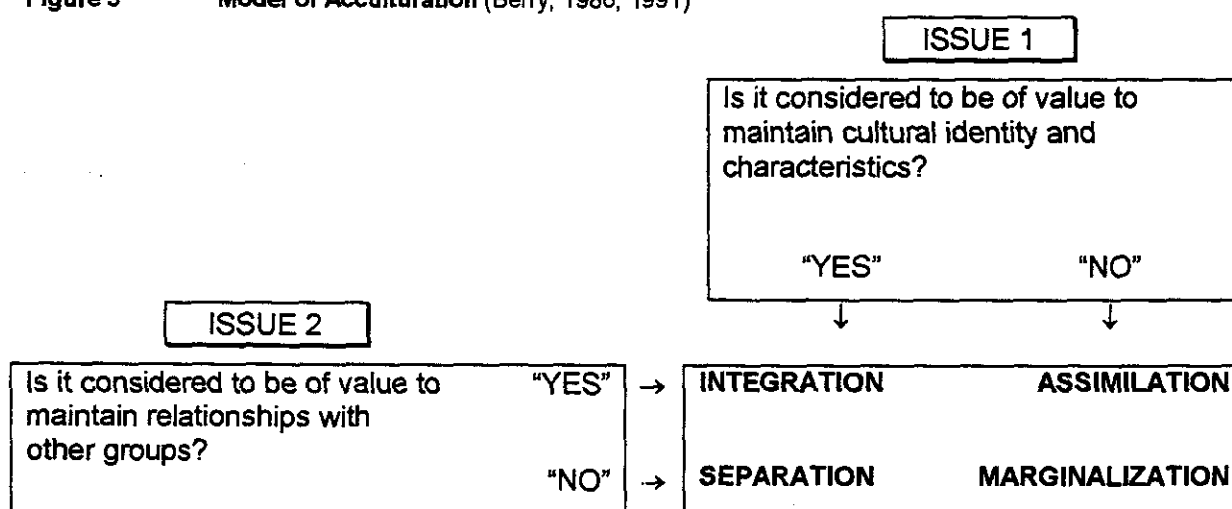
determine the outcome, it can be the choice of maintaining a cultural independence by the non-dominant culture; or it can be the segregation of the non-dominant culture by the dominant.

- ❑ **Marginalisation:** In certain cases, the person or group can lose cultural and psychological contact with their traditional culture, and with the larger society within which they now live. This can be initiated by either side, and is characterised within the marginalised group by feelings of alienation, loss of identity, and a general acculturative stress.

(Berry, 1986)

Figure 3, below, illustrates the acculturative outcome as an interaction between two issues - the decision to maintain one's original cultural identity and characteristics, and the decision to relate to other groups.

Figure 3 Model of Acculturation (Berry, 1986, 1991)



3.5.2 Acculturation and Resettlement Policy

Acculturation (of individuals and groups) is a dynamic and complex interaction between the person, the new group and the host country. In other words, the acculturation trends within a country are determined in part by the host or larger society, and in part by the minority groups within the society. At a social level, the host country affects acculturation trends through the policies it operates in relation to refugees. In Ireland, different strategies for the provision of support to programme refugees have been implemented at different times.

An interesting case example relates to housing location policy. During the period 1979 to 1980, when the initial group of Vietnamese arrived here, the policy implemented by the authorities was to re-house this group in various locations throughout the country. Consequently, groups of Vietnamese were to be found in Portlaoise, Waterford, Tralee, Sligo, and Dublin. There were several justifications for this policy at the time, prominent among them being the belief that this policy would prevent the Vietnamese community in Ireland becoming ghettoised. Referring to the model of acculturation outlined above, this would appear to be a policy that was based largely on a wish to encourage assimilation of the Vietnamese community in Ireland¹.

¹ McGovern (1990) gives a detailed case study of how the resettlement approach (particularly in terms of education) impacted on the Vietnamese community in Ireland during their first decade here (1979-1989).

However, over time there was a sizeable voluntary migration of Vietnamese families away from many of the original locations into Dublin (McGovern, 1990), where the majority of the Vietnamese community was to be found. Rather than leading to the formation of Vietnamese ghettos, this re-congregation appears to have served to provide a supportive environment from whence Vietnamese families have developed self-sufficiency within small-sized social systems, often centred around family groups. Without such a supportive basis, the integration of a refugee community within Irish society is very difficult to achieve.

The benefits of a supportive environment are many. One of the main benefits is that of having a social support system, through the proximity and presence of family, friends, or merely those who have similar needs, and share a common language and culture. It is this same expatriate supportive environment which Irish emigrants tend to seek when they first go abroad. It is not simply for geographic and economic reasons that cities such as Liverpool, London, Boston and New York have such concentrated populations of expatriate Irish. Valtonen (1996) notes that for Vietnamese, it is generally the extended family rather than the wider expatriate community that remains the predominant and most important unit of reference and support.

More recent public policy encourages the development and maintenance of strong family and community-based links among refugee groups. In consequence, virtually the entire Bosnian community has been located in the Greater Dublin region. A further form of encouragement comes through the support provided for the establishment and funding of associations such as the Vietnamese-Irish Association, and the Bosnian Community Development Project. The emphasis placed by the Irish Government in receiving a considerable proportion of primary refugee admissions in family units, together with the operation of the Family Reunification Scheme, is further recognition of the importance for refugees of maintaining and fostering pre-existing support structures.

3.6 Programme Refugee Children

McGovern (1990) identified several areas of concern relating to Vietnamese children in the Irish educational system. Issues included the absence of resources for supporting those with poor English language skills within the educational system; the incidence of racism which many children experienced within the school environment; and the difficulties sometimes experienced by teachers in communicating effectively with pupils' parents. In general, it was felt that the largely assimilationist policy for the education of Vietnamese children meant that pupils were being 'left to sink or swim' within the system. While some individuals were excelling academically, a significant number of Vietnamese children were not remaining within the education system beyond 15 years of age, irrespective of their ability to continue with their education to Leaving Certificate standard and beyond. The McGovern report identified a need to examine the psychological adjustment of programme refugee children within the school system

In the period since McGovern's report, substantial developments have been made in the provision of refugee support services, including the establishment of the Refugee Agency, in which all relevant Government Departments participate at Board level. There have also been substantial improvements in the provision of English language support to child and adult programme refugees. Over the past few years, a Refugee Support Unit, which provides a support service to programme refugee children who are experiencing English language difficulties within the primary school system, has been funded by the Department of Education and Science. In addition, the majority of the recommendations of the report by Little and Lazenby-Simpson, including the extension of the Refugee Support Unit to pupils in post-primary education, are expected to be implemented.

Chapter 4

Research Design and Methodology

4.1 Introduction

The size of the target populations (Vietnamese and Bosnian programme refugees) and the time scale of the project determined that the research would be conducted on a *sample* of the populations. Separate research designs were adopted for the adult and for the under-18 year old section of the population. A description of each design follows.

4.2 Adult Survey

4.2.1 Research Design

The research was targeted at two distinct populations - the Bosnian and Vietnamese communities. The research was based on semi-structured interviews with a sample of adults from each community. The quota illustrated below describes those eligible for consideration for inclusion in the survey. Figure 4 and Figure 5 give a detailed breakdown of this quota into categories, based on the general hypotheses that:

- (a) That there would be some significant differences between the needs of the female and male programme refugees;
- (b) That the medevac group (patients and their relatives) from the countries of the former Yugoslavia would exhibit some specific needs distinct from other groups in the research.

The sample was therefore chosen on a *structured-random* basis: in other words, specific quotas of participants were identified for selection from within each category. A quota of 137 adults was set as a target for the research.

The adult population from which the survey sample was drawn included:

- (a) those who arrived in this country as adults under the primary admissions category;
- (b) those who arrived in this country as children under the Family Reunification Scheme and who have now reached adulthood.
- (c) those who arrived in this country as adults under the Family Reunification Scheme;

Figure 4 Target Adult Sample Size for Bosnian Community

	Primary & FRS Admissions			Medevac Patient			Medevac Relative			Total		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Population Size	174	175	349	28	06	34	10	23	33	212	204	416
Target Sample Quota:												
i. size	25	25	50	~	~	25	~	~	12	~	~	87
ii. as proportion of population category	14%	14%	14%			73%			36%			21%

Figure 5 Target Adult Sample Size for Vietnamese Community

	Male	Female	Total
Population Size	178	169	367
Target Sample Quota:			
i. size	25	25	50
ii. as proportion of population category	14%	13.2%	13.6%

The sample sizes were generated with two guiding principles in mind:

- (a) That sufficient numbers would be surveyed within each category of the sample to allow for valid statistical analysis;
- (b) That as far as possible, the ratios between sample sub-categories would be proportionate to the population sub-categories.

The predominant concern was to achieve adequate numbers of participants in each cell of the research design to allow legitimate statistical analysis of the data. The variance of the sample proportionality between categories is of secondary importance to this concern.

Figure 4 illustrates one particular sample-population ratio that warrants further explanation. Relative to other sample-population ratios, medical evacuees are disproportionately represented in the research design. There are two reasons for this. Firstly, a proportionately larger sample size of Medical evacuees was initially targeted, because this was a markedly heterogeneous group consisting of injured military personnel and civilians, who may or may not have seen themselves in very different lights, but who certainly sustained their injuries under different circumstances, and consequently may have had some different experiences. Secondly, the number of medical evacuees and relatives living in Ireland was in a constant state of flux, to the extent that between the time the research design was planned and the time the interviews were carried out, 22 of the original 54 Medical evacuees had repatriated to Bosnia. The sample-population ratio of this group (and for the relatives of medical evacuees) was consequently higher than for other groups. Statistically, the proportionally-higher representation of medical evacuees does not present any difficulties - the baseline numbers in the cell design allow for legitimate statistical analysis, and the

higher the sample size is relative to the population the more likely it is to be representative.

4.2.2 *Sampling*

Those who participated in the development and piloting of the research materials were excluded from the sampling procedure. Individual participants were selected in a random manner from within each sub-category of the design. Random selection of participants was achieved using computer-generated random number simulations. A 9-digit random number was generated for each individual from the population sub-category. Each number was ranked in order from lowest to highest, and selection was based upon choosing the *n* highest rankings required for that particular sub-category. A new selection procedure was initiated for each replacement participant required.

4.2.3 *Research Materials*

Two main instruments were used in the survey, and are outlined in some more detail below.

4.2.3 - [a] *Interview Schedule*

The primary material for the research was a semi-structured interview schedule, which was developed and piloted over several months. The schedule was developed with reference to current international research topics, and examined a comprehensive range of issues which were regarded in the Irish context as important to the resettlement process. The schedule was developed to give information, in approximate chronological order, in the following broadly-based categories:

- ☐ Background information about the research participants in their countries of origin;
- ☐ Their circumstances and experiences of becoming a refugee;
- ☐ Their experience of arriving and resettling in this Ireland;
- ☐ Their present economic, social and personal circumstances;
- ☐ Their hopes and plans for the future;

4.2.3 - [b] General Health Questionnaire

Also included was the General Health Questionnaire (GHQ-28), developed by Goldberg and Williams (1989). This was used as a measure of the incidence of psychological distress among the programme refugee groups. The 28-item version of the GHQ was used, as this provides a set of 4 sub-scales, each of which can be analysed as an individual factor contributing to psychological distress. The four sub-scales included in the GHQ-28 are:

- (a) Somatic Symptoms
- (b) Anxiety and Insomnia
- (c) Social Dysfunction
- (d) Severe Depression

Each of the sub-scales, along with the overall GHQ score, can be used as stand-alone measures, and can also be included in analyses of other, related, data which was gathered during the survey. As a screening instrument, the GHQ has been validated against the outcomes of clinical psychiatric interviewing. It is not a measure of personality traits, nor is it a diagnostic or prognostic instrument. What it does is provide a valid and reliable profile of the range and distribution pattern of psychological distress within a given sample.

4.2.3 - [c] Scoring the GHQ

There are three alternative ways of scoring the GHQ. These are referred to in the literature as

- (a) 'GHQ' scoring method [format: 0-0-1-1]
- (b) Likert scoring method [format: 0-1-2-3]
- (c) 'CGHQ' scoring method [format: *negative items* 0-1-1-1, *positive items* 0-0-1-1]

The scoring system chosen with the present programme refugee sample was the widely-used 'GHQ' scoring system.

4.2.3 - [d] Pilot Study

All materials, including the GHQ-28, were piloted on a group of Bosnians and Vietnamese (who were subsequently eliminated from the selection procedure for the research proper). The pilot study was a vital procedure that identified many cultural and procedural issues that required consideration and rectification.

4.2.3 - [e] Translation of Materials

Both the interview schedule and the GHQ-28 were translated into Serbo-Croat (Bosnian) and Vietnamese, the two primary languages of interviewing. The translation procedure involved four translators (two for each language) working independently to verify and crosscheck the translated documents against the originals. A small number of interviews were conducted in Cantonese using the schedule typed in Vietnamese.

4.3 Research Procedure

4.3.1 *Fieldworkers*

It was crucial to the success of the project to employ fieldworkers who were able to conduct the research under demanding conditions. In this regard, the following decisions were taken:

- (a) To employ native-language fieldworkers. This decision was made primarily in order to ensure that no particular linguistic group were excluded from the sampling and interviewing procedures, and also to ensure awareness of the linguistic and cultural nuances which could arise in an interview situation.
- (b) To employ fieldworkers resident outside Ireland. This decision was made primarily to encourage participation from within the target groups. Because both the Vietnamese and Bosnian communities in Ireland are small, most individuals are directly or indirectly known to each other. It was therefore felt that the recruitment of fieldworkers from within these communities would hinder the acceptance of the research project as a confidential survey. Consequently, the fieldworkers were recruited in the United Kingdom.

The fieldworkers underwent an intensive training course to familiarise themselves with the research protocol and with the formal and informal institutions and systems in the Republic of Ireland. While all three fieldworkers had valuable prior experience of working with refugees and of conducting research interviews, they also underwent a thorough training course on interviewing techniques, with an emphasis on the particular groups they would be working with.

4.3.2 *Maximising Participant Recruitment*

4.3.2 - [a] *General Marketing of the Project*

One of the more difficult tasks faced by the project staff was to maximise the participation rate of both communities. The project was initially marketed to the entire programme refugee population, primarily through

- (a) Direct contact with all family units, by circulating to each a letter endorsed by the Refugee Agency. This letter (translated into Vietnamese, Cantonese, or Serbo-Croat (Bosnian)) introduced the project by explaining the reasons behind it, the relevance and importance of the research to the programme refugees, the methodology (including the random sampling procedure) that would be used, and the fieldworkers who would be carrying out the interviews.

- (b) Promoting the research among the community leaders and community associations;

It is difficult to assess the efficacy of the circular letter to each family unit. However, the contacts made with the community associations and groups proved to be productive. Both the Bosnian Community Development Project and the Vietnamese-Irish Association responded positively to the research team, and provided support and advice regarding the planning and implementation of the fieldwork.

4.3.2 - [b] *Specific Marketing to the Target Sample*

Promoting the research to those individuals who had been randomly selected as participants was done through a series of contacts with the individuals concerned.

- (a) Firstly, an initial letter of introduction and information was sent, outlining the purpose of the research, explaining the random selection process by which the individual concerned had been chosen as a participant, describing the confidential and voluntary nature of the research, introducing the native-language field-worker who would be making a follow-up contact, and making an invitation to ring with any immediate concerns.¹
- (b) Secondly, the field-workers made a follow-up contact with each person chosen in the sampling procedure. This more direct and personal contact was usually made over the telephone, and generally provided a greater opportunity for the research team to explain the project, and to offer any reassurances that may have been required. Where the person contacted was agreeable, a convenient appointment with the fieldworker was arranged.

During this phase of contact, differences in the response styles of the Bosnian and Vietnamese communities to the concept of a research survey began to emerge. In general, the Bosnian community was quite receptive to initial requests by the fieldworker for an interview. The Vietnamese fieldworkers needed to make a greater number of contacts with those on the sample list. This trust-building contact allowed the fieldworkers an opportunity to offer adequate reassurance about the nature of the research, and to encourage participation among the Vietnamese community. Consequently, the contact time per participant was much lower for the Bosnian fieldworker. Essentially, it proved much easier to access the Bosnian sample than the Vietnamese. The reasons for these differences in response styles, and the broader implications for working with the communities, are discussed in more detail at a later stage.

4.3.2 - [c] Interview Procedure

Interviews were conducted by fieldworkers in the language of choice of the participants, and typically lasted between 1½ and 2 hours. Those who agreed to be interviewed were invited to nominate a convenient venue; participants generally chose to be interviewed in their own homes. The fieldworkers began each interview by reiterating the terms of confidentiality, the means by which individuals had been chosen as participants in the research, and the purposes of the research.

Each interview was conducted in a semi-structured format, which allowed the fieldworker to probe and explore for meaningful answers, while at the same time ensuring that questions were being posed clearly and consistently. Thus, the reliability and validity of the interview process were being carefully promoted by enabling fieldworkers to record responses in a format that was readily interpretable for analysis, while at the same time allowing the interviewer scope to deal with any cultural, linguistic, or other issues. Responses were recorded during the interview on the schedules.

Subsequent to participating in the research, each participant was sent a thank-you letter, including a gift voucher in recognition of their co-operation with the research team.

¹ This letter was one of the few ways in which the approaches made to the Vietnamese and Bosnian communities differed. While it was culturally acceptable to write directly to Bosnians identified by the sampling procedure, it was decided upon advice to make a formal written approach to the head of each Vietnamese household.

4.3.3 *Analysis of Data*

For readers who may be interested, a brief outline of the techniques and terms used in the analysis of data is presented.

4.3.3 - [a] *Statistical Testing of Data*

A large proportion of the data contained in this report is quantitative. Responses to questions tended to be categorical, based on using Likert-type scales. By this is meant that questions asked of the participants offered the opportunity to respond by selecting one of a range of given answers. For example, a typical answer set would include five choices such as;

‘Very Easy; ‘Quite Easy’; ‘Not sure’; ‘Quite Difficult’; ‘Very Difficult’.

Scoring an answer involved assigning a corresponding figure of between 0 and 4 to a response.

Analysis of the data includes tests of significance, which allow the reader to state the statistical likelihood that a difference between data scores, when examined in conjunction with a second variable, is due to chance. In this report, data is generally presented if differences are significant at the .05 probability level – in other words, if there were 5 or less chances in 100 that a result was due to chance (denoted in the tables as $p < .05$). If the probability level is even less than .05 (for example, $p < .01$ or $p < .001$), this is generally presented to the reader. Occasionally, where it is considered relevant, probability levels of $p < .10$ (meaning one chance in ten that differences in the data are due to chance) are used to present data to the reader.

Statistical analyses were carried out using SPSS for Windows, version 7.5.

4.4 Survey of Children's Social and Academic Adaptation

4.4.1 Research Design

This survey was targeted at school-going members of the Vietnamese and Bosnian communities aged between 6 and 18 years. It was decided to confine the survey to teachers' assessments of children's levels of social and academic adaptation in the school environment. This decision was taken in order to obtain the most focussed and effective measurement under circumstances of limited resources and time.

Children eligible for inclusion in the survey were:

- (a) Those who arrived in this country as children of programme refugees;
- (b) Children who arrived in Ireland under the Family Reunification Scheme;
- (c) Children born in Ireland to programme refugee parents who were admitted either as primary admissions or under the Family Reunification Scheme (secondary admissions);

The target quota that was identified was 40 children: 20 each from the Vietnamese and Bosnian communities.

4.4.2 Sampling

Simulated random numbers were generated for each member of the target population. Each number was ranked in order from lowest to highest, and selection was based upon choosing the 20 highest rankings for each group. A new selection procedure was initiated for each replacement participant required.

4.4.3 Research Materials

The Teacher's Report Form (TRF, Achenbach, 1991) was chosen to obtain teachers' assessment of the children under their care. The TRF is the teacher's version of the Child Behavior Checklist (Achenbach). It is a multi-axial assessment instrument based on teachers' reports of adaptive functioning and problem behaviours observed in the classroom environment, and is designed to be filled out by teachers who have known a pupil in a school setting for at least two months. The TRF has been validated internationally, and is one of the primary measures in use today as an instrument measuring problem behaviours among children.

While parents' and teachers' observations of a child's behaviour do not necessarily correlate strongly, teachers' observations are as valid as parents' observations in the sense that both are context-dependent, a fact that should encourage such observations of a child's behaviour to be interpreted as highly situation-specific. Achenbach (1991) outlines several important reasons for assessing teachers' reports of children's behaviours:

- (a) The school is a central developmental arena in which problems arise that may not be evident elsewhere;
- (b) School-based social and academic skills are important for successful adaptive development in our society;
- (c) Teachers are often the second most important adults in children's lives, ranking only behind parents;

- (d) By virtue of training, experience, and opportunities for observing children in groups, teachers can report aspects of children's functioning not evident to parents;
- (e) Teachers' reports are not apt to be affected by family dynamics, although they are affected by the interpersonal dynamics of the school setting;
- (f) Teachers are often involved in the referral and assessment of children for special services, both within the school and elsewhere.

During the present survey, there were several particular advantages to using a teacher rating form in preference to a parent rating form:

- (a) The gathering of data on children by survey was greatly facilitated by the fact that teachers were more used to survey completion than many of the parents would have been (as was evident from the adult survey);
- (b) Reliable reporting was enhanced by teachers consulting with colleagues, particularly in regard to a child's behaviour and academic performance in other classes, and also in regard to any referrals to remedial services or language support services that had been made for the child.
- (c) Teachers' observations are particularly relevant for children who have grown up in homes where English is generally not the first language, and where parents may not be in a position to observe the effects of linguistic difficulties on the child's socialising and adaptive functioning;
- (d) Teachers are often in a better position generally to observe the child's behaviour in situations which do not arise as frequently in the home environment - in particular socialising patterns with other children (including children of other ethnic backgrounds);

4.4.4

Survey Procedure

Once the selection process had taken place, the research team began to identify the schools and class teachers of those selected for contact.

Subsequently, the fieldworkers contacted the parents of each child by telephone to discuss the possibility of their child becoming involved in the research. Those who agreed in principle were sent a letter and a consent form (appropriately translated), which outlined to them the purpose of the research, the process by which their child had been selected, and the individual teacher whom it was proposed would complete the TRF. Parents were invited to sign and return the form by pre-paid post, either granting or denying their consent to the teacher's involvement in the research.

Once written parental consent had been obtained, contact was made directly with the schools. A letter addressed to the school principal outlined the research project, requested the assistance of the child's teacher, and presented the parents' written consent form. A research pack was included for the teacher, containing the Teacher Report Form and a letter outlining the instructions for completion of the TRF, along with a stamped, addressed envelope for return of the forms.

Once the completed TRFs were returned, they were hand-scored and age-specific and gender-specific behaviour profiles were then generated.

Chapter 5

Adult Sample Profile

5.1 Introduction

This chapter profiles the sample that was used in the adult survey. The sample is described firstly in terms of the overall programme refugee population, and secondly in terms of the target sample set out in the design phase of the research.

The participation rates are discussed with regard to several issues which may have influenced the extent to which those invited to participate were willing to be interviewed by the fieldworkers.

5.2 Participation Rates

A total of 103 adults took part in the survey. This represents 75% of the target quota of 137, and 13% of the entire Bosnian and Vietnamese adult Programme refugee population in Ireland. Figure 6, below, illustrates the sample for each community by category of admission.

Figure 6 Admission Category

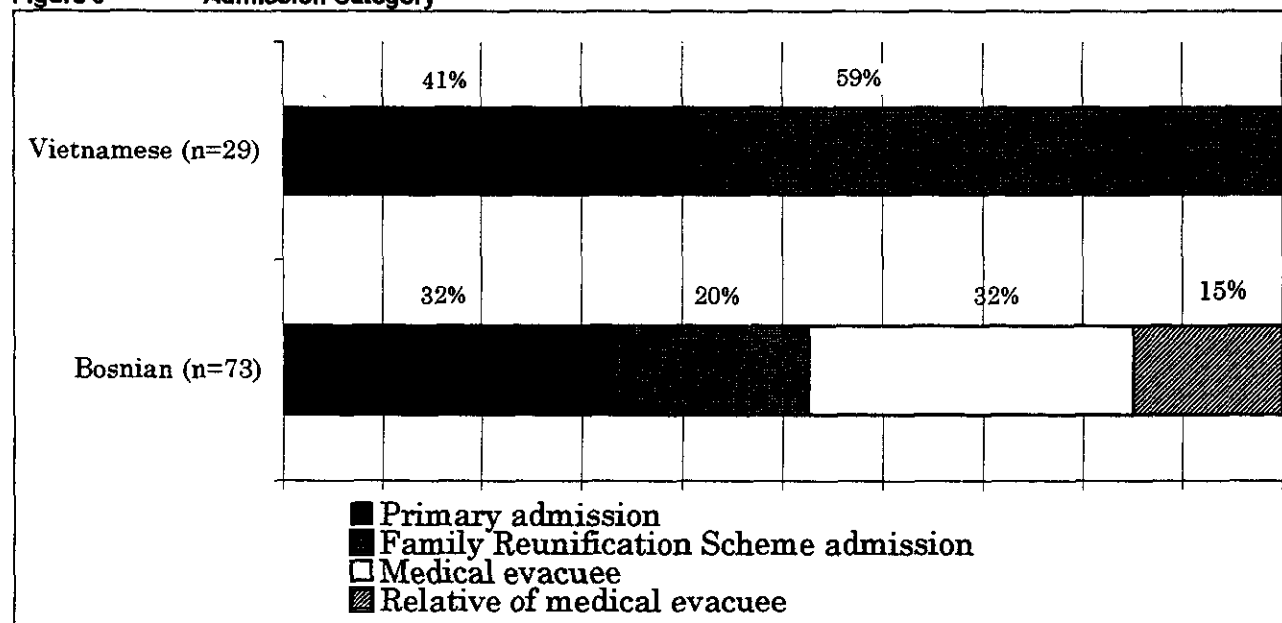


Figure 7 and Figure 8 outline the participation rates as proportions of the overall population and the original target sample size.

Figure 7 Population, Target, and Sample Sizes (Bosnian Adults)

	Primary & FRS Admissions			Medevac Patient			Medevac Relative			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
1. Population Size	174	175	349	28	06	34	10	23	33	212	204	416
2. Target Sample Quota												
a) Size	25	25	50	N/A	N/A	25	N/A	N/A	12	N/A	N/A	87
b) as proportion of population category	14%	14%	14%			73%			36%			21%
3. Numbers Contacted	25	25	50			25			12			87
4. Actual Sample												
a) Size	21	21	42	17	04	23	02	09	11	33	43	76
b) as proportion of population category	12%	12%	12%			68%			33%			8.3%
5. Participation Rate	84%	84%	84%			92%						87%

Figure 8 Population, Target, and Sample Sizes (Vietnamese Adults)

	Male	Female	Total
Population Size	178	169	367
Target Sample Quota			
size	25	25	50
as proportion of population	14%	13.2%	13.6%
Numbers Contacted (includes substitute sample list)	35	35	70
Actual Sample			
size	14	15	29
as proportion of target quota	56%	60%	58%
As proportion of population	7.9%	7.9%	7.9%
Participation Rate	40%	42.8%	41.4%

- ☐ The sample sizes represented 8% of the adult Vietnamese community, and 18% of the adult Bosnian community.

5.3 Factors Influencing Participation Rates

Participation rates among the Bosnian target sample (87%) were higher than among the Vietnamese target sample (41.4%). There are several reasons for this difference.

- (a) Firstly, the Vietnamese as a community have been living in Ireland since 1979, while the Bosnian programme refugees have been in Ireland for considerably less time. Many Vietnamese have gained Irish citizenship, and some have long since ceased to consider themselves as refugees. It was surprising for some of those Vietnamese

contacted that they should now be the focus of research into their resettlement so long after they had come to Ireland.

- (b) A second factor, which corresponds with observations made by Valtonen (1995), was that the ethos of research surveys, questionnaires and interviews seemed more familiar to Bosnians than to Vietnamese. This cultural difference between European and South-East Asian societies has been noted in many research situations. In addition, it is acknowledged that Vietnamese culture is such that people do not openly express their feelings on personal topics. Bang and Finlay (1987) state that 'In Vietnam, personal and emotional problems are dealt with within the extended family, or between very close friends, where they are kept a secret. Loss of face is involved if the outside world gets to know about it. So it is culturally alien to involve anybody from outside the family in these kinds of problems'.
- (c) Thirdly, the fieldwork with the Vietnamese was more time-consuming and circuitous than that with the Bosnian community. The strong family orientation of the traditional Vietnamese social system meant that decisions regarding participation in the research survey were frequently referred to the head of household. Also, in contrast with the Bosnian community, which was in a more dynamic state of change at the time, the Vietnamese community was relatively stable in membership. Thus, the Vietnamese fieldworkers (who had come from the United Kingdom) generated considerable more interest among the target sample than did the Bosnian fieldworker.
- (d) There were additional practical reasons for the Vietnamese response rate: the research began around the time of the celebrations of the Vietnamese New Year.

Outright refusals to participate in the research were rare. There were six refusals from the Bosnian sample group. Two of those refusals were because the people concerned were too infirm to take part. Two others wanted privacy, while the remaining two individuals were reluctant to specify a reason other than that they did not want to discuss the past. Among the Vietnamese sample, direct refusals were also rare. It was more likely that those on the sample list were difficult to make contact with, and needed considerable persuasion to participate in the research.

It is possible that a longer period of fieldwork could have contributed to overcoming some of these issues, by allowing more time for the individuals contacted to develop a sense of trust with the fieldworkers. Valtonen (1995) states that her fieldwork was greatly facilitated by the fact that among the Vietnamese community where she carried out her work, she was viewed as an independent researcher, while at the same time enjoyed a lot of respect from the community through her social work with them.

5.4 Implications for Sampling and Fieldwork

- ☐ Among those invited to participate in the research, there was a considerably higher participation rate by the Bosnian sample than the Vietnamese sample.
- ☐ For the reasons outlined earlier, the fieldwork with the Vietnamese participants took considerably longer to carry out than had been anticipated.
- ☐ Interviews with Vietnamese women were conducted primarily by the female fieldworker, while interviews with Vietnamese men were conducted by both the male and the female fieldworker.
- ☐ Because of the low participation rate from the initial target sample of 50, a further 20 Vietnamese adults were added to the sample pool.

5.5

Conclusions

This chapter has outlined the criteria for the development of the samples, and the rates of participation from those invited to take part. The participation rate of the Bosnian sample was higher than that of the Vietnamese. Nevertheless, there was a statistically adequate representation from each community. The reasons for the low participation rates are complex, and are explained by a combination of factors, including cultural issues, time restrictions on the fieldwork, and the relative length of time that both communities have been living in Ireland.

Chapter 6

Background Information on Participants

6.1 Introduction

This chapter presents a general profile of the participants. It outlines the background from which they came, and explores some of the circumstances that prevailed during the time preceding their arrival in Ireland. As well as their differing backgrounds, refugees' experiences before their arrival in Ireland have varied greatly. Some of those interviewed fled their homes under conditions made dangerous by events such as armed conflict or medical crisis. Others left relatively peaceful situations, to be reunited with family members who had already settled in Ireland. In addition, the journey to get here has varied hugely for the individuals concerned. For some, the entire process took less than 24 hours. For others, the process of coming to Ireland has taken considerably longer, in many cases lasting for several months, and in some cases years.

This type of information is important for several reasons. Firstly, it may provide an indication of some of the critical factors that influence resettlement. A consistent research finding in other countries is that a refugee's background, particularly in terms of socio-economic status and educational experience, is one of the most influential issues in determining the extent to which successful resettlement occurs. Secondly, the experience of becoming a refugee has been shown to influence subsequent well-being. All other factors being equal, the less traumatic the experience is for the refugee the more likely it is that he or she will make a good subsequent adjustment.

Much of the information presented in this chapter is presented as it was seen subjectively by the participants. It is through examining the factors that differentiate individuals, and the experiences that they may have shared, that a fuller understanding of the subsequent resettlement trends and needs of the Vietnamese and Bosnian communities may be gained. In addition, well-informed background profiles of the communities can contribute towards the planning and development of services that more effectively meet the needs of those who use them.

6.2 Place of Origin - Urban / Rural Profile

The data shows that the vast majority both of the Bosnian and Vietnamese participants come from urban or suburban backgrounds. Less than 10% of both groups come from rural backgrounds.

- ☐ Figure 10 illustrates that 77% of the Bosnian sample come from population centres of 10,000 or more. One third originally come from Sarajevo, 40% from towns in Eastern Bosnia, 10% from Banja Luka, and the remainder from various other regions of Bosnia.
- ☐ Among the Vietnamese sample, the figure is even higher - all participants come from towns / cities with a population of at least 10,000. Of these, 66% come from large urban centres of 100,000 or more in population. The other one third come from towns of population between 10,000 and 50,000. Nine come originally from Saigon, seven from Hai Phong, and the remainder from various other parts of Vietnam. One individual indicated China as the country of origin.

Figure 9 Participants' backgrounds - urban / suburban / rural

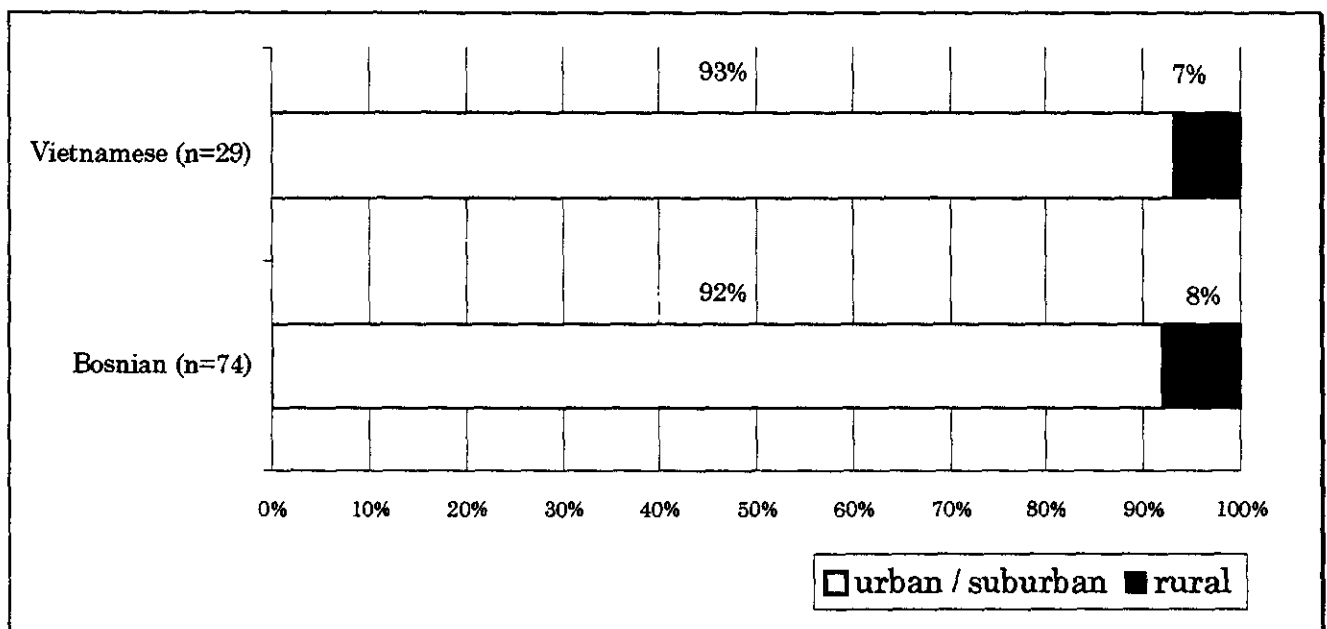
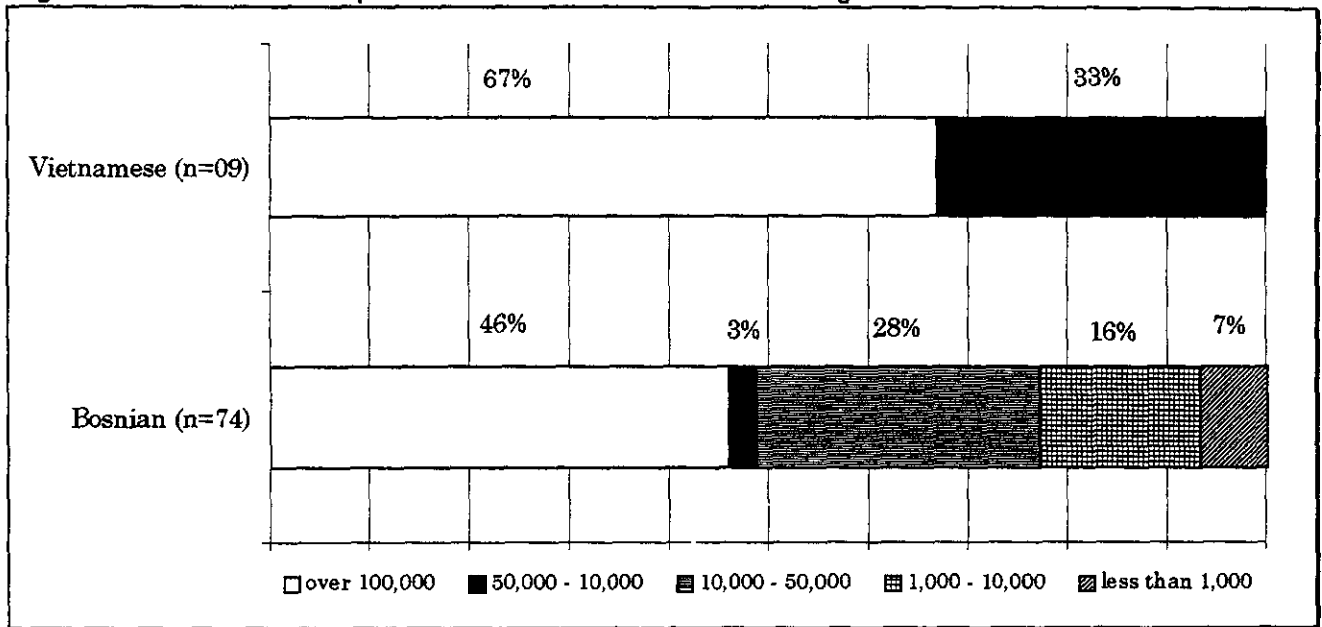


Figure 10 Estimated Population of Interviewee's home town / village



6.3 Age at time of Departure

Participants were asked what age they were when they left their homes and became refugees.

- ☐ Of those Vietnamese participants who were part of the primary refugee admission in 1979, the majority of the sample (63.7%) were under the age of 18 when they left their home for the first time. On the other hand, the majority (76.5%) of the Vietnamese participants admitted under the Family Reunification Scheme were adults between the ages of 18 and 55 years when they left their homes.
- ☐ The majority of the Bosnian participants were aged between 18 and 55 when they left their home. Only eight (11%) were older than 55 years.

6.4 Educational Background

Those who participated in the research were asked about the highest levels of education that they had achieved prior to arriving in Ireland.

- ☐ Those who arrived in Ireland from Bosnia generally have a high standard of education (illustrated in Figure 11). 70% had been to secondary school or higher. 21% were attending or had attended third level education before coming to Ireland. Three people had never received formal education.

Figure 11 Bosnian Refugees Education Levels prior to arriving in Ireland

Highest Education Level	Number of Participants	%
Bosnian First Level / Elementary	17	25.3%
Bosnian Vocational School	16	23.8%
Bosnian Grammar School	17	25.3%

Bosnian Third Level	14	20.9%
No Formal Education	2	3.0%
Other	3	4.5%
Total	67	100%

- ☐ While it is difficult to make direct comparisons between the education systems of two very different countries, at two distinct points in time, it appears that the educational circumstances of Vietnamese refugees who arrived in Ireland (presented below in Figure 12) were quite different from the picture painted above of the Bosnian group. There are indications, particularly among the nine participants who were children when they left Vietnam, of an interrupted educational experience. It is highly likely that the protracted war in Vietnam was the major contributing factor to this situation. Among participants who were adults when they left Vietnam 50% had primary education, a further 25% had secondary education, with 16.7% (2 individuals) having received third level education.

Figure 12 Education Levels prior to arriving in Ireland (Vietnamese Participants)

Highest Education Level	Adults at time of Departure	Children at time of Departure
Vietnamese Primary	6 (50%)	
Vietnamese Second Level	3 (25%)	
Vietnamese Third Level	2 (16.7%)	
No Education	1 (5.6%)	1
Other	0	1
Missing Cases	6	7
Total Valid Cases	12 100%	2

By the time they arrived in Ireland, a large proportion of the Bosnian and Vietnamese samples had already achieved qualifications.

- ☐ Of the 54 Bosnian participants who reported having qualifications prior to their arrival in Ireland, 21 had a school leaving certificate (or equivalent), 22 had a trade or professional qualification, eight had third level degrees, and three had post-graduate degrees.
- ☐ Fifteen of the Vietnamese were aged 20 or older when they left Vietnam. Of these, seven reported having qualifications prior to their arrival: five had a school leaving certificate or equivalent, one had a trade qualification, and one had a post-graduate degree.

Participants were asked if they had been engaged in full-time education or training at the time they left their homes.

- ☐ Of the seven Bosnian participants still in education, two were at Grammar school and five were attending third level institutions.
- ☐ Of the ten Vietnamese participants still in education before they left Vietnam, seven were at primary school, while a further three were at secondary school.

6.5 Employment History

Participants were asked whether they had ever been in paid employment in their country of origin. Results from respondents aged at least 18 years old prior to leaving their country of origin were analysed.

6.5.1 Types of Employment Experience

Employment categories among Bosnian participants include -

13 skilled / manual
11 semi-skilled / manual
9 skilled / professional
8 managerial / employer
7 administrative / clerical
3 unskilled / manual
1 farmer

Employment categories among Vietnamese participants included one of each of the following -

farmer
managerial / employer
skilled / professional
semi-skilled / manual
unskilled / manual

6.5.2 Differences between Bosnian and Vietnamese Samples

- ☐ 76% of Bosnian respondents had been in paid employment at some stage, while 47% of Vietnamese respondents had been. This difference is significant at the .05 probability level.

6.5.3 Gender as a factor in previous employment history

- ☐ A Chi-square analysis (see Figure 13) shows that Bosnian men were significantly more likely than Bosnian women to have been employed prior to coming to Ireland.

Figure 13 Chi-square Analysis: Previous Employment Status of Bosnian participants

	Male	Female
Previously Employed	36	18
Not Previously Employed	4	15
LR chi-square = 11.80574 (df=1, p<.01)		

- ☐ While the sample is too small to analyse using Chi-square analysis, Figure 14 shows that equal proportions of Vietnamese men and women aged over 18 years at the time had employment experience before leaving their country of origin.

Figure 14 Chi-square: Employment Status of Vietnamese participants

Employment History	Gender	Male	Female
Previously Employed		3	5
Not Previously Employed		3	6

6.5.4

School-leaving age as a factor in employment history

- ☐ A Chi-square analysis Figure 15 shows that, among Bosnian participants who were 18 years or older when they left Bosnia, those who had left school before the age of 17 were significantly less likely to have arrived in Ireland with employment experience.

Figure 15 Chi-square: Employment Status of Bosnian participants x School-leaving Age

Employment History	School-leaving age	Aged 11 – 16 years	Aged 17 years or over
Previously Employed		10	44
Not Previously Employed		14	01

Chi-square = 33.92, d.f.=1, p<.001

6.6

Reasons for Leaving Country of Origin

This section presents data on the reasons which participants gave for having left their home countries. Among both Vietnamese and Bosnians, the reasons cited depended partly on the type of entry status with which they arrived in Ireland.

The following is a breakdown of the responses given. While answers to the question were open-ended, they were readily categorised at a later stage into response headings, although there is inevitably some overlap between some of the headings.

Each participant had the opportunity to outline as many reasons for leaving as he or she felt were relevant. **Because of this, the figures in brackets represent the percentage of responses to a particular question, as opposed to the percentage of participants giving that response.**

- ☐ Among Bosnian primary admissions, the main reasons cited include 'ethnic cleansing' (29.4%), 'physical safety and survival' (26.5%), 'to ensure the welfare of the family' (14.7%), 'out of fear' (11.8%). 34 responses were given by participants in this category. Among Bosnian participants admitted under the Family Reunification Scheme, the main reasons cited include 'physical safety and survival' (46.7%) and 'ethnic cleansing' (33.3%). There were 15 responses by participants in this category. Among Bosnian medical evacuees, the predominant reason given was 'In order to get medical treatment' (91.7% of 24 responses). Among Bosnian medical evacuee relatives, where 12 responses were given, predominant responses were 'medical treatment' (41.7%), which presumably refers to treatment for their spouses, 'family reunification' (16.7%), and 'ethnic cleansing' (16.7%).

- ☐ Among the Vietnamese primary admissions, the principal reasons (11 in total) cited by participants include 'because of the war' (36.4%), 'ethnic cleansing' (18.2%), and 'physical safety and survival' (18.2%). Among those Vietnamese participants admitted under the Family Reunification Scheme, the predominant reasons (16 in total) cited for leaving Vietnam include 'family reunification' (56.3%), and 'because of the war' (31.3%).

6.7 Causes of Concern at time of Leaving

Participants were asked to describe the concerns that they had at the time they were leaving their homes. Each person was afforded the opportunity to describe as many causes of concern as he or she wished to. **Because of this, the figures in brackets represent the percentage of responses to a particular question, as opposed to the percentage of participants giving that response.**

Separate tables are presented for the responses given by Vietnamese (Figure 16) and Bosnian participants (Figure 17), outlining the type of concerns which they faced at the time they were leaving their homes.

- ☐ Among the Vietnamese primary admissions, the chief cause of concern cited by participants was their physical survival and safety (57.1% of responses).
- ☐ Among Vietnamese admitted under the **Family Reunification Scheme**, the primary cause of concern cited was physical survival and safety (50% of responses).

Figure 16 Main causes of concern to Vietnamese participants at time of leaving home

number of responses (percentage of responses for category)	Admission category	Primary admissions.	Admitted under the Family Reunification Scheme
	Physical survival of self and family members	4 (57.1%)	5 (50.0%)
	Concern about the future	1 (14.3%)	1 (10.0%)
	Too young at the time to remember	2 (28.6%)	3 (30.0%)
	Concerns about the culture / language of Ireland	0	1 (10.0%)
	no. of participants = 16 no. of participants = 17	7 (100%)	10 (100%)

- ☐ Among the Bosnian primary admissions (39 responses), the causes of concern related to the physical survival of self and family (66.7% of responses), and concern about family members left behind (20.5).
- ☐ Among Bosnian participants admitted under the **Family Reunification Scheme**, the primary causes of concern cited included the physical survival of self and family (72.2%), and concern about family members left behind (16.7%). There were 18 responses made by participants in this category.
- ☐ Among **Medical Evacuee** participants, a total of 40 responses were given, and the primary causes of concern included concern about health (35%), the physical

survival of self and family (30%), concern about family members left behind (17.5%), and concern about the future (12.5%).

- ☐ **Relatives of Medical Evacuees** (15 responses given) identified the primary causes of concern as including 'the physical survival of self and family (40% of responses), concern about health (20% of responses), concern about family members left behind (20% of responses), concern about the future (20% of responses).

Figure 17 Main causes of concern to Bosnian participants at time of leaving home

Issue of concern to participant	Admissions Category	Primary admissions	Admitted under secondary Govt. Decision (FRS)	Medical Evacuee Patient	Relative of Medical Evacuee Patient
	Physical survival of self and family members	26 (66.7%)	13 (72.2%)	12 (30.0%)	6 (40.0%)
	Health / Medical concerns	0	1 (5.6%)	14 (35.0%)	3 (20.0%)
	Fear of being conscripted	2 (5.1%)	0	0	0
	Concern about possessions	1 (2.6%)	1 (5.6%)	2 (5.0%)	0
	Concern about family members left behind	8 (20.5%)	3 (16.7%)	7 (17.5%)	3 (20.0%)
	Concerns about the culture / language of Ireland	2 (5.1%)	0	5 (12.5%)	3 (20.0%)
Total		39 (100%)	18 (100%)	40 (100%)	15 (100%)
total no. of responses = 112 no. of respondents = 73					

6.8 State of Readiness for Departure

This section examines the extent to which participants felt ready and prepared when they were leaving their homes.

Figure 18 outlines the responses of both communities. The Bosnian sample reported being significantly less prepared than the Vietnamese community.

- ☐ Over three-quarters of the Bosnian participants felt to some degree unprepared. The rate was highest (83%) among those who came to Ireland as primary admissions. Of the 51 reported cases of being 'very unprepared', there were eight anecdotal accounts of having little or no time to make preparations. This included one person who had literally 5 minutes to get out of the house. The other reports all mentioned having only a few hours at most to leave their home. All the accounts mentioned being able to bring only a few personal belongings, or none at all ("not even my photograph album"). Those who felt they were "quite unprepared" included five participants who had had only a few days to make preparations.
- ☐ In contrast, the pattern of preparedness amongst Vietnamese participants shows no predominant trend. There is a very even spread of responses across the Vietnamese categories. Generally, those admitted under the Family Reunification Scheme felt more prepared than those who came as primary admissions.

Figure 18 State of Readiness to Leave Home x Sample Group

	very prepared	well quite prepared	Not sure	quite unprepared	very unprepared	Total
Bosnian	1.39	6.94	15.28	15.28	61.11	72
Vietnamese	24.00	12.00	16.00	20.00	28.00	25
Total	7.22	8.25	15.46	16.49	52.58	97
LR chi-square = 16.32 df = 4 p < .001						

6.9 Emotional Perceptions of Departure

Participants were asked to describe their recollection of the main feelings that they had at the time of departure from their homes.

Each participant had the opportunity to describe as many feelings as he or she felt were relevant. **Because of this, the percentages presented represent the number of responses to a particular question, as opposed to the number of participants giving that response.**

There were many more responses from the Bosnian sample (186) than from the Vietnamese sample (4).

- ☐ Among both the Bosnian primary admissions and those admitted under the Family Reunification Scheme, the main groups of feelings described were:
 - ◊ sad, depressed, grief-stricken, dejected, miserable
 - ◊ fearful, panic-stricken
 - ◊ lost, confused, concerned, insecure
 - ◊ distressed, upset, devastated, desperate
- ☐ Medical evacuees experienced many of the same feelings, but the group of fear / panic type feelings was replaced by one of anxiety, nervousness, worry, and concern. Relatives of the medical evacuees reported feeling, in particular, some of the following:
 - ◊ lost, confused, concerned, insecure
 - ◊ sad, depressed, grief-stricken, dejected, miserable
- ☐ There were a limited number of responses to this question by the Vietnamese sample (Figure 20). Among Family Reunification Scheme admissions, there were mixed reports of uncertainty, sadness, and happiness. Among primary admissions, the reported feelings (n = 4) include sadness, distress, anxiety. This is perhaps partly due to the cultural traditions of Vietnamese people, who tend to deal with emotional (and psychological) issues more privately than people from a Western culture. Bang and Finlay (1987) state that during work with an encounter group of Vietnamese refugees, it emerged clearly that disclosure and discussions about the experiences of leaving Vietnam was a painful and culturally alien experience for their groups.

Figure 19

Main feelings at time of leaving home - Bosnian Responses

	Primary Admission	Family Reunification Scheme	Medical Evacuee Patient	Medical Evacuee Relative	Overall %
Fear, panic, etc.	11	8	2	3	12.9%
hopeless	2	2	0	1	2.7%
Shocked, very surprised	2	0	3	0	2.7%
Angry, furious	5	0	1	0	3.2%
sad, depressed, grief-stricken, dejected, miserable	12	9	15	6	22.6%
lost, confused, uncertain, insecure	11	4	7	7	15.6%
Distressed, desperate, devastated	11	9	6	3	15.6%
Apathetic, numb, emotionless, empty	4	0	3	3	5.4%
worn out, exhausted	0	1	1	0	1.1%
helpless	2	1	0	0	1.6%
Anxious, worried	2	5	6	5	9.7%
In physical pain	0	0	2	0	1.1%
happy	1	0	3	1	2.7%
relieved	1	1	1	0	1.6%
hopeful	1	0	2	0	1.6%

Figure 20

Main feelings at time of leaving home – Vietnamese Responses

	Primary Admissions	Family Reunification Scheme	Overall %
Fear, panic, etc.	0	2	12.5%
sad, depressed, grief-stricken, dejected, miserable	1	0	6.3%
lost, confused, uncertain, insecure	1	4	31.3%
distressed, desperate, devastated	1	0	6.3%
anxious, worried	1	4	31.3%
Happy	0	2	12.5%

6.10 Transit to Ireland

6.10.1 Safety of Self and Family

This section examines the issue of safety for refugees as they left their homes. While no significant trends emerge from the data, it is possible to make some interesting comparisons between the responses of participants from Vietnam and Bosnia.

- ☐ Of those admitted under the **Family Reunification Scheme**, over 66% of the Bosnian participants indicated that the situation was at best unstable, and at worst very dangerous for them personally. This compares with just over 40% of Vietnamese responses from those admitted under the Family Reunification Scheme indicating such a situation. This reflects the fact that Family Reunification Scheme admissions from Vietnam have been on-going over the 17 or so years since the crisis faced by the 'Boat People' and that not everyone admitted under the scheme has necessarily fled from a dangerous situation. At this relatively early stage, all those admitted from Bosnia under the Family Reunification Scheme would have recent memories of living under war-time conditions, and this is perhaps what is being reflected in the data.
- ☐ It was of particular note that 90% of responses by Vietnamese primary admissions indicated that the situation was either dangerous or unstable for them personally. This is probably a reflection of the crisis that was faced by the 'Boat People' during the exodus from Vietnam.

Figure 21 Perceptions of Personal Safety – Bosnian Responses

	Primary Admission	Family Reunification Scheme	Medical Evacuee Patient	Medical Evacuee Relative	Overall % of Responses
Very safe	3	2	6	1	14.8%
Quite safe	9	4	7	5	30.9%
Unstable	6	4	6	4	24.7%
Quite dangerous	4	3	3	3	12.3%
Very dangerous	5	5	3	1	17.3%

Figure 22 Perceptions of Personal Safety – Vietnamese Responses

	Primary admission	Family Reunification Scheme	Overall % of Responses
Very safe	0	0	0%
Quite safe	1	9	38.5%
Unstable	5	5	38.5%
Quite dangerous	2	1	11.5%
Very dangerous	2	1	11.5%

6.10.2

Safety of Family during departure

This section examines some of the perceptions held by refugees about how safe or dangerous the situation was for their family during the flight period.

In general, Bosnian participants seem to perceive the situation for their family members between the time of flight from home and arrival in Ireland to have been dangerous.

- ☐ Over 58% of Bosnian primary admissions felt that the situation during flight was either 'dangerous' or 'very dangerous'. Another 16% felt that it was unstable. The remaining 25% felt that the situation had been quite safe for their family members during flight / departure.
- ☐ For Bosnians admitted under the Family Reunification Scheme, 60% felt that the situation had been very dangerous for their family members. Another 20% felt that the situation had been either unstable or quite dangerous overall for their family members.
- ☐ Among Bosnian medical evacuees, there were similar elevated levels of perceived danger for loved ones. The relatives of medical evacuees had the lowest reported perceived level of danger for family members. Four out of the 11 participants reported perceiving the situation to be 'quite' or 'very safe'. Two reported an unstable situation, while five reported perceiving the situation to be 'quite' or 'very dangerous'.

Figure 23 Perceptions of Safety of Family Members – Bosnian Responses

	Primary Admissions	Family Reunification Scheme	Medical Evacuees	Medical Evacuee Relative	Overall % of Responses
Very safe	0	0	1	1	2.8%
Quite safe	6	3	3	3	20.8%
Unstable	4	1	3	2	13.9%
Quite dangerous	3	2	4	3	16.7%
Very dangerous	11	9	11	2	45.8%

Vietnamese responses to the question also indicate a perception of varying extents of danger to family members during the period between leaving home and arriving in Ireland.

- ☐ This perception of danger was particularly evident among participants who arrived during the 1979 - 1980 period, 45.5% of whom perceived the situation to be 'quite' or 'very' dangerous. A further 36% of participants in this category felt the situation to be 'unstable'. Only 18% felt that the situation for family members had been 'quite safe'. Participants admitted under the Family Reunification Scheme in general indicated a higher degree of perceived safety than those who were admitted during the initial intake of 1979. The majority (66.7%) of those who participated in the research responded that they perceived the situation for other family members to have been 'quite safe'.

Figure 24 Perceptions of Safety of Family Members – Vietnamese Responses

	Primary admission	Family Reunification Scheme	Overall % of Responses
Quite safe	2	10	46.2%
Unstable	4	4	30.8%
Quite dangerous	3	0	11.5%
Very dangerous	2	1	11.5%

6.11 Interim Destinations

This section examines the itinerary that those interviewed followed after they left their homes. In some cases, programme refugees came directly to Ireland. In other instances, however, considerable time was spent travelling, often between various refugee camps.

6.11.1 *Bosnian Movements*

- ☐ Of the 74 participants from Bosnia, only 20 came directly from their homes to Ireland. All but one of these 20 were either medical evacuees or their accompanying relatives. The remaining 54 participants spent some time in transit before arriving in Ireland.
- ☐ Those in the primary admissions category were largely found within refugee camps outside Bosnia, particularly in Croatia, Serbia, Macedonia and Austria.
- ☐ Among those admitted under the **Family Reunification Scheme**, there were significant levels of internal displacement within Bosnia prior to coming to Ireland.

6.11.2 *Vietnamese Movements*

- ☐ All Vietnamese research participants admitted under the 1979 Government Decision spent considerable time in transit to Ireland. China was the first place of refuge for five people, Hong Kong for four people, and Malaysia for three people.
- ☐ Among Vietnamese participants admitted under the Family Reunification Scheme, eight came directly to Ireland from their homes, another 8 spent some time in China before coming to Ireland, and one person spent some time in Malaysia.

6.12 Conclusions

The data gathered in this section of the survey lends credence to the perception that prior to coming to Ireland, a significant proportion of programme refugees living here have experienced considerable danger and threat to their own welfare, and to that of their families. In addition, they have suffered significant personal losses – of family and friends, of culture, lifestyle, income, and property. In general, there was very little time available to programme refugees to prepare for departure. Some had only a few minutes to flee their homes.

Among the wide range of concerns felt at the time, many related to the physical safety and integrity of the family unit. Other concerns related to the imminent relocation to Ireland, and what that would hold in store. Those who participated in the survey experienced a wide range of feelings during the time that they were becoming refugees. As can be appreciated, these feelings were overwhelmingly negative in tone.

Chapter 7

Arrival and Reception in Ireland

7.1 Introduction

The research explored some of the experiences that programme refugees had when they first arrived in Ireland. For refugees who have left their homes, their culture, and perhaps their families, arriving in a new country can be a particularly disorienting experience. At this time, the refugee is generally dependent on the provisions made by others, and may feel that he or she has very little control over the situation. Nevertheless, there are many practical issues to be dealt with, including ensuring that there is food and shelter available. For many people, this business of survival must be carried out in a situation where they are dependant on interpreters in order to be heard. It is in these circumstances that a lot of refugees must begin the process of coming to terms with the events that have brought them to Ireland, and begin to look down the road at the implications of their circumstances.

7.2 Circumstances at Arrival

Participants were asked about how many family members they arrived in Ireland with.

- ☐ The majority of participants (78% of Bosnians, and 79% of Vietnamese) arrived in Ireland accompanied by friends and/or family members. Of these, the majority of Bosnian participants arrived with between one and three family members (average = 2.183, std. dev. = 1.444), while the majority of Vietnamese participants (11 primary admissions and 12 FRS admissions) arrived with between four and five family members.
- ☐ Of the three Vietnamese participants (11% of the sample) who arrived in Ireland on their own, one was a primary admission, while the other two were Family Reunification Scheme admissions. Of the 16 Bosnian participants (12% of the sample) who arrived in Ireland on their own, half were medical evacuees, four were primary admissions, two were FRS admissions, and the remaining two were family members of medical evacuees.

7.3 Initial Host

The initial host for the refugee depends very much on what type of admission category they come under.

- ☐ Of the Vietnamese primary admissions (who arrived in 1979), 75% stayed in one of the reception centres, and one quarter were hosted by other sources (including housing provided by religious orders that were involved in receiving the Vietnamese refugees). Of those who were admitted under the Family Reunification Scheme, 80% were received by family members already in Ireland, with a further 20% (three people) being received by other hosts.

- ☐ 96% of Bosnian primary admissions (all but one) stayed initially in Cherry Orchard Reception Centre. This contrasts with 93% (all but one) of Family Reunification Scheme admissions, who were received directly by family members. The one exception spent some time in the Reception Centre. 92% of medical evacuees spent their initial time in hospital in Ireland. One person spent some time initially in the Reception Centre. 73% of family members of medical evacuees spent their initial time in Cherry Orchard, with two of the remaining 3 participants spending their initial time with family members, and one spending it in hospital.

For the vast majority of programme refugees hosted initially in a Reception Centre or Hospital, experiences appear to have been very positive.

- ☐ Asked if there was anything that they had found particularly helpful during their initial stay in the Reception Centre or hospital, 87% of Bosnian participants and 100% of Vietnamese participants stated that there had been. These included:
- Being able to have one's family together,
 - Having the opportunity to learn English,
 - Having the opportunity to get used to a new way of life, and to become familiar with the local area, and how to get around,
 - Being able to meet with fellow Bosnians and develop friendships
 - Being provided with security, food and accommodation,
 - Being given practical assistance, and having health needs attended to.
- ☐ Asked if there was anything that they had found unhelpful about staying there initially, 96% of Vietnamese and 79% of Bosnian participants did not raise any issues of complaint. Issues which did arise for a minority included a lack of privacy and quiet, difficulties getting used to Irish food, and a wish to have been resettled in the community more quickly.

Programme refugees who went directly to their family on arriving in Ireland were asked about the benefits and disadvantages of having done so. Again, the results were very positive.

- ☐ 88% of Bosnian and 92% of Vietnamese participants had identified particularly helpful aspects, which included
- the overwhelmingly positive emotional benefits of being reunited with family members
 - the substantial practical and emotional support that family members were able to provide to help in resettlement
- ☐ Asked whether there were any particular disadvantages to having joined other family members immediately, only two Bosnians and one Vietnamese person had any negative comments to make. These included two cases where the accommodation was overcrowded, and one person who felt that it would have been better to be resettled independently immediately.

7.4 Sources of Support and Information upon arriving in Ireland

Those who were interviewed were asked about the sources of information and support that they received at the time they initially arrived in Ireland. It is important to remember that responses to this question obviously vary according to the resources that were available at the particular time that the person entered the country.

Participants were asked to identify the main sources of information and practical support when they first arrived in Ireland.

- ☐ Among Bosnian participants (n = 74), the main sources of support at the initial stage after arriving in Ireland included the Refugee Agency (57%), the Irish Red Cross¹ (23%); Cappagh Hospital staff (23%); Irish friends; family and relatives in Ireland; and the Cherry Orchard Reception Centre.
- ☐ Among Vietnamese participants, the main sources of support that were cited included the Refugee Agency (41% of participants); family and relatives (37%); the Red Cross (22%); Sr. Phil Sinnot² (19%); and the local parish (19%).

Asked how satisfied they were overall with the practical assistance they received when they first arrived in Ireland, participants expressed a significant degree of satisfaction.

- ☐ 69% of Bosnian and more than 70% of Vietnamese participants expressed themselves 'satisfied' or 'very satisfied' with the practical assistance they received upon arrival. Only 12% of Bosnian participants, and no Vietnamese participants expressed dissatisfaction. Between 20% and 30% of the samples expressed no definite opinion.

Asked about the sources of information which were available to them when they first arrived in this country, participants indicated the following:

- ☐ Among Bosnian participants, the main sources of information at the time of arrival in Ireland proved to be the Refugee Agency (for 46% of participants); followed by family (28%); the Bosnian community already in Ireland (27%); Irish friends (21%); and interpreters (16%).
- ☐ Among Vietnamese participants, the main sources of information that they availed of at the time they arrived in Ireland include family members (43% of participants); the Red Cross (24%); the Refugee Agency (14%); and Sr. Phil Sinnot (14%).

Asked how satisfied they were overall with the information they received when they first arrived in Ireland, participants again expressed satisfaction.

- ☐ 56% of Bosnian and 47% of Vietnamese participants expressed themselves 'satisfied' or 'very satisfied' with the information they received upon arrival, while 19% of Bosnian participants and no Vietnamese participants expressed dissatisfaction. 25% of the Bosnian sample and 52% of the Vietnamese sample expressed that they were neither satisfied nor dissatisfied.

¹ The Irish Red Cross was responsible for running Cherry Orchard Reception Centre during the initial intake of Bosnian programme refugees. This responsibility eventually moved to a Management Committee chaired by the Department of Foreign Affairs.

² Sr. Phil is a member of the Sisters of Mercy order, and has been involved in providing support to the Vietnamese community in Ireland since the first arrivals in 1979.

7.5 Conclusions

This chapter has described some of the conditions of the programme refugees as they experienced them upon arriving in Ireland.

For both Vietnamese and Bosnian participants, their destination upon arriving in Ireland is very clearly linked with the admissions category under which they are admitted.

Primary admissions almost invariably spent their initial time in a reception centre. Experiences of the reception centres were, in the main, very positive. The main benefits attached to the stay in a reception centre include being able to keep the family unit intact, the receipt of practical support from the relevant agencies, and the opportunity to learn English. A small number found the lack of privacy to be a disadvantage.

Medical evacuees generally spent their initial time in Ireland in a hospital. The majority viewed the experience as beneficial to them, while four out of the 23 participants found some disadvantages to staying there.

Family Reunification admissions generally went directly to their family members who were already in the country. Again, the participants viewed this as an almost entirely positive experience. One of the main benefits they found was in the emotional and psychological relief of being reunited with their family, and the practical support that the family could offer in assisting the new arrival to resettle.

The majority of participants were satisfied with the provision of information and practical assistance. Others did not have a strong opinion, while a small proportion expressed dissatisfaction.

Chapter 8

Housing

8.1 Introduction

This chapter looks at the housing and accommodation circumstances of the participants. There is no national or local housing strategy for programme refugees, who have the same rights and entitlements to housing as Irish citizens. However, different approaches have been taken to the housing needs of the Vietnamese and Bosnian communities, which reflect the distinct circumstances that existed on their arrival.

When the Vietnamese arrived in Ireland in 1979 they lived temporarily in one of two reception centres, the first being part of the premises of a Dublin hospital and the second a building provided by a religious order. Subsequently, some families rented accommodation acquired for them by religious orders, while the majority went to live in Local authority accommodation provided in locations as diverse as Dublin, Tralee, Waterford, Portlaoise, and Drogheda. Local authorities had been asked by the Government to provide housing for the refugees, and some of them responded positively to that request. Most of the families who went to live outside Dublin eventually returned to the capital to live.

After the arrival of the first Bosnians in Ireland it was anticipated that they would return to their homeland when the war had ended. However, as the war dragged on it became apparent that this was not to be. Because of the initial view that the Bosnian refugees' stay in Ireland would only be temporary, it was decided to follow a policy of accommodating them in private rented accommodation. The policy with regard to the housing needs of the Bosnian refugees was that, after a stay in Cherry Orchard Reception Centre, newly arrived families and individuals were registered on the local authority housing list. Pending their allocation of local authority accommodation, refugees were accommodated in the private rented sector¹. The rent for this accommodation is subsidised by means of Supplementary Welfare Allowance.

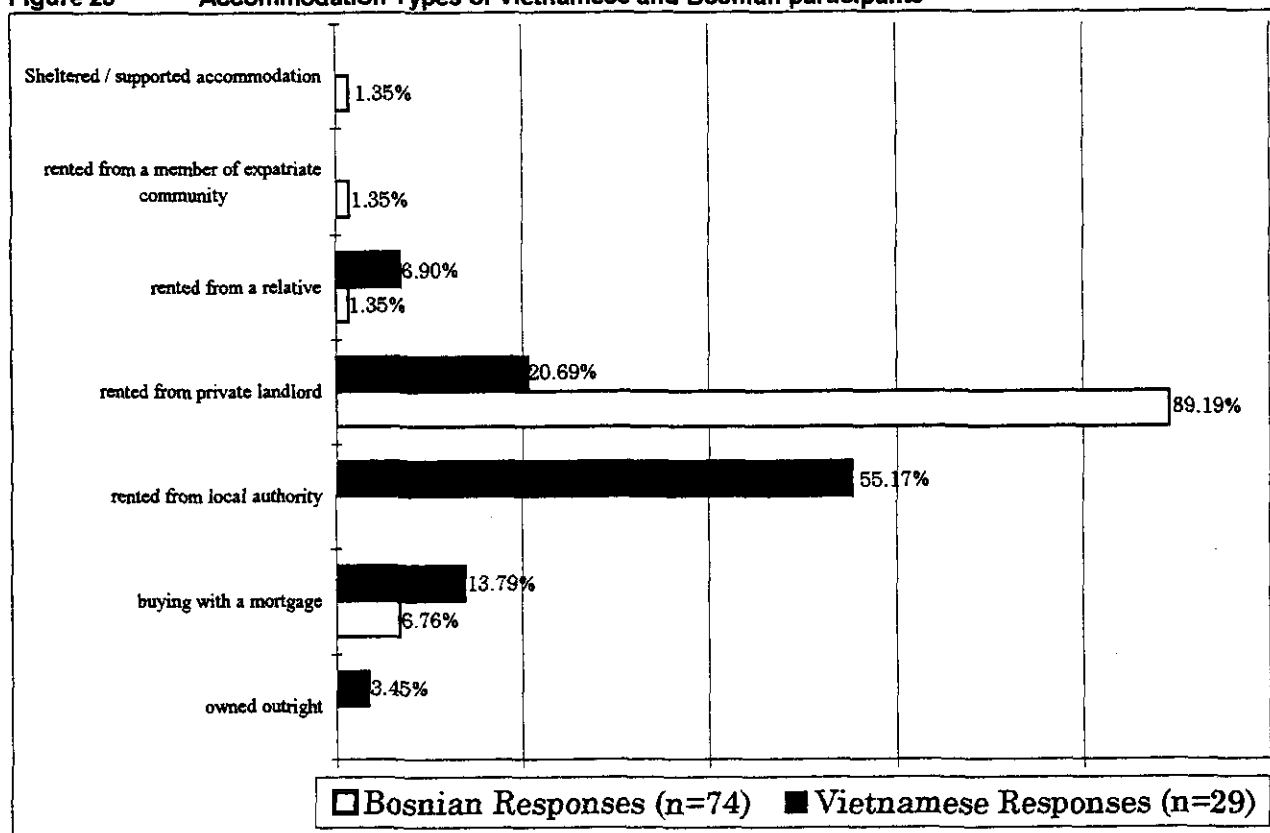
¹ Since the survey was carried out, and at the time of publication of this report, more than 20 Bosnian families have been allocated Local Authority housing in the Greater Dublin Area.

8.2 Accommodation Arrangements

The housing patterns of Vietnamese and Bosnian participants (as illustrated in Figure 25) were found to differ substantially.

- ☐ At the time of survey, over half (55.2%) of Vietnamese participants were living in accommodation rented from a Local Authority, whereas none of the Bosnian participants were living in Local Authority accommodation.
- ☐ The vast majority (89.2%) of the Bosnian sample were living in accommodation rented from private landlords (usually with a rent allowance from the Eastern Health Board). This corresponds with only 20.7% of the Vietnamese sample that were living in private rented accommodation.
- ☐ Over 17.2% of Vietnamese participants owned their home. This corresponds with 6.8% of the Bosnian participants.

Figure 25 Accommodation Types of Vietnamese and Bosnian participants²



² This data was found to correspond accurately with internal data provided by the Refugee Agency.

These differences in the housing patterns of the two communities can be explained by several factors:

- ☐ Home ownership rates differ between the communities partly because the Vietnamese sample have generally been living in Ireland for longer than the Bosnian sample, and are more likely to have had the opportunity to purchase.
- ☐ As outlined in the introduction above, the authorities have adopted different approaches to housing for the two communities. When the Vietnamese programme refugees arrived initially in 1979, it was anticipated that they would remain in Ireland indefinitely. In contrast, when the initial groups of Bosnian programme refugees began to arrive, it was not known how long they would wish to remain in Ireland, or how long the conflict in the former Yugoslavia would preclude them from returning home. Cognisant of these uncertainties, and considering the waiting lists for Local Authority housing, resettlement policy for Bosnian programme refugees at the outset was to procure private rented accommodation, with rent support provided under the Supplementary Welfare Allowance Scheme.
- ☐ This difference in housing policy may also in part explain the differences in home ownership levels among the communities. One benefit which local authority tenants enjoy is the option of purchasing one's home from the authority, and this option has been exercised by some of the Vietnamese tenants at least.

8.3 Residential Addresses

An analysis was carried out of the areas where participants lived at the time of survey. Results are illustrated below in Figure 26 and Figure 27.

The vast majority of those interviewed live in or around the Greater Dublin area. Certain resettlement trends were apparent among the Bosnian and Vietnamese communities, and are explainable in part by a combination of two factors:

- (a) Historically, at the time when the initial group of Vietnamese refugees arrived in Ireland in 1979, housing was more readily available in certain areas of Dublin, and was more readily made available by particular Local Authorities around the country. After spending time in the Reception Centres, the Vietnamese were generally re-housed in these areas. A similar scenario existed with the Bosnian community when the first arrivals came to Ireland in 1992.
 - (b) The trend, noted in the literature review, for expatriate communities to resettle in proximate areas resulted in areas with an existing population of refugees to become the favoured resettlement zones for subsequent arrivals of refugees (to the extent that Dublin 15 has now become affectionately known as 'Little Bosnia').
- ☐ The majority (54%) of the Bosnian sample were living within the Dublin 15 postal district. Another 17% were living in other areas of County Dublin, including Swords, Killiney, and Monkstown.
 - ☐ Among the Vietnamese participants, 56% were living in either the Tallaght or Clondalkin areas of Dublin.

Figure 26 Vietnamese Residential Addresses

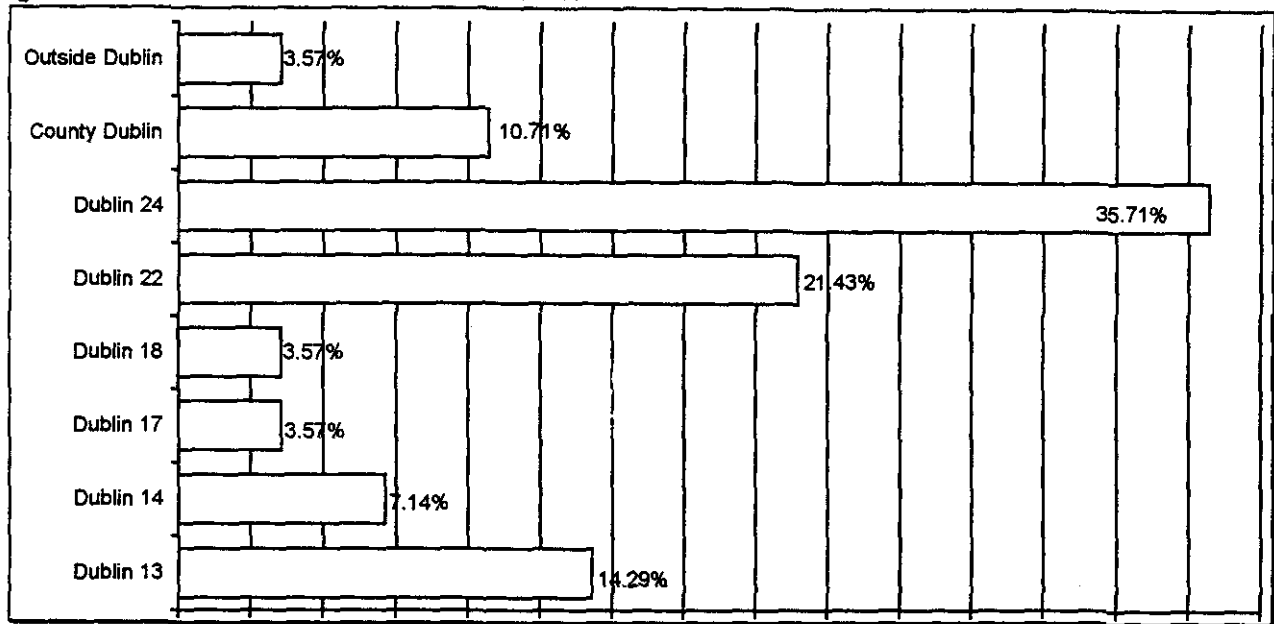
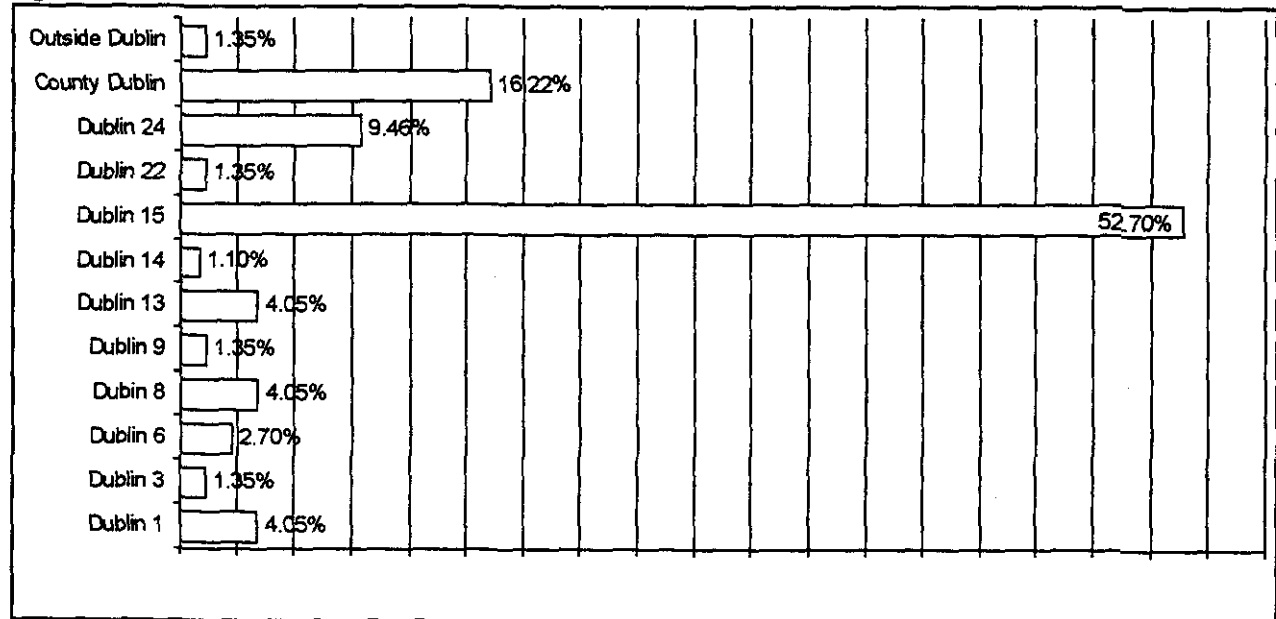


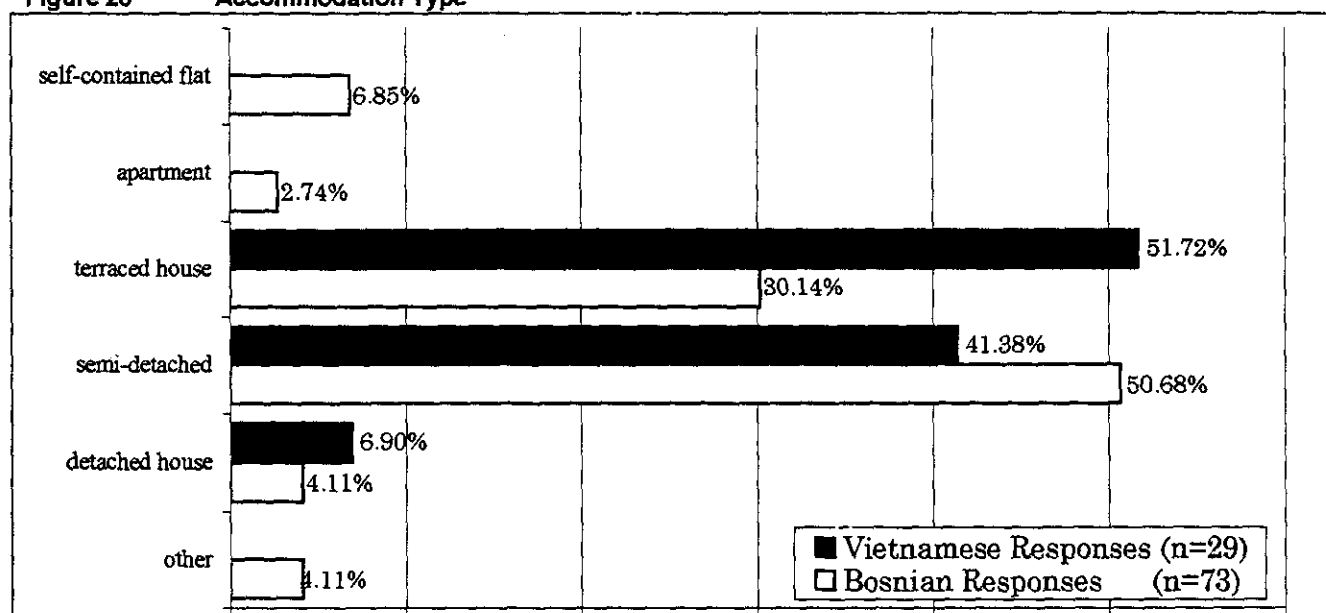
Figure 27 Bosnian Residential Addresses



8.4 Types of Accommodation

Figure 28 outlines the types of accommodation in which participants were living at the time of survey. The predominant type of accommodation for both Vietnamese and Bosnian participants is the semi-detached or terraced house.

Figure 28 Accommodation Type



8.5 Satisfaction with accommodation

Participants were asked how satisfied they felt with their accommodation, and why.

- ☐ The overall picture shows strong levels of satisfaction among both communities with the standard of housing they live in. 80% of Bosnian participants and 70% of Vietnamese participants expressed themselves either 'very' or 'fairly' satisfied with their housing. Only 3.5% of Vietnamese and 9.5% of Bosnian participants expressed dissatisfaction with their accommodation.
- ☐ The main reasons given by participants for being satisfied with accommodation included being satisfied with the standard of the accommodation, the area in which they live, and the convenience of where they live. A significant number of participants (16% overall of those who expressed satisfaction) also cited the specific factor of living in a 'peaceful' or 'secure' area as influencing how they feel about where they live.
- ☐ Less than 10% of Bosnian participants and less than 5% of Vietnamese participants expressed dissatisfaction with where they live. There were some differences between the two communities in the reasons they cited. Among Vietnamese, there are only two types of complaint: 'experiencing harassment' (four cases) and 'unhappy with the area' (two cases). Among the larger sample of Bosnian participants, there is a wider spread of complaints. These include seven participants who expressed unhappiness with the standard of accommodation, four complaints about overcrowding, and three complaints of rent being too high.

8.6 Relocation / Movement Patterns

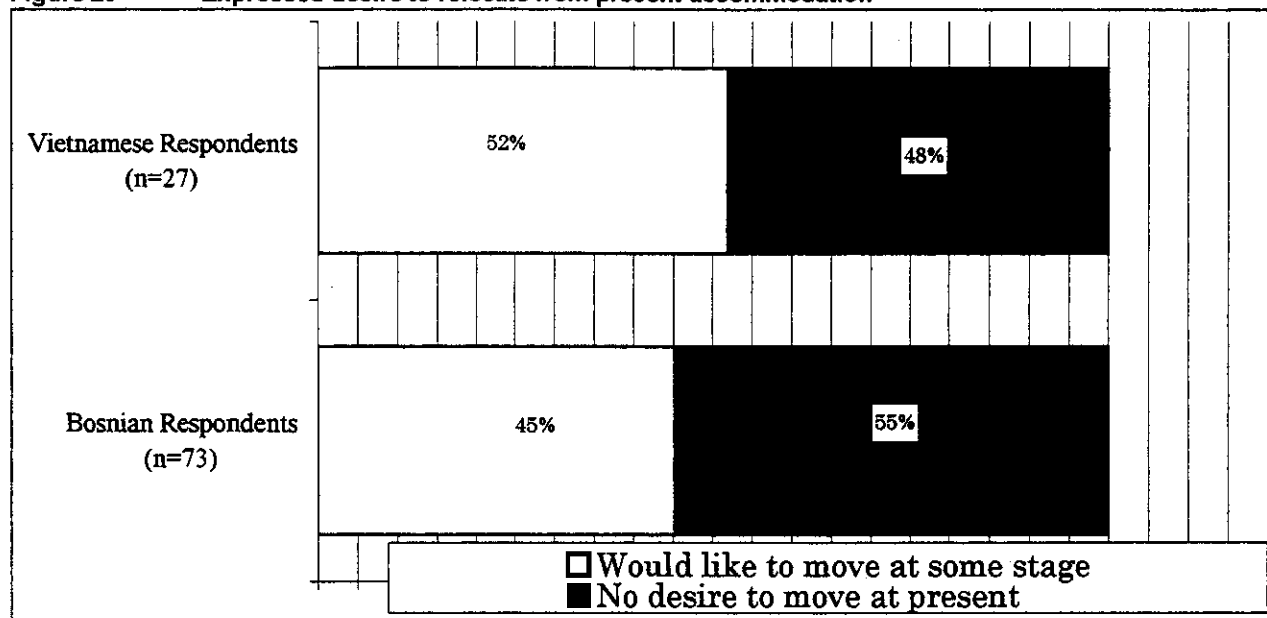
Participants were asked several questions relating to their relocation history to date, and their future aspirations.

Those who took part in the interviews appear to be settled quite well in terms of housing.

- ☐ The vast majority (approximately 80% of those interviewed from each community) have lived in between one and three places of residence since coming to Ireland. A small minority of the Bosnian and Vietnamese had lived in more than three places.
- ☐ Among the Vietnamese sample, all except one of those who have lived in more than three places of residence have been in the country for 15 years or longer. The exception is one person who has lived in six different places of residence, and has been in the country for between five and ten years.
- ☐ In general, it tends to be those who have been in Ireland the longest who have lived in the most number of places. However, two individuals who had been in Ireland for between two and three years at the time of survey had already moved five times each.
- ☐ Among the Bosnian sample, there are signs of considerable mobility among a minority of the sample.¹
- ☐ Just under half of all Vietnamese and Bosnian participants would like to move house again at some stage in the future. A variety of reasons were given for this wish. For Vietnamese participants, the main reasons cited were for convenience (to be near work or family), or to achieve a better standard of accommodation. For Bosnian participants, the main reasons cited again include the wish to improve the standard of accommodation, for employment purposes, in order to become a homeowner, or to achieve greater personal independence.
- ☐ The desire to move expressed by some participants ties up with other variables. It is not surprisingly related to their satisfaction levels with their accommodation. An interesting analysis shows that participants who have a very limited or non-existent level of interaction with their neighbours are much more likely to want to move accommodation.

¹ While the survey did not examine the issue of security of tenure, it may well have been an issue for many of the Bosnian programme refugees, who are dependent on housing support and a favourable housing market for their accommodation.

Figure 29 Expressed desire to relocate from present accommodation



8.7 Conclusion

This chapter has identified significant differences in accommodation types between the Vietnamese and Bosnian groups. Many of these differences can be explained with reference to the historical differences in housing availability and policies for primary Vietnamese and Bosnian admissions. Vietnamese participants had a higher rate of home ownership, and of local authority housing, while a higher proportion of Bosnian participants were living in accommodation rented from private landlords.

Participants from both samples have high levels of satisfaction with their accommodation. While roughly half of the participants stated that they would like to move at some stage from their present accommodation, it was found that this was generally for practical reasons, such as ease of convenience, rather than because of negative experiences.

Chapter 9

Socio-Economic Profile of Participants

9.1 Introduction

Participants were asked a series of questions about their economic status, which is clearly one of the more important indicators of successful resettlement. One of the key indicators of economic success is employment status.¹ Two questions were used to determine employment status; firstly, participants were asked what social welfare payments they were in receipt of (if any), and secondly, they were asked what their *main day-to-day activity* was.

Other, comparative questions were also included in the research protocol in order to try and gain an insight into how programme refugees are coping with their financial circumstances in Ireland, and what prospects they see in store for their futures.

Some of the challenges faced by refugees in accessing employment, including language barriers, and difficulties in obtaining recognition for qualifications, are discussed elsewhere in the report. Factors related to socio-economic status are examined later in this chapter.

9.2 Participants in Paid Employment

- ☐ The employment rates among Bosnian and Vietnamese participants in the survey are roughly equivalent, with 24.3% of Bosnian and 27.6% of Vietnamese participants reporting being in full-time paid employment.

9.2.1 Bosnian Participants

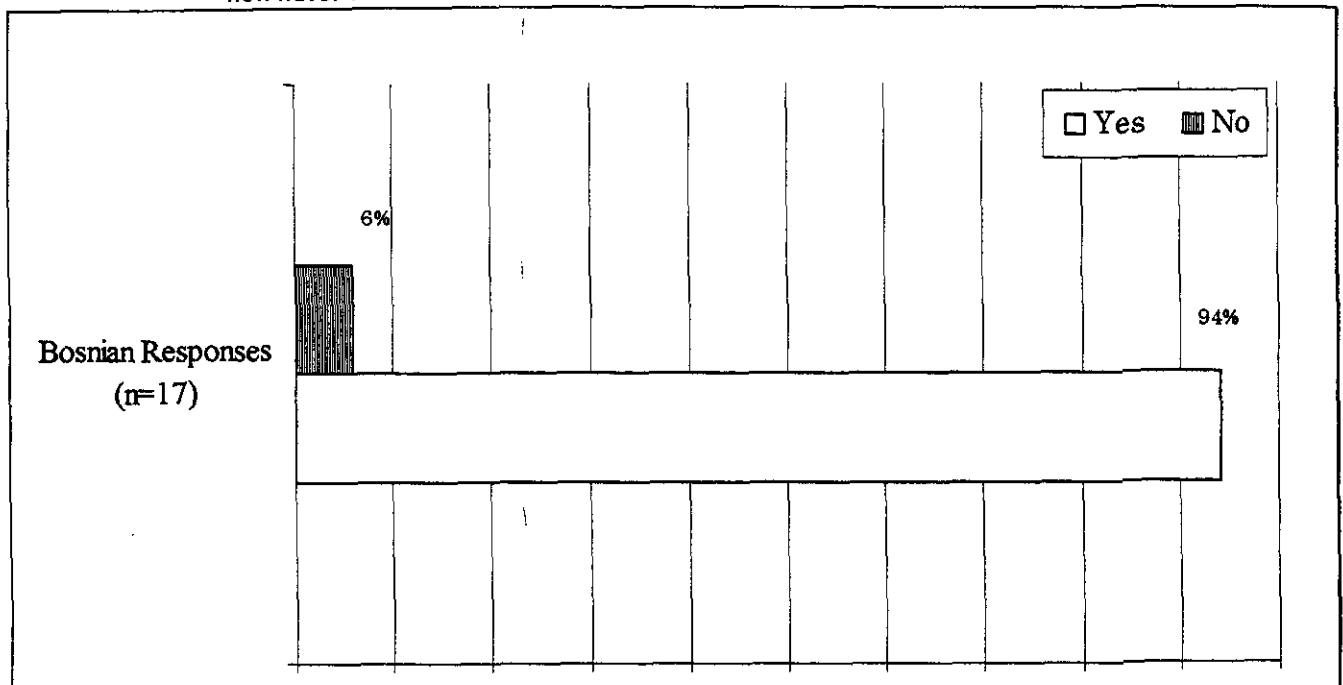
- ☐ Of the 17 participants classified as employed, 16 were paid employees (94%), with one person involved on a Temporary State Employment Scheme. None were self-employed.
- ☐ Asked about the number of hours worked during a typical working week, 53% work for between 15 and 39 hours (all female participants fell into this category). The remaining 47% work for between 40 and 50 hours.
- ☐ 62.5% of participants felt that their job was either 'very' or 'quite' secure. Another 25% felt some level of insecurity in their jobs.
- ☐ 76.5% felt that their training or education was to some degree relevant to their job. At the same time, however, Figure 30 illustrates that 94% felt that they had the skills or qualifications to do a more demanding job than the one they now have.

¹ Unemployment has been shown to be strongly related both with poverty and with elevated levels of psychological distress (Whelan et al, 1991).

Figure 30

Bosnian Responses to the question:

"Do you feel that you have the skills or qualifications to do a more demanding job than the one you now have?"



9.2.2

Vietnamese Participants

- ☐ Of the nine people who at the time of the survey were working at least 15 hours per week, two were working as paid employees in a family business, another two were working as unpaid workers assisting family or relatives, four were paid employees elsewhere, and one person was self employed. Only one person worked more than 50 hours during a typical working week.
- ☐ Of 7 people who responded to the question, none felt that their training or education was particularly relevant to the work they are now doing in Ireland.
- ☐ Two out of 7 respondents felt that they were skilled or qualified to work at a more demanding job than the one they presently have. The other 5 did not believe that this was the case for them.
- ☐ Five out of 7 respondents felt that their job was very or quite secure. The other 2 respondents did not know how secure their job was.

9.3

Participants not in Paid Employment

Significant levels of unemployment among both the Vietnamese and Bosnian participants are evident. Data pertaining to unemployment-related payments from the Department of Social, Community and Family Affairs is presented. An additional, subjective indicator is the question put to participants about their main day-to-day activity.

9.3.1

Bosnian Participants

- ☐ Twenty-one Bosnian participants were in receipt of unemployment assistance, with a further three receiving unemployment benefit. This amounted to 32.4% of the sample that was unemployed. Looking at the data pertaining to the main day-to-day activity, the majority (15 out of 24) of those in receipt of unemployment payments

describe themselves as 'unemployed'. Six describe their main day-to-day activity as 'on home duties', while one person describes himself as 'retired'.

- ☐ Of the 27 Bosnian participants classified as unemployed (including first-time job-seekers), every one is long-term unemployed (out of paid employment for longer than 12 months). The majority (77%) of those out of work have never been employed in this country.
- ☐ Those who were unemployed were quite pessimistic about their prospects over the next 12 months. Asked how good or bad they thought their chances were of finding the kind of job they were looking for over the next 12 months, 8 out of 11 participants rated their chances as 'bad' or 'very bad'. The remaining 3 had 'moderate' hopes of gaining employment.
- ☐ Several suggestions were made by participants for improving their employment prospects, including obtaining better qualifications, being given assistance in approaching employers, and improving English language ability.
- ☐ The 11 participants who were on home duties or looking after dependants had an average of 2 persons in their care on a typical day. Eight out of 10 participants were either 'very' or 'quite' satisfied with the level of services available to them. Two out of 10 participants (both of whom were themselves medical evacuees) expressed some dissatisfaction with the level of support services available to them as carers.

9.3.2

Vietnamese Participants

- ☐ Five Vietnamese participants reported that they were in receipt of unemployment assistance, with a further two in receipt of unemployment benefit. This amounted to 24% of the sample that was unemployed. The data pertaining to the main day-to-day activity of the Vietnamese sample was useful in shedding further light on this situation. Of the seven unemployed people, five stated that their main day-to-day activity was on home duties. Only one stated themselves to be 'unemployed', while the remaining individual was 'attending education / training course' (very likely, this person was attending English language training).
- ☐ Efforts are made in section 9.4.2 below to reconcile the discrepancies between the reported payments from social welfare and the descriptions of main daily activities.

9.4

Main Day-to-Day Activities

A complementary process for examining the circumstances of the participants is to look at what they described as their main 'day-to-day activities'. While this information is useful in order to profile how participants perceive their main roles, discrepancies arise between the number of participants who described themselves as unemployed and the number who are in fact in receipt of social welfare unemployment payments. Accurate levels of unemployment are more likely to be determined from reported social welfare payments. However, without access to official records, it is always difficult to determine the exact status of an individual.

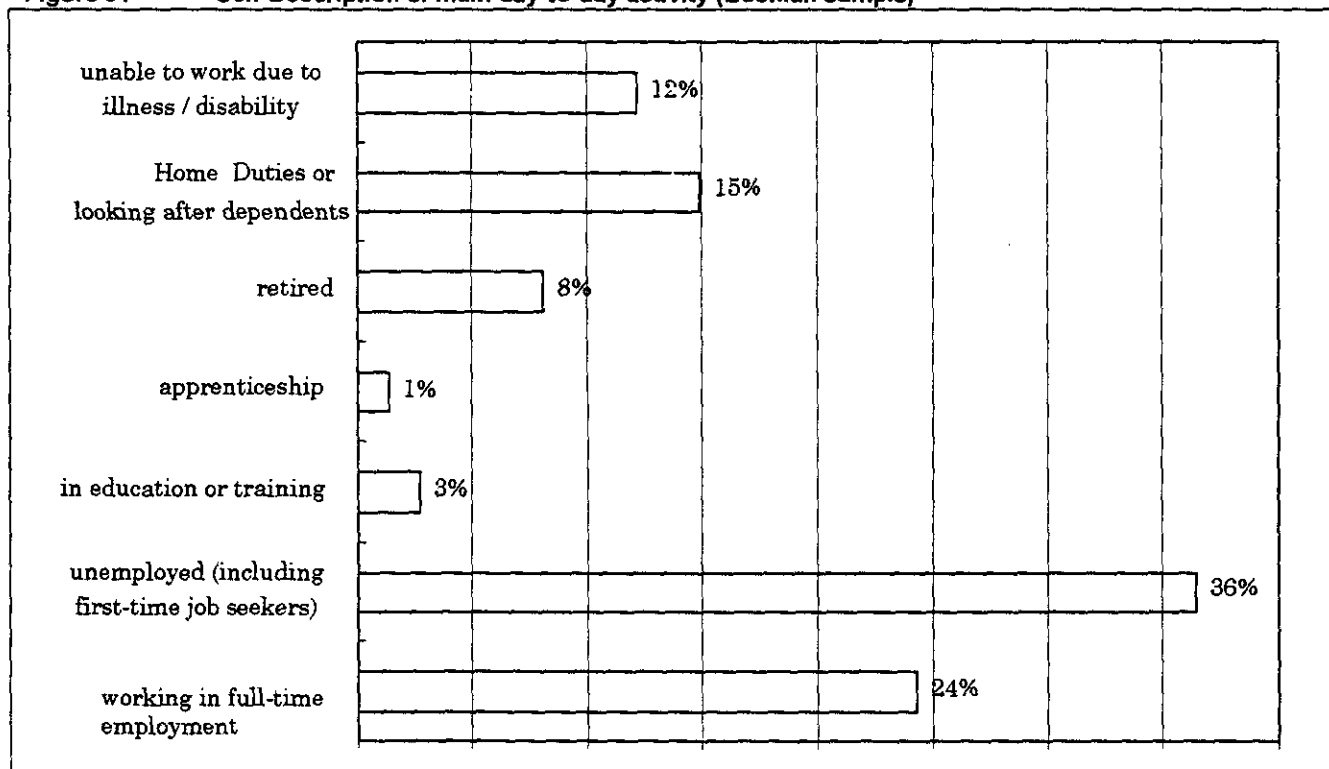
9.4.1

Bosnian Sample

- ☐ Figure 31 illustrates the trends among the Bosnian sample at the time of the survey, when a total of 24% stated that they were employed, 36% unemployed, 12% (mainly medical evacuees) unable to work due to illness or disability, three people

(3%) in education or training, and 15% on home duties looking after children or elderly dependants.

Figure 31 Self-Description of main day-to-day activity (Bosnian sample)



9.4.2 Vietnamese Sample

Among the Vietnamese sample of 29 adults, 27.6% stated that they were in full-time paid employment. 24% in education or training programmes, another 24% on home duties, while 10% (3 people) stated that they were retired. While only one person reported that they were unemployed, the data in section 9.3.2 demonstrates that seven participants from the Vietnamese sample were in receipt of Unemployment Assistance or Benefit payments. Of these, one person stated that their main day-to-day activity was 'education / training'. Five others (all women) stated that their main day-to-day activity was 'on home duties / looking after dependants'. Only one person saw himself as 'unemployed'.

There are several obvious explanations for the differences between reported social welfare payments and self-descriptions.

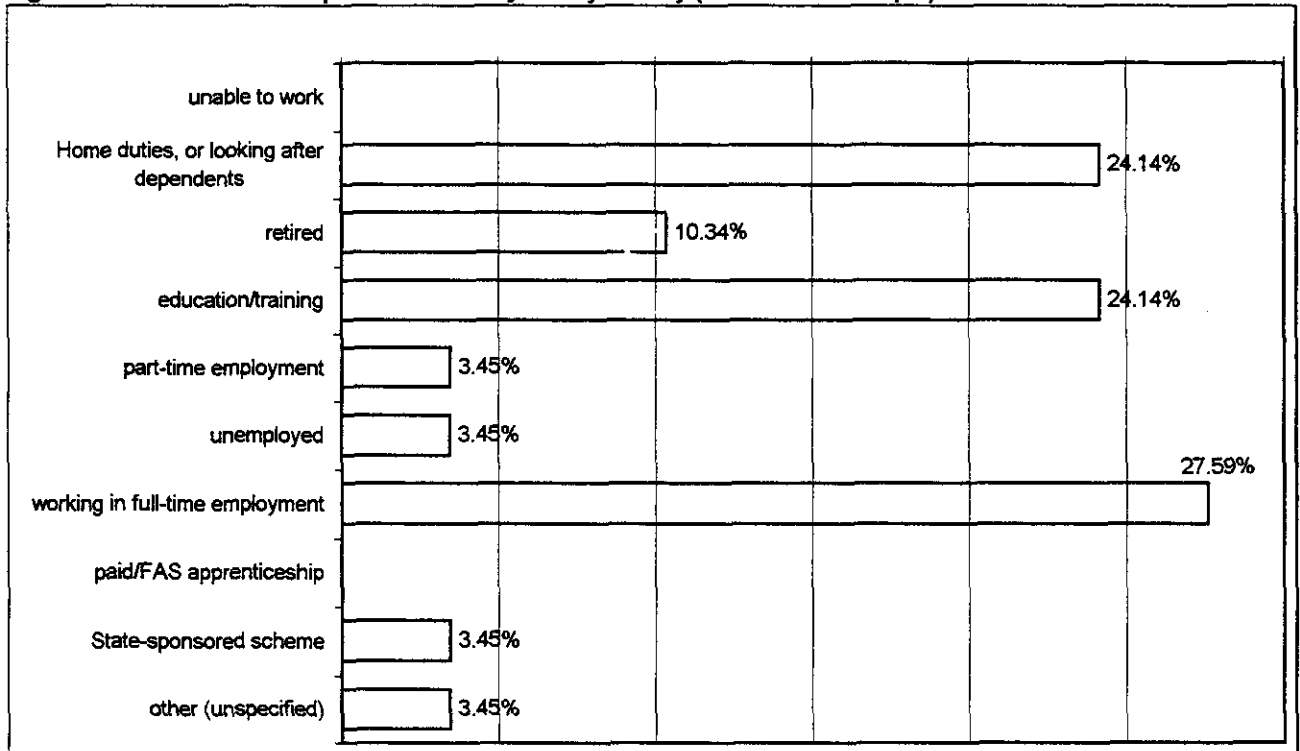
In the first place, it may be that the five women who stated that they were in receipt of unemployment benefit were actually dependant spouses of someone who is unemployed. This would explain their description of themselves as being 'on home duties'.

Alternatively, it could be that Vietnamese women who are unemployed and available for work choose to describe their main activity during the day as 'on home duties', rather than merely describing themselves as 'unemployed'. This would correspond with the observations of researchers internationally, who have noted that there is a reluctance on the part of Vietnamese adults to describe themselves publicly in ways that would reflect negatively on the family. However, a more positive way of interpreting this would be to

see it as a healthy psychological coping mechanism, where those who are unemployed adopt a definite role in their day-to-day lives, despite their circumstances.

There is also a possibility that participants who reported being in receipt of Unemployment Benefit had confused this payment with Unemployment Assistance. There is no evidence whatsoever that any participant who stated they were in receipt of social welfare unemployment payments was unavailable for work.

Figure 32 Self-Description of main day-to-day activity (Vietnamese Sample)

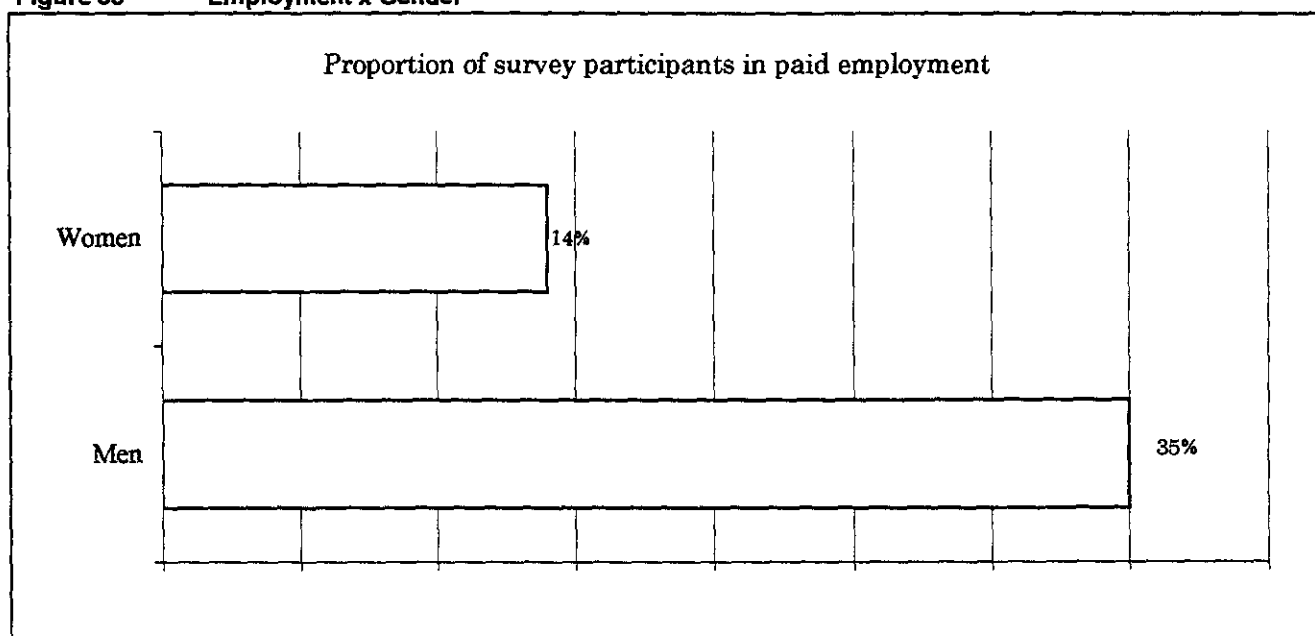


9.5 Other issues affecting socio-economic status

9.5.1 Gender

There are several significant gender differences in the occupational situation of participants. The primary difference - in employment rates, shows that 35% of men are in full-time employment, while the corresponding figure for women is 14%. This difference is apparent among both Vietnamese and Bosnian samples, and is significant at the .01 probability level. There follows a more detailed look at men and women in the survey.

Figure 33 **Employment x Gender**



9.5.1 - [a]

Women in the survey

- ☐ 18 women (11 Bosnian, 7 Vietnamese) who took part in the survey were on home duties, often looking after children or elderly dependants, while none of the male participants were in this position. The proportion of Vietnamese women on home duties (46.6%) was greater than the proportion of Bosnian women (32.5%). 35% of Bosnian women reported being unemployed, while no Vietnamese women reported being in this situation. This difference may be partly due to a different interpretation of their situations.
- ☐ 47% of married women from the combined Bosnian and Vietnamese samples reported their main daily activity as on home duties. In contrast, no single women from either sample were on home duties. Another contrast between single and married women is the fact that 44% of single women were in education or training programmes, while no married women were. 14% of married women and 11% of single women were in paid employment.
- ☐ All 6 Vietnamese women in receipt of unemployment payments stated that their main day-to-day activity was 'on home duties or looking after dependants'. On the other hand, half of the 12 Bosnian women in receipt of unemployment payments describe themselves as 'unemployed', while the other half state that their main day-to-day activity is 'on home duties or looking after dependants'.
- ☐ There were 5 widowed women in the sample: one was employed, 2 were on home duties, one was retired, and one other was unemployed.

9.5.1 - [b]

Men in the survey

54 men participated in the survey, and several significant factors emerge in relation to the activity in which they were engaged at the time of survey.

- ☐ Seven males aged under 25 took part in the survey. Four of these (57%) were in education or training programmes, while the remaining three (43%) were unemployed. None were in paid employment.
- ☐ Of the 46 men aged over 25 years, 19 (41.3%) were in paid employment. Twelve men (26%) were unemployed, while seven more (15%) were unable to work due to illness or disability.
- ☐ Identical proportions of Bosnian and Vietnamese men were in paid employment (35%). 17.5% of the Bosnian sample were unable to work. Bosnian men were more likely to be unemployed than Vietnamese men (37.5% compared with 7.1%). 35% of Vietnamese men were engaged in education or training, while none of the Bosnian men were involved in education / training as their main day-to-day activity.

9.5.2

Age

Taking the combined Bosnian and Vietnamese samples, age is significantly related to the economic activity of the participant. A chi-square analysis shows a difference significant at the .01 level of probability for participants aged under 25 years, between 26 and 45 years, and those aged 46 years or over.

- ☐ Of the 15 participants aged under 25 years, 40% were involved in education or training programmes, another 40% were unemployed, with only one individual (6.6% of the under 25's in the survey) employed.
- ☐ Among the 54 participants aged between 26 and 45 years of age, 37% were working in paid employment, 27.8% were unemployed, and 20.4% were on home duties. The remaining few individuals were engaged in training or education. The gender differences mentioned previously pertain to this data, with a higher proportion of women on home duties, and a higher proportion of men in paid employment.
- ☐ Of the 30 individuals aged 46 years or over, 30% were retired, 20% were unemployed, 16.6% were in paid employment, another 16.6% were on home duties, with one individual in education / training. In this age group, those who left school before they were aged 18 are more likely to be unemployed than those who left after age 18 years.

9.5.3

Refugee Admission Category

Taking the combined data for both samples in the survey, there are differences between the activity of the various types of refugee (significant at the .01 level of probability).

- ☐ Primary admission participants were more likely to be in paid employment (44%) than those admitted as medical evacuees (20.8%), those admitted under the Family Reunification scheme (12.5%), or the relatives of medical evacuees (9%).
- ☐ Of those admitted under the Family Reunification scheme, one third were on home duties. 19% were unemployed, another 19% were retired, and 12.5% were working.
- ☐ Not unexpectedly, one third of medical evacuees were unable to work due to illness / disability. 21% were in paid employment, while 30% were unemployed.

- ☐ Of the 11 relatives of medical evacuees, 6 were unemployed, 3 were on home duties, 1 was retired, and 1 was in paid employment.

9.5.4 Other comparisons between the samples

- ☐ Significantly more Vietnamese participants reported being in training or education (24% of the sample) than did Bosnian participants (7%).
- ☐ Roughly equivalent proportions of the Bosnian and Vietnamese samples were retired (8.1% and 10.3% of the samples, respectively).

9.6 Social Welfare Payments

Participants were asked about the payments they are in receipt of from the Department of Social, Community and Family Affairs. Over 90% of Bosnian participants who responded to the question (n = 56, 20 missing respondents) claimed to be in receipt of some payment. This compares with 57% of Vietnamese participants (n = 28, 0 missing respondents) who claimed to be in receipt of payment.

9.6.1 Bosnian responses

- ☐ Twenty-one of the Bosnian sample said they were in receipt of Unemployment Assistance. A further three reported being in receipt of Unemployment Benefit.
- ☐ Fifty-six Bosnian participants said they were in receipt of income support payments, particularly Rent Allowances. This corresponds with the fact that the majority of Bosnian participants were living in private rented accommodation.
- ☐ Forty participants from the Bosnian sample said that Child Benefit was a source of income for their family.
- ☐ Four women said they were in receipt of the Lone Parent's Allowance.
- ☐ As would be expected, a significant proportion of medical evacuees said they were in receipt of Disability Allowance (formerly Disabled Persons' Maintenance Allowance).
- ☐ Other significant sources of benefit for Bosnian participants included bus / travel allowances and fuel allowances.

9.6.2 Vietnamese Responses

There was a scarcity of detailed information from Vietnamese participants regarding the nature of their income from the Department of Social, Community and Family Affairs.

- ☐ Only one person from the primary admissions category claimed to be in receipt of welfare benefits. The other responses came from participants admitted under the Family Reunification Scheme.
- ☐ Five Vietnamese participants reported being in receipt of Unemployment Benefit, all of whom were women who reported their main daily activity as being on home duties. Another two reported being in receipt of Unemployment Assistance. While

the information about women receiving Unemployment Benefit describing themselves as being on home duties appears to be potentially contradictory, refer to section 9.4.2 for a series of possible explanations for this data.

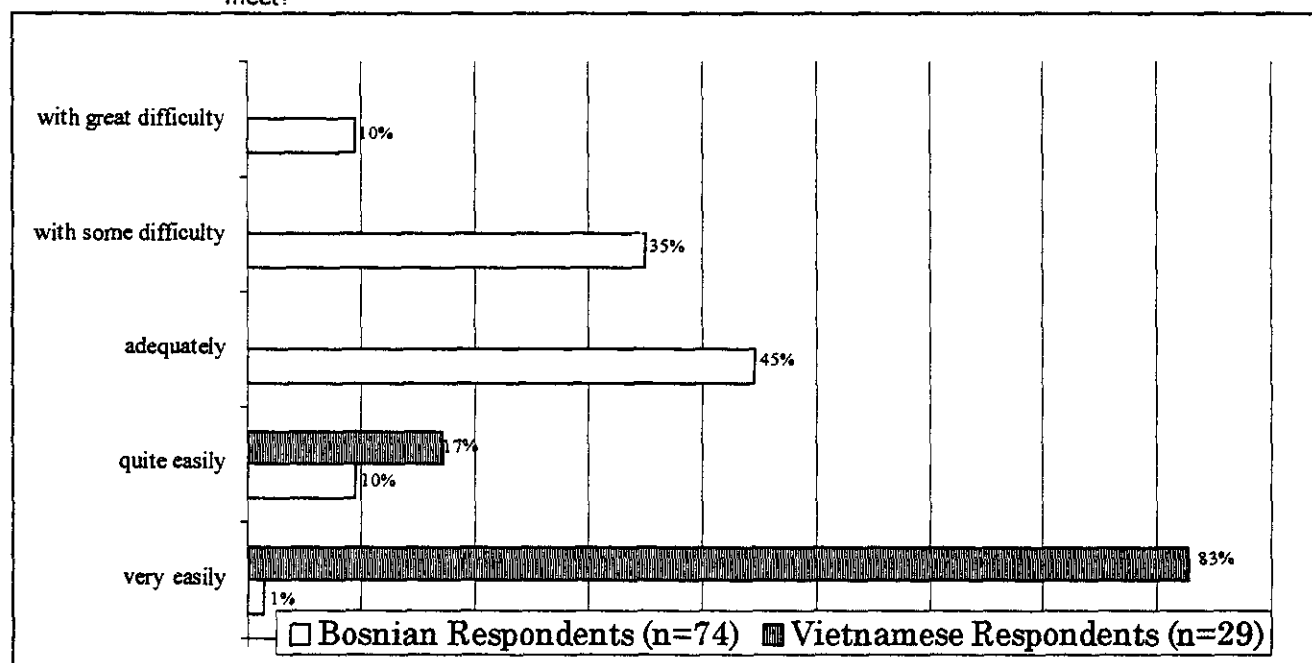
- ☐ Three Vietnamese participants were in receipt of income support payments (including Rent Allowance).

9.7 Household Income and Standard of Living

Participants were asked about the adequacy of their household incomes. Responses (outlined in Figure 34) show some highly significant differences between the Vietnamese and Bosnian groups.

Whelan, Hannan, and Creighton (1991) have demonstrated that this question is a reliable indicator of perceived economic strain, and has been shown to be strongly correlated with primary lifestyle indicators of economic deprivation. It is a useful tool for indicating the presence of poverty.

Figure 34 Responses to the Question
"Thinking of your household's total income, would you say that your household is able to make ends meet?"



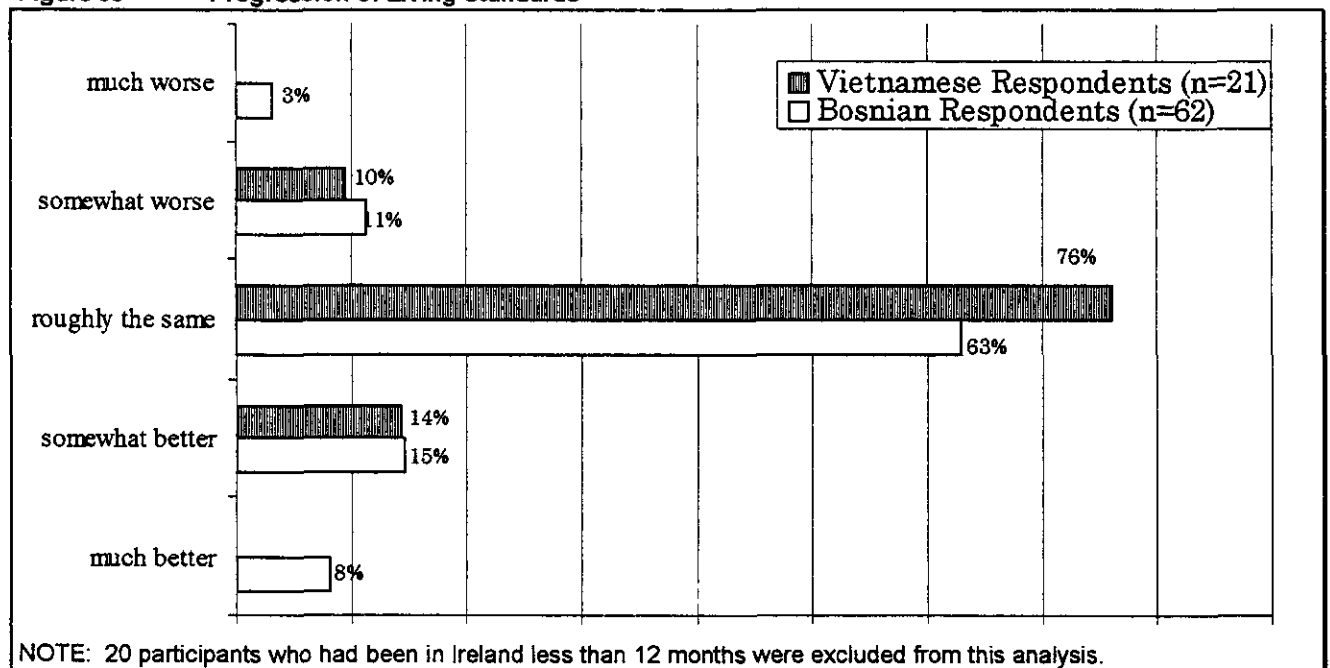
- ☐ None of the Vietnamese sample indicated any difficulty in 'making ends meet', whereas 44.7% of the Bosnian sample experience 'some' or 'great' difficulty.
- ☐ It is reasonable to interpret these differences as being indicative of a significant variance of perceived economic strain within Bosnian and Vietnamese households. Given the relationship demonstrated elsewhere between perceived financial strain and indicators of poverty, it is highly possible that at the present time, a significant minority of those Bosnians who took part in the survey are experiencing difficult economic circumstances.
- ☐ On first reading of the data, it is difficult to understand the large difference between the perceived economic strain felt by Bosnian and Vietnamese participants,

particularly as the indicators of economic activity do not differ so substantially between the two samples. Several reasons for the discrepancy can be hypothesized.

- ☐ Firstly, if one can assume the measure to have adequate validity and reliability, then it may be that because the Vietnamese community has been established in Ireland for considerably longer than the Bosnian community, there are more extensive family systems for the support of individuals within the community. Thus, a Vietnamese individual on low income would not be as vulnerable to economic strain as a Bosnian individual in similar financial circumstances.
- ☐ Secondly, it may be that, as has been mentioned previously, the validity of the indicator is diminished due to the cultural ethos of Vietnamese society not to publicly present the family in a negative light.
- ☐ Thirdly, some commentators would argue that because the economy from which the Vietnamese refugees fled was not as affluent as that from which Bosnian refugees fled, there are different expectation levels about standards of living among the two communities. No data emerged in the present study to substantiate this hypothesis.

Participants were asked to compare their overall household income at present with that of one year ago. Results are outlined below in Figure 35.

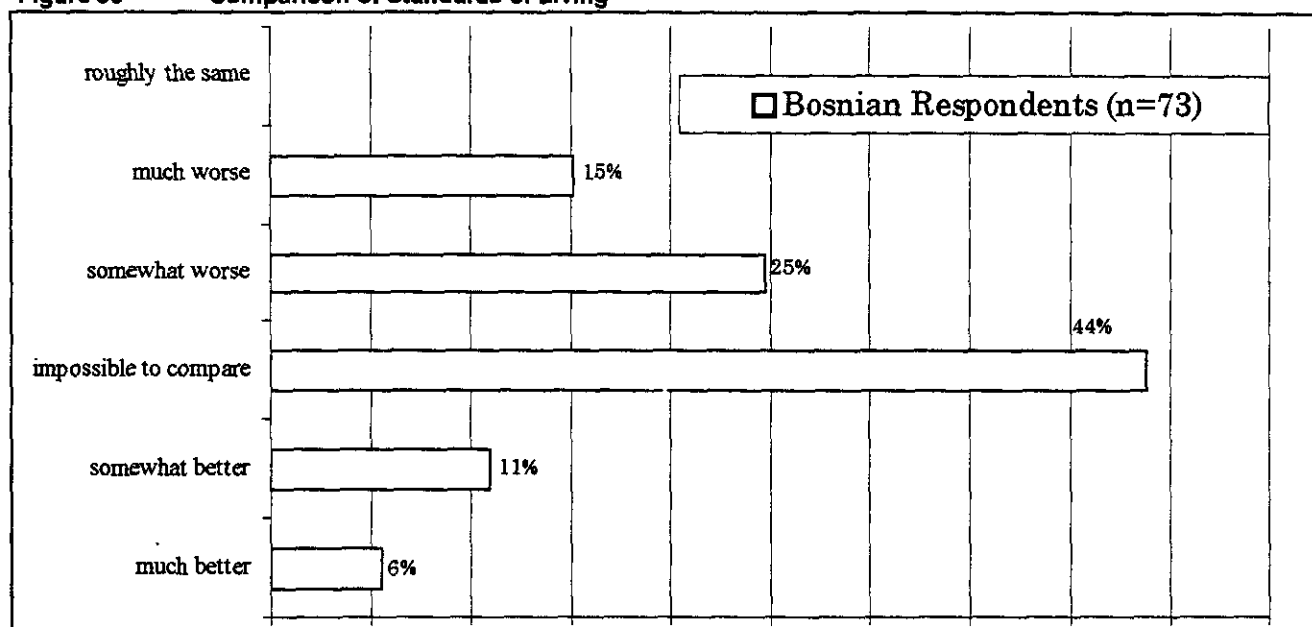
Figure 35 **Progression of Living Standards**



- ☐ A majority of both communities saw little change in their living standards over the past 12 months. 14% of Bosnian participants and 10% of Vietnamese participants report a decline in living standards, while 23% of Bosnian and 14% of Vietnamese participants report an upturn in living standards over the past 12 months.

Participants were asked to compare their overall standard of living in Ireland with that which they enjoyed before they left their home country. Only Bosnian responses are examined here in Figure 36, as Vietnamese responses were insufficient in number to allow any analysis.

Figure 36 Comparison of Standards of Living



□ A substantial percentage (44%) of Bosnian participants did not think it was valid to compare living standards in Ireland with those in Bosnia. However, 40% felt that there had been a decline in their standard of living since coming to Ireland, while only 17% felt that there had been an improvement in their circumstances since coming here.

9.8 Conclusions

This chapter examined some of the socio-economic circumstances of the participants. The main finding is that unemployment levels among both communities (identified in the first instance by reported unemployment payments from the Department of Social, Community and Family Affairs) are much greater than those for the general Irish population. A greater proportion of Bosnian participants were unemployed than Vietnamese. There were clear divisions of role along gender lines - women were more likely to be on home duties, with men more likely to be in paid employment.

Among participants who were unemployed, many were pessimistic about their short-term chances of obtaining employment, and felt that improved language skills, the attainment of new qualifications, the recognition of existing qualifications, and assistance in approaching employers, would be helpful to job-seeking programme refugees. Among those who were employed, most felt that they were underemployed, and that they were qualified to work at a higher level than they were at.

There are clear signs of financial difficulty being experienced by some of the Bosnian sample. Most thought that their financial circumstances and standard of living had taken a downturn since their arrival in Ireland.

There is an apparent contradiction between the high levels of unemployment in the Vietnamese sample, and the ease with which the sample appears to be managing financially. It is perhaps an indication that, 17 years after the first Vietnamese arrived in Ireland, the community is contributing very successfully to its own well-being (and to the Irish economy), evidenced by the support given to the more vulnerable members of the community. Nonetheless, there is reason to be somewhat circumspect about the overwhelmingly positive nature of the data relating to financial well-being. Reports from the resettlement staff of the Refugee Agency, and from the Vietnamese-Irish Association indicate that there is a section of the Vietnamese community which is experiencing financial difficulties. The fact that this has not come across in the survey is possibly because of the nature of the sample, or because of under-reporting of financial difficulties due to cultural norms and expectations.

Chapter 10

Education and Training

10.1 Introduction

As noted in the literature review earlier, the role of local language acquisition is vital in the acculturation process.

The present chapter outlines data on the language skills of participants when they arrived in Ireland, looks at their participation rates in English Language Training since coming to Ireland, and examines their own satisfaction with their progress.

In addition, information on other training and educational qualifications of the participants is presented.

10.2 English Language Acquisition

10.2.1 *Measurement*

During the present research, a self-evaluation was obtained of language ability at two points in time - at the point of arrival in Ireland, and at the time of survey. While there are limitations to this approach, as it does not assess the linguistic ability of those interviewed, the data is nonetheless interesting when viewed as a snapshot of how those who were surveyed feel they have progressed since coming to Ireland.

Participants were asked to make self-assessments of their English language abilities, by indicating whether they possessed the following linguistic skills:

- (a) Comprehension
- (b) Verbal Expression
- (c) Ability to Read
- (d) Ability to Write

to a functional level in day-to-day activities, at two points in time - when they arrived in Ireland, and at the time the survey was carried out.

Scores were calculated for each point in time by adding together the number of skills which participants indicated they had.

10.2.2

English Language Skills at time of arrival in Ireland

- ☐ The vast majority of Bosnian and Vietnamese participants did not have any English language skills on arriving in Ireland, as outlined below in Figure 37. As might be expected due to the relative geographical proximity, a greater proportion of Bosnian participants had more reported English language skills than did their Vietnamese counterparts.

Figure 37 Chi-Square Analysis of English language skills at time of arrival x Sample

		No. of English Language indicators					Total %
		0	1	2	3	4	
Sample	Bosnian	62 84.93%	1 1.37%	1 1.37%	0.00%	9 12.33%	73 100%
	Vietnamese	22 81.48%	1 3.70%	3 11.11%	1 3.70%	0.00%	27 100%
	Total	84 84.00%	2 2.00%	4 4.00%	1 1.00%	9 9.00%	100 100%

- ☐ Men were significantly more likely than women to have more English language skills before arriving in Ireland, as illustrated in Figure 38.

Figure 38 Chi-Square Analysis of English language skills at time of arrival x Gender

		No. of English Language indicators (column %)					Total %
		0	1	2	3	4	
Gender	Male	42 79.2%	0%	3 5.7%	0%	8 15.1%	53 100%
	Female	42 89.4%	2 4.3%	1 2.1%	1 2.1%	1 2.1%	47 100%
	Total	84 84%	2 2%	4 4%	1 1%	9 9%	100 100%

LR chi-square = 11.04 df = 4 p < .05

10.2.3

English Language Skills at time of survey

- ☐ Figure 39 illustrates the number of language skills which participants reported having at the time of survey. 23.3% of Bosnian participants and 15.4% of Vietnamese participants judged themselves to have no linguistic capacity in English at the time of survey. 45% of Bosnian participants and 50% of Vietnamese participants judged themselves to have basic functional ability (at least) in all four linguistic skills: verbal comprehension, verbal expression, ability to read, and ability to write. The remaining participants from each community judged themselves to have varying degrees of skills in the language.

Figure 39 English Language Skills at time of survey x Sample

		No. of English Language indicators					
		0	1	2	3	4	Total %
Sample	Bosnian	17 23.3%	3 4.1%	13 17.8%	7 9.6%	33 45.2%	73 100.0%
	Vietnamese	4 15.4%	3 11.5%	3 11.5%	3 11.5%	13 50.0%	26 100.0%
	Total	21 21.2%	6 6.1%	16 16.2%	10 10.1%	46 46.5%	99 100.0%

- ☐ Participants aged 45 years or less were likely to have more English language skills than those aged over 45. This difference is significant at the .01 level of probability, and is detailed in Figure 40.

Figure 40 Chi-Square: English language skills x Age group of participants

		No. of language proficiency indicators					
		0	1	2	3	4	Total
Age group of participants	Under 45 years	7.25	4.35	15.94	13.04	59.42	69
	Over 45 years	53.33	10.00	16.67	3.33	16.67	30
	Total	21.21	6.06	16.16	10.10	46.46	99

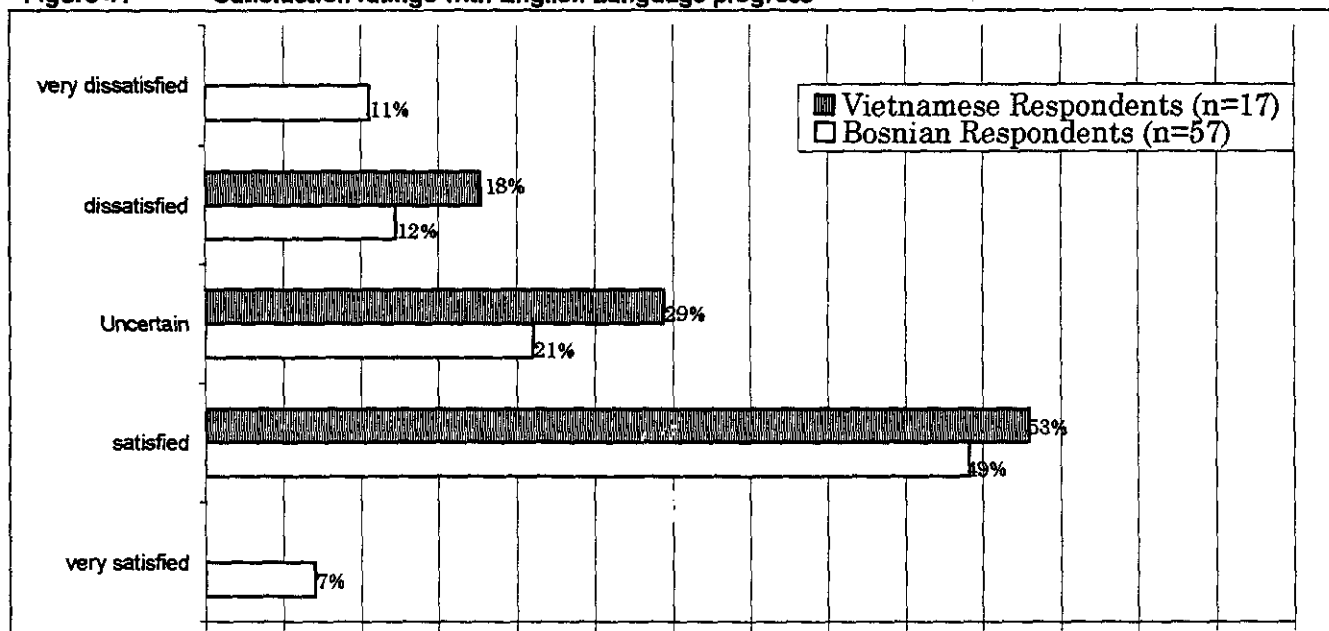
LR chi-square = 32.08 df = 4 p < .001

10.2.4 English Language Progress

10.2.4 - [a] Satisfaction with Progress

- ☐ Interview participants were asked to rate their level of satisfaction with the progress they feel they have made in the English language since coming to Ireland. Over half of Bosnian and Vietnamese participants expressed themselves satisfied or very satisfied with their progress to date in English language acquisition. A considerable minority from each community expressed dissatisfaction with their progress to date.

Figure 41 Satisfaction ratings with English Language progress



- ☐ As Figure 42 illustrates, the majority (81%) of those who expressed dissatisfaction with their progress in learning English are also those who rated themselves as having no more than 2 of the 4 listed elements of English.

Figure 42 Chi-square analysis of Language Progress x Satisfaction with Progress

Level of satisfaction with Language Progress to date	No. of language proficiency indicators					Total
	0	1	2	3	4	
'Very satisfied', 'quite satisfied', or no strong feeling either way.	3.64	5.45	14.55	14.55	61.82	83.3% (n=55)
'Quite dissatisfied', or 'very dissatisfied'	31.25	18.75	31.25	6.25	12.50	16.6% (n=16)
Total	21.21	6.06	16.16	10.10	46.46	100%
LR chi-square = 41.11 df = 8 p < .001						

10.2.4 - [b] **Changes in English Language Skills**

By comparing the number of linguistic skills at time of arrival and at time of survey, an indication is obtained of progress in language skill acquisition.

- ☐ Of Bosnian participants who estimated that they had no linguistic skills in the English language when they arrived, 23 persons have since achieved at least a basic functional capacity in the four language skills. A further 22 other people indicated having achieved between 1 and 3 of the language skills in English
- ☐ Significant patterns of language skill acquisition can also be seen among Vietnamese participants. Since arrival, 10 people have achieved (at least) a basic functional ability in the four linguistic skills. Of the others, 8 indicated having achieved ability in between 1 to 3 of the defined linguistic language skills.
- ☐ Figure 43 and Figure 44 outline the trends for the Bosnian and Vietnamese programme refugee samples. The columns labelled 0 through 4 represent the number of language indicators reported present at the time of arrival in Ireland. Thus, 62 Bosnian participants indicated that they had no English language skills when they arrived in Ireland (meaning that they could not read, write, speak or understand English). The language acquisition trend is viewed by looking at how many indicators had been acquired by the time the survey had been carried out.

Figure 43

Cross-tabulation of number of English language skills at time of arrival x English language skills at time of survey (Bosnian sample)

		English ability upon arrival in Ireland (no. of skills reported)					
		0	1	2	3	4	Total
English ability at time of survey (reported no. of indicators)	0	17 100.0%					17 100.0%
	1	3 100.0%					3 100.0%
	2	13 100.0%					13 100.0%
	3	6 85.7%		1 14.3%			7 100.0%
	4	23 69.7%	1 3.0%			9 27.3%	33 100.0%
Total		62 84.9%	1 1.4%	1 1.4%		9 12.3%	73 100.0%

Figure 44

Cross-tabulation of English language ability at time of arrival x E.L. ability at time of survey (Vietnamese sample)

		English ability upon arrival in Ireland (no. of skills reported)					
		0	1	2	3	4	Total
English ability at time of survey (reported no. of indicators)	0	4 100%					4 100%
	1	3 100%					3 100%
	2	2 66.7%		1 33.3%			3 100%
	3	3 100%					3 100%
	4	10 76.9%	1 7.7%	2 15.4%			13 100%
Total		22 84.6%	1 3.8%	3 11.5%	0 0%	0 0%	26 100.0%

10.2.5 Factors in English Language Skills Development

10.2.5 - [a] English Language Training (ELT)

- ☐ Those who have spent longer than 2 months in English language training have significantly better proficiency in English than those who have spent less than 2 months in ELT.

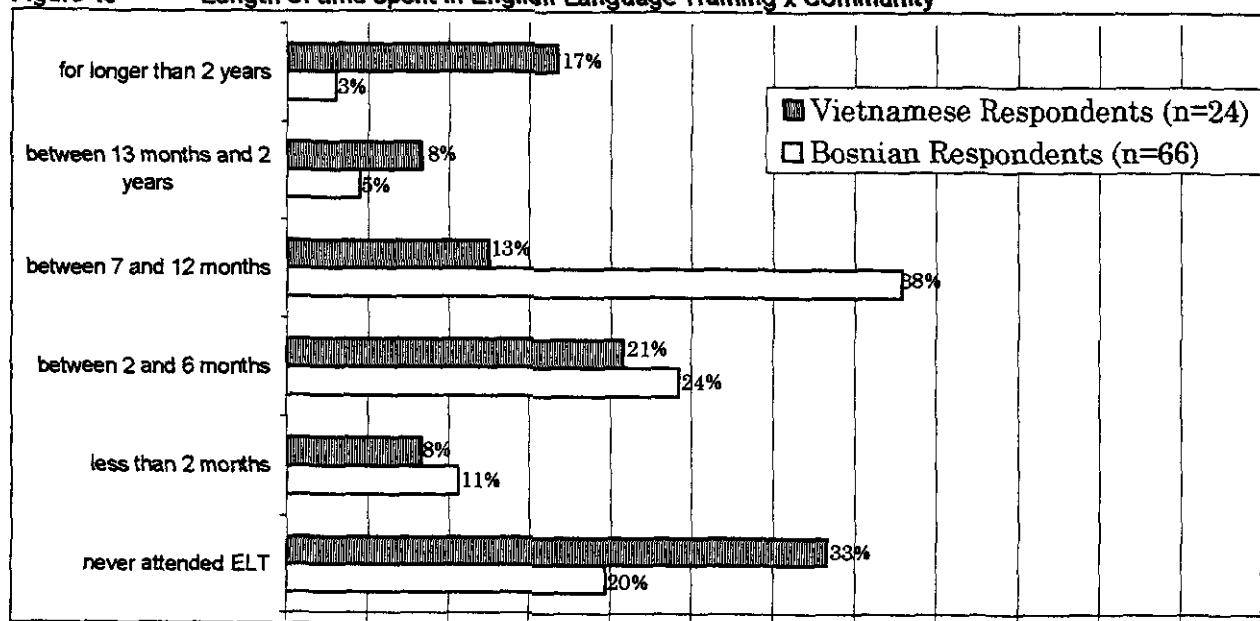
Figure 45 Chi-Square Analysis of Number of language skills acquired x Length of Time in English Language Training

No. of months in ELT classes	No. of language skills acquired					Total
	0	1	2	3	4	
Less than 2 months	38.10	0.00	16.67	7.14	38.10	42
Greater than 2 months	8.77	10.53	15.79	12.28	52.63	57
Total	21.21	6.06	16.16	10.10	46.46	99

LR chi-square = 18.32 df=4 p<.05

- ☐ As is illustrated in Figure 46, a substantial proportion of both Bosnian and Vietnamese participants have spent less than 2 months in English language training.
- ☐ One third of the Vietnamese sample and one fifth of the Bosnian have not availed of the English language training available to them. The vast majority (over 76%) are married or widowed people, while only 19% are single. More than 60% are aged over 45 years, with less than 10% being aged under 25.

Figure 46 Length of time spent in English Language Training x Community



10.2.5 - [b] Role of Reception Facilities in Delivery of English Language Training

One of the clear outcomes of the research is that participants who accessed English language training for two months or longer were more likely to have stayed initially in a reception centre, while those who have very low levels of attendance at ELT were more likely to have been admitted under the FRS – and therefore to have gone directly to stay with their family upon arrival in Ireland.

Figure 47 Role of Initial destination in take-up of English Language Training

Length of Time in English Language Training since arriving in Ireland		Reception Centre	Hospital	with family members	Other	Total
	< 2 months in ELT (including those who had never attended ELT)	26.19	16.67	45.24	11.90	42
	> 2 months in ELT	44.83	36.21	15.52	3.45	58
	Total	37.00	28.00	28.00	7.00	100

LR chi-square = 15.99 df = 3 prob = 0.012 (adj.)

10.2.5 - [c] English Skills Development through living in Ireland

- ☐ Figure 48 shows that the difference in English language skills between participants is not significant when examined in the context of length of time in Ireland. In other words, it is important to note that not everyone has made equivalent progress in learning English, and that spending time living in Ireland alone does not guarantee that the person will learn English.

Figure 48 Chi-square analysis of Number of Language Skills acquired x Length of time in Ireland (Combined Samples, excluding those already fully-skilled upon arriving in Ireland)

		No. of language skills acquired					
		0	1	2	3	4	Total
Length of time living in Ireland	less than 12 months	44.83	0.00	17.24	6.90	31.03	29
	Between 2 and 3 years	20.00	6.67	20.00	20.00	33.33	15
	Between 3 and 4 years	25.00	6.25	18.75	18.75	31.25	16
	Between 4 and 5	9.09	18.18	27.27	9.09	36.36	11
	Between 5 and 10 years	50.00	0.00	50.00	0.00	0.00	2
	Between 10 and 15 years	0.00	0.00	100.00	0.00	0.00	1
	more than 15 years	0.00	20.00	6.67	13.33	60.00	15
	Missing response	0.00	0.00	0.00	0.00	100.00	1
Total		24.24	7.78	18.89	12.22	36.67	90

LR chi-square = 35.40 df = 28 prob = 0.15

- ☐ In fact, the data on social interaction (Chapter 12), will show clearly one of the reasons why the assumption that those who spend time living in this country will learn English by picking it up from those around them is flawed: those who are not skilled in English are significantly less likely to talk with people who are not from their own expatriate community.

10.2.5 - [d] **Prior Education Levels and English Language Skills Acquisition**

- ☐ There is a direct relationship between the age at which a person left school for the first time, and the number of proficiency indicators claimed by the participant. Those who had left school before their teenage years are very likely to have limited capacity in the English language. Those who had left before age 18 are likely to have less capacity at present in the English language than those who remained in full-time education beyond the age of 18 (most likely to be third-level students).
- ☐ Similarly, those who had formal qualifications prior to arriving in Ireland are likely to have more proficiency in English language.

Figure 49 Chi-Square Analysis of Number of Language Skills Acquired x Age of Leaving School

Age of leaving school	No. of language skills acquired					Total
	0	1	2	3	4	
Age 11-12	70.00	10.00	20.00	0.00	0.00	10
Age 13-18	24.14	0.00	37.93	10.34	27.59	29
Age 19-22	7.14	14.29	7.14	21.43	50.00	28
Age 23 and over	15.63	3.13	3.13	3.13	75.00	32
Total	21.21	6.06	16.16	10.10	46.46	99
LR chi-square = 54.23 df = 12 p < .001						

10.3 **Participation in Education or Training since arriving in Ireland**

Participants were asked about their participation in education or training since arriving in Ireland. Data was considered in terms of those who were in education before coming to Ireland, and those who had left full-time education before arriving in this country.

10.3.1 **Full-time students before arriving in Ireland**

17 participants were in full-time education, and one was in full-time training before they left their country of origin. Of these,

- ☐ Two Bosnian participants have continued their education since arriving in Ireland. Both cited the main reason for continuing as needing to improve their chances of getting a job. They rated the standard they study at in Ireland as 'a continuation' of the level they were studying at in Bosnia.
- ☐ Five Bosnian participants have not continued their education since arriving in Ireland. A variety of reasons were cited, including one case of a person who felt his skills were redundant in Ireland, another who applied too late this year, but hopes to resume education next year, another who felt that age was a barrier, and another who felt that language was a barrier to resuming education.
- ☐ A total of 8 Vietnamese have continued their education since arriving in Ireland. Two of these cited the fact that they had not completed their studies as the main reason for continuing. Five others cited their desire to learn English as the main reason for continuing. The standard of their level of education in Ireland varied relative to that which they had previously followed. Two studied at a more advanced standard than

previously, while three studied at a less advanced standard than they had in Vietnam. Two others said it was difficult to compare standards.

- ☐ Of the three Vietnamese who did not continue with their education since arriving in Ireland, one cited age and ill-health as the reason, another has commitments to looking after a family, and another is looking for employment.

10.3.2 *Those who had left full-time education or training*

83 participants reported that at the time they arrived in Ireland, they were *not* in full-time education or training. Of these,

- ☐ Six Bosnian participants reported having gone back into education or training. The main reason cited was in order to improve one's chances of getting a job. A further six Vietnamese participants reported having gone back into education or training. The main reasons cited for doing so included wanting to learn English.
- ☐ The remaining 60 Bosnians and 11 of Vietnamese had not returned to education or training since arriving here, and the main reasons are outlined below in Figure 50.

Figure 50 **Reasons given for not returning to education or training**

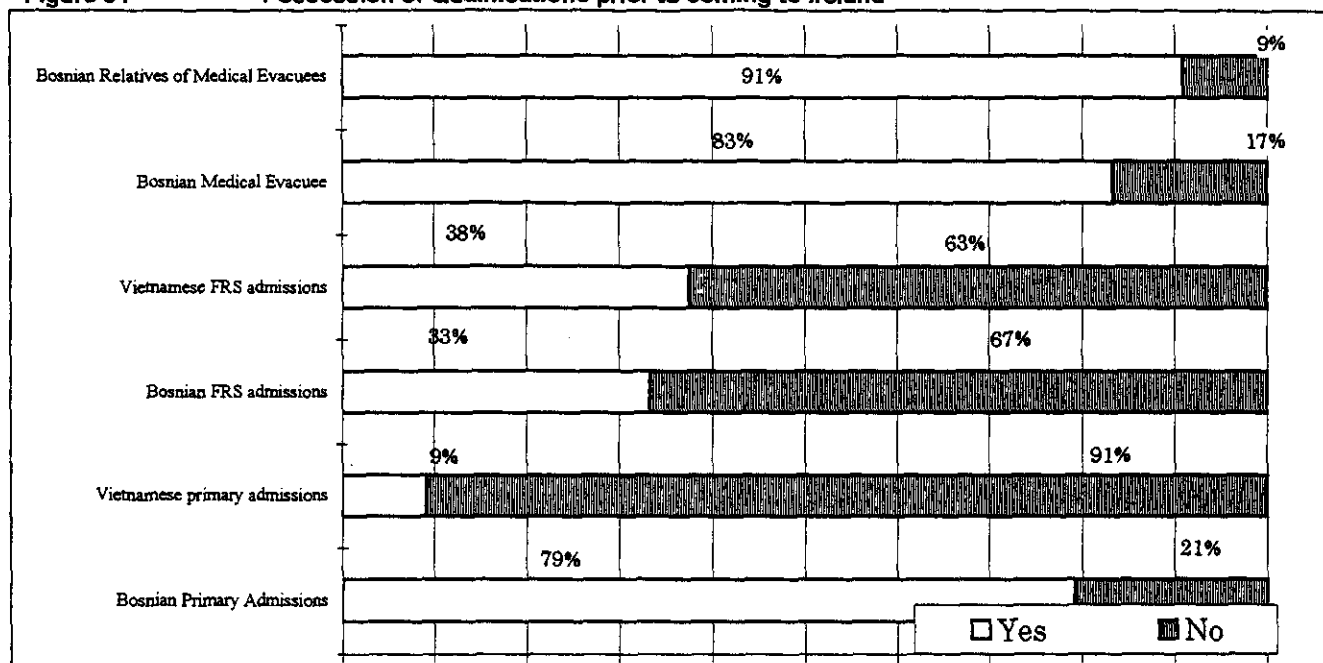
	Bosnian Responses (col %)	Vietnamese Responses (col %)
Age reasons	19 (20.65%)	5 (29%)
Language difficulties	38 (41.3%)	3 (17.6%)
Medical / Health reasons	20 (21.7%)	0
Caring for family dependants	9 (9.7%)	4 (23.5%)
Looking for / taking up employment	2 (2.17%)	2 (11.75%)
Other Reasons	4 (4.34%)	3 (17.6%)
responses = 109		respondents = 69 (15 missing cases)

10.4 **Recognition in Ireland of overseas qualifications**

A major issue for refugees is the recognition of their existing educational and occupational qualifications in the new host country. Accordingly, participants were questioned about their experience in this regard.

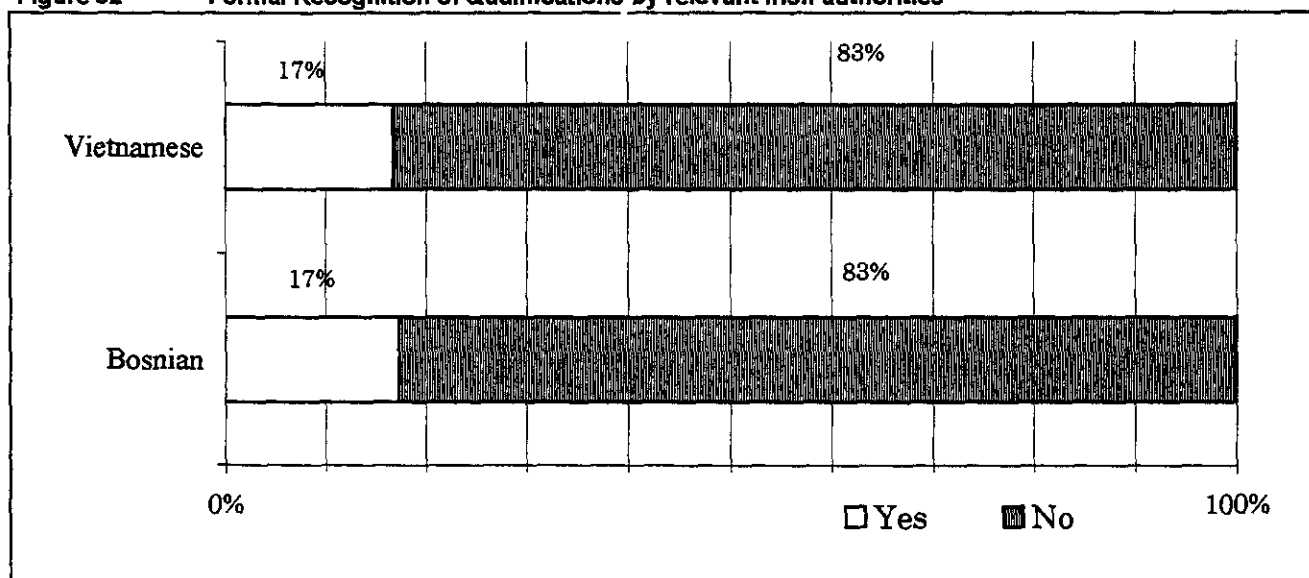
"Did you have any formal (State-recognised) qualifications before coming to Ireland?"

Figure 51 Possession of Qualifications prior to coming to Ireland



- ☐ A chi-square analysis shows that of those participants who were aged 18 or older when they arrived in Ireland, those from the Bosnian community were significantly more likely (at .01 probability level) to hold a state-recognised qualification than those from the Vietnamese community. Overall, men were significantly more likely than women to hold recognised qualifications before coming to Ireland (at .01 probability level).
- ☐ Of the 58 participants who held qualifications prior to coming to Ireland, only 10 people (representing 17.2% of the sample) stated that their qualifications are recognised by the relevant authorities. Eleven of the 58 participants had applied for recognition, of which seven had been successful and four had been unsuccessful.

Figure 52 Formal Recognition of Qualifications by relevant Irish authorities



10.5 Conclusion

This chapter outlines some of the issues pertaining to the education and training needs of the programme refugee community. Among these, the need for English language skills is fundamental – without the ability to communicate in English, all other tasks become much more difficult, or impossible. The link between skills in English and employment prospects has already been established. Further links will be outlined later on between skills in English and mental health.

In terms of English language acquisition, the majority of participants indicated that they had made progress since arriving in Ireland. However, there was a considerable minority (approximately 20% of the Vietnamese and Bosnian samples) who expressed dissatisfaction with their progress in learning English, and appear to be making slow progress. Further analyses identified some of the factors which influence the likelihood of experiencing difficulty in learning English: those who had spent less than 2 months in English language training were likely to be dissatisfied, and to have made relatively slow progress in learning English. In fact, a high proportion of each community had never attended English Language Training. In establishing training as a factor in English language learning, it is important to point out that the reasons for low or non-attendance in training were not established.

The research also identified low levels of return to education. Many felt that they were too old to go back into training or education. It was not established whether they were aware of the various educational and financial supports available to adults wishing to return to education.

A large proportion of participants had a qualification before coming to Ireland. However, only 17% of those with qualifications before they arrived here had attained formal recognition of these qualifications. A very low proportion (11 out of 58) had actually made an application to have their qualifications recognised by the appropriate authorities. Statistically, men were more likely to hold a qualification than women were. Among the Vietnamese community, those who arrived as primary admissions (in 1979) were least likely to be formally qualified.

Chapter 11

Nationality and Identity

11.1 Introduction

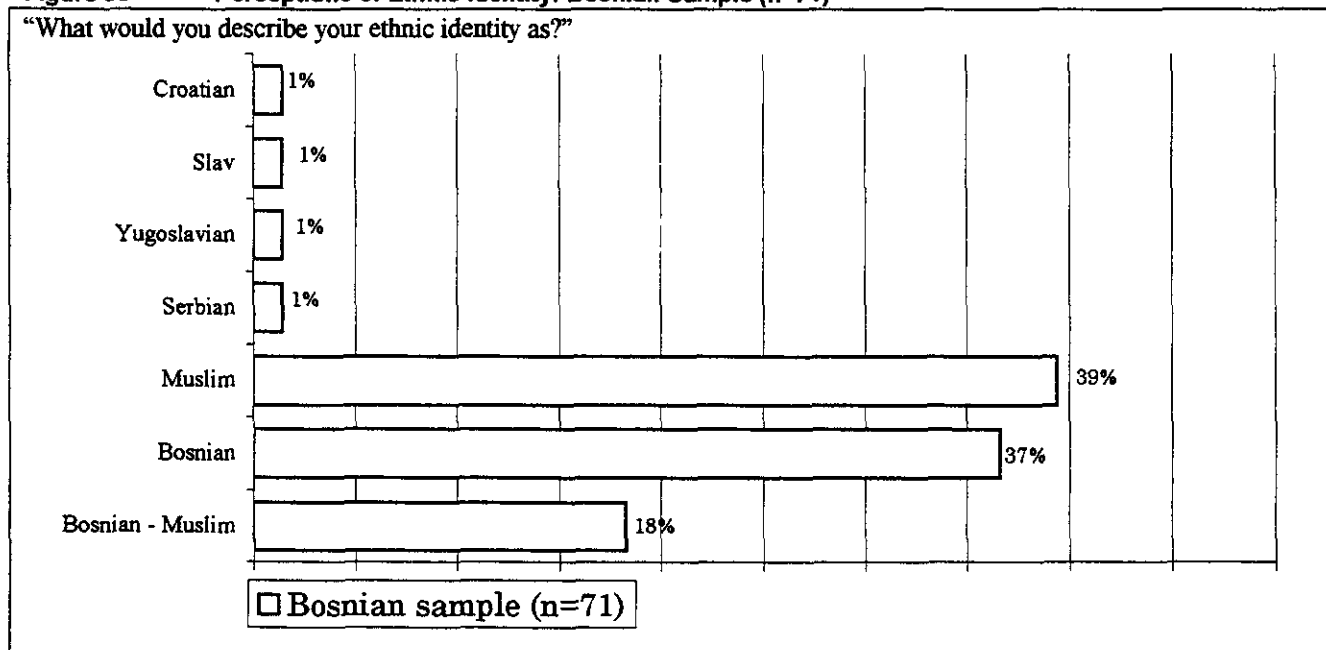
This chapter looks at data that was gathered during the survey relating to the national identity and legal status of the participants, and also examines their views on the Family Reunification Scheme. Furthermore, those who participated were also asked for an indication of what they would like to do in the future regarding their legal status and residency.

11.2 Perceptions of Ethnic Identity

One of the interesting experiences often associated with migration is that of redefining oneself as one's identity undergoes change and evolution. Participants in the survey were asked to describe their ethnic identity as they see it at present.

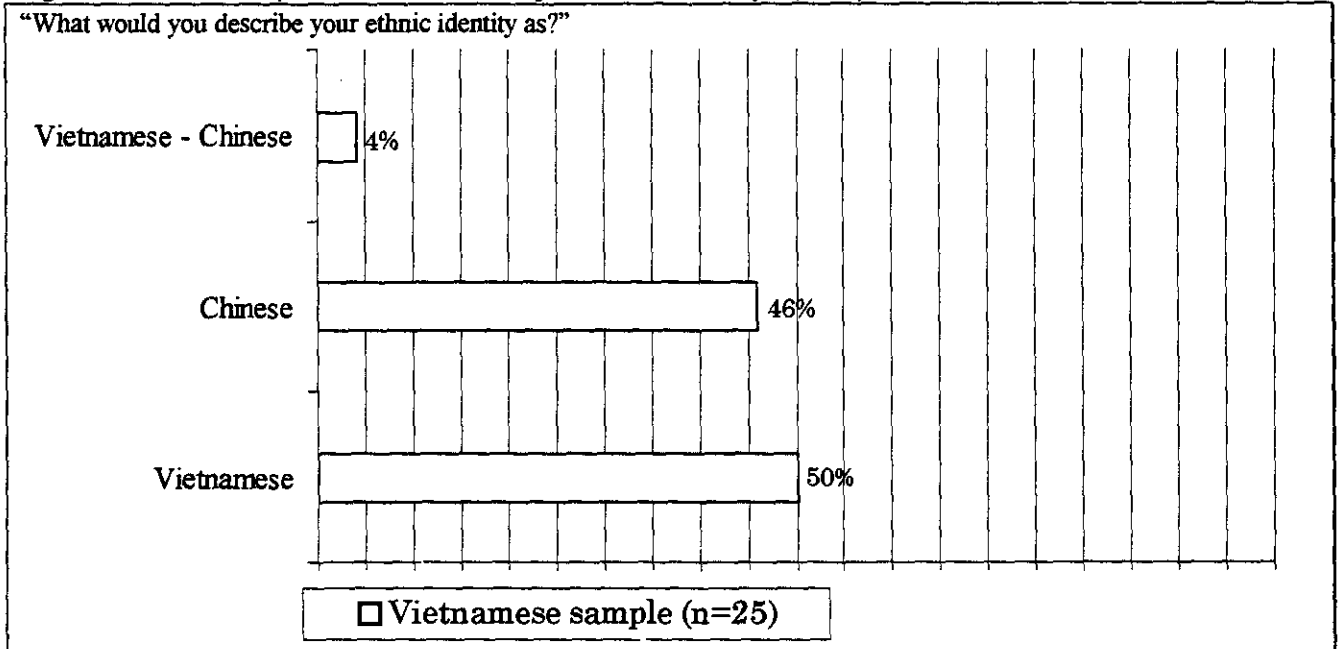
□ Figure 53 outlines responses from the 'Bosnian' sample, members of which tended primarily to define themselves in one of three ways - 'Muslim', 'Bosnian Muslim', or 'Bosnian'. The fieldworker reported that the task of choosing a description of identity was generally carried out with great deliberation and care. Precision in their self-definition seemed important to participants, at a time when there had been considerable conflict and debate in their country of origin about the very same issues.

Figure 53 Perceptions of Ethnic Identity: Bosnian Sample (n=71)



- Figure 54 outlines Vietnamese responses. Approximately half define themselves as Vietnamese, with the other half describing themselves as ethnic Chinese.

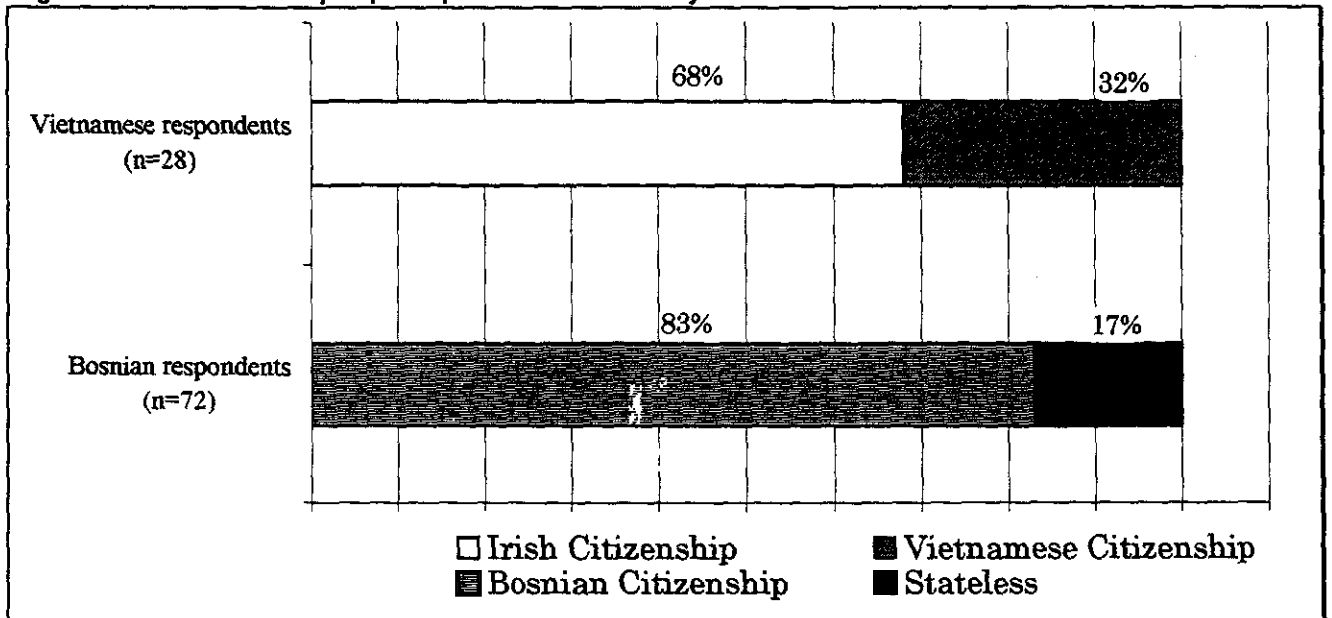
Figure 54 Perceptions of Ethnic Identity: Vietnamese sample (n=25)



11.3 Nationality and Naturalisation

Participants were asked to state their present citizenship status. Responses are outlined below.

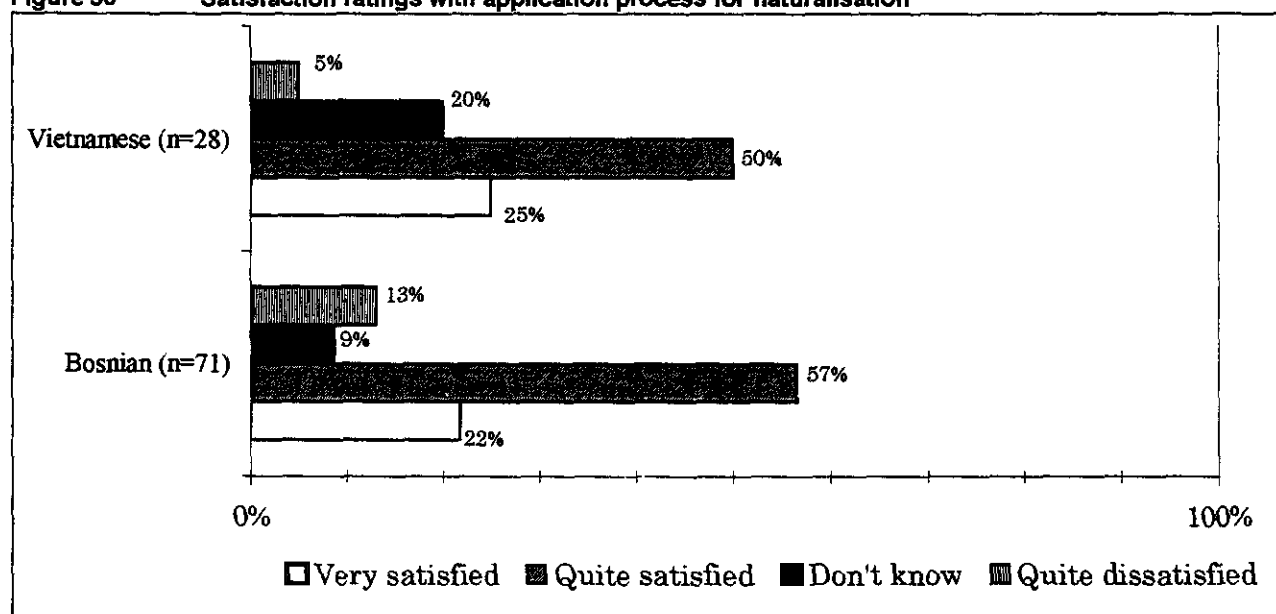
Figure 55 Citizenship of participants at time of survey



The differences between Bosnian and Vietnamese participants can clearly be seen in the above graphic.

- ☐ Among Bosnian participants, there were two categories of response. The majority of the sample held Bosnian citizenship, while 17% indicated that they were 'stateless'. This condition is one of the possibilities resulting from the war in Bosnia, and may arise in several different ways.
- ☐ At the time of the survey, the first applications for naturalisation made by Bosnian programme refugees were being processed by the Department of Justice, Equality and Law Reform. One third of those who responded to the question (24 people) have made applications for citizenship, while the remaining two-thirds (48 people) have not yet applied. Of those who have not yet applied, 38 indicated that they intend to apply in the future, while only one person stated that they did not intend to make an application.
- ☐ Members of the Vietnamese community are clearly availing of their entitlement to apply for Irish citizenship after having spent three years living here. Of those who do not already have Irish citizenship, two thirds (9 people) have made applications for citizenship, while the remaining one third (4 people) have not yet applied. All those who have not yet applied for Irish citizenship intend to do so in the future.
- ☐ In general, there do not appear to be substantial difficulties with the *process* of making naturalisation applications. 78% of Bosnian and 75% of Vietnamese expressed themselves 'satisfied' or 'very satisfied' with the process of applying for Irish citizenship. Many participants said that they had received excellent help from the Refugee Agency in completing all the necessary documentation. Three Bosnians and one Vietnamese person expressed themselves dissatisfied with the length of time the process took (from 6 months to three years).

Figure 56 Satisfaction ratings with application process for naturalisation



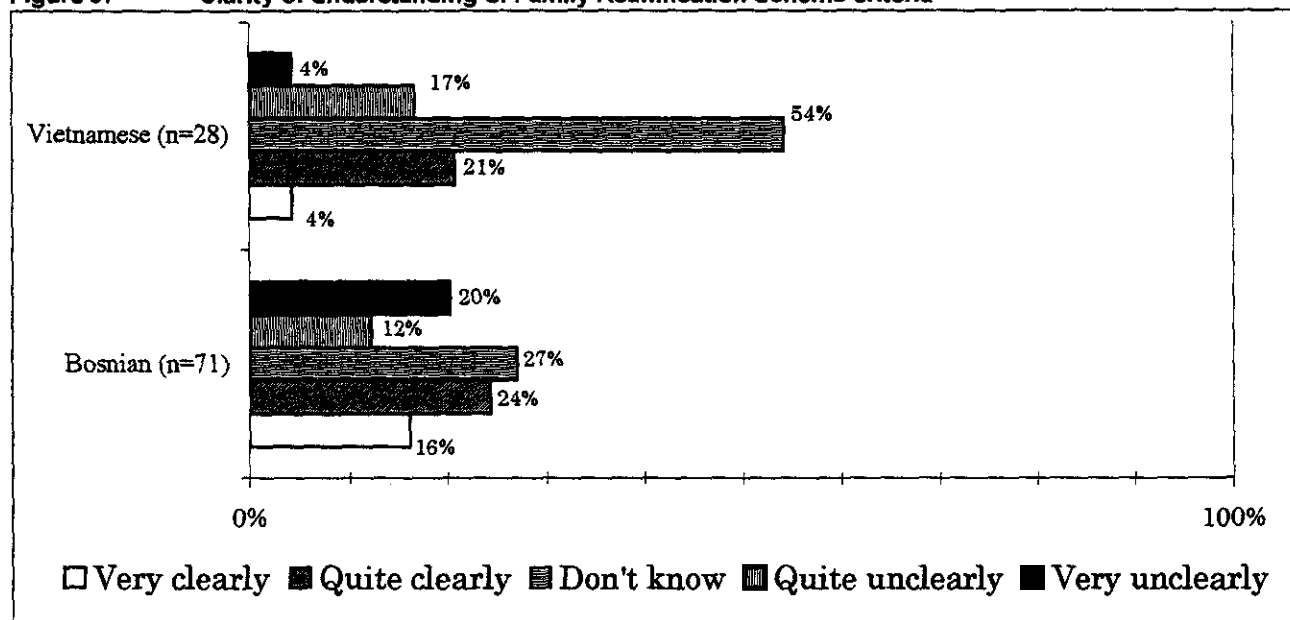
11.4 The Family Reunification Scheme

The Family Reunification Scheme is an issue that raises much debate among the programme refugee community in Ireland. Participants were asked a series of questions about the FRS in an attempt to gauge their perceptions of the scheme.

11.4.1 Clarity of understanding of FRS criteria

- 40% of Bosnian participants stated that they understood 'clearly' or 'very clearly' the criteria and rules for the operation of the FRS. 27% were 'not sure', while the remaining 33% were either 'unclear' or 'very unclear' about the operation of the FRS. There was even less clarity among the Vietnamese sample, with only 25% of the sample understanding the FRS criteria 'clearly' or 'very clearly'. 54% were 'not sure', while the remaining 21% were 'unclear' or 'very unclear' about the operation of the FRS.

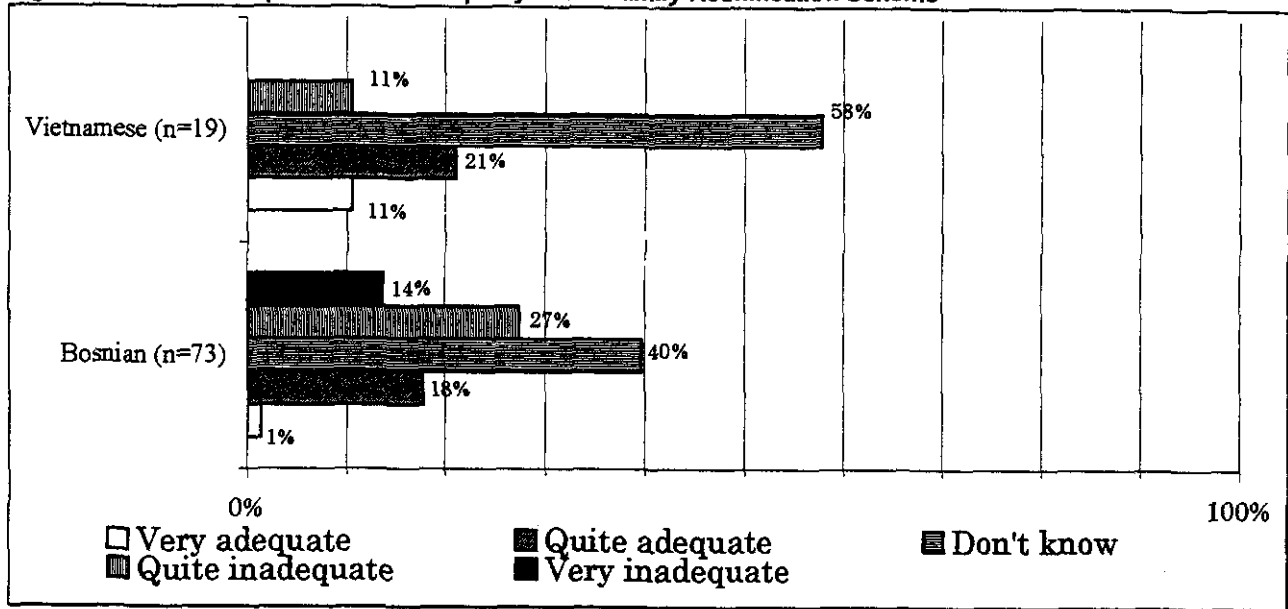
Figure 57 Clarity of understanding of Family Reunification Scheme criteria



11.4.2 Perceived adequacy of the Family Reunification Scheme in meeting demand

- Among Bosnian participants, less than 20% thought the present FRS was adequate, while 41% felt that it was 'inadequate' or 'very inadequate'. The remaining 40% responded that they were 'unsure'. Among Vietnamese participants, 32% felt that the FRS was 'adequate' or 'very adequate'. Only 2 people (10%) stated that they felt the FRS was 'quite inadequate', while the majority (58%) stated that they were 'unsure'.

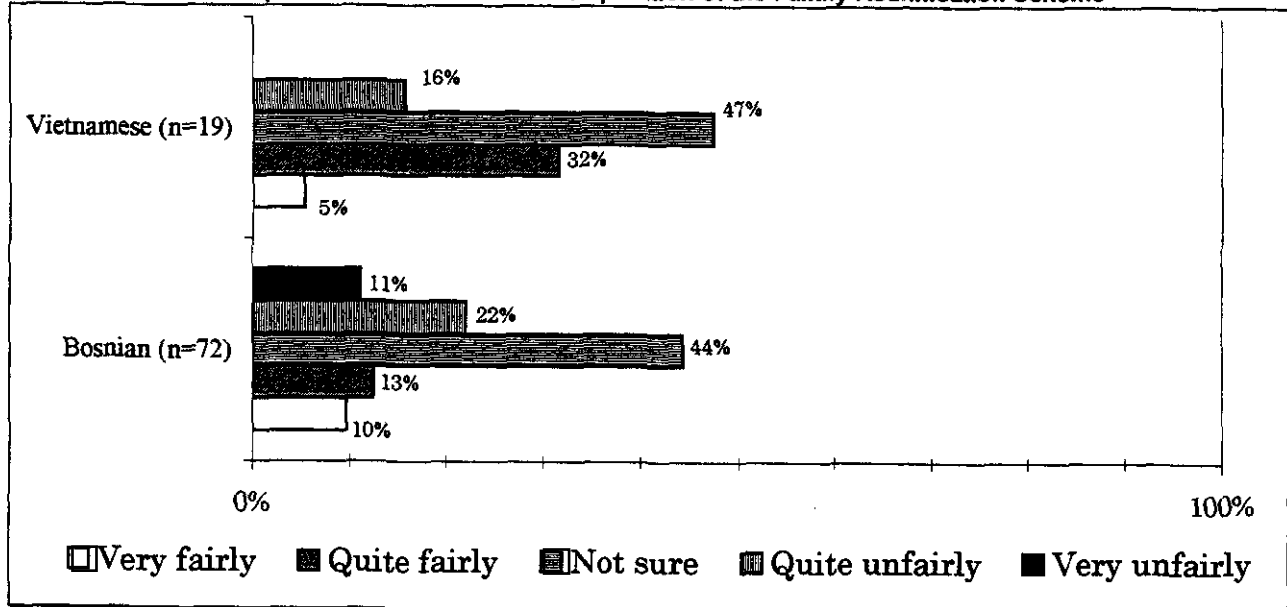
Figure 58 Perceptions of the adequacy of the Family Reunification Scheme



11.4.3 Perceptions of Fairness in the Family Reunification Scheme

- Participants were asked whether they thought that the Family Reunification Scheme was being operated fairly. Again, there was considerable responding using the 'not sure' category by both Bosnian (44%) and Vietnamese (47%) participants. 22% of Bosnian and 37% of Vietnamese participants felt that the FRS was being operated either 'fairly' or 'very fairly', while 33% of Bosnian and 16% of Vietnamese participants felt that the FRS was being operated 'quite unfairly' or 'very unfairly'.

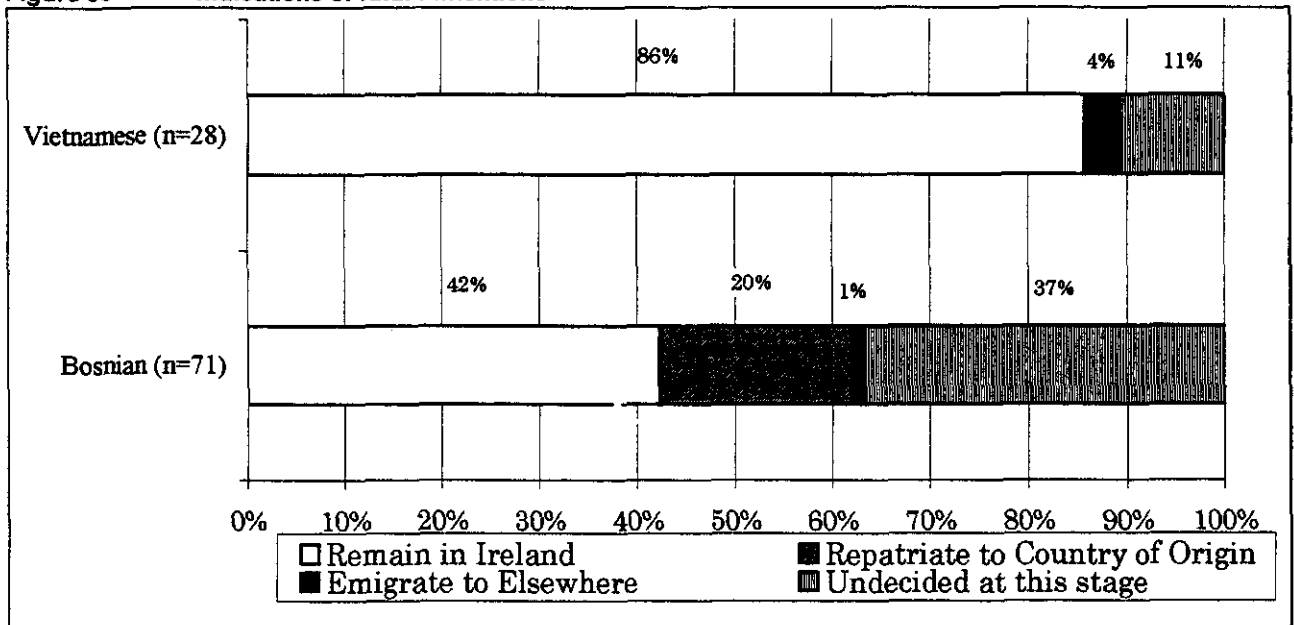
Figure 59 Perceptions of the fairness of the operation of the Family Reunification Scheme



11.5 Future Plans

Participants were asked what their intentions for the foreseeable future were. Responses indicate considerably more certainty among the Vietnamese community than among the Bosnian.

Figure 60 Indications of future intentions



- ☐ In the main, 'undecided at this stage' indicates that participants' plans depend on one of two factors: firstly, whether the political, social, and / or economic circumstances in their country of origin improve, and secondly, the wishes of their children in years to come.
- ☐ None of the Vietnamese community plan to repatriate to their home country, in contrast with 20% of the Bosnian community.

11.6 Conclusion

The issues dealt with in this chapter provide an indication of the identity and legal status of the participants.

The issue of ethnic identity was one that participants addressed with considerable interest. The vast majority of Vietnamese defined their identity (in equal numbers) as either Vietnamese or Chinese, while the majority of Bosnian participants defined their identity in one of three ways: as Muslim, Bosnian or Bosnian-Muslim.

In terms of the naturalisation process, there is a high take-up rate among the Vietnamese sample. While no Bosnian participants had yet received citizenship, interest was shown to be very high (86% of the sample had either already applied, or intend to apply in the future). There was a high level of satisfaction with the application process for naturalisation – participants were generally satisfied with the level of support offered to applicants by the Refugee Agency. The complaints about the application process centred around the length of time some applications took to process.

In terms of the Family Reunification Scheme, there were mixed perceptions. It emerged that there was a considerable lack of understanding among participants about the rules and criteria for the operation of the FRS. In addition, there were indications, particularly among the Bosnian participants, that the FRS was not seen to be meeting the demands of the community. Vietnamese participants were less critical of the FRS, but there remained a considerable proportion of the sample who were 'not sure'. It also emerged that there is a considerable degree of doubt about whether the FRS is being implemented fairly. This is reflective of the feedback received during the fieldwork, and is not surprising considering the confusion surrounding the operation of the scheme.

Finally, the Vietnamese participants indicated a strong level of commitment to remaining in Ireland. There was less certainty among a section of the Bosnian sample, 20% of whom stated that they planned to return to where they came from. Another 37% were undecided about their future, stating that it depended on a number of factors, including the wishes of their children, and practical issues like the resolution of the war. Nevertheless, 40% of the Bosnian sample intended to remain in Ireland for the foreseeable future.

Chapter 12

Social Interaction and Social Support

12.1 Introduction

One of the aims of the research was to examine how the Bosnian and Vietnamese Programme refugees seem to be integrating into Irish society. As outlined in the literature review, *integration* involves learning and adopting some of the social norms of the new country, while at the same time valuing and maintaining traditional customs and norms. It is a process that at times requires a compromise between alternative viewpoints and practices, both for the programme refugee communities and for Irish society in general.

This chapter presents data on several aspects of social adjustment. Participants were asked about their experiences of living in their local communities, and about the extent to which they interact with fellow expatriates, and with the wider communities in which they live.

12.2 Socialisation Patterns

12.2.1 *Interaction with the wider community*

- ☐ Asked how often they talk with neighbours who are not members of their expatriate community, the following data was obtained:
- 36% of both the Vietnamese and the Bosnian sample stated that they talk on a daily basis with people outside of their own expatriate communities.
 - A further 16% of the Bosnian sample and 24% of the Vietnamese sample talk with people outside their expatriate community 'once or twice' per week.
 - 15% of Bosnian participants and 20% of Vietnamese participants talk with people outside their own ethnic communities only once or twice per month.
 - 8 Bosnian participants and 3 Vietnamese participants stated that they talk with people other than compatriots less than once a month.
 - 16 Bosnian participants (22%) and 2 Vietnamese people (8% of participants) stated that they never talk with people other than their fellow expatriates. An interesting analysis of this data shows that those who stated that they never talk with people outside their own expatriate community are significantly more likely to want to move house.

Figure 61 Occassions on which participants talk with community.

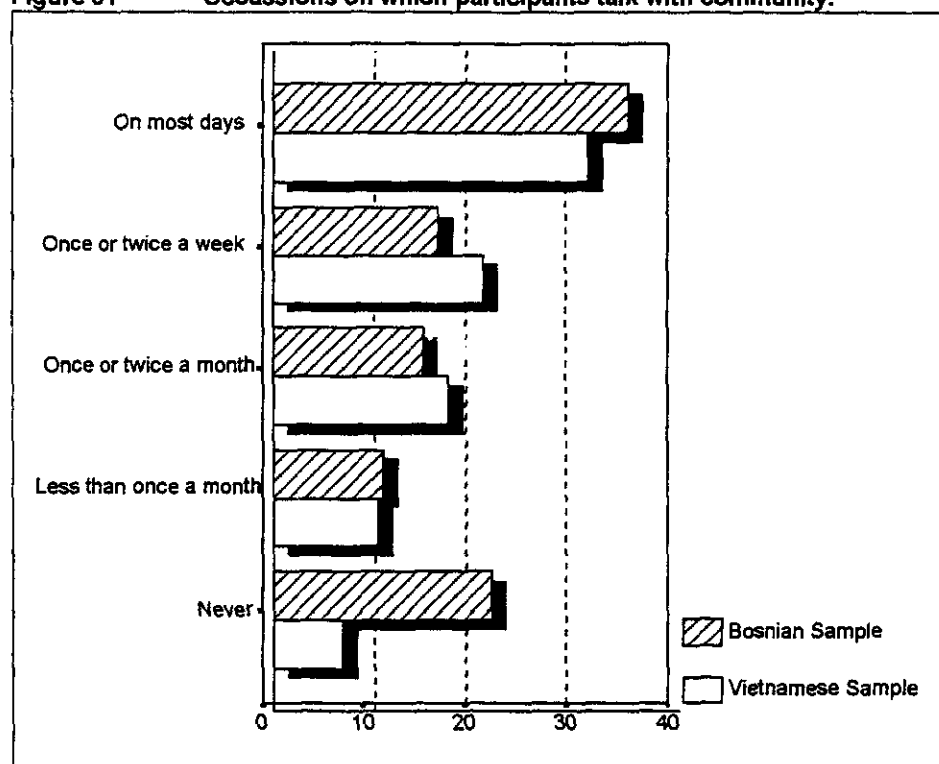


Figure 62 Role of Contact with neighbours x desire to move accommodation 'at some stage in the future'

		Expressed wish to move accommodation		
		Yes	No	Total
Frequency of communication with people other than	Ranging from 'on most days' to 'less than once a month'	54.88	45.12	82
	'never'	11.11	88.89	18
	Total	47.00	53.00	100

LR chi-square = 12.82 df = 1 prob = 0.0031 (adj.)

12.2.2

Gender-based Differences

- Separate Chi-square analyses of the data from the Bosnian and Vietnamese samples shows that there is no significant gender-based difference in the levels of talking with the wider community. However, the chi-square analysis of the Vietnamese sample shows a difference approaching significance at the .05 level ($\chi^2 = 8.54076$, probability level = 0.07366). In other words, it is possible that Vietnamese women who participated in the survey are more likely to be isolated from the wider social community than are Vietnamese men.

12.2.3

Role of English Language Skill

Combining the data for the Vietnamese and Bosnian samples, English language skills emerge as a significant factor influencing the frequency with which programme refugees talk with the members of the wider community.

- There is a correlation of +.485 between the number of indicators of language ability present and the frequency with which the participant meets people other than fellow expatriates.

- ☐ As an illustration of this relationship, of those who reported having no English language skills, 42% never interact with members of the wider community, while none interact on a daily basis. By contrast, of those who reported being able to read, write, speak, and understand English (to at least a basic functional level), 56% interact daily, a further 30% once or twice a week, and only 7% report never interacting with the wider community.

12.2.4 *Participant's Day-to-Day Occupation as a factor in socialisation*

- ☐ Another predictor of the frequency with which programme refugees talk with members of the wider community is the type of activity in which participants are engaged on a daily basis. For example, of those who state that they are in paid employment, 73% interact on a daily basis, the remainder on a fairly regular basis, with members of the wider community. Of the 18 people who stated that they never talk to neighbours who are not members of their expatriate community, 17 are not in paid employment. The categories least likely to interact on a regular basis with the wider community include the unemployed and the retired. Six out of eight retired persons (75%) state that they never meet people outside their expatriate community, while less than 18% of unemployed participants talk with people outside their community on a daily basis, and 25% stating that they 'never' meet members of the wider social community.
- ☐ This data highlights a potentially significant barrier to social integration for programme refugees living in Ireland: those who are not employed outside the home, and particularly those who are experiencing language skills deficits, are less likely either to engage in social interaction, and access employment.

12.2.5 *Participation in Clubs and Organisations*

- ☐ Participants were asked to indicate whether they were active members of social groups, clubs, organisations. The majority of each sample were not, with thirteen Bosnian participants (17.5% of the sample) and two Vietnamese (6.9% of the sample) being actively involved in a group.

12.2.5 - [a] *Gender*

- ☐ There is a significant gender difference ($p < .05$) in participation rates with social groups – of the 15 participants who were involved, 12 were men.

12.2.5 - [b] *Admission Category*

- The highest ratio of involvement among the various refugee categories was from the medical evacuees patients – one third of this sample were actively involved in a social group.
- All those who indicated involvement in a social group stated that they came from an urban background in their home country. No one of the 19 people who stated they came from a suburban or rural background claimed to be actively involved in a social group or club.

12.2.6 Contact with country of origin

Asked about their level of contact with family members in their country of origin, it was found that the Bosnian sample had a higher frequency of contact with their country of origin than the Vietnamese.

- Bosnian participants made contact on average 25 times in the preceding twelve months (with a wide variation of scores – standard deviation = 24.4). Vietnamese participants make contact by (letter, telephone, etc.) on average 3 times in the twelve months preceding the survey.

The different figures for the two communities are not surprising, given the fact that the Vietnamese community has been established in Ireland for a considerably longer period than the Bosnian.

12.2.7 Religious Participation

- Asked about their involvement in a religious group, four Vietnamese (13.8% of the sample) and 21 Bosnian participants (28.3% of the sample) indicated that they were actively involved in a religious group.¹
- Language ability was the most significant predictor of involvement with a religious group. Of those with a language capability score of between 0 and 2 (i.e. those participants with fewer English language skills), 50% were involved with a religious group. This contrasts with 7.7% of those with a score of 3 or 4 being involved in a religious group.
- Six out of the seven participants (86%) from a rural background were involved with a religious group. This figure was significantly different from the 19 participants (22%) from an urban or suburban background who were involved in a religious group.
- Older participants (over 45 years) were more likely to be actively involved in a religious group than those aged under 45 (50% compared with 16% of participants).
- Those involved in a religious group also scored high in terms of psychological distress. This trend is likely to be associated with factors such as lack of English language skills.
- Of those who described their ethnic identity as 'Bosnian', 11.5% were involved in a religious group. Of those who described their ethnic identity as Bosnian/Muslim, 50% were involved in a religious group, while 40% of those who described their ethnic identity as 'Muslim' were actively involved in a religious group.

12.2.8 Social Participation

The survey sought to gain information on social participation, as a potential indicator of the wider social adjustment patterns of the participants. Participants were asked whether they had had a social evening, for their entertainment, during the preceding fortnight.

45% of the combined samples stated that they had had, while the remaining did not. One of the primary reasons cited for not having had a night out was that the participant

¹ This indicates that there is not a direct relationship between the programme refugee's ethnic identity and his or her religious practices.

could not afford it. In reality, there are many factors which analyses indicate are relevant to the social activities of the participants.

Age, English language ability, and civil status were some of the key factors associated with socialisation levels among the participants. Other factors (each significant at .01 probability level) which are related to socialising patterns include type of daily activity, gender, and GHQ-28 score.

12.2.8 - [a] Age of the participants

- ☐ Those aged under 25 were much more likely to have attended a social event during the fortnight preceding the survey than any other age group (Figure 63).

Figure 63 Chi-Square analysis of socialising x age group

		Attended social event during preceding fortnight		
		Yes	No	Total
Age Group	Under 25	87%	13%	15
	25 – 45 years	48%	52%	50
	46 years and over	25%	75%	28
	Total	45%	55%	93
		LR chi-square=19.56 df=2 p<.001		

12.2.8 - [b] English Language Skills

- ☐ Participants with better English language skills were significantly more likely to have attended a social event during the same period.

Figure 64 Chi-Square analysis of socialising x number of English language skills

No. of English language skills	Attended social event during preceding fortnight		
	Yes	No	Total
0	5.26	94.74	19
1-3	38.71	61.29	31
4.	65.96	34.04	47
Total	45.36	54.64	100% 97

LR chi-square=24.13 df=2 p<.001

12.2.8 - [c] Civil Status

- ☐ Widowed persons were the least likely to have had a social evening out during the fortnight preceding the research interview. Married (65 participants), separated (one participant) and divorced (two participants) were more likely than widowed, but significantly less likely than single participants to have had a social evening out during the preceding fortnight.

Figure 65 Chi-Square analysis of socialising x Civil Status

Civil Status	Attended social event during preceding fortnight		
	Yes	No	Total
Single persons	82.61%	17.39%	23
Married, separated and divorced persons	37.88%	62.12%	66
Widowed persons	0.00%	100.00%	8
Total	45.36%	54.64%	97

LR chi-square=24.80 df=2 p<.001

12.2.8 - [d] Daily Occupation

- ☐ Participants who typically spent their day in the home (specifically, unemployed and retired people, and those who are on home duties) were least likely to have attended a social event during the preceding fortnight. 32% of unemployed participants had been out, four out of 12 people on home duties, and none of the eight participants who were retired. In contrast, over 90% of people who were working or who were attending education or training courses had been socialising during the period. The difference between those who spend their day in the home, and the other categories, is significant at the .001 probability level.

12.2.8 - [e] Gender

- ☐ 32% of women had socialised during the period, compared with 57% of men. This difference is significant at the .05 probability level.

12.2.8 - [7] Mental Health

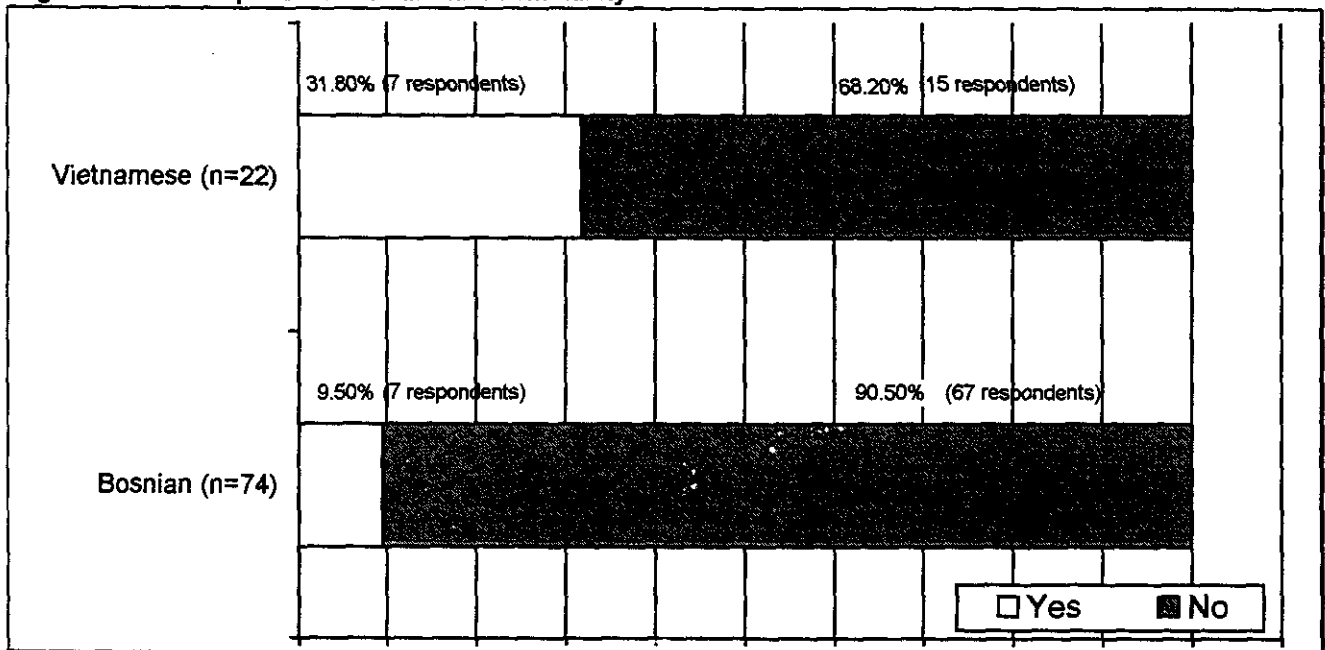
- ☐ The data also highlights a significant relationship between socialising and mental health. 59% of those below the GHQ-28 threshold mark had socialised during the period, compared with 24% of those above the threshold.²

12.2.9 Experiences of Racism

Participants in the survey were asked whether they had ever experienced racial abuse in Ireland. Responses illustrated that:

- ☐ Seven Vietnamese participants (32% of the sample) and seven Bosnian participants (9.5% of the sample) had experienced some form of racism. The predominant form of abuse experienced by Vietnamese was verbal, while Bosnian participants experienced verbal abuse, both on its own, and sometimes with physical abuse.

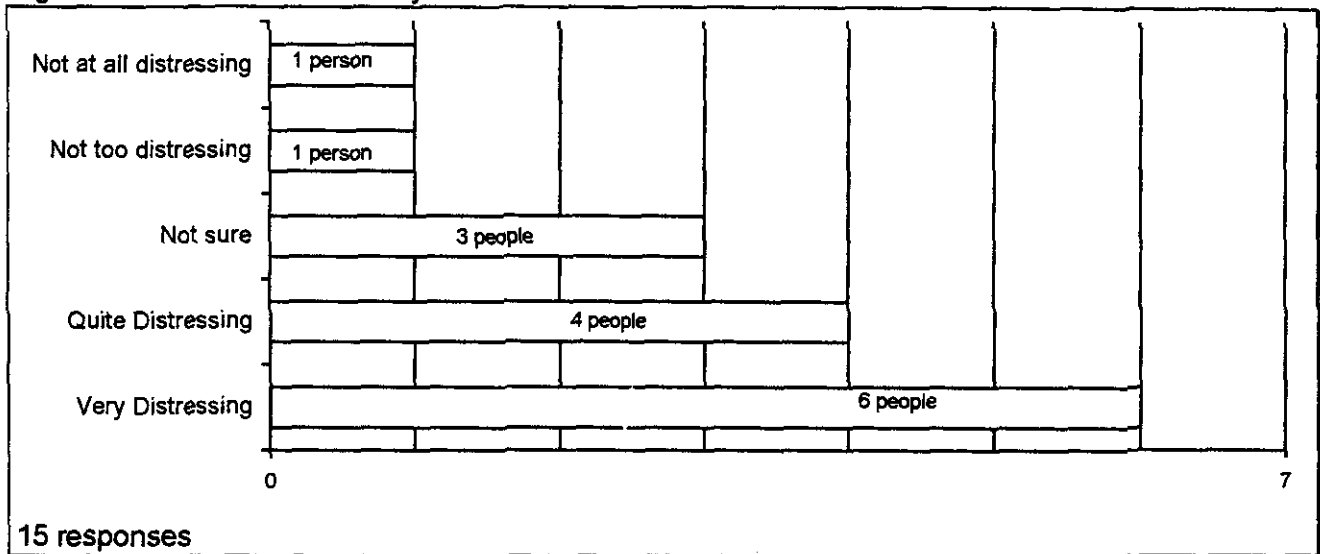
Figure 66 Experiences of Racism x Community



- ☐ Those who had experienced racial abuse were asked to rate on a 5-point scale how distressing they had found the abuse. Bosnian and Vietnamese responses were collapsed, and are illustrated below in Figure 67.

² See Chapter 13 for fuller discussion of the GHQ score.

Figure 67 Distress caused by Racial Abuse



12.3 'Feeling of Belonging' to the community

Participants in the survey were asked whether they feel that they belong to the community in which they live. Some of the significant factors are outlined below.

12.3.1 Difference between sample groups

There was a significant difference between the Vietnamese and Bosnian samples (as outlined in Figure 68). A large proportion of Bosnian participants (61%) felt that they were not part of the community they live in. 17% felt they 'partially' belonged to the community, while the remaining 22% did feel part of the community in which they live.

Figure 68 Feelings of 'being part of the community' x participant's country of origin

		"Do you feel you belong to the community in which you live?"			
Country of origin		No	Partially	Yes	Total
	Bosnian	60.81%	17.57%	21.62%	74
	Vietnam	13.64%	36.36%	50.00%	22
	Total	50.00%	21.88%	28.13%	96

LR chi-square = 16.49 df = 2 p < .001

12.3.2 Gender differences

There was a significant effect for gender among the Vietnamese sample, while there was no corresponding effect among the Bosnian sample.

Figure 69 Feelings of 'being part of the community' x participant's country of origin

		"Do you feel you belong to the community in which you live?"			
Country of origin		No	Partially	Yes	Total
	Male	7.14%	21.43%	71.43%	14
	Female	25.0%	63.5%	12.5%	8
	Total	13.64%	36.36%	50.00%	22

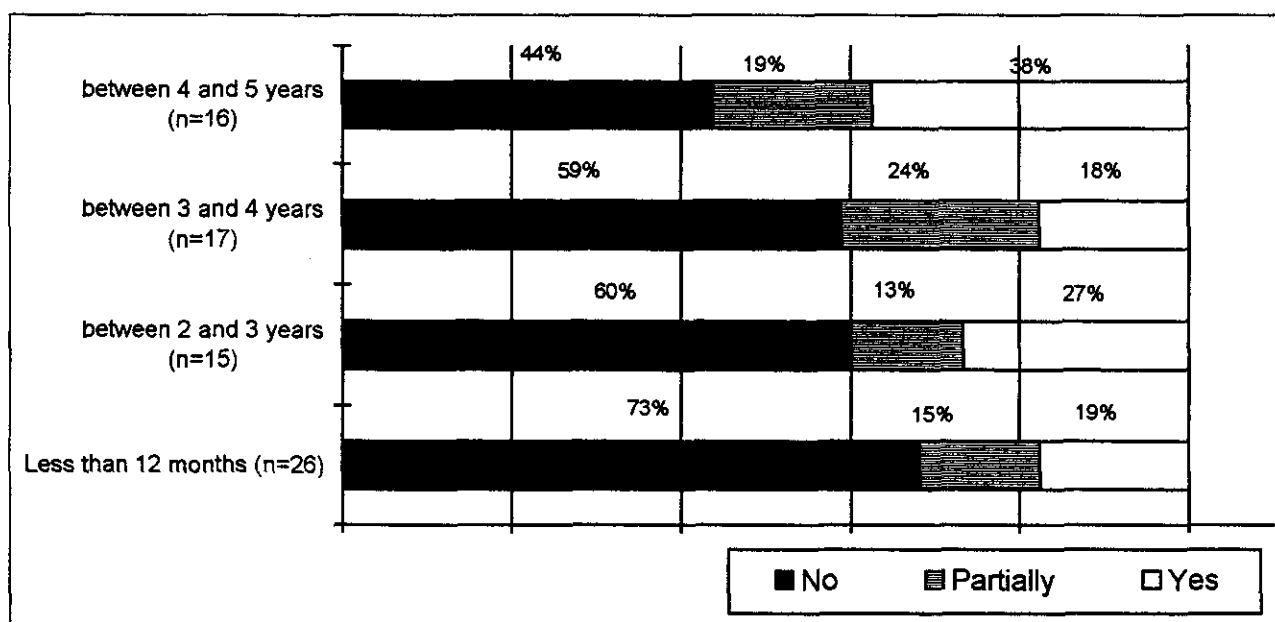
LR chi-square = 7.74 df = 2 p < .05

12.3.3 Length of Time in Ireland

Figure 70 shows that there is a growing sense of belonging to the community as Programme refugees spend more time in the country.

- ☐ Of the Bosnian sample who had been in Ireland less than 12 months, 73% did not feel part of the community. The corresponding figure among those who had been in Ireland for between 4 and 5 years was significantly reduced, at 44%.
- ☐ Similar trends can be seen among the Vietnamese sample. Of the 13 participants who had been in Ireland for more than 15 years, 8 people (61.5%) had a sense of belonging to their community, while only one person did not. The remaining four felt they belonged 'partially' to the community in which they live.

Figure 70 Bosnian Community - Feelings of 'being part of the community' x Length of time in Ireland



12.3.4 *Future Plans*

The programme refugee's future plans are also closely related to how much they feel part of the community.

Figure 71 Chi-square table: Feeling of belonging in the community x future plans

Future Plans		Programme refugees were asked whether they felt part of the community in which they lived.			
		No	Partially	Yes	Total
Future plans	Remain in Ireland	32.65%	18.37%	48.98%	51% (n = 49)
	Repatriate to Country of origin	64.29%	28.57%	7.14%	14.6% (n = 14)
	Emigrate to elsewhere	0.00%	100.00%	0.00%	2.08% (n = 2)
	Undecided	71.43%	21.43%	7.14%	29.16% (n = 28)
	No response	100.00%	0.00%	0.00%	3.125% (n = 3)
Total		50.00%	21.88%	28.13%	100% (n = 96)

LR chi-square = 32.54 df = 8 p < .001

12.3.5 *Financial Well-Being*

- ☐ The data illustrated in Figure 72 below strongly indicates that financial well-being is closely related to a feeling of being part of the community. Put in another way, participants who reported being under economic strain were significantly more likely not to feel part of the community in which they live.

Figure 72 Chi-square table: Feeling of belonging to the community x ability to manage on income

		"Do you feel part of the community in which you live?"			
		No	Partially	Yes	Total
ability to manage on household income	very easily	5.26%	36.84%	57.89%	19.8% (n = 19)
	quite easily	63.64%	18.18%	18.18%	11.45% (n = 11)
	Adequately	63.64%	15.15%	21.21%	34.4% (n = 33)
	with some difficulty	53.85%	23.08%	23.08%	27.08% (n = 26)
	with great difficulty	71.43%	14.29%	14.29%	7.3% (n = 7)
Total		50.00%	21.88%	28.13%	100% (n = 96)

LR chi-square = 23.78 df = 8 p < .001

12.3.6 *English Language Skills*

- ☐ Figure 73 shows the relationship between English language skills and the participant's 'feeling of belonging' in the community.

Figure 73 Chi-square table: Feeling part of the community x English language skills

English language skills	"Do you feel part of the community in which you live?"				
		No	Partially	Yes	Total n
	0 or unknown	77.27 %	22.73 %	0.00%	22.9% (n=22)
	1 or 2	65.00 %	15.00 %	20.00 %	20.8% (n=20)
	3 or 4	33.33 %	24.07 %	42.59 %	56.25% (n=54)
	Total	50.00%	21.88%	28.13%	100% (n=96)

LR chi-square = 24.00 df=4 p<.001

12.4 Conclusion

The present chapter presented data that gives some indication of the extent of social interaction and social isolation.

One of the findings is that a minority of both the Bosnian and Vietnamese samples had a very limited level of interaction with people other than members of their own expatriate communities. Some of the factors associated with this include spending the daytime in the home, and not possessing good English language skills.

Only a small minority (mainly men) were involved in clubs or organisations. 14% of Vietnamese and 28% of Bosnian participants were involved in a religious group. Those involved in such a group generally had lower levels of English language skills, and were found to be largely from rural areas in their countries of origin.

Almost half of the participants had not had attended a social / entertainment event during the fortnight preceding the survey. These were mostly over 25 years of age, married, with poorer English language skills, and likely to spend their day in the home environment. In addition, fewer women than men had socialised during the period. One of the implications of this relates to mental health.

Participants were asked about their 'feeling of belonging to the community'. Those who were the most likely to feel part of the community in which they lived had been living in Ireland for longer, had better English language skills, spoke more frequently with people outside their ethnic group, and had decided to remain in Ireland for the foreseeable future.

Participants had experienced racism to a significant level - 32% of the Vietnamese sample (7 participants) and 9.5% of the Bosnian sample (7 participants). The majority of these people had found the experience to be distressing.

Encouragingly, the data shows that as participants spend more time in Ireland, they tend to show signs of adjusting to life here. For example, they begin to feel more that they belong to the community in which they live. Young people in general seem to be more integrated into Irish society; they socialise more frequently and have better English language skills. There is a danger that older programme refugees are particularly vulnerable to isolation, and the associated dangers of psychological distress.

Chapter 13

Physical and Psychological Health

13.1 Introduction

During the research, data was gathered on several issues that may serve as indicators of the general health status of participants. Primary among these indicators was the administration of the General Health Questionnaire (GHQ-28), as described in Chapter 4.

There were a series of other questions relating to health in general. Some of this data is presented also in conjunction with the GHQ scores, and where relevant, is analysed for its effect on the GHQ scoring patterns.

In relation to the Bosnian community, there is a fundamental distinction to be made during the analyses in this chapter between, on the one hand, primary admissions and FRS admissions (as defined in Chapter 2), and medical evacuees on the other. Government Decisions relating to medical evacuees from the former Yugoslavia were made with the specific intention of providing medical attention (primarily of an orthopaedic nature) in Ireland to victims of the conflict. It is therefore to be anticipated that medical evacuees will have very different health issues, and rates of health service utilisation, than any other category of programme refugee.

13.2 Health Insurance Cover

Participants were asked about their health insurance provision. The data shows that the Bosnian community has substantially better health cover.

- ☐ Only 2 Vietnamese participants had Voluntary Health Insurance¹ cover. A further 13 had a medical card. Seven stated that they had neither a medical card or VHI cover.
- ☐ Among Bosnian participants, 89% had a medical card, with only 11% not being in possession of such a card. All medical evacuees and their family members had medical cards. As regards VHI cover, only 11% claim to have this cover, with 89% not being covered by VHI. None of that 11% (8 participants) are medical evacuees or their family members.

¹ At the time the survey was carried out, VHI was the only provider of private health insurance cover in Ireland.

13.3 Utilisation and Perceptions of Health Services

Participants were asked how many times they had visited any doctor, including their General Practitioner, over the past 12 months. Analyses exclude those who had been in Ireland for less than 12 months at the time of survey.

- ☐ Bosnian participants from among the primary admissions and Family Reunification Scheme admissions averaged 1.44 over a 12 month period (std. dev. = 2.45) visits to a doctor. When the data from family members of medical evacuees are included in the analysis, the average rises to 3.24 (std. dev. = 5.86), mainly due to the inclusion of one individual who had visited a doctor more than once a month. These data, therefore, demonstrate no dramatic levels of medical complaint among the general body of Bosnian programme refugees who took part in the survey, and are roughly equivalent with general Irish norms (ESRI, 'Living in Ireland' survey, 1997).
- ☐ As would be expected, the 22 medical evacuees averaged significantly more visits to the doctor during the 12 month period prior to the survey (average = 14.5 visits, std. dev. = 23.54). A one-way analysis of variance shows a statistically significant difference at the .05 level of probability between the mean score of medical evacuees and the primary admissions / FRS groups. With a range of scores like this, it is apparent that a few individuals have required considerable medical attention, thereby pushing up the average score; one individual reported requiring medical attention about twice a week, and in total about 25% of medical evacuees reported requiring medical attention at least once per month over the 12 month period. On the positive side, 50% of the medical evacuees required medical attention less than once every 2 months, which is a strong indication that these individuals' medical problems are well controlled.

Looking at the entire sample, perceptions of the health services seem very positive. Participants were asked whether they had availed of health services during the preceding 12 months, either on their own or on somebody else's behalf.

Out of 74 Bosnian participants,

- ☐ 59 had been in contact with their local GP during the preceding 12 months. Out of these, 56 had found the service very or quite helpful. 50 were satisfied with the outcome. Only one person had found the GP service unhelpful, while 2 were dissatisfied with the outcome of the service.
- ☐ 35 had been in contact with the services of a hospital doctor during the preceding 12 months; 33 had found the service very helpful, while 29 were very satisfied with the outcome of their visit (with only 3 people expressing dissatisfaction).
- ☐ Eleven Bosnian participants had been in contact with the Health Board psychological services during the preceding 12 months; eight of these had found the service very helpful, while 2 had found it unhelpful. Seven out of the 11 users were very satisfied with the outcome, another 2 were quite satisfied, while the remaining 2 people did not know.
- ☐ A further four Bosnian participants had been in contact with a private therapist / counsellor during the preceding 12 months - all had found the service very useful.

Out of 29 Vietnamese participants

- ☐ 17 had been in contact with a GP during the preceding 12 months, all were very satisfied, both with the service, and with the outcomes of their visit.
- ☐ Eight Vietnamese participants had been in contact during the preceding 12 months with a doctor in a hospital. All had found the service useful, and all except one felt satisfied with the outcome of the contact.
- ☐ None of the 29 Vietnamese participants had been in contact during the preceding 12 months with either the Health Board psychological services, or with the services of a private therapist / counsellor.

Participants were also asked about the number of prescriptions issued to them over the previous 12 months.

- ☐ On average, participants had received 5 prescriptions from doctors during the 12 months prior to the survey. While medical evacuees had the highest average number of prescriptions issued to them (avg. = 7.5, std. dev. = 8.07), there was no significant difference between the categories of refugee (at .05 level of probability). Since the majority of the medical evacuees admitted into Ireland were orthopaedic patients, many of their visits to the doctor involve check-ups or physiotherapy, rather than the administration of medication.

Among Vietnamese participants, health service utilisation figures were considerably lower than among Bosnian participants.

- ☐ 85% of participants had 4 or less visits to a doctor during the 12 months preceding the survey (mean = 3.42, std. dev. = 5.36).
- ☐ Similarly, 85% had received 4 or less prescriptions from a doctor during the same 12-month period. The remaining 15% (three individuals) had between one and two visits per month to the doctor, apparently receiving one prescription with each visit.

Participants were asked whether they had any long-term illness or disability, and if so, how it affected them in their everyday lives.

- ☐ Of the Vietnamese participants, 18% reported having a long-term illness or disability, while 82% did not. There is no statistical difference between primary admissions and those admitted under the Family Reunification Scheme.
- ☐ As would be expected, by far the highest level of complaint about physical health was from the group of medical evacuees who took part in the survey. Of these ($n = 23$), 91% reported having a long-term disability or illness. The majority of these complaints were about loss of limbs, or loss of the use of limbs. Asked how the disability affected their everyday lives, participants reported in the main about restricted movement, experiencing pain, and not being able to do everyday tasks that they could do before sustaining their injuries. There were 3 reported cases of visual impairment or blindness. One of these cases reported that the complaint had no effect on his everyday life. The other two reported severely restricted activities, where they are dependent on the help of other people for a significant proportion of their daily activities. Only one patient reported psychological effects of the disability, where the person suffered from insomnia, and was dependent on medication for the problem.
- ☐ Among the relatives of these patients, 27% of those who took part in the survey reported having a disability or long-term illness (these included one case of asthma and one case of arthritis), while the remaining 73% did not report any problems.
- ☐ Similar figures were found for primary admissions, 17% of whom reported a problem, including 2 people with complaints about nerves (1 migraine sufferer, and one person who said that they cannot deal with everyday life), along with one person who suffers a skin disorder, which causes self-consciousness. The remaining 83% did not report any disability or long-term illness.
- ☐ The figures found for secondary admissions (programme refugees admitted under the Family Reunification Scheme) show higher levels of complaint than the other two non-patient categories. 60% did not report any disability or long-term illness, but a substantial 40% did. Problems include diabetes (1 case), blood-pressure and cholesterol-related illnesses (3 cases), bronchitis (1 case), limited limb movement (1 case), and anxiety / nervousness (1 case).

13.4 The General Health Questionnaire

13.4.1 Introduction

The GHQ is a versatile measure of the concept of 'psychological distress'. In the context of resettlement in a new country, and particularly in the context of the enforced displacement experienced by many programme refugees, the incidence of psychological distress is one of primary concern, while its potential relationship with other factors is also an issue of strong interest.

The GHQ-28 instrument and its scoring methodologies have been described in detail previously in section 4.2.3.

13.4.2

GHQ Reliability

Using the 4 sub-scales of the GHQ-28 as the additive components for the overall score, split-half and Alpha analyses were carried out on the 95 valid scores obtained during the study. Results of the reliability analysis were very satisfactory: Chronbach's Alpha score for the scale was + 0.9841.

The correlation matrices for the Vietnamese and Bosnian samples (Figure 74 and Figure 75) show a strong positive correlation between all sub-scale scores on the GHQ. All correlations are significant at the .01 probability level.

Figure 74 Correlation matrix for GHQ scores and sub-scale scores (Vietnamese sample)

GHQ Subscale	A	B	C	D	Total GHQ
A		.980	.977	.942	.985
B	.980		.993	.983	.998
C	.977	.993		.984	.997
D	.942	.983	.984		.984
Total GHQ	.985	.998	.997	.984	

Figure 75 Correlation matrix for GHQ scores and sub-scale scores (Bosnian sample)

GHQ Subscale	A	B	C	D	Total GHQ
A		.966	.914	.845	.958
B	.969		.969	.920	.990
C	.914	.969		.968	.989
D	.845	.920	.968		.957
Total GHQ	.958	.990	.989	.957	

13.4.3

Interpretation of Data

The GHQ score can be interpreted in one of two ways.

- The first approach treats psychological disorder as a dimension, and uses GHQ-28 scores as a linear measure of this dimension. Based on the GHQ scoring system, the scores may range from 0 to 28.
- The second approach, as used frequently in large-scale epidemiological studies, is to treat each score as indicating a 'case' or 'non-case' of psychological disorder. This approach involves adopting a threshold score, below which the person is considered a 'non-case', and above which the person is considered a 'case'. The reliability measurement using this approach benefits from the cross-analysis of the GHQ score with the outcome of a clinical interview.

During the present study, a threshold mark of 5 is adopted. This is a relatively stringent criteria upon which to base analyses. The decision is based primarily on Goldberg and Williams (1991), who outline 16 studies which have used the GHQ-28. Among these, the lowest threshold scores for the GHQ-28 are between 4 and 5, while the highest scores are between 11 and 12, with the modal value being between 5 and 6.

13.4.4

Distribution of GHQ scores

A Chi-square analysis of the GHQ-28 data shows a significant difference between the GHQ scores of the Bosnian and Vietnamese samples (illustrated in Figure 76). Based on the following scores, it would appear that the Vietnamese sample have significantly fewer mental health problems than the Bosnian sample. On this basis, frequency

distribution of the scores for the two communities are therefore presented, below, independently of each other.

Figure 76 Chi-square of threshold position on GHQ-28 x Group

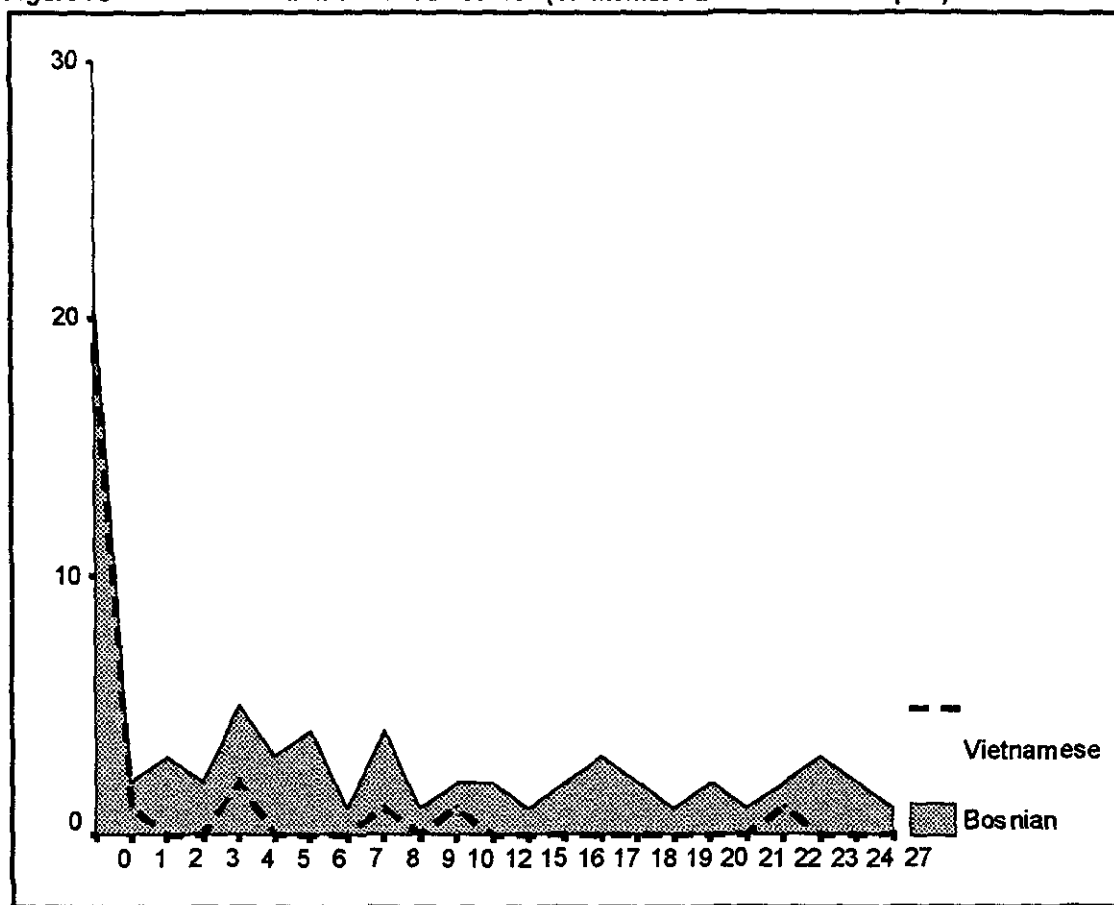
	below threshold	above threshold	Total
Bosnian	51.43	48.57	70
Vietnamese	88.00	12.00	25
Total	61.05	38.95	95
LR chi-square = 11.69 df = 1 p < .001			

- ☐ Using the threshold criterion of 5, only 12% (3 individuals) of the Vietnamese sample fall above the threshold mark, while the remaining 88% fall below the threshold. This finding contrasts markedly with the Bosnian sample, 48.6% of which falls above the threshold using the same criteria. It also appears to compare favourably with the Irish population, where Whelan, Hannan, and Creighton (1991) found 17.2% of their sample (n = 6,095) to be above the 2/3 threshold mark for the GHQ-12 questionnaire (which is comparable as a threshold score to that adopted for the present study).

Figure 77 GHQ-28 Frequency Distribution

Bosnian Sample				Vietnamese Sample			
Score	Frequency	Percent	Cumulative Percent	Score	Frequency	Percent	Cumulative Percent
0	21	30.0	30.0	0	19	76.0	76.0
1	2	2.9	32.9	1	1	4.0	80.0
2	3	4.3	37.1	2	~	~	~
3	2	2.9	40.0	3	~	~	~
4	5	7.1	47.1	4	2	8.0	88.0
5	3	4.3	51.4	5	~	~	~
6	4	5.7	57.1	6	~	~	~
7	1	1.4	58.6	7	~	~	~
8	4	5.7	64.3	8	1	4.0	92.0
9	1	1.4	65.7	9	~	~	~
10	2	2.9	68.6	10	1	4.0	96.0
12	2	2.9	71.4	12	~	~	~
15	1	1.4	72.9	15	~	~	~
16	2	2.9	75.7	16	~	~	~
17	3	4.3	80.0	17	~	~	~
18	2	2.9	82.9	18	~	~	~
19	1	1.4	84.3	19	~	~	~
20	2	2.9	87.1	20	~	~	~
21	1	1.4	88.6	21	~	~	~
22	2	2.9	91.4	22	1	4.0	100.0
23	3	4.3	95.7	23	~	~	~
24	2	2.9	98.6	24	~	~	~
27	1	1.4	100.0	27	~	~	100.0
Total	70	100.0		Total	25	100.0	

Figure 78 Distribution of GHQ-28 scores (Vietnamese and Bosnian samples)



13.4.5 Further analysis of GHQ scores

Where it is considered appropriate, an analysis is presented of the combined Bosnian and Vietnamese sample data. Otherwise, analyses are presented for one or each of the sample groups.

13.4.5 - [a] Admission Category

There is no significant difference between GHQ scores for the combined samples. However, the following results merit consideration given that they are significant at the .10 probability level.

- ☐ A chi-square analysis of the Bosnian sample shows the difference between various categories of refugee in the survey to be significant at the .10 level. Collapsing the data categories, it is found that primary admissions score more frequently below the GHQ threshold than all other admissions categories.
- ☐ Among the Vietnamese sample, the trend towards significance is opposite to that of the Bosnian sample. Here, there was a higher proportion of primary admissions than FRS admissions above the GHQ threshold (significant at .10 probability level).

Figure 79 Position relative to GHQ Threshold x Admission Category (Bosnian Sample)

Refugee Admission Category	below threshold (row %)	above threshold (row %)	Total
Primary admissions	69.57	30.43	32.85% (n = 23)
Admitted under Family Reunification Scheme	28.57	71.43	20% (n = 14)
Medical Evacuee Patient	45.83	54.17	34.3% (n = 24)
Medical Evacuee Relative	55.56	44.44	12.85% (n = 9)
Total	61.05	38.95	100% (n = 70)
LR chi-square = 6.50 df = 3 p < .10			

Figure 80 Position relative to GHQ Threshold x Admission Category (Vietnamese Sample)

Refugee Admission Category	below threshold (row %)	above threshold (row %)	Total
Primary admissions	80.00	20.00	40% (n = 10)
Admitted under Family Reunification Scheme	93.33	6.67	60% (n = 15)
Total	88.00	12.00	100% (n = 25)
LR chi-square = 0.99 df = 3 prob = 0.80			

13.4.5 - [b]

Age

A Chi-square analysis shows that age is strongly related to GHQ score among the Bosnian sample, but not among the Vietnamese sample. Results are outlined below in Figure 81.

- ☐ Among the Bosnian sample, the younger the participant, the less likely that person was to score above the GHQ threshold. Only 1 person under the age of 25 (12.5% of the age group) falls above the threshold, while 18 people aged between 26 and 45 years (45% of the age group) fall above the threshold. The age category '46 years plus' is the highest-scoring category, where the majority (13 out of 19, or 68% of the age group) fall above the threshold score. This result is significant at the .05 level of probability, and is a strong indication that younger Bosnian adult programme refugees are experiencing lower levels of psychological distress (and consequent mental health problems) than older adults.

Figure 81 Position relative to GHQ Threshold x Age Category (Bosnian sample)

Age Group	Below threshold (row %)	above threshold (row %)	Total
under 25	87.50	12.50	11.4% (n = 8)
26-45 years	55.00	45.00	57.1% (n = 40)
46 years plus	31.58	68.42	27.14% (n = 19)
Missing data	33.33	66.67	4.3% (n = 3)
Total	51.43	48.57	100% (n = 70)
LR chi-square = 8.39 df = 3 p < .05			

13.4.5 - [c] Gender

There is no significant overall effect between GHQ scores for males and females.

13.4.5 - [d] Socio-Economic Status

The strongest set of predictors of whether or not a person's GHQ score falls above the threshold mark are those relating to the socio-economic status of the survey participant.

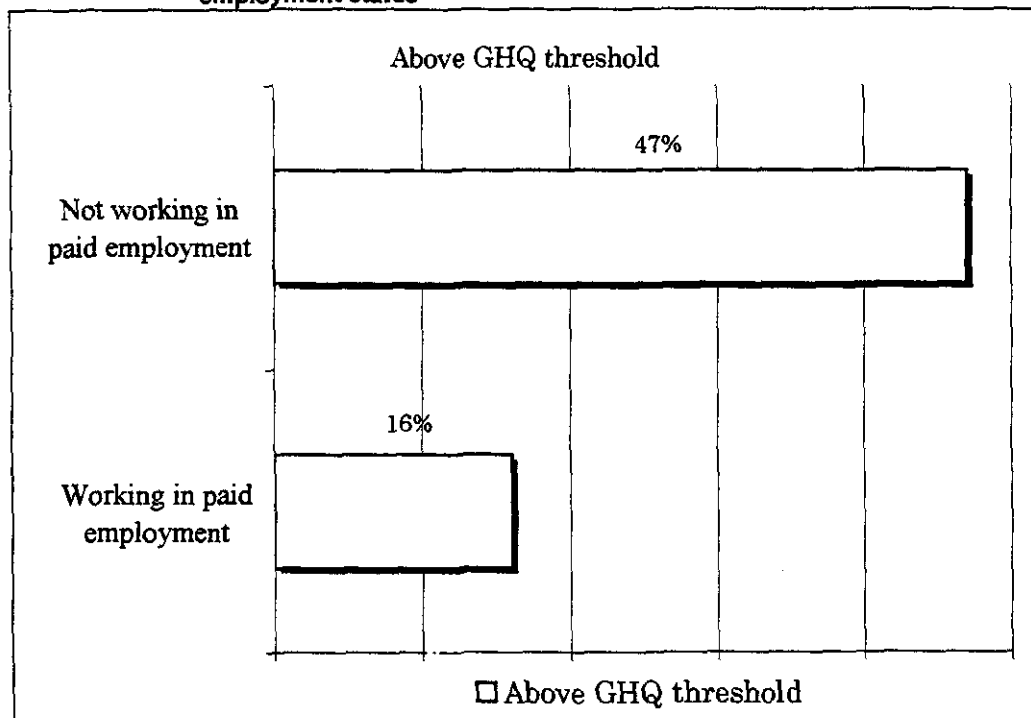
- ☐ There is a very strong relationship between the economic strain which a participant perceives him or herself to be under and the participant's position relative to the GHQ threshold. Those who indicated that they are experiencing 'great difficulty' in coping with their household income have scored significantly higher than other categories on the GHQ, indicating more elevated levels of psychological distress. Only a small minority of those who are coping 'very easily' or 'quite easily' with their household income level score above the threshold on the GHQ.

Figure 82 Perceived economic strain x % above GHQ threshold

Adequacy of household income in making ends meet	below threshold (row %)	above threshold (row %)	Total
'very easily' or 'quite easily'	87.50	12.50	33.7% (n=32)
'adequately' or 'with some difficulty'	51.79	48.21	58.9% (n=56)
with 'great difficulty'	14.29	85.71	7.4% (n=7)
Total	61.05	38.95	100% (n=95)
LR chi-square=19.60 df=2 p<.001			

- ☐ The difference in GHQ scores between those who are working and those who are not working is also statistically significant at the .01 level. In other words, as illustrated below in Figure 83, those who are in paid employment are much less likely to be suffering from psychological distress than those in other categories.
- ☐ Among participants not in paid employment, those who are unable to work score significantly higher on the GHQ-28 than those who are not employed for other reasons, including persons who are unemployed, people who are on home duties, and those who are in education or training.

Figure 83 Percentage of Combined Samples above and below threshold x employment status



- ☐ These data correspond with the findings of the 1991 study by Whelan et al on the effects of unemployment on psychological distress. Researching a large sample of the adult Irish population, they found that 34% of unemployed people in their sample were above the GHQ threshold, while only 7% of employees were above the mark. The same survey once again illustrated the relationship between unemployment and poverty. This relationship was shown using a series of variables including that used above – the survey participant's perception of difficulty in making ends meet.

13.4.5 - [e]

English Language Skills

- ☐ As illustrated in Figure 84, those who have greater English language skills are significantly more likely to score below the threshold on the GHQ scale. This illustrates the significant role that English language acquisition plays in supporting the adjustment of refugees to living in this country, and particularly the role that a functional knowledge of English serves in protecting the refugee against psychological distress.

Figure 84 Chi-Square Skills of English Language Skills x GHQ score (Combined Samples)

No. of indicators of English language capacity	Position relative to GHQ threshold score	below threshold (row %)	above threshold (row %)	Total
	Between 0 and 2	43.59	56.41	39
	3 or 4	73.21	26.79	56
	Total	61.05	38.95	95

LR chi-square = 8.51 df = 1 p < .05

- ☐ Analysis also reveals that having some level of English language skill prior to arriving in Ireland has acted as a buffering factor in protecting against mental health problems. Out of the 95 participants who responded to the question, 16 indicated they had some level of English language skill prior to arriving here, of whom 15 (94%) score below the GHQ threshold. In contrast, among the 79 participants who indicated that they had no English language skills prior to arriving in Ireland, 42 (54%) score below the GHQ threshold, with the remaining 37 people (46%) scoring above.

13.4.5 - [f]

Social Participation

- ☐ While the frequency with which participants met members of their own communities, and Irish neighbours, did not show a significant relationship with GHQ score, it did transpire that those who had had a social evening out during the fortnight preceding the interview scored significantly lower on the GHQ score (illustrated below in Figure 85).

Figure 85 Chi-Square Analysis of GHQ position x Recent Participation in Social event

Participation in social event during fortnight preceding the survey interview		Yes (row %)	No (row %)	Total
Position relative to GHQ threshold mark	below threshold	58.93	41.07	57.73% (n = 56)
	above threshold	23.53	76.47	35% (n = 34)
	Not known	42.86	57.14	7.2% (n = 7)
	Total	45.36	54.64	97

LR chi-square = 11.14 df=2 prob=0.0038

13.4.5 - [g]

Future Resettlement Plans

- ☐ There is a highly significant relationship between participants' (combined samples) positions relative to the GHQ threshold and their plans for the future. Of the 48 people who plan to remain in Ireland for the foreseeable future, 40 (83%) scored below the GHQ threshold, and 8 above. Of the 28 people who indicated that they hadn't made up their minds yet, 15 scored below, and 13 scored above, the threshold mark. In contrast, of the 19 participants who plan not to stay in Ireland (wanting to return home or to emigrate elsewhere), 16 (84%) score *above* the threshold, and the remaining 3 people (16%) score below. This finding, outlined below in Figure 86, illustrates the relationship between having a secure vision of the future, and one's present psychological well-being.

Figure 86 Chi-square Analysis of Future Plans x GHQ position (Combined Samples)

GHQ score relative to threshold mark		below threshold (row %)	above threshold (row %)	Total
Future resettlement plans	Remain in Ireland	83.33	16.67	50.5% (n = 48)
	Repatriate to country of origin or emigrate to elsewhere	15.79	84.21	20% (n = 19)
	Other (undecided, depends on circumstances)	53.57	46.43	29.5% (n = 28)
	Total	61.05	38.95	100% (n = 95)
LR chi-square = 28.52 df = 2 p < .001				

- ☐ There are some important effects on these data. Of those who plan to remain in Ireland, 34 out of 35 who can be categorised as in Ireland under primary or FRS admissions score below the threshold. This compares with less than half (6 out of 13) medical evacuees or their relatives who score below the threshold.

13.5 Conclusions

- ☐ The physical health concerns of programme refugees do not appear to differ substantially from that of the general Irish population. Not unexpectedly, the Bosnian medical evacuees have a higher level of health service utilisation than other categories of refugee.
- ☐ The General Health Questionnaire has identified several issues that have a strong impact on the measured levels of psychological distress.
- The Bosnian and Vietnamese refugees scored very differently on the GHQ-28. The scores of the Vietnamese sample are significantly lower than those of the Bosnian sample. The Vietnamese scores compare very favourably with those of the Irish population. However, Bosnian scores on the GHQ-28 were significantly higher than the norm in Ireland.
 - Some of the main factors influencing GHQ scores could be described as 'social integration issues'. People less likely to experience psychological distress include those who are relatively young, those who have a more active social life, those who are in paid employment, those who have good English language skills, and those who have made a clear decision to settle in Ireland.

Chapter 14

Survey of Children

14.1 Introduction

The Teacher Report Form for children aged 5 to 18 years (Achenbach) was administered to teachers of the children chosen in the sampling process. The Achenbach TRF scale is described in detail in section 4.4.3).

Because of the small sample size used in the survey, caution needs to be exercised in making inferences from the sample to the population as a whole. The data is presented in three sections; 'adaptive functioning', 'academic performance', and the total score for the behaviour profile.

The data from Vietnamese children ($n = 11$) and Bosnian children ($n = 20$) are combined. Results are presented based on a breakdown into two age groups: the 5 – 11 year old group, and the 12 – 18 year olds. In addition, data is broken down into gender categories. This is because separate male and female norms exist for these age groups.

14.2 Adaptive Functioning

14.2.1 *Measuring the Construct of 'Adaptive Functioning'*

The measurement of adaptive functioning was based on a comparison of scores between the refugee child and *typical pupils of the same age*. Teachers were asked the following questions about the child in question:

1. How hard is he / she working?
2. How appropriately is he / she behaving?
3. How much is he / she learning?
4. How happy is he / she?

Responses were given on a 7-point scale ranging from *Much less* to *Much more* than the typical pupil of that age.

A score of 14 would indicate roughly average adaptive functioning of a child in comparison to their peers (equivalent to the mean score of 3.5 for each item, multiplied by four).

14.2.2

Outline of Results

- ☐ Results of the 'Adaptive Functioning' scores obtained by the sample are outlined below in Figure 87 through Figure 90. There were only four girls in the 5 – 11 years age range. The average score for adaptive functioning among these girls was 18 (standard deviation of 2). All were well outside the clinical range of scores, and again the data demonstrate a very positive trend towards successful adaptation.

Figure 87 Adaptive Functioning scores for Boys aged 5 - 11

	Score	Frequency	Percentage	Cumulative Percentage
	11	1	12.5	12.5
clinical borderline	12	1	12.5	25.0
outside clinical range	13	1	12.5	37.5
	17	1	12.5	50.0
	18	1	12.5	62.5
	20	1	12.5	75.0
	22	1	12.5	87.5
	23	1	12.5	100.00
	Missing	1	12.5	
			Mean	17.000
			Std dev	4.598

- ☐ The mean score of 17 (with a standard deviation of 4.598) indicates that the majority of boys aged between 5 and 11 years are adapting well in their school environment. While none are within the range of scores which would indicate a possible clinical basis to their adjustment difficulties, two individuals are at the borderline of the clinical score.

Figure 88 Adaptive Functioning scores for Boys aged 12 - 18

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	13	1	11.1	11.1
	14	2	22.2	33.3
	16	1	11.1	44.4
	17	1	11.1	55.5
	19	1	11.1	66.6
	20	1	11.1	77.8
	23	1	11.1	88.9
	24	1	11.1	100.00
			Mean	17.778
			Std dev	3.993

- ☐ Again, the 12 – 18 years age group of boys indicate a positive pattern of adaptive behaviour. The mean score of 17.778 (with a standard deviation of 3.993) is a strong score for the group of 9 boys in this age range, particularly when it is considered that they are being compared by the teacher-participant with their Irish classmates. None are approaching a clinical score for maladaptive behaviour.

Figure 89 Adaptive Functioning scores for Girls aged 5 - 11

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	15	1	25.0	25.0
	19	3	75.0	100.00
		Mean	18.000	Std dev 2.000

- ☐ There were only four girls in the 5 - 11 years age range. The average score for adaptive functioning among these girls was 18 (standard deviation of 2). All were well outside the clinical range of scores, and again the data demonstrate a very positive trend towards successful adaptation.

Figure 90 Adaptive Functioning Scores for Girls aged 12 - 18

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	13	1	11.1	12.5
	16	1	11.1	25.0
	17	1	11.1	37.5
	23	2	22.2	62.5
	25	1	11.1	75.0
	27	2	22.2	100.00
	Missing	1	11.1	
		Mean	21.375	Std dev 5.344

- ☐ Again, there is a high mean score of 21.375 for the 8 girls aged between 12 and 18 years. Once again, all scores are outside the clinical range of scores, and indicate a strong pattern of successful adaptive functioning in the school setting.

14.3 Academic Performance

This section presents frequency distribution tables for scores on the Academic Performance section of the Teacher's Report Form.

While the scores referenced to available norms are important to consider, it is also useful to look at the mean scores for students. Teachers make their judgement of academic performance based on a comparison with *typical pupils of the same age*. Therefore, the child is being assessed by being compared with his or her peer group in the Irish classroom.

14.3.1 Scoring and Norms

The teacher's ratings of performance in academic subjects were scored as follows:

- 1 = Far below grade
- 2 = Somewhat below grade
- 3 = At grade level
- 4 = Somewhat above grade
- 5 = Far above grade

After excluding ratings given for non-academic subjects (such as Physical Education, Nature Studies, Art, Religious Education, etc.), the ratings for all academic subjects were averaged.

Figure 91 Academic Performance scores for Boys aged 5 - 11

	Score	Frequency	Percentage	Valid Cumulative Percentage
Within clinical range	1.33	1	11.1	11.1
	1.83	1	11.1	22.2
clinical borderline	2.00	1	11.1	33.3
	2.33	1	11.1	44.4
outside clinical range	2.70	1	11.1	55.5
	3.00	2	22.2	77.8
	3.50	2	22.2	100.00
		Mean	2.577	Std dev .757

- ☐ The mean score for boys aged 5 – 11 is 2.577, which is slightly below the teachers' perceptions of grade level for typical pupils of that age. Two individuals scored within the clinical range, indicating probable cause for concern for these children regarding their academic performance.

Figure 92 Academic Performance scores for Boys aged 12 - 18

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	1.00	2	22.2	22.2
	2.28	1	11.1	33.3
	2.57	1	11.1	44.4
	2.66	1	11.1	55.5
	2.86	1	11.1	66.6
	3.00	1	11.1	77.8
	3.20	1	11.1	88.9
	3.30	1	11.1	100.00
		Mean	2.430	Std dev .869

- ☐ All of the boys in the survey aged 12 to 18 years scored outside the clinical range for academic performance. The average score of 2.430 was again slightly below the teachers' perceptions of the typical score for a student of that age in Irish classrooms.

Figure 93 Academic Performance scores for Girls aged 5 - 11

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	1.00	1	25.0	25.0
	2.25	1	25.0	50.0
	3.00	1	25.0	75.0
	3.20	1	25.0	100.00
		Mean	2.363	Std dev .996

- ☐ All girls aged 5 to 11 years scored outside the clinical range. The average score was again slightly below the teachers' perceptions of grade level for typical students of that age.

Figure 94 Academic Performance scores for Girls aged 12 - 18

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	2.00	1	11.1	12.5
	2.60	1	11.1	25.0
	2.83	1	11.1	37.5
	3.00	2	22.2	62.5
	3.20	1	11.1	75.0
	3.25	1	11.1	87.5
	4.75	1	11.1	100.00
	Missing	1	11.1	
		Mean	3.079	Std dev .784

- ☐ All girls in the 12 to 18 years age group scored outside the clinical range. The mean score for the girls in this age range was slightly above the grade level for their peers.

14.4 Behaviour Profiles

14.4.1 Total t-scores

The final section of results presents the total scores (transformed into t-scores) for the behaviour of children in the sample, as reported by their teachers. Again, the data is presented based on a breakdown by age and by gender. In addition to the sample data, Figure 95 through Figure 98 include the *normative data appropriate for the age and gender group in question*. Normative data for the TRF Academic Performance scales was that presented by Achenbach (1991), based on a sample from a nation-wide survey in the United States, and is contained in the last row of each figure.

Figure 95 Total t-scores for Boys aged 5 - 11

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	31	1	11.1	11.1
	35	1	11.1	22.2
	42	2	22.2	44.4
	51	1	11.1	55.5
	52	1	11.1	66.6
	59	1	11.1	77.8
	60	1	11.1	88.9
	61	1	11.1	100.00
Sample mean	Mean		48.111	Std dev 11.118
normative means	Mean		50.300	Std dev 09.400

- ☐ All data for boys aged 5 to 11 years is outside the clinical range, and indicates a generally positive pattern of behaviour in the school environment.

Figure 96 Total t-scores for Boys aged 12 - 18

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	13	1	11.1	11.1
	14	2	22.2	33.3
	16	1	11.1	44.4
	17	1	11.1	55.5
	19	1	11.1	66.6
	20	1	11.1	77.8
	23	1	11.1	88.9
	24	1	11.1	100.00
Sample mean	Mean 45.667		Std dev 06.764	
normative means	Mean 50.300		Std dev 10.000	

- ☐ Once again, all scores for boys aged 12 to 18 years fall outside the clinical range of scores, and indicate a positive pattern of behaviour, though the means of the data are slightly lower than those of American norms.

Figure 97 Total t-scores for Girls aged 5 - 11

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	43	1	25.0	25.0
	45	1	25.0	50.0
	53	1	25.0	75.0
	57	1	25.0	100.0
Sample mean	Mean 49.500		Std dev 06.608	
normative means	Mean 50.200		Std dev 09.800	

- ☐ The four girls in the age range 5 to 11 years score well in overall data – none are near the borderline clinical range of scores.

Figure 98 Total t-scores for Girls aged 12 - 18

	Score	Frequency	Percentage	Cumulative Percentage
outside borderline clinical range	40	2	22.2	22.2
	43	1	11.1	33.3
	45	2	22.2	55.5
	47	1	11.1	66.6
	52	1	11.1	77.7
	55	1	11.1	88.9
	57	1	11.1	100.0
Sample mean	Mean 47.111		Std dev 06.234	
Normative means	Mean 50.300		Std dev 10.000	

- ☐ As with their younger counterparts, girls in the age range 12 to 18 years all score above the clinical range of scores.

14.5 Language Problems among Children

14.5.1 *Measuring Language Problems*

While the main aim of the research was to examine data obtained from the Teacher Report Form, a strong interest was also taken in the language needs of children, and how these needs impact on those who were being surveyed. However, given the *confined timeframe of the research*, it was felt that asking teachers directly about language difficulties among their students without having the capacity to reference the information to professional language assessments and appropriate norms would have introduced an unreliable variable into the survey.

During the survey, *therefore*, teachers were not asked directly about whether or not the child being surveyed was experiencing difficulties with the English language. Nevertheless, careful attention was paid to the qualitative information that was contained in the teachers' reports. One open question in the TRF asked teachers to indicate what particularly concerned them about the child being surveyed, and responses to this question *sometimes yielded specific indications of language difficulties*.

14.5.2 *Analysis of Data*

The TRF data was examined with a view to establishing the role of language problems on the scores. Data was dichotomised into those on whose report form the teacher gave some indication of a language-related problem, and those on whose report forms no such indication was contained. A subsequent analysis (CHAID) of the data yielded some interesting results:

- ☐ Firstly, in cases where the teacher has indicated the presence of language difficulties for the child in question, that child is significantly more likely to exhibit difficult behavioural patterns in the classroom. Of those who had a low score (either 0 or 1) on the subscale relating to 'acting out', only 7% had any indication of language problems, while of those who scored between 2 and 14 on the subscale, almost 59% were identified as having a language difficulty.

Figure 99 TRF Subscale iii by language problem indications

		Detection of language problem, as indicated by qualitative information on TRF		row %
Subscale iii "Acting Out" scores		yes (%)	no (%)	Total
	0 - 1	7.14	92.86	45.2% (n=14)
	2 - 14	58.82	41.18	54.8% (n=17)
	Total	35.48	64.52	100% (n=31)

LR chi-square=10.08 df=1 prob=0.012 (adj.)

- ☐ Secondly, there was a significant difference between indications of language problems among boys and girls. Boys were more likely to be reported as having language difficulties, as the figure illustrates.

Figure 100 Gender by language problem indication

		Detection of language problem, as indicated by qualitative information on TRF		row %
gender		yes (%)	no (%)	Total
	Male	50.00	50.00	58% (n=18)
	Female	15.38	84.62	42% (n=13)
	Total	35.48	64.52	100% (n=31)
LR chi-square=4.21 df=1 prob=0.040				

- ☐ Thirdly, in cases where the teacher has indicated the presence of language difficulties for the child, that child is significantly more likely to score highly on the Internalising section of the TRF. In other words, the teacher is more likely to judge the child as displaying internalising behaviour problems.

Figure 101 Internalising T-scores x Language Problem Indications

		Detection of language problem, as indicated by qualitative information on TRF		row %
(Internalising t-scores after merging scores)		yes (%)	no (%)	Total
	36 – 49	7.69	92.31	42% (n=13)
	51 – 66	55.56	44.44	58% (n=18)
	Total	35.48	64.52	100% (n=31)
	LR chi-square=8.54 df=1 prob=0.054 (adj.)			

14.6 Conclusions

The Teacher Report Form scores obtained on a sample of Bosnian and Vietnamese students aged 5 to 18 years has shown few indications of behavioural problems manifesting themselves in the classroom on a systematic basis. Similarly, the children generally scored well in terms of adaptive behaviour. In this regard, it seems that the sample (while small in size) displayed a trend towards successful adaptation in the school environment. While this information is encouraging, particularly in light of the concerns expressed by McGovern (1990), it must be stressed that the information is merely preliminary information on a group that warrant comprehensive monitoring and evaluation on an ongoing basis. There are several issues not examined by this survey that pertain to the well-being of the refugee child, and remain to be investigated.

Scores on the academic performance indicator are generally slightly lower than the normative scores of American children of comparable age and gender. This is more likely to be a function of the appropriateness of the particular norms referred to than to any other factor. Nevertheless, there are some indications of academic performance difficulties among a significant minority of boys in the 5 to 11 age range. This may well be related to the difficulties experienced with aspects of the English language. A more thorough examination of English language difficulties and their impact on general academic performance, using a larger sample, is needed before any definitive conclusions can be drawn.

Based on the present data, English language problems are certainly associated with various aspects of behaviour difficulties among children. Where a teacher has indicated the presence of a language problem, that student is statistically more likely to score highly on the 'acting out' and 'internalising' subscales of the TRF. In addition, boys are more likely than girls to score highly on these behavioural subscales.

In conclusion, the data elicited from the survey of children is generally indicative of a group that are coping well in the school environment, and adjusting well socially and academically. The conclusion from the available data is that particular difficulties are at least partly related to problems with English language. To this extent at least, the future for children of programme refugees in Ireland seems bright, provided that adequate resources are made available to identify and tackle any barriers to their social and academic development.

Chapter 15

Key Conclusions

15.1 Overview

This report is based on the findings from a detailed survey during Spring 1997 of 103 programme refugees in Ireland, including 29 from the Vietnamese community (representing 8% of the adult Vietnamese population) and 74 from the Bosnian community (representing 18.3% of the adult Bosnian population). Being the first in-depth survey carried out on refugee resettlement in Ireland, many valuable lessons were learned not only through data analysis, but also through interacting with and receiving feedback from the Vietnamese and Bosnian communities, during the initial planning stages, and during the data-gathering stages of the project.

Some of the information that has been elicited through the research may be particularly relevant in the context of policy development. The primary purpose of this concluding chapter is to outline some of the more salient findings in this regard.

The reader is strongly advised that a comprehensive examination of this report is necessary to gain a full understanding of the implications of the project. This final chapter focuses on selected implications, based on the author's interpretation of the survey results.

15.1.1 Role of Research in Policy Development

In the current climate of social, political and economic stability, Ireland has become a place of refuge for a very small number of the millions of displaced people world-wide. Irish society, heretofore more familiar with emigration than immigration, has been increasingly challenged over recent years by the growing number of refugees and asylum seekers coming here.

One concern that manifests itself among the public is the capacity of public services to respond to the needs of refugees and asylum seekers. This issue must also be addressed by policy planners and public service providers, albeit in a more formal and precise manner. The most effective responses are based on informed and pro-active planning, utilising the best models of international practice. In this regard, it is useful that many member states of the European Union have already invested considerable resources and expertise into identifying how public services can best respond to the needs of refugees.

Nevertheless, there continues to be a cogent need for on-going research into the particular needs of refugees in the ever-changing social and economic climate of Ireland. It is hoped that the research gathered by this project will prove useful in this regard. By its consultative approach during development, and its comprehensive range of focus, the project encouraged the maximum input of refugees throughout the process, and to this extent provides a body of information that will be valid and useful in the development of policy towards refugees in Ireland.

15.1.2 *Role of the Refugee Resettlement Research Project*

The Refugee Resettlement Research Project has been made possible by the involvement of the Departments of Foreign Affairs, Health, Education and Science, Environment, and Social, Community and Family Affairs, together with the Department of Psychology, Eastern Health Board, and the Refugee Agency. The funding of and management of the project is consistent with the principles of the Strategic Management Initiative, which encourages Government Departments and public service providers to formulate policy based on a cross-departmental and inter-agency approach, using the most up-to-date client-centred information available. In the context of a demonstrably vulnerable group, such a commitment by the Departments concerned is to be whole-heartedly welcomed.

15.2 Overview of Findings

15.2.1 *Maintaining Lines of Communication*

In addition to being a successful data-gathering exercise, the research proved a useful exercise in establishing lines of contact with those who had been randomly selected as part of the target sample. Several issues emerged during the course of the project that may be relevant to those wishing to work with refugees in the future.

- Participation rates from the Bosnian sample were very satisfactory. It proved much more difficult to access the Vietnamese sample (an experience which is shared by researchers in other countries).
- The length of time that fieldworkers needed to establish a sufficient level of trust with the sample groups generally differed between the two communities. The Bosnian participants generally required a shorter period of rapport-building than the Vietnamese participants did.
- The fact that translated documents and native-language fieldworkers were available was highly beneficial to the project's success. However, participation in the research was by no means guaranteed because of this.
- The co-operation of the relevant refugee associations was immensely helpful in carrying out the work of the project. Nevertheless, as the research demonstrates, there is a huge diversity within both communities, and many refugees have no active links with associations or other groups. Thus, a range of strategies is necessary in order to achieve comprehensive access to the individuals within the communities.
- The research shows that English language skills are vital to refugees in communicating with the wider community. It would seem clear that the on-going utilisation of public services by all refugees is dependent to a significant extent on the availability of adequate interpretation and translation services, together with the continuing development of the English language skills of the refugees.

15.2.2 *Some Personal and Socio-Economic Implications*

One of the significant issues that emerged throughout the project was that, both in personal and financial terms, the majority of refugees have suffered significant losses. Many recounted stories about their experiences prior to arriving in Ireland which incorporated significant levels of disruptive and traumatic life events - war, injury and death, separation from loved ones, substantial loss of personal possessions, and eventual flight to Ireland. Even refugees who had had a more benign passage to Ireland had experienced significant losses of various sorts.

As far as the Bosnian and Vietnamese communities are concerned, the results of the survey also provide a strong factual rebuttal to the perception held by some that they have to come to Ireland primarily as economic migrants. For instance, only 17% of Bosnian respondents stated that there had been an improvement in their living standards since coming to Ireland, while 40% stated that there had been a noticeable drop in their standard of living. However, the extent of the experienced decline in standard of living is difficult to quantify - 43% stated that it was impossible to compare the standard of living in Ireland to that which they enjoyed in their country of origin. It is difficult to quantify loss or gain in purely financial terms, when there is so much more to the refugee's experience, from the trauma and disruption of personal losses, to the challenges and opportunities of resettling in a new country.

The majority of those who had experienced a decline in their standard of living since coming to Ireland were not in paid employment at the time of the survey. This raises another issue of concern - the significant level of unemployment and underemployment among refugees. Those who were unemployed were significantly more likely to be experiencing financial difficulties, and were more likely to be experiencing high levels of psychological distress.

At the time the survey was carried out, a high proportion of Bosnian and Vietnamese participants were in receipt of unemployment payments from the Department of Social, Community and Family Affairs. In the intervening period, there has been evidence of an improved employment rate among that community. Paradoxically, the Vietnamese sample reported very low levels of financial strain.

For the refugee in employment, many benefits were apparent - improved income and lifestyle being the obvious ones. Other benefits included *better mental health* (manifest through lower levels of psychological distress), an increased sense of belonging to the community, and better rates of interaction with people other than the expatriate community. Among those who were in employment, most felt that they were capable of working in a more challenging role than the one they had. Overall, there were strong indications from participants that they were anxious to work, and to utilise their skills and qualifications to their maximum potential.

15.2.3 *Resettlement and Health Issues*

One issue that emerged during the literature review was the stressful nature of the resettlement process. A lot of this stress is due to the demands placed on the individual to adjust to a new environment. However, the very nature of being a refugee means that one has likely experienced a *considerable level of physical and/or emotional trauma* prior to coming to Ireland. Therefore, the health needs of refugees are dependent both on the experiences they had prior to arriving here and on the situations in which they are now living.

The mental health of refugees has consequences both for those service providers directly concerned with their psychological well-being, and also for the wider health services. Research shows that those with higher levels of psychological distress tend to seek treatment for physical complaints more frequently than those with good mental health do.

One hypothesis of the research was that Bosnian medical evacuees, who had been admitted into Ireland on the basis of their medical needs, would be heavier users of the health services than other categories of refugee. While this proved to be the case, there was no evidence that the physical health problems of medical evacuees were impinging on their mental health. In fact, the medical evacuee group proved to be one of the groups more resilient to mental health problems.

A range of indicators showed that, in general, Vietnamese participants were experiencing lower levels of mental health problems than Bosnian participants. The reasons for this are complex, but are possibly related in part to the relative financial security of the Vietnamese participants compared with the Bosnian participants. The length of time which the Vietnamese community has been established in Ireland is also undoubtedly a factor. This finding certainly warrants further investigation, not only as a matter of concern for health service providers, but also as a matter of interest to all concerned with promoting the welfare of refugees. These findings may also be due to difficulties in measuring the incidence of psychological distress within the Vietnamese community.

While the Eastern Health Board put in place a designated psychological service for Bosnian refugees in 1992, there is evidence that not all those experiencing mental health difficulties are accessing psychological services. There seems to be a certain dependence on medical interventions, as evidenced by the high frequency of prescriptions being issued to those with mental health problems. The low levels of accessing psychological services (both State-provided and private) are likely to be due to a combination of cultural factors and language barriers. In both Bosnia and Vietnam, the utilisation of such services is stigmatising, perhaps to a higher extent than is the case in Ireland.

15.2.4 *Language and Education Issues for Refugees*

The importance of English language skills in the resettlement process was one of the predominant issues to emerge from the research.

The issue of English language skills was one of the predominant issues to emerge from the research, in terms of how it affected participants' resettlement patterns.

Adequate English language skills facilitate several aspects of resettlement: they mean that refugees are more likely to be employed, to interact with Irish people, to socialise, to feel that they belong to the community in which they live, and are more likely to enjoy better mental health.

While the majority of those who took part in the survey were satisfied with the progress that they have made in learning English since coming to Ireland, there was still a significant minority who were not satisfied.

The research identified some significant factors in English language acquisition, including participants' age (young participants were more likely to be better skilled in the English language than older participants); prior education levels (the longer participants had spent in formal education, the more likely they were to be skilled in English); the amount of time participants had spent in English language training classes (those who spent more than 2 months in English language training were significantly more skilled in the language); and the amount of time participants spent outside of the home (participants, whether attending an education or training course, or by working outside the home, were more likely to have better English than those who were unemployed, retired, or on home duties).

15.2.5 *Resettlement and Housing Strategy*

In general, refugees appeared quite satisfied with their accommodation arrangements. Vietnamese participants had higher rates of home ownership than Bosnian participants. Bosnians tended to live primarily in private rented accommodation, while a large proportion of Vietnamese participants were living in accommodation rented from the local authorities. There were considerable signs of mobility among the participants. This is partly due to the practicalities of finding more satisfactory rented accommodation, but is primarily due to the lack of security of tenure associated with the rented

accommodation market (O' Sullivan, 1997). Many aspire to owning their own home in the future.

There were very distinct trends in terms of where refugees were living. The vast majority of both samples were living in the Greater Dublin area. Over the past two decades, the Vietnamese community in Ireland, which was originally dispersed throughout the country, have gradually migrated towards particular areas of Dublin, where supportive communities have become established. It seems that the lessons of the past have been incorporated into current housing strategy and that Bosnian refugees have been generally living in parts of the Greater Dublin region where there is already an established community of Bosnians.

15.2.6 *Experiences of Racism in Ireland*

Seven Vietnamese (32% of the sample) and seven Bosnian participants (9.5% of the sample) reported that they had experienced racism in Ireland. The elevated level of racism experienced by Vietnamese participants is likely due to the fact that most of the participants from the Vietnamese community have been living longer in Ireland. Also, the distinguishing physical appearance of Vietnamese makes it more likely that they will be subjected to racism, particularly on a random basis. The majority of those who had experienced racism said they had found it distressing.

15.2.7 *Resilient and Vulnerable Groups*

The research demonstrated that, in general, refugees are making progress since their arrival in Ireland. However, a range of indicators were useful in identifying particular sub-groups that were more vulnerable or more resilient to resettlement difficulties.

Factors such as coping with household income, levels of home ownership, etc. indicate greater levels of financial well-being among Vietnamese participants than among Bosnian participants. One of the main factors is likely to be the length of time that the Vietnamese community (as opposed to individuals within that community) has been established in Ireland. The historical perspective on the Vietnamese community in Ireland shows that in the early years, the community worked hard in the face of adverse economic conditions to set up businesses and provide for their families. The apparent success with which the Vietnamese sample is managing financially is reassuring, and demonstrates that, less than 20 years after the first Vietnamese arrived in Ireland, the community is contributing very successfully to its own well-being, and to the Irish economy.

Having identified that the Vietnamese sample indicates good signs of adjustment, it should be noted that there are individuals within the community who are vulnerable to difficulties including low skills levels in English, isolation within the home, etc. These issues will be outlined below in the context of both Vietnamese and Bosnian participants.

There was a higher incidence of psychological distress among the Bosnian participants than among the Vietnamese participants. This is likely to be due in part to the economic viability of the Vietnamese community. One of the strongest predictors of psychological distress is financial stress - low incomes generally correlate with poverty and poor mental health. In this survey, those with greatest difficulties managing on their incomes are also those most likely to be experiencing mental health problems. Those who are in paid employment are likely to enjoy good mental health. In contrast, those who are not in paid employment, and particularly those who spend their day in the home are more likely to experience elevated levels of psychological distress and to be more isolated from interaction with Irish people.

The younger refugees appear to be more resilient to the pressures of the resettlement experience. Older people had significantly higher levels of psychological distress than did younger people, particularly those aged under 25 years.

Younger people had better skills in English language - the older the participant, the less likely they were to be skilled in English (those who have fewer English language skills are more likely to experience elevated levels of psychological distress).

While the majority of participants were making progress in learning English language skills, there was an identifiable minority who had spent little or no time in English language training, and were experiencing difficulties in learning the language. Those who had spent their initial time in Ireland based in one of the reception centres (including hospitals) were more likely to have spent at least 2 months in English Language Training. Family Reunification Scheme admissions were less likely than other groups to have received ELT. The consequences of limited English language skills include: a lower likelihood of being in paid employment; a lower level of interaction with the wider community; a higher incidence of psychological distress; a lower likelihood of wishing to remain in Ireland.

There were noticeable differences between men and women throughout the survey. In terms of their current economic activities, women were more likely to be on home duties (often with child-minding responsibilities), while men were more likely to be working outside the home. Women were less likely to have received formal qualifications prior to arriving in Ireland, and were less likely to have had previous work experience. Women certainly appeared more vulnerable to unemployment than men did. In addition, because of their lifestyle, women were less likely to avail of opportunities to access English language training courses, and were likely to interact less frequently with English speaking people.

15.2.8 Children of the Programme Refugee Communities

The results from the survey indicate that, in the main, the children are doing very well. While the sample was small, certain observations were possible.

- There were some gender differences among children: specifically, boys tended to manifest more behavioural problems than girls.
- Overall, children demonstrated high levels of integration within the educational system. Overall academic performances were very good, although particular individuals with low achievement rates scored within the clinical range. It would appear that one of the factors influencing academic performance is the presence of English language difficulties. This survey did not attempt to measure English language problems in a structured way. It is recommended that future research into refugee children take this issue into account.
- In terms of service delivery, particularly in the educational sector, it is important to identify the individual needs of each child before appropriate remedial action is possible.

15.3 Framework for Resettlement

The following sections examine the important implications of the provisions made for programme refugees, and argue that the State can directly promote many of the conditions necessary for successful adjustment. In terms of public service provision, one of the main outcomes to successful resettlement is that fewer demands are made on these services. However, the social and psychological benefits to the individuals, the families, and the communities concerned must be the primary concern of a society that plays its full international role as a place of refuge.

15.3.1 *Integration and Empowerment - Key Principles of Successful Resettlement*

It is important to outline a working definition of what is encompassed by the term 'successful resettlement'. While there is no absolute measure of resettlement, it is maintained here that the goal of resettlement should be integration rather than assimilation. Successful integration means that the refugee is able to participate to the extent that he/she needs and wishes in all of the major components of the new society, without having to relinquish his or her own identity. The host society facilitates this by identifying barriers to integration, and putting in place measures to overcome them.

This interpretation is reflected in the history of public policy towards another minority group in Irish society: the travelling community. The approach to travellers during the 1960's, when they first came under consideration in public policy-making, was based on an analysis which identified the travellers' way of life as the problem, and proposed as a solution their assimilation and absorption in to the way of life of the settled, majority community. By 1981, travellers had come to be recognised as a distinct cultural group with associated rights, and public policy was to be based on integration rather than assimilation. This approach has been further reinforced by the 1995 Report of the Task Force on the Travelling Community.

Internationally, countries with substantial experience of resettling refugees tend towards the empowerment of the refugee communities as the fundamental approach to resettlement. The refugee communities themselves are seen as having an intrinsic role in the planning, development and management of the resettlement process. At a practical level, this involves the development of a viable infrastructure that allows each refugee community to provide the appropriate support to members of its community.

A full consideration of the data presented in this report clearly illustrates that Ireland has a substantial way to go before that level of resettlement is possible. It requires that the refugee communities be supported at two different levels. Firstly, the relevant authorities and agencies can foster and facilitate the ongoing process of community development, thereby enabling the emergence of informal support structures (social support networks), together with more formal support structures (such as representative groups, and various psychosocial projects). The support provided to the Bosnian Community Development Project and the Vietnamese Irish Association are to be welcomed as two positive steps towards the empowerment of the refugee communities. Secondly, they could support the empowerment of the refugee communities by developing opportunities to employ members of those communities in roles where they can directly contribute to the resettlement process. The training, education and employment of individuals who can function in such roles is one way of empowering the communities to take more ownership of the resettlement process.

15.3.2 *Resettlement and Irish Citizenship*

The research has positively identified that the decision to remain in Ireland is closely linked with good levels of mental health among refugees. For example, less than one

quarter of Bosnian participants who have decided to remain here for the foreseeable future were experiencing elevated levels of psychological distress (as measured by the GHQ-28). In contrast, more than three-quarters of those who intend to return to their country of origin were experiencing high levels of psychological distress.

Vietnamese and Bosnian refugees are entitled to apply for Irish citizenship after three years of residency in Ireland. Citizenship is, by definition, the most explicit acknowledgement of the refugee's right to become fully integrated in Irish society, and is a highly attractive option for refugees. It is valued by and availed of by the vast majority of Vietnamese. While none of the Bosnian participants had completed the naturalisation process at the time the survey was conducted, all but one had either made an application, or intended to do so when they became eligible to apply. Because programme refugees already enjoy most of the same opportunities and entitlements as Irish citizens, the demonstrated interest in becoming a naturalised Irish citizen must be seen primarily as reflecting a need to obtain long-term psychological security. In addition, Irish citizenship bestows practical benefits, such as facilitating the opportunity to visit family and friends abroad.

15.3.3 *Resettlement and the Family Reunification Scheme*

The family reunification scheme has been demonstrated through this research to be an important element of resettlement for the refugee. A significant proportion of Bosnian refugees thought that the FRS was inadequate for the needs of the community. There was a very considerable lack of clarity about the implementation of the FRS criteria among both the Bosnian and Vietnamese participants. The less clearly the participants understood the FRS, the more likely they were to perceive it as being unfairly implemented. Nevertheless, there were also quite a few participants who claimed to understand clearly the criteria for the implementation of the FRS, and still felt that the scheme was being unfairly implemented.

15.3.4 *Resettlement and the Role of the Reception Centre*

The research has identified that refugees who stayed initially in a reception centre or hospital clearly benefited from the ease of access to various services, particularly English language classes. One of the primary functions that reception centres serve is to facilitate access to various services, including health, education, social welfare, housing and psychological services. On this basis, it appears that the reception centres have functioned very effectively as a point of arrival for refugees.

Other benefits identified by participants include the security of shelter and food, and the benefits of staying with other people from the same country as them.

15.3.5 *Language, Education, Training and Employment*

Two predominant themes emerge from the research in terms of the language, training, and education needs of refugees. Firstly, there is a clear need for the on-going analysis of individual needs, and secondly, innovative responses are required from education and training providers in meeting these needs. Participants themselves clearly identified four main areas in which they need support - a) English language training; b) accessing further training; c) assistance with the translation / conversion of qualifications obtained abroad; and d) help in approaching employers.

Appropriate language training must be viewed as one of the primary mechanisms for facilitating the integration of the refugee communities in Ireland. The reader is referred to the report by Little and Lazenby-Simpson for a comprehensive review of the principles of and models for English language training. The findings in the present report reinforce some of the main tenets of the report on the language needs of refugees. Primarily, it is

clear that language training must be based on a comprehensive analysis of each participant's linguistic needs. In addition, refugees have a range of practical needs. It is clear that at present, some categories of refugee are more likely to access training. In particular, those who spent some time in a reception centre before being settled in the community were more likely to have spent time in English language training than Family Reunification Scheme admissions.

In addition, the lack of English language skills is a barrier to accessing and participating in training and education. Current developments in this regard, where English language training is being delivered in conjunction with FAS technical training, is to be welcomed as a flexible response to the needs of refugees. However, this intervention is a pilot model, and needs to be developed further in order to have a serious impact on the training and education needs of refugees.

While the difficulties associated with having foreign qualifications recognised by the appropriate authorities in Ireland are acknowledged, it is a matter of some concern that a large proportion of refugees with qualifications has not attempted to do so. Generally, no formal conversion procedures operate between Ireland and other countries, and many of the qualifications held by refugees are difficult to equate with training or education courses here. Nevertheless, every effort should be made to develop systems whereby refugees who wish to resume their career, training or education in this country have their previous experience or qualifications credited.

Considering the language barriers and the difficulties in adequately presenting their training or educational attainments, it is not surprising that refugees feel the need for support in approaching employers. It is important that employment support services, such as the Local Employment Service Network, be utilised to their fullest, perhaps by targeting refugees as a priority group for support.

15.3.6 *Priority Target Groups and Service Delivery*

15.3.6 - [a] *Improving service access*

Those who had gone directly to family members in Ireland were less likely to have spent time attending English language training. This in itself is an indication that Family Reunification admissions are likely to be more isolated from the services that are available.

Refugees admitted under the Family Reunification Scheme are very likely to go directly to live with family members when they arrive in Ireland. There are undoubted benefits attached to this approach; one of the primary benefits being the emotional relief attached to rejoining family members, and the practical support that family members can offer the new arrival.

The important issue, then, is not *where* refugees spend their initial time in the country, but whether they are likely to be in a position to benefit to the maximum extent from the range of services that are available.

15.3.6 - [b] *The older refugee*

It is clear that older refugees are more likely to experience isolation. As Little and Lazenby-Simpson have identified, older people find language acquisition more difficult than do younger people. This has been borne out in the present research. Poor language skills mean that older people are less likely to socialise, particularly with English-speaking people. It is also probable that they are less likely to engage in a range of daily activities than they might if they had better English language skills.

Perhaps partly as a consequence of their more isolated position, older participants experienced significantly higher levels of psychological distress than did younger participants.

15.3.6 - [c] *Women*

The research identified that women participants in the study were more likely to be on home duties than men were. Some of the implications of this include the fact that women were less likely to be in paid employment. Generally, women who were looking after dependants (young or old) were satisfied with the level of services available to them, which is an indication that they were happy with the role of carer. However, being in the home was associated with higher levels of psychological distress, lower levels of interaction (particularly with English speakers), and lower rates of language acquisition.

15.3.6 - [d] *Unemployed and Retired Participants*

Again, there are strong indications that these groups are particularly vulnerable to isolation. 61% of unemployed participants and 75% of retired participants did not feel at all part of the community in which they live. In addition, those who were not working were significantly more likely to experience high levels of psychological distress.

15.3.7 *The National Anti-Poverty Strategy*

There is much evidence throughout the research that the refugee communities in Ireland are vulnerable to factors that specifically influence their financial well-being. Refugees are more vulnerable to unemployment, for several reasons, including their lack of English language skills, and also because those with qualifications from their home countries find it difficult to have them accredited by the relevant Irish authorities. The link between unemployment and poverty in Ireland has been well established. On this basis, the inclusion of refugees as a specific target group under the **National Anti-poverty Strategy** should be considered.

15.4 Conclusions

While this report has identified several factors that contribute to successful resettlement, it is important to stress the need for further research to continue investigating the issues that affect refugees as they attempt to rebuild their lives. The following are the main points that emerge.

Cultural differences and linguistic difficulties must be respected and taken into account in the development and provision of services to refugees.

*Service providers need to **enhance communication** with members of the refugee communities on an on-going basis. This should be taken into account in training programmes for those working with refugees.*

*Positive measures aimed at **enabling refugees to join the workforce** are an essential part of refugee resettlement. Existing supports should be further developed.*

*The levels of **psychological distress and psychiatric morbidity** should continue to be monitored by the appropriate bodies, and services further developed. There were significant levels of distress in evidence for the Bosnian sample, in particular, during the survey. While Vietnamese mental health levels overall were very good, there were individuals who are experiencing mental health problems.*

*The research identifies that, in the school environment, **children of refugees appear to be adapting well academically and socially**. However, it is possible that speech and language difficulties may have a role to play in cases where individuals are demonstrating behavioural problems. It is suggested that these difficulties be monitored, and appropriate interventions undertaken by the relevant bodies.*

*The research suggests that **services dealing with refugees need to develop additional strategies to make their services more accessible**. Specific measures are required to ensure that isolated refugees are empowered to use the entire range of services that are provided. Readily-identifiable target groups include older refugees, those who have not spent time in a reception centre, and those with poor English. Such groups will generally require a more active approach from service providers.*

*Refugees as a group experience more barriers to employment than the general population. On this basis, the inclusion of refugees as a specific target group under the **National Anti-Poverty Strategy** should be considered.*

*This report recognises that the most effective approach to resettlement is to **encourage the integration, rather than the assimilation, of refugees into Irish society**. Refugees represent both an opportunity for Ireland to provide humanitarian refuge, and an enormous benefit to our society. The benefits of successful integration will be evident through the increased contribution of refugees in all aspects of this society. Afforded the appropriate support and opportunities, refugees will very quickly demonstrate their huge wealth of talent, skills, enthusiasm, culture and energy, and will continue to contribute to the social fabric of Ireland – our shared society.*

Bibliography

- Achenbach, T.M. (1991) *Manual for Teacher's Report Form and 1991 Profile* (Child Behaviour Checklist). Burlington, VT: University of Vermont Department of Psychiatry
- Ahearn, F.L and Athey, J.L. (1991) *Refugee Children - Theory, Research and Services*. London: John Hopkins University Press
- Bang and Finlay (1987) *Working to Support Refugees*. A report of a training project to prepare Vietnamese and Chinese field staff to work with people from Vietnam resettled in the UK. Derby: Refugee Action.
- Beiser, M., Barwick, C., Berry, J.W., da Costa, G., Fantino, A.M., Ganesan, S., Lee, C., Milne, W., Naidoo, J., Prince, R., Tousignant, M., & Vela, E. (1988). *After the door has been opened: Mental health issues affecting immigrants and refugees*. Ottawa, Ontario, Canada: Ministries of Multiculturalism and Citizenship, and Health and Welfare
- Ben-Porath, Y.S. (1987) *Issues in the Psycho-Social Adjustment of Refugees*. Refugee Assistance Program, National Institute of Mental Health, University of Minnesota
- Berry, J.W (1986). The acculturation process and refugee behavior. In C.L. Williams and J. Westermeyer (eds.), *Refugee Mental Health in Resettlement Countries*, pp. 25-7. Washington, D.C.: Hemisphere
- Bracken, P.J., Giller, J.E. and Summerfield, D. (1995) *Psychological Responses to War and Atrocity: The limitations of Current Concepts*. Social Science and Medicine, 40 (8) pp. 1073-1082
- Carey-Wood, J., Duke, K., Karn, V. and Marshall, T. (1995) *The settlement of refugees in Britain*. Home Office Research Study 141. London: HMSO
- Duke, K. and Marshall, T. Vietnamese Refugees since 1982. Home Office Research Study 142. London: HMSO
- Graves, T. (1967) Psychological acculturation in a tri-ethnic community. South Western Journal of Anthropology 23, 337-350
- Goldberg, D. and Williams, P. (1991) A User's Guide to the General Health Questionnaire. Berkshire: NFER-Nelson Publishing Company Ltd.
- Ireland (1996) Refugee Act. Dublin: Government Publications
- Lin, K-M. (1986) Psychopathology and social disruption in refugees. In C.L. Williams and J. Westermeyer (Eds), *Refugee mental health in resettlement countries* (pp. 61-73). Washington, D.C.: Hemisphere
- Little and Lazenby-Simpson (1996) *Meeting the Language Needs of Refugees*. Centre for Language and Communication Studies, University of Dublin, Trinity College.
- Maslow, A.H. (1968) *Toward a psychology of being* (2nd ed.) New York: Van Nostrand.
- McGovern, F. *The Education of Refugee Children in Ireland* Oideas, Vol. 43
- McGovern, F. *Vietnamese Refugees in Ireland, 1979-1989: A Case Study in Education and Resettlement*. Unpublished M.Ed. Thesis, Trinity College, Dublin, 1990.

Quinn, P. (ed.) (1995) *A Profile of the Bosnian Community in Ireland*. Dublin: Bosnian Community Development Project

Whelan, C.T., Hannan, D.S and Cerighton, S. (1991) *Unemployment, Poverty and Psychological Distress*. Economic and Social Research Institute General Research Paper no. 150. Dublin: ESRI.

Williams, C.L. and Berry, J.W. (1991) Primary Prevention of Acculturative Stress among Refugees - Application of Psychological Theory and Practice. *American Psychologist*, 46 (6), 632-641