INTRODUCTION

The aim of this chapter is to present a discussion about some of the challenges faced by social workers and human service workers engaged in responding to the child welfare needs of refugee children and youth. Through a discussion referring to the Saskatchewan-based Moving Forward project, the chapter will highlight important aspects of this work: working with parents, building strong communities, understanding the needs and challenges facing refugee families. The Moving Forward project was sparked by two publications: Post traumatic stress disorder: The lived experience of immigrant, refugee, and visible minority women of Saskatchewan (Immigrant, Refugee, and Visible Minority Women of Saskatchewan,
2002), and *Women and post traumatic stress disorder: Moving research to policy* (Omorodion & White, 2003). The 2002 study discussed experiences that led to post traumatic stress and described symptoms of post traumatic stress (for example, flashbacks, hypervigilance, withdrawal, and depression). The studies reported the underutilization of “mainstream” mental health agencies. Both studies reported the concerns of refugee parents about the unaddressed needs of their children.

Despite the fact that Canada has boasted of a long tradition of humanitarian response to the needs of this population (Government of Canada, 2008), social workers and human service practitioners are still learning about how to respond to the needs of children and youth who have experienced trauma. Unlike the situation of immigrants, where there is some choice with respect to returning to their countries of origin, refugees have a real fear of returning to their countries of origin because of the situations of war, violence, oppression, and persecution (Immigration and Refugee Board of Canada, 2006). These experiences have resulted in post traumatic stress responses, and in calls for the development of programs, services, and interventions to address accompanying symptoms and negative outcomes that affect the lives of children and youth.

These children and youth may not have experienced traumatic events directly. However, they may experience secondary traumatization and its transgenerational effects (Kirmayer, Lemelson, & Barad, 2007). They may grow up hearing stories about the experiences of their parents, and may develop anxieties as a result (Kirmayer, Lemelson, & Barad, 2007). The impact of traumatic events extends to the wider community. Alexander (2004) (as cited in Kirmayer et al., 2007) and Robben and Suarez-Orozco (2000) (as cited in Kirmayer et al., 2007) have suggested that there is need to understand how “the interaction of individual and collective processes contribute to resilience and reconstruction in the aftermath of political violence” (Kirmayer, Lemelson, & Barad, 2007, p. 10). In short, as the literature concludes, child welfare work with refugee children and youth cannot be done in isolation, but within the context of community and family (Hurlock, McCullagh, & Schissel, 2004; Kirmayer, Lemelson, & Barad, 2007).

Various reports have already described some of the negative outcomes of trauma: the vulnerable situation of refugee and immigrant youth, including the potential for involvement in gangs, situations of violence, and drug trafficking (Baldwin, 2005; Federation of Canadian municipalities,
2004; CBC Sports, 2007; Van Ngo & Schleifer, 2005; Hurlock, McCullagh, & Schissel, 2004; Mellor, MacRae, Pauls & Hornick, 2005). These reports emphasize the need for ongoing knowledge building, and also the development of a social and health services infrastructure to serve this population (Cooper, Masi, Dababnah, Aratani, & Knitzer, 2007).

There have been some initiatives aimed at responding to these issues (Public Safety Canada, 2006; United States Conference of Catholic Bishops/Migration and Refugee Services, 2007); however, there is still a dearth of literature relating specifically to the needs of refugee children and youth living in the Prairies. It is hoped that this study will contribute to an understanding of the importance of including this literature within the domain of Canadian, but particularly Prairie, child welfare literature.

BACKGROUND

Immigration trends: Canada and Saskatchewan

One of the challenges of putting the topic of trauma and its impact on immigrants and refugees on the public agenda in Saskatchewan was that, prior to the 2000s, the number of immigrants and refugees arriving in Saskatchewan was relatively small (Christensen, 1999, 2003, 2005; Henry, Tator, Mattis, & Rees, 2000; Beaujot, 1996; Elliott, 2003; Mulder & Korenic, 2005). In addition, immigrant retention rates were relatively low (City of Saskatoon, 2004, 2007). Nevertheless, Saskatchewan’s experiences with refugee resettlement have been more significant. Indeed, settlement work in Saskatchewan evolved from Saskatchewan residents’ concerns about the needs of refugees. For example, the Open Door Societies, now the largest settlement agencies in the province, were first established in the 1980s to respond to the needs of refugees from Vietnam. Another interesting observation is that in the 2001 to 2002 period, the immigrant population to Saskatchewan tended to have larger numbers of children and youth than Saskatchewan-born residents (Elliott, 2003).

Saskatchewan’s “economic boom” has resulted in some changes with respect to attitudes to newcomer settlement. “Economic boom” has resulted in labour market shortages in Saskatchewan, and immigrants and refugees are now being seen as a source from which to draw. In 2002, 229,000 immigrants arrived in Canada, with 1,665 of these arriving in Saskatchewan (Citizenship and Immigration Canada, 2006; City of Saskatoon, 2004, 2007). About 43 percent of the immigrants to Saskatchewan
tend to settle in Saskatoon. In terms of refugees, there was an increase from 9.7 percent to 11.6 percent between 1996 and 2001. During this period, 21 percent of immigrants came under the family class, 46 percent under economic immigrant class, and 33 percent came under refugee class. Between 2001 and 2004, 22 percent came under the family class, 41 percent came under the economic immigrant class, and 35 percent came under the refugee class (Citizenship and Immigration Canada, 2006; City of Saskatoon, 2004).

There has also been a shift with respect to source countries. Prior to the 1970s, the majority of immigrants to Canada came from the United States, Britain and other European countries (Christensen, 1999, 2003, 2005). In more recent times, immigrants have been arriving in larger numbers from African, Asian, Caribbean, and Latin American countries (Beaujot, 1996; Mulder & Korenic, 2005). Many are coming from war-affected regions and regions of unrest. Host communities are faced with the goal of helping these families, children, and youth to settle in Canada and to build community and social relationships within their environments.

**Project Design and Assumptions**

**The partners**

The project was designed by International Women of Saskatoon (IWS) and Family Service Saskatoon. IWS (formerly Immigrant Women of Saskatchewan, Saskatoon Chapter) is a non-profit community-based organization that has been providing services to immigrant women and refugee women and their families for the past twenty years. Family Service Saskatoon is a non-profit community-based organization that has served the Saskatoon community for more than 75 years. The agency provides counseling services and programs for youth, young parents, couples, individuals, and families. The advisory committee included representatives from the settlement and immigrant serving agencies, the police, and the school sector. It was anticipated that social work practicum students would be involved in the project and therefore would also be invited to participate on the advisory committee.

**Rationale and assumptions driving the project design**

IWS decided to approach Family Service Saskatoon because IWS assumed that they themselves lacked the capacity to address the psychological
needs of this population. While IWS had a long history of working with immigrant and refugee women, they did not believe that the agency had the professional knowledge and skills to address the issues of trauma adequately on their own. They were also committed to building bridges with “mainstream” organizations and building capacity within these organizations. Family Service Saskatoon’s staff members were extremely enthusiastic about this partnership. The agency had a long history of counseling, including group work, and they made assumptions that their staff had the knowledge and skills to work competently with this population. The project was designed based on these assumptions: one agency assuming they could apply the Western model as their modus operandi; the second assuming that the other partner was the expert, with knowledge and skills that they did not have.

**Goals of the project**

The main goal of the project was to provide opportunity for building knowledge and skills among refugee children, youth, and their families to effectively address issues of trauma. A second goal was to build awareness of the services and programs available to immigrant and refugee families. A third was to enhance capacity among service providers so they could better respond to the needs of refugee children, youth, and their families.

**Recruitment and group process**

The project coordinator, in consultation with the group facilitators, was responsible for screening participants. No new group members were to be added to the group after the first group session. The intervention plan for the first intake included facilitating 6 group sessions with parents from 7-10 families from Afghanistan and Sudan, and 6 group sessions with children and youth from the same communities. The groups would be co-facilitated with at least one facilitator being a new Canadian, immigrant, or refugee woman.

The decision to focus on these two populations was supported by statistics that reported that 30 percent of government-assisted refugees were arriving from Sudan, and 25 percent from Afghanistan (Anderson, 2005). Advisory committee members who were connected with settlement agencies also supported this choice. It was anticipated that choosing participants from two countries only would minimize communication
(language) challenges. Allowances were made within the budget to accommodate the use of interpreters if necessary.

The team planned on developing posters and pamphlets to advertise the project and to assist with recruitment. Other planned methods of recruitment included presentations to staff and clients at settlement agencies, schools, and ethnocultural associations. The team also planned to develop and disseminate resource materials on the topic of post traumatic stress. The team hoped that these resource materials would serve to engage refugee and immigrant families.

Orientation

Prior to the commencement of groups, the advisory committee planned an orientation for all staff and volunteers involved in the program. The aim of the orientation sessions was to expose participants to a broad range of topics relevant to working with refugee children, youth, and families. The orientation sessions included presentations by individuals from specific ethnocultural communities (focusing on those identified for recruitment). The aim of these presentations was to invite speakers to share information about the historical, political, economic, and social conditions in their countries of origin. Presenters were also invited to share personal stories about their experiences living in war-affected countries, in situations of extreme trauma, and in refugee camps. Other presentations focused on information about the journey, settlement, and integration experiences of refugees in general. Other key components of the orientation included presentations on the theme of post traumatic stress and post traumatic stress responses, and on cross-cultural communication. The orientation session always included a presentation on self-care for service providers.

HOW THE PROJECT UNFOLDED

Project components

The primary components of this project were education, intervention, resource development and dissemination. These components would be mutually inclusive of one another, reflecting a commitment to a holistic, integrated approach to program delivery. The project materials (for example, flyers, brochures, and pamphlets) were used for publicity, recruitment and education. These were developed in multiple languages in an attempt to reach as broad a cross-section of the immigrant and refugee
community as possible. The team relied on group work in order to provide opportunity for participants to learn life skills topics such as the effects of trauma and stress on family dynamics, positive coping skills, and problem solving skills. Youth had an opportunity to use arts and crafts to assist with building communication and self-expression skills.

The education component was directed not only towards the immigrant and refugee children, youth, and families, but also towards service providers and professionals. For example, presentations were done to the Saskatoon Catholic Schools Professional Development Conference, to the 2007 Congress of the Social Sciences and Humanities Conference held in Saskatoon, and at the Prairie Child Welfare Consortium Symposium held in 2007 in Regina.

The advisory committee

Following receipt of funding, one of the first tasks of the team was to put together an advisory committee. Bimonthly meetings provided opportunity for input and guidance through brainstorming, project reports, reviews, and discussions. During the first intake, representation came primarily from the immigrant and refugee serving agencies. Following this intake the team was more intentional about reaching out to the school sector and used formal letters of introduction with telephone and face-to-face follow-up meetings to assist with networking. A representative from the public school system joined the advisory committee. Letters of invitation were also sent to the Saskatoon Police and to the Mennonite Central Committee. Both of these responded positively.

There are still individuals or sectors missing from this advisory committee; of particular note would be representation from the health and social services sectors. The team concluded that participation by the mental health sector would be a step towards addressing concerns about the underutilization and often non-utilization of traditional mental health services by refugee families, children and youth (Canadian Task Force on Mental Health Issues Affecting Immigrants and Refugees, 1988; Williams, 2002; White, 2007; Immigrant, Refugee, and Visible Minority Women of Saskatchewan, 2002; Omorodion & White, 2003). Another gap is the lack of direct participation or representation from the province’s child welfare services. This is a major failing considering the fact that one of the stated reasons for the creation of the project was the vulnerability of refugee and immigrant youth and the potential for them to become involved in
the child welfare system (risk of gang involvement, violence, drugs). The failure to reach out to these sectors reflects the general tendency of human services agencies to approach their work in a fragmented manner.

The orientation sessions

These orientation sessions have been invaluable, as reflected in the feedback following both orientations. The project team gained an understanding of the possible challenges they would face while working with the target group. The use of presenters from different countries allowed participants to listen to individuals who had survived challenging life experiences, and who were now giving back to their communities in many different ways. In some cases, the stories gave participants a glimpse of the depth of trauma experienced by individuals, the level of resilience, and also of the invisible and deep-rooted scars of trauma. Presenters spoke about the factors that led to strife, violence, and underdevelopment in their countries of origin. They would often share information about themselves, including information about the events or conditions that led to their leaving their countries of origin. These sessions put a human and local face to much of what participants may have learned about through books and the media. The sessions provided background preparation for all those involved in the project, as well as an opportunity for participants to begin the process of networking and sharing with one another.

Toseland and Rivas (1995) have argued that it is not possible for professionals to know everything about the background and cultures of all the individuals and families with whom they work. However, the authors acknowledge that there are many ways of building knowledge in this area. These include reading and researching, visiting agencies and communities that newcomers might frequent, and through the technique of social mapping. The Moving Forward project team continued to remain focused on providing an approach that would best meet the child welfare needs of this population and on encouraging professional development that would identify and respond to new and emerging issues and challenges.

Orientation sessions provide opportunity to build and enhance knowledge and skills among practitioners from varied backgrounds in order to provide the best possible and most comprehensive approaches.
This is supported in the literature, which suggests that interventions with refugee children and youth have often been fragmented and that it is important to ensure the “weaving together of intervention modalities by a multicultural, multidisciplinary, professional and paraprofessional team, preferably working at the primary prevention level” (Aldous, 1999, p. 49).

Recruiting refugee families

The team promoted the project and worked on recruitment through: telephone calls, correspondence, face to face meetings with management staff and English as a Second Language teachers at schools, home visits, presentations at adult group meetings and classes at settlement agencies, and other social events and gatherings where there would be potential parents and youth; print media, and on websites. Although the team initially assumed that they would recruit about 7-10 families from Afghanistan and Sudan, the first intake actually included families not only from these two countries but also from Burundi, China, Colombia, and Peru. Eighteen families participated in this first intake. Service providers from the settlement agencies referred individuals whom they assessed to be in tremendous need of services, and this list went beyond the anticipated target populations.

At the second intake, the team again tried to limit the number of country groups, still believing that this would help alleviate the difficulties that multiple languages posed. Again, because of demand, the team did not adhere to their plan. International Women of Saskatoon played a lead role in the recruitment process of the participants. This “flexibility” continued to create challenges for group facilitators and had an impact on the group process that will be discussed later in this chapter. Eighteen families from Colombia, Afghanistan, Sudan, Burma, Rwanda, Congo, Egypt, Mongolia, Bosnia, and Burundi participated in the project. In this final list, there were 4 families from Columbia, 7 from Afghanistan, 3 from Sudan, and 1 from each of the other countries.

There were distinct differences between the two intakes. Group sessions from the first intake took place at Family Service Saskatoon office while the second was school-based. The children and youth connected with the first intake were between the ages of 12 and 17; those from the second intake were between the ages of 12 and 22.
The group process with parents

Six week sessions were held with parents. The team provided transportation, childcare, and refreshments. During the design and planning stages, the assumption was that the groups would be closed (that is, not adding new members after the first session) (Toseland & Rivas, 1995). The different viewpoints in the literature demonstrate some of the challenges of making decisions about whether groups should be closed. Some authors suggest that while there is a place for open groups, constantly adding new members can be distracting (Daste & Rose, 2004). Daste and Rose (2004) cite literature suggesting that groups should be closed after the first sessions “to enhance cohesion of the group and to ‘allow progressive work and promote good attendance’” (p. 21). Toseland and Rivas (1995) note that groups where there are “frequent and extensive membership changes” (p. 86) usually remain at the formative stage. These authors argue that open groups usually do not lead to intimacy among members.

The notion of a closed group was not easily understood by the participants. The team had expectations about how the groups would evolve, but decided that the messages from the parents were compelling. These messages were that the parents were happy with an open group concept and process. The result was that in both intakes it took some time to build cohesiveness because of having to navigate through a maze of different languages. Participants were new to the country and often to one another. Nevertheless, this “open group” concept seemed to work for the participants. The facilitators accepted that parents would bring their friends to the group. They also learned to embrace the spontaneous dancing and singing that would emerge. They were flexible and were able to embrace the new members, while at the same time knowing that this meant they were entering “new territory” with respect to how they would run their groups.

It was always important to focus on the intent and benefits of the group process. First, the team drew on literature about the nature of the group experience (Ephross, 2004, p. 2). Individuals would be members based on being “social beings in continuous interaction with others who are both seen and unseen” (p. 2). With respect to understanding group principles, there was a belief that “a member’s actions are socially derived and contributory” (p. 2). Participants would realize they were not alone in their experiences, and they could support and learn from one another. Parents would learn to identify and discuss the effects of trauma
on themselves and on their children. The team anticipated that the group process would provide opportunity for giving information or educating (in this case education about trauma and other aspects of the healing journey) (Moursund & Kenny, 2002; Toseland & Rivas, 1995; Ephross, 2004).

Cooper, Masi, Dababnah, Aratani, and Knitzer (2007) note that the lives of refugee children and youth in Canada will be influenced by the experiences of their parents as they (the parents) go through the process of learning to live and cope with life in Canada. Hence, it was important to build knowledge and skills among parents so that they could begin to name and understand the challenges of life in Canada, and also begin to build and enhance relevant skills and capacities to assist them with communicating their needs and concerns with others and developing the kind of mutual aid and support networks that they might require (Moursund & Kenny, 2002; Toseland & Rivas, 1995; Ephross, 2004).

With respect to educative and informative goals, parents seemed to express more interest (especially at the start) in talking about how they could become a part of Canadian society, and less in talking about their past experiences of trauma. They did not want to relive memories, and wanted to make a fresh start in Canada. Nevertheless, there were opportunities for the facilitators to provide information about trauma and about responses to trauma. This included information about the impact of trauma and its effects on the family and on child development. This was consistent with the goals and objectives that the facilitator had presented to the participants.

**Language, reading, and writing**

Facilitating groups with parents proved to be extremely challenging, especially because of the assumption that presentations and discussions would be the primary activities during the groups. Language barriers made this difficult. Since participants did not want to have interpreters in the sessions, they acted as peer interpreters when necessary. A disadvantage of this was that there would be side conversations that could be distracting. Nevertheless, peer interpreting may not necessarily have taken more time than if professional interpreters had been used.

Lack of basic literacy skills in reading and writing was evident among some participants in the first cohort. This was even more apparent with the second cohort. This created challenges for facilitators who were not
accustomed to having to address literacy issues. Once the team realized that not all participants had English language skills, they began to use more visual aids. Facilitators used flip charts to write out the names of emotions (sadness, anger, joy) in different languages. However, this had to be supplemented with peer support and interpreting, since not everyone could read (even in their own language). The team had to be creative and explore techniques that would best fit the group members.

One of the lessons was that knowledge could be expressed in various forms and that lack of ability to use traditional reading and writing did not necessarily mean a lack of understanding or knowledge about trauma, or an inability to engage in the healing journey. This suggests a need for both practitioners and newcomers (particularly refugees) to come together to share knowledge in their different “languages” and means of expression. This is consistent with UNESCO’s definition of literacy and suggests that this might be an opportunity for practitioners in the helping profession to engage “clients” to use the modes of communication and healing that best fit them and that would achieve intended goals and objectives. The team has since informally discussed the potential for theatre, dance, art, and learning about other techniques and approaches that may have been used in other countries and settings (Pipher, 2002).

**Group dynamics and follow-up**

Some participants spoke to facilitators about still living in fear of the people from their own country. This extended to how they felt about participating in groups when there were individuals from their home country. This concern was more apparent among participants from Afghanistan and Columbia. At the conclusion of the adult group sessions, the facilitators reported to the advisory committee about the challenges they had encountered. In response, one of the members of the advisory committee made a presentation about aspects of life in Columbia, since this had not been done during the orientation sessions.

**The group process with children and youth: A work in progress**

The team hoped to be able to facilitate group sessions with children and youth. This component of the project remained very much in its infancy stage. During the first intake, there were two groups: one with female youth (ages 12 to 16), and another with male youth (ages 13 to 18). These groups took place at Family Service Saskatoon. The girls were involved
in a mask-making exercise and were encouraged to talk about what the masks meant to them. The facilitators concluded that the participants were not ready to go very deeply into issues. Only one went a bit further when she said that she had put feathers across the eyes on the mask to express her feelings of not being understood. The feathers kept her hidden. The male participants talked about the issues that had an impact on their settlement process: language barriers and communication difficulties, finances, visas, passport, public transportation services, and adapting to the weather. They identified grief and losses including loss of relatives they had left behind. In many ways, the males seemed to take on the role of provider and were already striving to be independent adults.

During the second intake, a group of girls/young women from two schools were invited to participate in the groups. Both schools were geographically close to one another. The group sessions were held at times that were appropriate to the needs of the young people. Sharing a meal was an integral part of this process and so food was always provided. Participants were ages 15 to 18. Approximately 4 sessions were held with art and craft being the primary activity. The fact that the youth continued to return seemed to suggest that the facilitators were able to engage them, and that artistic and creative approaches worked well with youth.

There were several challenges: getting parental consent, schools’ consent, schools’ willingness to participate, school/academic schedules, privacy issues, diverse personal interests of youth, availability. This was compounded by the fact that the youth were reluctant to express their pain and feelings. They wanted to fit in, and would not venture into any activity that would make them appear to be “different.” Another challenge was the perception by some school counselors that participation in any group session would result in re-traumatizing and reliving of experiences which would have negative effects. Some school counselors wanted to be a part of the entire group process as a condition of the school’s participation in the project.

As already mentioned, this is an area that needs much more reflection and planning. One might speculate that the expansion of the advisory team to include creating safe spaces, nurturing relationships, community building, and having fun representation from other sectors such as Child and Youth (mental health) services and the Child Welfare sector might help to strengthen this component of the project. Another is the need to allow time for building relationships with and among youth.
CONCLUSIONS

The gathering: The first step

The Moving Forward team assumed that there would be a screening process for participants, that the groups would be closed, that they would build awareness about the issue of trauma, and that the parents would begin to develop some knowledge and skills to help them address their own issues of trauma. The team also hoped that this insight would help parents to assist their children with their healing and growing needs. What evolved was the creation of a space where parents could meet, feel safe, laugh, cry, and build new relationships (especially relationships of trust). The facilitators’ willingness to be flexible and to comply with the parents’ move to the open group concept helped in the creation of this safe space. This is consistent with the literature which stresses the importance of creating safe spaces, nurturing relationships, community building, and having fun (Pipher, 2002). The team considered factors such as user friendly administrative processes, warm and welcoming physical environments, and practical issues such as ensuring that posters were available in multiple languages (Pipher, 2002). As Pipher (2002) concludes, “Therapy is very much about the construction of a space for people to think, talk, and work out their problems” (p. 298).

In reflecting on how the groups evolved, some team members suggested that what had emerged at each intake was a Gathering; and that it was totally acceptable to consider that this was a necessary concept or method of professional response. In many ways, this Gathering or creation of a space where parents could come together to address the issue of trauma in their own way is consistent with what the literature has identified as relevant to healing. The themes of trust and safety, for example, which are also aspects of safe space, run through the literature on trauma (Herman, 1992; Rousseau & Measham, 2007; Pipher, 2002). The importance of community, which is created by the Gathering, is also discussed in the literature (Herman, 1992; Hurlock, McCullagh, & Schissel, 2004; Kirmayer, Lemelson, & Barad, 2007).

Herman (1992) has suggested that survivors recognize how much their own self-worth is connected to their relationships with others or “depends on a feeling of connection to others” (p. 214). Group solidarity is therefore a strong factor in the healing journey of trauma survivors (Herman, 1992, p. 214). When survivors become a part of a group whose
members share, embrace, give to, listen, hug, care for and take care of one another, these human acts create a sense of connection to others, and help members to reconnect with the world around them. Herman has referred to this as the “restoration of social bonds” (p. 215).

Barter (2001, 2005) has emphasized the importance of understanding the contexts of the lives of children defined as “at risk.” He draws on the work of Schorr (as cited in Barter, 2001, 252) and notes that children at risk are “growing up in families whose lives are out of control, with parents too drained to provide the consistent nurturance, structure, and stimulation that prepares other children for school and life” (Barter, 2001, p. 252). One of the remarkable aspects of working with refugee families was being able to recognize the parents’ commitment and devotion to ensuring that their children have “successful” lives in Canada. Many live for their children. Yet, their lives have been so disrupted that they themselves have a difficult time helping their children. Therefore, an important aspect of addressing the needs of refugee children and youth is responding to the needs of their parents.

In many ways, the Gathering seemed to represent the first stage of healing for the participants. This appears to be the equivalent to what Herman (1992) describes as the third stage group. She suggests that third stage groups are those that “concern themselves primarily with reintegrating the survivor into the community of ordinary people” (p. 217). The Gathering comprised individuals who had lived in refugee camps or who had survived differing kinds of traumatic experiences. Most had come as refugees and had embraced Canada as their new homeland. They were interested in building community, learning about life in Canada, making Canadian friends. During the first session, when the facilitators were doing introductions, they asked about the expectations of the parents. Why had they come? What did they want from the sessions? Despite the fact that the parents had been informed about the intent of the program, their responses related to settlement issues such as finding jobs, learning English, learning about how to live as Canadians. What distinguished members from those of other groups was the recognition of the traumatic experiences that they had survived, that there would be times when they would have to cry together, but often it was about moving forward together from places of grief and trauma.

On the other hand, closed groups appeared to be more appropriate for the youth who lived at a developmental stage where peer influence
and support were particularly important. During the recruitment stage, the team paid attention to group affiliation, to existing cliques and relationships, to age and age differences, life experiences, and to other factors that might influence group formation and bonding. These issues were recognized during the recruitment with parents, but did not have the same impact on the actual recruitment and group process.

An important lesson for child welfare workers and policymakers was the value of creating safe spaces and opportunities for community- and relationship-building, since these are vital for successful integration and creation of sense of home. While one might approach working with children and youth differently from working with adults, the overall goals of prevention and empowerment remain the same.

**Implications for social work practice and education, and human service intervention**

One of the biggest lessons for the team was that of flexibility. The team entered this project with assumptions that were strongly influenced by a Eurocentric approach to helping, and found they had to redefine what intervention would mean in this context. One of the common comments was: “It’s different work … it’s different.” In this case, it was important to listen to participants, and take cues from them, especially as this related to how the program would evolve.

Another lesson was one with which settlement agencies have long grappled: the importance of supports such as childcare and transportation. During the first intake the team had not anticipated that most families would be large and had assumed that some families could carpool. Instead, the team had to focus on ensuring that vans were sent to pick up families since these could accommodate large-sized families.

A second lesson was that family size would have an impact on the requirements for childcare. This was a hard lesson for the team during the first intake because they were not prepared for the numbers of children. Interaction with the children allowed team members to begin to build relationships with children and families. It also gave team members a glimpse into some of the needs of these families. Providing a school-based program (as occurred at the second intake) helped with child-minding, since the team now had access to gym and recreational facilities. Another factor related to family size was deciding if several siblings would be in the same group, and then determining how to respond to the specific
needs of each child or youth. The team relied on members of the advisory committee (for example, the Settlement Support Workers in Schools [SS-WIS] to assist with making decisions about recruitment.

**Lessons for social work practicum students**

The team was able to involve practicum students from the Faculty of Social Work, University of Regina. During this process, students interacted with the participants, and often became anxious about how their relationships with the families were evolving. One of the biggest concerns of students was that their relationships with participants seemed to extend beyond the boundaries of what they had been taught was appropriate. Sometimes families would invite students to tea or coffee or they would want to hug students, and students were nervous that they were violating professional boundaries.

Team members continually stressed the importance of relationship-building, of being genuine, and about using good judgment. This was difficult for students who seemed to have very rigid notions of what their relationships should “look like.” Indeed, this is an area that needs to be discussed in social work education. What does it mean to have genuine relationships with newcomers and other clients? How rigid do these boundaries need to be? What is the intent of the “professional boundary”? The team realized that participants generally trusted them and women would disclose incidents of abuse and violence with individual facilitators. Many of the women seemed to come from traditions where women found ways of supporting one another, and they evidently considered the facilitators as individuals whom they could also trust to support them in the same way. They were not always ready to leave or report incidents of abuse and violence. but clearly wanted to talk. Students learned to take cues from the women about what kind of physical responses (hugs, etc.) would be appropriate. In the case of children and youth, this was more difficult because it seemed to take a long time for these young people to go beyond superficial discussions. Facilitators tended to be relatively rigid with the rules about physical contact with young people.

Another lesson for practicum students was that while the team engaged in group work, the work was also about community-building: community development. Community developers usually know that there are tasks that need to get done and they quickly go about doing them. Group work practitioners are also aware of the details they have to
address as part of setting up groups. These include ensuring that facilities are appropriate and adequate, and ordering or preparing refreshments. These may also include ensuring that transportation and childcare arrangements are addressed.

All of the social work practitioners and community workers involved in the project assisted with these tasks. At the start, it was evident that not all social work practicum students considered these tasks as social work duties, despite the fact that the practitioners modeled behaviour. Nevertheless, since its inception, there has been a significant change in attitudes, and social work students now work alongside community workers and social workers to ensure that the tasks are completed. That is, in any kind of community development work, everyone participates and does what is necessary to ensure success of projects. This group work project was also built on community development principles, and consistent with the focus on building safe community.

FINAL COMMENTS

If one considered that a goal of the project was to enhance accessibility and utilization of traditional mainstream agencies, then in many ways this project made significant progress in achieving this goal. One step in doing this was to build awareness among service providers, professions, and immigrant and refugee children, youth, and their families about the kinds of programs and services that are available within the community. Another was to build relationships with the participants so that they become more comfortable with service providers and with using mainstream services. The relationships with practitioners that emerged from this project have had important outcomes.

Graduates from the project have contacted facilitators and other team members for support and advocacy when child welfare protection agencies have become involved with the families, and when other personal crises have arisen. One of the facilitators made this comment: “We are their Canadians,” which could also be interpreted to mean that the team had achieved another goal of helping participants to begin to build relationships and bridges with Canadians. There has also been greater conversation and interaction between settlement workers and workers from Family Service Saskatoon. An important lesson for the team was one that came with years of community work: the importance of integrating food, fun and especially celebration into the project.
Some of the challenges for facilitators may be related to the notion that professionals trained within Western settings have certain expectations of how to provide service to their “client populations.” This project exposed the strong influence of these Western ways of “doing and thinking,” and challenged the team as a whole to rethink how one might provide service in contexts where populations are becoming increasingly culturally diverse and where migration has been a strong influence on these changes. Clearly, services to address the child welfare needs of refugee children would reflect a commitment to prevention, and to creating the kinds of strong community supports and infrastructures that would enhance access and utilization of refugee children, youth, and their families, for example, encouraging the participation of refugee families in parent education groups, in families and schools together (FAST) programs, and in other group and community activities.

There have been other offshoots of this project. The team has presented reports about their work at several conferences. The feedback has been positive and has resulted in requests for more information and also for team members to lead other workshops or provide educational materials. The team has developed educational material focusing on the topic of post traumatic stress among immigrants and refugees. These have been well received by the participating schools. At the end of the two intakes, parents wanted to continue to meet. There have been several ways in which International Women of Saskatoon responded to these requests. These have included the development of women’s drop-in programs and activities based on the requests of women (for example, craft-making sessions; presentations and sessions on self-care and self-esteem; yoga, cooking and other recreational activities). The organization, often in partnership with Family Service Saskatoon has continued to work to ensure that participants strengthen relationships within the community and build new communities of support. Both agencies have partnered with schools and other agencies frequented by newcomers, to develop programs and activities aimed at social integration and social inclusion.

The project has exposed the importance of working holistically with newcomer families who come from war-affected regions. There are now plans to build on this by engaging in further research and evaluation, in partnership with refugee families, to address the needs of this population. An area that is being explored is the development of a participatory action research evaluation study with refugee and immigrant families.
to determine the impact of projects such as these, and to make recommendations for future action. The Moving Forward project represents a journey that once begun, is hard to leave.

REFERENCES


Canadian Task Force on Mental Health Issues Affecting Immigrants and Refugees (1988). After the door has been opened: Mental health issues affecting immigrants and refugees in Canada. Ottawa: Health and Welfare Canada and Author.


