

## Trauma and Refugees

It is important to understand the difference between the terms ‘refugee’, ‘asylum seeker’ and ‘migrant’ because how a person is viewed may affect their ability to resettle in Australia, the supports available to them, and the issues behind their involvement with the child protection system.

Often the terms are used interchangeably, but they have very different meanings.

**Refugees** are people living outside of their country of origin due to fear that they will be persecuted or harmed. This may be because of their race, religion, nationality, political beliefs, or membership of a certain social group.

**Asylum seekers** are people who has applied for protection as a refugee and are waiting to find out if the United Nations will decide they are refugees. All refugees have been asylum seekers either in Australia or in another country.

**Migrants** are people who move to another country to seek a better life, be reunited with family, or for other personal reasons.

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Always remember, refugee children, adults and families are survivors. You can honour and harness this strength and resilience to motivate change when needed

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Refugees’ experience of trauma is unique and complex. This is because of the:

- nature of the initial trauma i.e., torture, war, political oppression
- combination of trauma experienced i.e., in their homeland, in fleeing, and trying to integrate into a new country
- prolonged nature of traumatic experiences i.e., can last for many years
- multiple types of trauma experienced i.e., personal trauma and collective trauma.

For more information see: [Collective Trauma](#).

## Trauma Experienced in their Homeland

Before fleeing their homeland, refugees may experience one or more of the following:

- imprisonment related to their political activity or membership of a social group or severe harassment by authorities
- torture
- people they know and love being killed, often in large numbers
- kidnapping and ‘Disappearances’ of people they know and love
- rape, and being forced to watch the rape or torture of loved ones
- malnutrition and being deprived of food, shelter, and health care
- bombings, destruction of property
- physical violence
- extreme fear
- loss of livelihood

## Trauma Experienced in Fleeing

The flight process can last days or, more often, years. During flight, refugees often:

- are unable to say goodbye to people they know and love or take belongings with them
- undertake dangerous journeys that can leave them with permanent injuries, and witnessing the death of others on the journey with them
- spend years in unsafe, overcrowded refugee camps or other environments with poor accommodation
- are separated from family members, robbed, and become victims of rape and other physical violence and a lack of safety
- experience ongoing uncertainty about where they will live
- go hungry and lack basic health care
- have little or no schooling

## The Impact of Refugee Experiences

The trauma refugees experience interact in complex ways. This can make it difficult for refugee children and families to settle into a new country and build new lives. It may also affect a family's ability to care for their children. It's important to realise that trauma experiences are likely to have affected a person's mental and physical health, social connection, and trust in themselves and others. Many refugees are traumatised by issues of betrayal. This can be on an interpersonal, political, or systemic level. This sense of betrayal and grave injustice can make trusting other people or systems difficult. Children and families who have experienced refugee trauma can also be hyper-vigilant and easily triggered.

Remember, refugee families will be grieving the loss of their home, community, and family left behind. It is common for refugees to experience grief and loss for the people, places, customs, and social standing. They may also be suffering with issues surrounding personal identity and belonging.

Many refugees will also need to learn a new language, culture, and system. Adults may find it hard to find work, and their qualifications might not be recognised. Their network of family and friends will be significantly reduced, if there at all.

Most refugees will also have concerns about:

- learning a new language
- money and finding secure accommodation
- maintaining their cultural practices, and understanding Australian culture
- developing a social network
- experiencing discrimination and racism
- tracing friends and family still in danger, and supporting friends and family overseas through remittances or sponsorship (Working with Refugees: A guide for Social Workers, 2004).

## Survivors' Guilt

It is common for refugees to experience 'survivors' guilt' once they reach safety. If it is not identified and addressed, survivors' guilt can hold people back from participating in their new communities. People suffer in silence, even within themselves. This has led to a suicide; to a yearning to join those who have gone.

## The Impact of Refugee Experiences on Children

Children are at greater risk than adults of abuse, neglect, violence, exploitation, trafficking or forced recruitment into armed groups. They may have experienced and witness disturbing events, been separated from their family or have seen horrific acts committed against their family.

Girls may have been the victims of rape, forced into sexual slavery or faced other gender-related risks.

These experiences can often have a profound effect on children, from infancy and childhood through to adolescence and into adulthood. Due to war, violence and fear, their family and other networks are less likely to have been able to support them.

Traumatic experiences will often affect a child's development and ability to learn at school, especially if their schooling has been interrupted. Remember, most children's education will have been disrupted. Children may have also suffered from malnutrition and a lack of immunisation.

Often children and young people become socialised into Australian society faster than their parents, and this can create tension in families. As children pick up English faster than adults, their role in the family can change, particularly if service providers inappropriately use them as interpreters. Traditional roles may be reversed, with children taking on a more significant role in the family.

See: [Impacts of Trauma](#) for more information.

## Understanding Common Signs and Symptoms of Refugee Trauma

Reactions to trauma will be different for everyone. Sometimes reactions to trauma do not surface until someone is in a safe place. For other people severe trauma reactions may occur on the journey, and by the time they reach Australia, they have become numb and withdrawn.

Particularly for children, trauma reactions will depend on the severity of the trauma they have experienced, and the support they receive from parents, family, and community. Experiences of racism and support from the Australian community and systems will also affect how trauma affects children and families.

## Children

Exposure to traumatic events can cause the following general symptoms in children of all ages:

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| <ul style="list-style-type: none"><li>• stomach aches, headaches</li><li>• crying a lot, fear, or anxiety</li><li>• sadness or irritability</li><li>• thoughts about the traumatic event that won't go away</li><li>• avoiding thinking or talking about anything that reminds him or her of the traumatic event</li><li>• acting as if the event is happening right now (when it is something that occurred in the past)</li><li>• trouble managing behaviour or emotions</li></ul> | <ul style="list-style-type: none"><li>• pains in the body that don't seem to have a physical cause</li><li>• hopelessness</li><li>• nightmares</li><li>• trouble paying attention</li><li>• trouble falling asleep, or sleeping too much</li><li>• getting upset when things happen that remind him or her of the traumatic event</li><li>• lack of desire to play with others or take part in activities that her or she used to enjoy</li></ul> |
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## Adults

Common reactions after traumatic life events include:

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| <ul style="list-style-type: none"><li>• anxiety, panic attacks</li><li>• startle responses</li><li>• depression and grief reactions</li><li>• dissociation or numbing</li><li>• sleeping problems</li><li>• inability to plan for the future</li></ul> | <ul style="list-style-type: none"><li>• irritability or aggressiveness</li><li>• emotional stress</li><li>• eating disorders</li><li>• psycho-sexual problems</li><li>• pre-occupation with the past</li></ul> |
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## Post-traumatic stress disorder (PTSD)

Some children and adults may also have symptoms of PTSD including:

- intrusive thoughts, memories, flashbacks, and nightmares of traumatic/persecutory content
- numbing and blocking responses such as avoiding thoughts, memories, people, and situations that trigger traumatic memories
- hyper-arousal symptoms such as sleeping, memory and concentration problems, startle responses, and irritability.

## Normalise Reactions

It is important to see their symptoms as normal responses to abnormal situations.

Many survivors of torture and trauma don't realise their symptoms are common responses to extremely distressing events. Many fear they are 'going mad'. You can help by:

- explaining that their symptoms are normal reactions to extreme stress
- explaining the ways different people can react to traumatic events
- acknowledging their distress
- acknowledging their strengths and noticing the ways they have survived.

## Talking about Trauma and Making Referrals

Talking about trauma is likely to be a foreign concept for the refugee children and families you work with. Use their words to describe what has happened in the past and only explore their trauma experiences if it is needed or they would like to.

Talking about refugee traumatic can be very distressing. Refugees are likely to have had to retell their trauma story many times. Be sensitive to this. Refer the children and families you work with to a professional counsellor or therapist, such as a STARTTS' counsellor, who can provide a structure for these issues to be worked through safely.

If it is necessary to ask about their trauma history, it's important the child or family feels safe enough to do so. They may be reluctant or even unable to talk about these experiences because of:

- their need to avoid re-living their experiences
- mistrust of other people
- fear of reprisals to themselves or their family
- avoidance of humiliation or stigma.

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For specialised torture and refugee trauma recovery services, see [NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors](#).

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## Tips for Working with Refugee Children and Families

- **Determine if a child or family is from a refugee background** to help you assess their needs and identify appropriate interventions.
- Refugee children, adults, and families are survivors. You can **honour and harness this strength and resilience** to motivate change when needed.
- Be patient, **developing trust will take time**. For many refugee children and families being suspicious and not trusting government has helped them survive.
- **Practical advice and support can help build trust** with children and families. Refugees may not understand how Australian health, welfare, education, and employment systems work. Don't assume they know. Refer children and families for help when needed, such as with a local migrant centre.
- Ask children and families **how they would like to work with you and be supported**. This helps them gain a sense of control over their lives.
- Every child and family you work with has the right to be **understood respectfully within their refugee and cultural context**. This may require you to adjust your approach and broaden your knowledge and skills.
- People are the experts in their lives. So, it is **okay to ask questions so you understand** their context. This is a good way to engage with and empower the family.
- View cultural consultation as an ongoing process, not a one-off event.
- **Be aware of your own cultural beliefs, biases and assumptions** and the impact of these on your practice.

- **Work hard to understand the family's culture and refugee experiences.**
- **Explain** how organisations are involved in working with families to help children be safe in Australia. **Child protection** is likely be a foreign concept. Talk about how keeping children with their families is the first priority and what happens when this is not possible.
- Help children and families **identify and connect with cultural and support networks**. This may be community cultural groups, religious groups, elders, or migrant organisations. Helping a child and family keep connected to culture and community can reduce social isolation, increase feelings of pride and provide a source of support.
- Let children **express themselves in different ways**. It might be hard for them to describe in words their fears, needs and wishes. Listen to their body language, facial expressions and tone and use drawings, art and play in your work with refugee children.

## More Information

See: [Tips for Working with Culturally and Linguistically Diverse \(CALD\) Communities](#),

Also see: [Working with Refugees: A guide for Social Workers \(2004\) developed by STARTTS](#).

## References

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