

SESSION 5:

REFUGEE COMMUNITIES AND DOMESTIC VIOLENCE

Time 2 Hours - 

*“I could not forgive - only hate was in me”
(Croatian Focus Group, 2004)*

*“When a family goes on their refugee journey, they do this without confidence or trust. Some people lose trust in their partners, others lose their own confidence.”
(Croatian Focus Group, 2004)*



Introduction

When seeking to understand the incidence of domestic violence in refugee communities, we must always remember that it is still both a criminal act and a human rights abuse. We are not seeking to excuse domestic violence, merely to understand it. Through this understanding, we can develop better ways of working with women and families who are experiencing this abuse. In this session, using the concept of “intersectionality” we will bring together the insight gained into the refugee experience in sessions 1 – 3, and add to it our understanding of domestic and family violence as outlined in session 4. Combining these two sets of

information will provide us with a firm foundation for our work with refugee women and their families.

Session Objectives

On completing this session, participants will be able to:

- Demonstrate an understanding of the intersection of domestic violence vulnerabilities and the refugee experience
- Explain the compounding effects of these experiences
- Identify the range of services necessary to address domestic and family violence in refugee communities
- Begin to discuss the complexities of working with families in these circumstances

PRESENTER'S NOTES

Presenters must read and be familiar with the course material for this session before conducting the training. Section 1, **SESSION CONTENT**, is background material for the facilitator. This material can also be given as class handouts if required. Section 2, **SESSION MATERIALS**, includes a suggested running order, a power point presentation, audio visual materials and activities to use when presenting this training session. Small copies of the power point slides are included in the text to indicate where they will be most useful. Larger copies of the PowerPoint slides are printed at the end of the section and can be photocopied as Session Handouts.

SESSION CONTENT

Refugee Communities and Domestic Violence

What is Intersectionality?

(NB this session is based on “The Ultimate Betrayal – an examination of the experience of domestic and family violence in Refugee Communities” written by Eileen Pittaway, and commissioned and funded by the Domestic Violence Clearing House, UNSW).

“Intersectionality seeks to provide a tool for analysing the ways in which gender, race, class and all other forms of identity and distinction, in different contexts, produce situations in which women and men become vulnerable to abuse and discrimination. It also allows us to recognise the civil, political, social, cultural, economic and historical processes which, in forming constructions of race, ethnicity, descent, nationality or place of origin, can also lead to discrimination of women and girls and the violation of their human rights. It illustrates intersectional discrimination in both the public and private sphere” (Real, 2002).

The concept of intersectionality explores the many multiple oppressions and discriminations experienced by women. It also challenges the notion that we have one dominant identity with which we interact with the world, such as being a member of an ethnic minority, or a refugee woman. It argues that women have multiple identities, which come to the fore in the many different situations in which she may find herself during the course of her existence. It contends that to fully understand the experience and discrimination experienced by women, we have to analyse and understand how the multiple oppressions are intertwined with the multiple identities of women. It explores how this impacts on the lives of women and their ability to access human rights.

Previous analysis has focused on notions of multiple “layers” of discrimination and has acknowledged the fact that many women suffer from many different types of discrimination simultaneously. The notion of intersectionality challenges the notions of “layers” of oppression and discrimination. This concept suggests that it should be possible to separate the layers out and address the issues one by one. Experience has taught us that this is not effective. It assumes one predominant identity with which we interact with the world, and ignores the compound effect of being subjected to multiple discriminations.

To give some examples: addressing the feminisation of poverty by the provision of micro credit schemes is not effective for women if men still control the economic life of the community in which she lives. Raising quotas for women in parliament is not effective if women still suffer from religious persecution, and do not have access to power and decision making. The introduction of labour laws is not effective if women are still commodities and used as sex slaves by male power brokers. Sexual and reproductive health care is little use to women in conflict situations who are targeted, raped and forced to trade sex for UN food rations. Better education will not relieve oppression if Indigenous communities are denied access to their land. These issues and prescriptions have to be understood as part of the complex web of discriminations which affect women, in particular - the intersection of racism, gender and class. Intersectionality examines the way in which the different oppressions weave together and compound the effects of each. The effect of the whole is far more than the sum of the parts.

In adopting the use of this concept, we are arguing that if we wish to achieve equality and access to human rights, freedom and dignity for all women, we need to identify and address the compounding effects of these strands of oppression. We have to treat them as a whole, and understand them in a social and historical context. Using the concept of intersectionality in this way “helps us understand the ways in which injustice and discrimination are rooted within hierarchies of power and privilege in modern society” (George 2002).

Using a “Road Map” of Oppressions

At a workshop in the gender caucus at the WAR in Durban, Kimberley Crenshaw from New York used the notion of a road map of a busy town to explain the meaning of the intersectionality of oppression and discrimination. Having drawn the map, with many busy streets crossing a central intersection, she then proceeded to name the streets. Racism Road, Patriarchy Parade, Sexism Street, Colonisation Crescent, Religious Persecution Road, Indigenous Dispossession Highway, Class Street, Caste Street and so on.

She described the roads as being full of heavy speeding traffic, and described the impact of intersectionality as being what a woman from a marginalised group would experience when she tried to cross the main intersection.

To use this model as an analytical tool, we must unpack each of the “Road Names” to explore the origin of the oppression, and the impact of these on women across a range of situations. For example, refugee situations are produced by conflicts, by the aftermath of colonisation, by racist policies and law. Refugee women are affected by discrimination on the grounds of sex, because of their membership of a marginalised group. She is forced to migrate, becomes dispossessed and may become a victim of trafficking.

These things are not individual occurrences with separate root causes. They are all intricately linked, and the linkages are both the cause and effect of the intersection of oppression and discrimination.

The Impact of Pre Arrival Experience

The experiences of refugees prior to their arrival in Australia contribute many elements to the risk of domestic violence in refugee communities, both pre- and post-arrival. The widespread suffering of violence, torture and trauma, displacement and dislocation, family and social disintegration, and challenges to traditional gender roles contribute to a unique set of cumulative risk factors that leads to the heightened vulnerability of refugee women to domestic violence.

Loss of family members is perhaps the most common of all refugee experiences. Many refugee women have lost children, and the large proportion of women refugees illustrates the loss of male family members, either dead, presumed dead, or merely 'disappeared' (Pittaway, 1999). In one Cambodian camp in Thailand, a survey found that 80% of the women had lost three out of four children in the four years prior to the survey (Freidman, 1992). In a survey conducted in Sudan in 1985, 34% of the women had lost at least one child in the previous four months (Berry, 1986, cited in National Population Council, 1991). Loss of family members during war and political upheaval can leave people with feelings of guilt at having survived when others have not. This compounds the grief normally experienced at times of loss (Pittaway, 1999).

The refugee experience is characterised by exposure to high levels of violence. Almost all refugees have either witnessed or been subject to violence, including rape, torture, public humiliation, murder, and the loss or disappearance of family members (Kaplan & Webster, 2003; Silove, 2003). Men experience the terrible atrocities of armed conflict, while women are frequently targeted for systematic rape (Burnett & Peel, 2001; McWilliams, 1998). Particularly for women, the violence continues after they have fled from their homes. They continue to be the victims of rape and sexual exploitation, both during flight and in the supposed safety of refugee camps and settlements (Bartolomei, 2003; Friedman, 1992; Human Rights Watch, 2000; Hyndman, 2000; McGinn, 2000; McWilliams, 1998; Ward, 2002) (See Box 3).

UNHCR estimates that 80% of all refugee women and many children are routinely raped and sexually abused (UNHCR, 1995). Women are raped to humiliate their husbands and fathers, and for reasons of cultural genocide. They are forced to trade sex for food for their children. They are raped by the military, by border guards and by the UN Peace Keeping forces sent to protect them. Rape and sexual abuse is the most common form of systematised torture used against women, and this ranges from gang rape by groups of soldiers, to rape by trained dogs and the brutal mutilation of women's genitalia. Many children are born to refugee women as the result of rape (Friedman, 1992; Martin, 1992; McGinn, 2000; Pittaway, 1999).

An increase in the risk of domestic violence after flight can partially be explained by refugees' widespread exposure to violence. Studies have shown that experiences of violence by men can be turned on family members, and have linked an increase in domestic violence to situations of war, post-war or social upheaval (Krug, Dahlberg, Mercy, Zwi & Lozano, 2002; McWilliams, 1998; Victorian Foundation for Survivors of Torture, 1998). Widespread social violence establishes a cycle of violence that has heavily gendered consequences. Refugee women experience high levels of domestic violence in both camps and post-conflict situations (Human Rights Watch, 2000; McGinn, 2000; McWilliams, 1998; Peavey & Zardkovic, 1996; Ward, 2002), which leads many women to feel they are being victimised twice: first by the armed conflict in their home countries, and then by the violence of their own husbands (Human Rights Watch, 2000; McWilliams, 1998). Some women even express the wish to return to war-torn areas, in order to escape the violence in their own home (Human Rights Watch, 2000).

Research in the former Yugoslavia found that family violence had risen markedly during and after the war (Nikolic-Ristanovic, 1989; Peavey and Zardkovic, 1996). The increase was mostly attributed to men's involvement in warfare, and their bringing home of "guns and internal wounds which are now directed at the women who must live with them" (Peavey & Zardkovic, 1996, p.15; McWilliams, 1998). Many women reported that their husbands became "crazy" after the war experience, while others reported that domestic violence only began after the onset of the war. The aggression was exacerbated by television propaganda programmes, which resulted in a phenomena of "post-television news violence". This was identified by some women as the initial cause of domestic violence (Maguire, 1998; Nikolic-Ristanovic, 1989, p.76).

Not only the effects of war but also those of torture, impact on family relations. Survivors of torture typically suffer from symptoms of extreme anxiety, depression, guilt, shame and anger, as well as fear of intimacy, social impairment and changes in identity. They commonly experience post traumatic stress disorder, and sometimes suffer from psychiatric symptoms including marked social withdrawal, strange or abnormal behaviour, and aggression towards others (Burnett & Peel, 2001; Friedman, 1992; Gorman, 2001; Kantemir, 1994; Piwowarczyk, Moreno & Grodin, 2000). This can have a lasting result on interpersonal communications, with the result that men more readily resort to violence to solve family conflict:

"Male refugees... suffer psychological damage which can affect their emotional well being. Once out of immediate danger, a refugee man may be angry for the horrible crimes which he has witnessed, and feel guilty for having been unable to live up to his expected role in society and protect himself and his family. After witnessing massive episodes of pain and torture, the psychology of violence may numb him and... make him more likely to resort to violence himself" (Friedman, 1992, p.70).

The effects of violence, torture, and the trauma of flight from home are all amplified by conditions in refugee camps and settlements. Camps are more like institutions than communities, lacking both social structure and the means for self-sustainability (Crisp, 2000; Hyndman, 2000). Human rights such as access to adequate food, housing, and health and education services are routinely violated, making existence in camps a daily struggle for survival. There are little or no economic resources available, or options for income generation (Bartolomei, 2003; Hyndman, 2000). Residents are denied civil rights, freedom of expression, freedom of movement and freedom of self-determination. They live in a state of insecurity and uncertainty – in effect, a state of limbo for what is sometimes many years - not knowing what will happen to them, whether they will be able to return home, or whether they will ever reach a place of safety from where they can rebuild their lives.

Inadequate services also mean that refugees are not provided with support to enable them to deal with the emotional and psychological disturbances of armed conflict, persecution and flight. Traditional networks of family and community support have been broken down, and most refugees suffer from trauma as a result of the atrocities they have witnessed and experienced. In addition, they frequently suffer from depression and loss of hope in camps, because of their loss of control over their lives and future. These cumulative stress factors tend to compound the effects of violence, leading to a higher risk of domestic violence against women (Easteal, 1996; McWilliams, 1998; Perilla, n.d.). Women in Kakuma camp, Kenya, reported that violence had increased since their arrival because men were inactive and bored (McGinn, 2000). In 1999, the UN Special Rapporteur on Violence against Women found fatalities in domestic disputes were on the rise in refugee camps in Pakistan, probably resulting from the tensions associated with the precarious status of refugees, and high rates of unemployment (Ward, 2002)

Refugee women often receive little support from their communities, even if they do feel comfortable speaking out about the violence they are experiencing. Sometimes they internalise cultural norms, believing that domestic violence is the right of their husbands, and that if they talked about it they would be 'bad wives'. But whether or not they seek outside help, the ignorance of relief agency staff exacerbates the problem (Human Rights Watch, 2000). Those working in refugee camps often share similar views that domestic violence is a private issue, or worse still, that it is "cultural" and therefore somehow sacrosanct (Volpp, 2003; Ward, 2002). There is also a common belief that domestic violence is "normal", and therefore not as serious as other types of violence to which refugees are exposed, including sexual violence (McGinn, 2000). The pervasiveness of these three attitudes results in the blindness of field workers to the scope of the problem, which leads to inadequate policy and ineffective or non-existent services for victims of domestic violence (Friedman, 1992; Maguire, 1998). It also contributes to a general lack of commitment to carrying out policy where it does exist (Human Rights Watch, 2000; Ward, 2002).

Domestic violence against women in camps therefore often goes unnoticed and unaddressed. Victims have very few avenues for justice or legal redress, and the violence usually continues unabated. Women receive no support or protection to enable them to leave their violent partner, and refugee camps offer few places that women can escape to in safety. They fear the anger of their husbands, and the numerous other risks of violence and rape they will be exposed to if they leave the 'protection' of their homes (Human Rights Watch, 2000; McWilliams, 1998). While most relief agencies at least acknowledge the problem of widespread sexual violence, and have some programs in place to begin to address it, many continue to neglect the issue of domestic violence.

State violence, social violence, structural violence

Violence assumes many different forms. In refugee-producing countries, much of the extreme violence to which people are exposed is perpetrated or sanctioned by the state. This includes most notably violence perpetrated by the military against civilians and other armed forces. In many post-colonial developing countries, it also includes deliberate strategies of public shame, humiliation and subjugation, usually involving torture, systematic rape, death and "disappearance" (Osirim, n.d.).

In situations of social disintegration, precipitated by armed conflict, economic crisis, or persecutory governments, there is a correlative rise in social violence. This may include crimes of hatred committed in times of ethnic tension, violence and terror campaigns carried out by guerrilla groups or insurgent forces, a general rise in the incidence and tolerance of public violence, and marked increases in adolescent violence or attacks against women (Nikolic-Ristanovic, 1989; Osirim, n.d.) All of these forms of societal violence can be considered to be risk factors in domestic violence. Research in the field of social work has focussed for years on the correlation between people's exposure to violence and their propensity for violence, identifying a "cycle of violence" that is handed down between generations in abusive families (Widom, 1989).

Correspondingly, studies have demonstrated the effects of warfare and the military on men's propensity for domestic abuse. One Army-funded study in the US found that the incidence of severe domestic abuse was three times higher among Army families than civilian ones, and that the greatest incidence occurred when men had just returned from war (Lutz & Elliston, 2002). Well-documented reports also indicate the strong correlation between men's experience of warfare in the former Yugoslavia, and the escalation of their domestic violence towards their spouses (Nikolic-Ristanovic, 1989; Peavey & Zardkovic, 1996).

State-sanctioned and other social violence also indirectly exacerbate the risk of domestic violence by their raising of the general social tolerance to violence. Men who have witnessed horrific atrocities and widespread violence may be more likely to view violence as a means of conflict resolution or expressing their emotions (Nikolic-Ristanovic, 1989). They may also suffer threats to their masculine identities as a result of

humiliation, victimisation or violence, and this may find expression in domestic abuse as a way of reasserting their power and control (Brownell & Congress, 1998; Eastal, 1996). In many cultures, if a woman is raped by soldiers, guerrilla forces, or members of a rival group, her vulnerability to domestic violence is greatly heightened, because her husband will perceive the assault as an attack on his own “honour” (Brownell & Congress, 1998; Isis-WICCE, 2001; Friedman, 1992; McWilliams, 1998).

It is important to recognise that state and social violence are the legacies of the refugee experience, inflicting unseen internal scars that refugees carry with them to resettlement communities. Unfortunately, the experience of structural violence often continues, albeit in another form, during the resettlement process. Racism is a prime example of this. A particularly pertinent example of this is the inadequacy of mainstream domestic violence services to meet the needs of refugee women. However, there are other issues such as ongoing economic marginalisation, which have been identified as trigger factors for domestic violence in refugee communities. In considering the impact of societal violence on the risk of domestic violence in refugee families, it is important to recognise not only the violence to which they have been exposed before migration, but also the structural violence that continues during resettlement.

Post arrival experience

Potential impacts on refugee women

The social isolation that refugee women experience is a major contributing factor for post-migration domestic violence. Isolation results from their lack of English, financial dependence and the cultural constraints on their freedom. It is exacerbated by their sense of dislocation when their families and communities are fractured and they are relocated to an alien culture. Cut off from family support and traditional avenues of community intervention, many women experience heightened domestic violence as a result of resettlement (Brownell & Congress, 1998; Eastal, 1996). (The links between domestic and family violence and isolation are well known and will be more fully explored in Section 4 of this paper.)

Refugee women are far more likely than men to stay in the home. They have less access to English classes, employment opportunities, and resettlement services, including housing, training and health care (Pittaway, 1991; Iredale et al, 1996). Insufficient knowledge of English specifically disadvantages them in comparison to men in their families, who often use this as a tool of power and control, engendering the total dependence of refugee women on their husbands (Brownell & Congress, 1998; Perilla, n.d.)

“Living in Australia is like living in a golden cage in a wonderful room! – I can see all the good things but I can not get out because I do not have the key – and the key is English. My children are ashamed of me – they are always out with their friends, and I do not know what they do, they

speak more English than [our language]. They do not treat me with respect anymore. My husband says I am boring – he has his work, he goes out with his friends – he has learned English. He does not treat me well; I am like a poor servant to all of them. They have a new life, I have not. I wish we had never come here” (Refugee woman, ANCORW, 1990).

Likewise, lack of training, inadequate English, and cultural restraints on women’s employment create situations of economic dependence. Research has indicated that women who are dependent on their husbands have increased vulnerability to domestic violence (Bell & Wilson, 2003; Brownell & Congress, 1998). They are often subject to financial abuse, to which refugee women are more vulnerable due to their lack of awareness of government allowances (Easteal, 1996).

Another major issue for refugee women is the loss of their extended and informal family networks. The family unit is a social construction, and different societies have defined families in different ways. The imposition of the Australian model of a nuclear family onto groups which perceive families in very different ways, can cause tremendous problems. The Australian model informs Australian immigration policy, and this leads to situations whereby many refugee and migrant families find themselves attempting to start a new life without key family members here with them. This can have very detrimental consequences for the families concerned, particularly if the family members are left behind in refugee camps and other situations of danger:

“I sit here in my nice chair in this nice flat and I just feel sick thinking of my family sitting in the dust in Kakuma. I have too much to eat, they don’t have enough. I feel sick all the time; I cannot sleep at night for worrying about them” (Sudanese refugee woman living Australia, Bartolomei & Eckert, 2004).

A recent study found that the Australian CALD community has strong beliefs in the permanence of marriage which encourages women to “keep their problems at home” and to view leaving a violent relationship as a last resort (Partnerships against Domestic Violence, 2000a). The same report indicated the existence of cultural expectations on women to be “patient”, and to endure and tolerate their partner’s “shortcomings” - exemplified by the belief that “good wives stay with their husbands no matter what” (p.39).

Motivated by threats to cultural identity, refugee communities in resettlement usually place strong importance on these traditional cultural values, which may account for some of the reluctance of refugee women to report domestic violence. In addition, they are likely to be under strong social pressure not to “discredit” their community by reporting undesirable social problems (Brownell & Congress, 1998).

Due to these cumulative factors - women's lack of economic independence, lack of English, social isolation and exclusion, and limited gender roles - the occurrence of domestic violence in refugee communities is usually "hidden". For various reasons, refugee women may be more reluctant than women in the wider community to come forward and seek help. Refer to section 9 "Roads to Respect – Learning about Different Communities". This issue is discussed in the sections on Somalia (p9), Afghanistan (p8) and Iraq (p7).

Potential impacts on refugee men

Changed social status, unemployment and lack of financial security are significant factors in the stress that refugee men experience, and may in turn increase the likelihood that they will be violent towards their spouses. (Easteal, 1996; Kang et al, 1998; Nikolic-Ristanovic, 1989; Partnerships against Domestic Violence, 2000a). Men may also find it difficult to deal with changes in gender roles brought about by integration into the dominant culture. They may resent their wives' newfound independence or opportunities for work or study, and may feel that their traditional role as breadwinner and their power as the head of the family is being usurped (Brownell & Congress, 1998; Kang et al, 1998; Hurst, 2002; Partnerships against Domestic Violence, 2000a).

Other frustrations experienced by refugee men may also contribute to domestic violence. In society at large, identified causal factors for domestic violence include poverty, social exclusion, low education levels, and lack of economic resources (Bell & Wilson, 2003; Krug et al, 2002). All of these are commonly experienced by refugee families, particularly in early resettlement. In addition, refugees are "frequently re-traumatised" in the process of meeting the challenges presented by an alien culture (Carciero, 1998).

Refugee men may resort to patterns of violent behaviour originating from the refugee experience, or they may utilise the accessibility of alcohol in resettlement countries as a way of dealing with traumatisation (Easteal, 1996; Kang et al, 1998). Many refugee women and women in the wider community have reported a link between alcohol consumption and domestic violence (Partnerships against Domestic Violence, 2000a and section 9 "Roads to Respect – Learning about Different Communities", focus groups from Iran, Iraq, Croatia, Serbia and Sudan.)

Other forms of family violence

Family violence in refugee communities does not only take the form of abuse of women by their husbands. Intergenerational violence, by adolescents against their parents, and adults against their elders, is also prevalent. Refugee women often sacrifice themselves for their children and families in the resettlement process. Mothers first concentrate on establishing their families, leaving their own needs to last. They are the last to make new friends, the last to seek help. The exception is that of paid work. Sometimes the urgent need for income forces women to take

on the additional burden of what is often exploitative employment, while seeking to establish their families. Their own needs are then even more neglected. This often means that mothers are the last to adapt to the new social environment, and are forced to depend on their children to help them navigate their new life. When adults rely on the child's ability to learn a new language and new culture, they abdicate much of their care and control over the children's lives. They reverse the notions of who is responsible for whom.

In their teens, these children, already used to taking responsibility for family life, assert their right as young adults to follow the customs of the new country. Parents then attempt to regain their parental control and responsibility and to reverse the process that has taken place. This is often unsuccessful, because they cannot take back the authority that they have given away earlier. This is particularly problematic for families from strictly patriarchal societies, and frequently results in the breakdown of family relationships. There are reports of male children reacting to parental control and becoming abusive in their own families. Once again, women are vulnerable to violence within their homes.

Studies of refugee youth in the juvenile justice and criminal systems, both in the United States and in Australia, show that a large percentage of children had taken an early care-taker role for their families (Eklund, 1982, in Bylund, 1992). It is obvious that this role reversal is detrimental for both children and their parents. Once again, this experience is similar to that of many other migrant families. The difference is the additional baggage that the refugees bring with them, which appears to lead to an increased resort to learned patterns of violence when faced with difficult circumstances.

Another "loud silence" is that surrounding the abuse of elders in refugee families and communities, but slowly some whispers are being heard. Again, there are strong parallels with the experiences of other migrants, and once again we have to look into the additional baggage carried by refugees to elucidate the differences (Pittaway 2004).



SESSION MATERIALS

Refugee Communities and Domestic Violence

“Families are isolated and lonely with no family support - this can have very negative impacts on the whole family”
(Croatian Focus Group, 2004)

Activity - Play Session 3 From Horror To Hope DVD

We will start this session by listening to the voices of the women who took part in the focus groups which informed this training kit. It is important to notice that their experience of domestic violence and the way in which it is regarded, differs from country to country, from rural to urban areas.

“Refugee families are really are a great DV risk - not for cultural reasons but because of the stresses of resettlement and the difficulties of parenting, parents need lots of information.”

“Women started to realize how their neighbours live - so they start asking for the responsibilities of child care, house work & work to be shared. We all should share, but back home men didn't do such things. We were not that open, women roles are important but the men take care of everything.”

“Women started to realize they are due more respect, they got confused & they start saying

to their partners "I do not want to do that anymore."

"No jobs, no proper information & support, low self esteem as parents, as, wives, as husbands."

"Settlement traumas, these build up like a geometric puzzle and then they collapsed in a pile."

"DV can be caused by economic problems."

"Wives feel incapable; frustration, insecurity & desperate frustration can be causes of DV."

"Settlement difficulties greatly contribute to DV where there is DV on wives and kids then it will build up again and again."

"The causes of DV are not because of cultural issues."

"Men are very sensitive, their egos."

"Here there is a lot of separation of the families - resettlement is the major stress."

"To talk about domestic violence is taboo - shameful. In order to keep a good name one shouldn't speak about it."

"I have always had a good relationship, but my experience is that when the tempo of life

gets too quick then lack of understandings of each other can happen in a relationship and then it breaks down”

“Women are expected to take everything - including abuse”

“Traditionally in our culture a woman should always be ready for sex, and if she refuses her husband her parents will come in and scold her.”

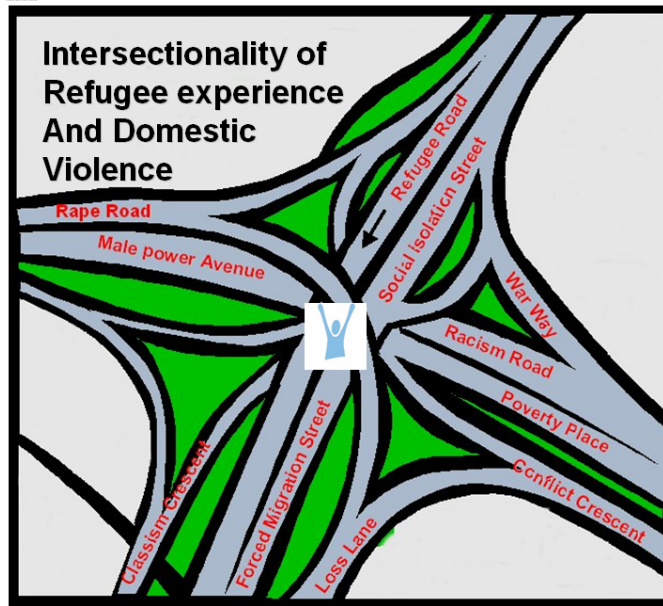
“Not everyone is aware of the idea of ‘rape in marriage’ - in Australia women are not always ready for sex - they can be the breadwinners, still do all the domestic chores, and come home tired from work.”

(Combined focus groups 2004)

INTRODUCTION - 1 hour

In order to bring together our knowledge of the refugee experience and our understanding of domestic violence, we are going to use a concept called “Intersectionality” (See session content). While it might at first sound very complicated, using the idea of a “road map” is a simple and effective way to assist people to appreciate the complex dynamics between the many forms of disadvantage and abuse which some refugees face.

Use PowerPoint 39



S. Rees 2004

Discussion Point

Explain the concept of intersectionality to participants.

Use PowerPoint Number 40

**Refugee Communities
And Domestic Violence**

Women experience becoming and being refugees differently to men

Experiences related to :

- gender
- culture
- persecution
- challenges during resettlement

compound to make refugee women vulnerable to domestic violence

S. Rees 2004

Refugee Communities And Domestic Violence



Rape of women, particularly of younger women, disrupts the cultural and social order.

It undermines the functioning and strength of the community

Male power and privilege, the cultural expectations of women and the experience of rape are often interrelated with the partner inflicted violence during resettlement

Many women 'married' the person who raped them in order to 'save face'



S. Rees 2004

Activity: Group discussion based on Power Point graphics



Using the roads names on the “Intersectionality” road map, ask participants to make links between the refugee experience and the resettlement experience.

Discuss some examples of how the different experiences compound one another.

For example, if a woman has been raped and tortured prior to arrival, this is likely to lead to social isolation. Social isolation itself can cause depression, which will compound the effects of the rape. Both of these things make her vulnerable to domestic and family violence. Poverty and unemployment are additional risk factors. Male power can compound all of these issues.

Ask participants to add new road names to the map.

Compounding factors

Working with refugee women and families who are experiencing domestic violence, can pose challenges for service providers who often lack the resources to deal with the multiple and compounding aspects of the

cases. Often, sophisticated case plans are needed to ensure that all aspects of the problems are covered.

Use PowerPoint Number 42



Refugee Communities And Domestic Violence

For refugee women the intersecting factors that disadvantage or increase risk of domestic and family violence during resettlement can include:

- residency status
- restricted access to gender specific service and support
- culturally inappropriate service interventions
- racism
- domestic violence
- downward mobility
- unemployment and changed identities



S. Rees 2004

Use PowerPoint Number 43



Refugee Communities And Domestic Violence

For refugee women, English language skills are critically important to social inclusion.

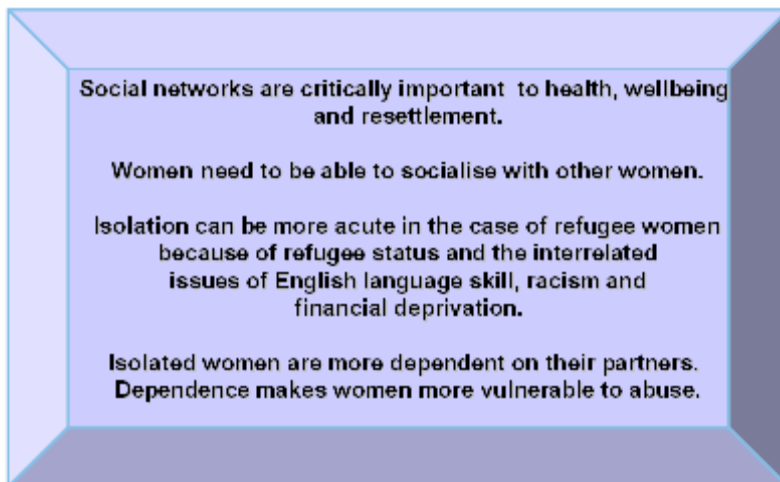
Without English women have less opportunity to understand social expectations of male behaviour in Australia and legal and welfare options to protect them from further violence.

Refugee women are isolated because of extremely low socio-economic status, inadequate support to learn English and fear of, or actual, racist violence.



S. Rees 2004

Refugee Communities And Domestic Violence



S. Rees 2004

Activity: Case studies

1 hour



Divide the participants into 4 groups and distribute the case studies which are at the end of this kit. Assign one case study to each group.

Ask the participants to list all of the compounding factors that they can identify in the case study.

Against each of the factors that they list, ask them what action they think needs to be taken.

Share the work of each group, and from their answers, compile a comprehensive list of all the services we might need to refer to, or offer, if we are going to respond effectively to refugee families who are experiencing domestic and family violence. Keep this list as a reference point for sessions 7 and 8.

Use PowerPoint Number 45



Refugee Communities And Domestic Violence

CASE STUDY 1

A Muslim woman from Afghanistan with recently acquired refugee status is experiencing domestic violence. She is visited by a statutory child protection worker, an interpreter and a mainstream domestic violence shelter worker.

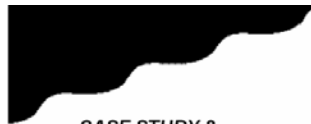
In the presence of her husband the woman is told that if she does not leave him, her two children (aged 2 and 4 years) will be removed from her.

The woman refuses to leave and the children are placed in foster care.



S. Rees 2004

Use PowerPoint Number 46



Refugee Communities And Domestic Violence

CASE STUDY 2

A Somali woman who is a refugee is referred by a community welfare worker to a immigrant domestic violence service.

The service worker supports the woman to take out a civil protection order so that she can remain in the home but in the hope that it deters her husband from further abuse.

When the woman arrives at court with her application for the order she is met by her husband's family members.

They dissuade her from taking further action and she returns home without the order.



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Refugee Communities And Domestic Violence

CASE STUDY 3

A refugee woman from Sierra Leone has a history of sexual abuse and rape by military officers prior to arrival in Australia. Her partner has experienced severe torture and experiences feelings of anger that is often turned on her.

The woman visits a doctor for chronic sleep disturbances and vomiting.

The woman describes her symptoms to the doctor through an interpreter. She is sent for various blood tests and x-rays. The cause of her illness is never found and she returns home.

Her refugee status and history are never discussed with the Doctor.



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Refugee Communities And Domestic Violence

CASE STUDY 4

A refugee family arrive in Australia, they are excited about their new life In what they have been told is called "the lucky country".

The family are assisted with housing, although it is on the 14th floor of a tower block and there are no other people they know or can communicate With there.

The man cannot find work, and the woman eventually finds part-time employment in a factory where she is treated poorly by her employer.

Her children have to attend childcare, an unfamiliar concept to her and the children, causing great distress to her as a mother.

The family live for two years in isolation and poverty until the woman is admitted to hospital after being severely beaten by her husband.



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