Meaning or Measurement? Researching the Social Contexts of Health and Settlement among Newly-arrived Refugee Youth in Melbourne, Australia

SANDRA M. GIFFORD¹
CHRISTINE BAKOPANOS¹
IDA KAPLAN²
IGNACIO CORREA-VELEZ¹

¹Refugee Health Research Centre, La Trobe University, Bundoora, Victoria 3086, Australia
s.gifford@latrobe.edu.au

²Victorian Foundation for Survivors of Torture, Melbourne, Australia

What are the most appropriate methodological approaches for researching the psychosocial determinants of health and wellbeing among young people from refugee backgrounds over the resettlement period? What kinds of research models can involve young people in meaningful reflections on their lives and futures while simultaneously yielding valid data to inform services and policy? This paper reports on the methods developed for a longitudinal study of health and wellbeing among young people from refugee backgrounds in Melbourne, Australia. The study involves 100 newly-arrived young people 12 to 18 years of age, and employs a combination of qualitative and quantitative methods implemented as a series of activities carried out by participants in personalized settlement journals. This paper highlights the need to think outside the box of traditional qualitative and/or quantitative approaches for social research into refugee youth health and illustrates how integrated approaches can produce information that is meaningful to policy makers, service providers and to the young people themselves.

Keywords: research methods, health and wellbeing, refugee adolescents, settlement

Introduction

A key element of Australia’s commitment to the international protection of refugees is the Humanitarian Programme, a planned component of the country’s Migration Programme. From January 2001 to December 2005, Australia’s Humanitarian Programme granted approximately 50,000 visas to refugees and other displaced persons. Approximately 50 per cent of the Programme’s intake was people under the age of 20 years. Thus over the last
five years 25,000 children and adolescents from refugee backgrounds have resettled in Australia (DIMIA 2005).

A challenge for Australia’s resettlement programme is how to effectively promote health and wellbeing among new arrivals and particularly how best to support refugee young people (Refugee Resettlement Advisory Council 2002). However, there is a dearth of evidence informing policy and practice on the most effective ways to promote psychosocial wellbeing and successful resettlement for refugee youth, due to the limited research investigating factors associated with successful outcomes.

The challenges of researching the determinants of well being and good settlement among newly-arrived refugees include developing appropriate methods of sampling, recruitment and informed consent, and appropriate data collection methods. There are additional logistical issues of conducting research with people who have many pressing health and settlement needs within their first months of arrival. Furthermore, research with refugee young people requires parental consent which can be complex given the family history and settlement demands.

One of the key methodological challenges of developing an appropriate research approach is the difficulty associated with eliciting information from a population with a range of literacy skills and languages, who are unfamiliar with research and have diverse pre-arrival experiences. In addition to the developmental challenges of being an adolescent in a new country, refugee young people are grappling with pre-migration experiences, which may include growing up in a context of war, violence, and protracted periods spent in refugee camps. Many of these young people have experienced displacement from one or more communities and homes, disrupted schooling, separation from close family and friends, and the trauma and loss associated with their refugee experiences (Coventry et al. 2002; Rousseau et al. 2001; VFST 1996). Given the history of persecution, mistrust and fear can continue to be played out in the resettlement country (Coventry et al. 2002). Many refugee youth find themselves faced with the often fraught process of negotiating conflicting cultural values of their families and of their host country (Coventry et al. 2002; Brough et al. 2003; Hyman et al. 2000). Given the immediate challenges facing young people in their first year, research with this population must at minimum not further add to the burdens of resettlement, and should ideally contribute to a positive experience of adjustment to their new country.

This paper begins by briefly discussing the literature pertaining to the conduct of research with refugee communities. We then address the above issues by discussing the methodological approach taken in designing and conducting the Good Starts study, research that investigates the psychosocial determinants of wellbeing and settlement among refugee youth in Melbourne, Australia. We describe the aims, objectives and design of the study and discuss the logistical issues of sampling, informed consent, data collection, follow-up and analysis. We describe in detail the specific methods and
instruments of data collection which are organized around the five theoretical themes of the study (identity and self, social support, connections to place, health and wellbeing, and aspirations for the future). We conclude with reflections from our study and the implications of carrying out research into the social determinants of settlement and wellbeing among young people from refugee backgrounds.

Researching Refugee Wellbeing and Resettlement

Theoretically and methodologically, research into refugee health and wellbeing is fraught with difficulties (Ahearn 2000). First, refugee studies are inherently multidisciplinary, drawing upon many different theoretical and methodological approaches (Black 2001). While this provides a rich context for approaching research questions, it also presents many complexities as there is no straightforward approach to theory, method or design. Second, there is a tension between meaning and measurement. While qualitative studies of the refugee experience provide valuable insights into the meanings of transition and resettlement (Ahearn 2000), it is difficult to generalize these findings to the broader resettled population. And when it comes to measurement, there are at present very few quantitative instruments that possess the validity and rigour required to assess constructs of psychosocial wellbeing, health, resilience, and other key variables that are associated with resettlement outcomes (Gagnon and Tuck 2004; Hollifield et al. 2002; Porter and Haslam 2005). The methodological problems of carrying out survey research with refugee populations range from issues of cross-cultural translations and equivalency of concepts, through to the practical issues of sampling and negotiating with community gatekeepers (Bloch 1999). Sensitive ethical issues (Jacobsen and Landau 2003; Rodgers 2004), and the need to establish a sense of trust between researchers and refugee communities (Hynes 2003) while at the same time ensuring methodological rigour (Kopinak 1999), often give rise to competing demands. This has led to an increasing recognition of the value of participatory and action research approaches, focusing on research with rather than on refugee communities (Briant and Kennedy 2004; Johannsen 2001). Finally, there is a growing trend within the field of combining different methodological approaches, thus allowing for both meaning and measurement. Research designs that combine qualitative approaches which give voice to the refugee experience (Powles 2004), with quantitative approaches that can provide population-based evidence, are likely to prove as fruitful as they have in other areas of social science and health (Hines 1993; Maton 1993).

Change is central to the refugee experience, yet surprisingly few studies with refugee populations have adopted a longitudinal approach, with the majority of designs (qualitative and quantitative) being cross-sectional or conducted at one point in time. In a systematic review of longitudinal studies on refugee children and youth published between 1984 and 2004, only five
studies could be identified, all with relatively small sample sizes, most with short follow-up periods, and all using only quantitative methods (Correa-Velez et al. 2005). In qualitative research, follow-up studies are rare. However, the ethnographic approach of anthropology has much value for longitudinal investigation, due to its in-depth focus on both context and change over time (Alverson et al. 2000; Barley 1990). Although no such studies on refugee youth could be identified, a number of studies have adopted longitudinal ethnographic designs to investigate teenage smoking (Bell et al. 1999), substance abuse (Alverson et al. 2000), injecting drug use (Sherman and Latkin 1999), and school success (McLeod 2000).

Several studies have highlighted the strengths of longitudinal ethnographic approaches for researching cultural diversity and change over time (Moerman 1993; Sissons 1999) and this approach has been shown to be especially appropriate for research with children and young people in contexts of cultural diversity (Boyden and Ennew 1997). In sum, the majority of research with refugee populations has been cross-sectional with few longitudinal or ethnographic studies, and it is rare to find a study that combines both qualitative and quantitative approaches (Loizos 2000).

The strength of longitudinal designs in studies of refugee resettlement is that they allow us to investigate key transitions and changes in people’s lives. In contrast retrospective studies are limited in that individuals are often unable to accurately recall the details of earlier experiences, and later experiences influence the recollection and interpretation of earlier events. When asking respondents about the past, events may be forgotten, partially remembered, or misplaced in time (Uncles 1988). Past intentions may be recorded inaccurately as a result of post-hoc rationalization of events that did not take place as originally expected (Uncles 1988; Rose et al. 1991). An important advantage of a longitudinal (cohort) study is that it reduces the likelihood of inaccuracy by decreasing the time between the occurrence and the recording of an event (Robinson and Marsland 1994). Another advantage of longitudinal studies is that they allow the analysis of change at both the individual and the aggregate levels (Uncles 1988; Rose et al. 1991). Especially in the resettlement period, a time fraught with emotions and pressing needs, documenting experience as it happens provides a richer and more accurate picture of this process.

In late 1999 we undertook the challenge of designing a longitudinal, ethnographic study of the psychosocial determinants and contexts that support health, wellbeing and good settlement among newly-arrived refugee young people in Melbourne, Australia. In 2001–2002 we conducted a pilot study, the precursor to the longitudinal study ‘The Good Starts Study for Refugee Youth’ which began in 2004. The Good Starts study is being conducted by the Refugee Health Research Centre (RHRC), a partnership between La Trobe University and the Victorian Foundation for Survivors of Torture (Foundation House)—a community based organization that delivers services and programmes to children, young people and adults from
refugee backgrounds. The study developed out of questions arising from the delivery of services by Foundation House to newly-arrived adolescents. It was within this context that questions arose about the evidence informing what works in supporting young people throughout resettlement. How do newly-arrived young refugees experience settlement? What are the determinants of good health and wellbeing? What are the most appropriate research methods for investigating the process of settlement amongst vulnerable and potentially traumatized youth? How can models of research be developed to provide important information to inform services and policy, and at the same time contribute meaningfully to refugee young people’s lives? Combining the disciplines of anthropology and social epidemiology, the Good Starts study aims to build a body of evidence to inform health, education, and welfare policy for refugee youth resettlement.

Study Aims and Objectives

The Good Starts study aims: (a) to identify the psychosocial factors that assist refugee young people in making a good start in their new country; and (b) to describe in depth, contexts, settings and social processes that support, enhance and facilitate settlement and wellbeing. A particular focus is on key transitions: from pre-arrival to Australia, from the language school to mainstream school, and from mainstream school to higher education or to the workforce.

The specific objectives of the study are to: (a) identify the psychosocial determinants at the individual and community level, that promote health and wellbeing of newly-arrived refugee youth over time; (b) describe how young refugees build social capital; (c) describe how young refugees re-establish a sense of coherence and control over their lives and futures; (d) identify and describe the factors within specific settings (school, family, community) that young refugees regard as health enhancing; (e) explain the ways in which specific settings act to support physical, mental and social wellbeing.

Quantitative measures are used to examine the relationship between psychosocial factors (which may act as risk or protective factors) and health and wellbeing outcomes, while qualitative methods are used to generate a richer picture of the contexts and processes that influence settlement and wellbeing over time. This mix of methods aims to generate both meaning and measurement.

The Pilot Study

The pilot study was conducted in 2001–2002 and involved the recruitment of 50 newly-arrived young people aged 12–18 years. ‘Newly-arrived’ was defined as those residing in Australia for less than twelve months. Participants were recruited from two English Language Schools/Centres (ELSs) and from community based networks, and represented a mix of refugee and other
migrant backgrounds. Forty young people were recruited from two ELSs and we worked with one or two classes of 13–14 students at each school. Another ten young people were recruited from community networks (Horn of Africa communities). The sample included a wide range of cultural/ethnic backgrounds depending on ELS enrolments at the time of data collection. As ELS enrolments include students who have entered Australia on visas other than ‘humanitarian’, all students in the selected classes participated in the pilot. Classes were chosen by the ESL principal or coordinator; however, a ‘transition class’ was requested so that students could be followed up after six to eight months, once they had moved into a mainstream school. Collectively, students were born in 19 different countries and represented 17 ethnic backgrounds and languages. The sample was about evenly split between females and males. Sixty per cent of participants were from refugee backgrounds, predominantly from the Horn of Africa, the Former Yugoslavia and the Middle East, and these communities made up the top three refugee groups arriving in Victoria at that time (DIMIA 2002). Forty-five of the 50 young people returned signed parental consent for their participation and were thus contacted for follow-up.

The Good Starts Longitudinal Study

Following the completion of the pilot study, funding was secured (in late 2003) to follow and maintain a cohort of 100 newly-arrived refugee young people over a five year period. In 2004 participants were recruited into the study through two ELSs. Classes with students predominantly from refugee backgrounds were selected. In total, 105 young people participated in baseline data collection and 99 returned signed consent. At the time of data collection, the participants were aged 12 to 19 years with a mean age of 15.6 years. They represent 10 different countries of birth (Afghanistan, Bosnia, Burma, Burundi, Croatia, Ethiopia, Iran, Liberia, Sudan and Uganda) and more than 20 different languages. The mean time since arriving in Australia was 7.3 months.

Logistical Issues with Sampling and Recruitment

Participant recruitment and follow-up are key challenges for any longitudinal study and particularly with refugee young people. Building a sense of trust and establishing a relationship between participant and researcher is critical for short- and longer-term success. Thus, recruitment strategies focused on settings where potential participants already felt some sense of belonging, security and trust. In the pilot we trialled recruiting through ELSs, community and family networks. However, recruiting through the networks did not prove successful, mostly due to difficulties collecting data in the home environment with family present. Thus recruitment for the longitudinal study took place through ELSs.
When refugee young people first arrive in Australia they are eligible to
attend an ELS for up to one year before transiting to a mainstream school.
Although young people frequently move from one residential location to
another in the first 12 months of settlement, they usually remain in the same
ELS, therefore recruitment strategies focused on building partnerships with
ELSs. This strategy proved advantageous for a number of reasons. It was
relatively easy to establish a relationship with participants through their
school, data collection was conducted within the school setting, and consent
from parents (for the young people to participate in the study) was gained
through the partnership with the school.

We established ongoing relationships with two ELSs with high numbers of
refugee youth in their student profile. ELSs were chosen that, though not
strictly representative, had similar proportions of refugee students from key
source countries compared to the overall intakes (DIMIA 2005). A sampling
profile has been achieved that does not vary greatly from Australia’s overall
humanitarian intake, though Middle Eastern young people are under-
represented. Researchers worked with the ELSs to integrate the first year
of data collection into the school curriculum, thereby allowing researchers to
collect data in the classroom over a series of sessions. This enabled
relationships to be established and allowed students to become more familiar
with the concept of research over a number of weeks.

A necessity for the longitudinal study was determining an adequate sample
size—one that was large enough to conduct valid quantitative analysis but
small enough to generate in-depth qualitative data. The study aimed to
involve 10 per cent (n = 80) of the 802 humanitarian arrivals in Melbourne in
2003 aged between 10 and 19 years (DIMIA 2005). One hundred participants
were required at baseline data collection after incorporating an anticipated
attrition rate of 25 per cent into the calculations. This sample size has enabled
the collection of qualitative data from all participants as well as providing
opportunities for more in-depth nested case studies of young people’s
experiences. A range of strategies including telephone calls, newsletters,
postcards, fridge magnets and brief meetings with participants at school or in
public venues (e.g. the local library) have been implemented so as to prevent
and limit dropout. However, when dropout occurs new participants are
recruited so as to maintain a sample size of 100.

Logistical Issues with Data Collection

Developing and piloting methods of data collection involved the need both to
count or measure as well as to elicit meaning and experience. Many of the
young people had disrupted schooling, varying levels of literacy in their own
language, a limited comprehension of English, and no prior experience of
being involved in research. They had no familiarity with research questions
and scales or with qualitative approaches. Thus we developed a strategy of
collecting data in a way that complemented the school curriculum, was seen
by teachers and young people as adding value to the classroom experience, and engaged young people who had no familiarity with research. In the pilot study, data was collected during four 100-minute sessions over a four week period in the classroom. Each session had a particular theme (driven by the theory) and involved a range of activities (qualitative and quantitative) where information was recorded in a personal ‘Settlement Journal’. Activities included photo novellas (students were each given a disposable camera), drawing exercises, open-ended short answer questions and some standardized health and wellbeing instruments. Students were seated by language group, with three to four students in each group who then worked with a bicultural worker, interpreter or multicultural education aide to complete the activities. While there are obvious limitations to this approach, it proved to be well accepted by both students and teachers as the study was seen as contributing to learning English and the gaining of new skills.

Piloting these methods was crucial because it gave us a much more comprehensive understanding of the ways in which the young people interpreted the activities and questions in the Settlement Journal. It also gave us insight into the difficulties young people had in completing various activities, and how we could make the data collection process easier and more closely reflective of their experiences. We also used the pilot study as an opportunity to fine tune the theoretical focus of the study.

It became clear from the pilot that additional time was needed before data collection commenced in order to introduce the concept of research to participants and their parents, and during data collection in order to explain and administer the questions and activities and to build trust and rapport with the young people so as to enable follow-up. Given the language and literacy issues, especially for young people with disrupted schooling, one-to-one assistance and additional time was required to complete the journals. In the longitudinal study the first year data was collected in weekly 100 minute sessions in the classroom, over 8–10 weeks of the term. Several participants required further sessions out of class time to complete their journals.

Finally in order to give something back to participants, we designed a settlement journal (containing the activities and questions for data collection) which young people could keep as a record of their first five years in Australia. The Settlement Journal was not designed to be a self-administered survey but rather to be administered with the assistance of a bilingual interpreter or researcher. Training was provided to interpreters/research assistants on the administration of the data collection instruments and on the process for clarification of questions. Given the diversity of language and literacy skills among the participants, the diversity of data collection methods and the limitation of resources, it was not feasible to translate the Settlement Journals into all languages nor was it possible to carry out cross-cultural validity of standardized instruments (Brown 2003). However, method triangulation has been used to increase the rigour of the data (Patton 2002). Finally many visual methods are used in the study to accommodate limited
language and literacy, and also to provide other mediums by which young people can express and present their experiences.

Logistics of Obtaining Informed Consent

The pilot was critical for developing a process of informed consent, as refugee young people, in addition to being unfamiliar with this requirement for research, come from environments where human rights have been violated. Consequently there was no basis for trusting the research and consent process. A process was developed, piloted and refined. The process that was then implemented in the longitudinal study commenced with an initial session in the classroom discussing issues of autonomy and the voluntary nature of research participation. Particular attention was given to informing students about their right to say no to participation in a research project. Second, an invitation was extended to parents/guardians to attend a briefing session to hear about the project. Students were given project fliers and consent letters translated into the appropriate languages. In cases where consent letters were not returned, interpreters/bicultural workers discussed the issue with participants and in some cases telephoned parents or guardians to further explain the study and respond to any of their concerns. The study also employed a community liaison worker to better facilitate communication with parents and guardians.

Logistical Issues with Follow-up

Two different strategies were piloted for students recruited from ELS settings, including sending the follow-up instrument through the mail and organizing a data collection reunion party. The time between baseline and follow-up in the pilot was between six to eight months, during which time contact was maintained predominantly via post. Participants were sent first year completion certificates, greeting cards and a disposable camera so they could take photos for the second round of data collection. Fifteen follow-up journals were returned by the participants (i.e. 33 per cent participant retention at follow-up). Many of the materials sent by post were returned due to incorrect addresses, indicating participants had moved house. Letters were sent inviting participants to attend an after-school reunion party during which group discussions were planned. However, only six participants attended this activity.

Follow-up for data collection was equally fraught for the pilot community sample. A bicultural researcher contacted participants in their homes six months after baseline. Although she was able to locate all participants, data collection was incomplete, highlighting the difficulties of collecting information in home settings.

The pilot follow-up highlighted the frequency with which families move house in the first year of arrival and the importance of establishing relationships between participants and the Good Starts study. Strategies to
assist young people to remain connected to the study despite changes in
schools and home, are critical.

Applying these lessons from the pilot to the longitudinal study has resulted in
using a range of strategies to build a sense of connection for participants to the
Good Starts study. Given the turnover in research staff, the focus is on building a
connection to the study rather than building relationships with individual
research staff. A Good Starts logo and a distinct and positive graphic design has
been developed and used for all project materials to make them easily
identifiable for participants. A Good Starts magnet and certificate (incorpo-
rating a group photo) are sent to participants at the end of year one data
collection, and postcards (thank you, change of address, season greetings, and
invitations) are sent throughout each year reminding them of upcoming data
collection and thanking them for their participation. Participants are also sent
an annual Good Starts newsletter designed using their own drawings and words
and sharing some of the study findings. Quarterly phone calls are made to
participants to check their home and school contact details.

Maintaining contact with schools has also been an important follow-up
strategy. The study received ethics approval from the Victorian Department
of Education and data collection occurs in the school setting in the first year
and also in subsequent years if negotiated with participants and their schools.
Building and maintaining relationships with school welfare officers has
assisted us in tracking participants as they transit from the ELS to main-
stream schools. An example of the importance of this relationship with
schools is highlighted by the fact that in year one, all participants attended
one of two ELSs. However in year two, participants collectively attended
29 different schools, one moved interstate, two are in the tertiary sector and
several have left school and are working in paid employment.

Year two data collection is nearing completion with a retention rate thus
far of 88 per cent. Data collection has been carried out in a range of settings
(schools, public libraries, homes) and mostly in English as interpreters have
only been requested by a few participants.

In summary, follow-up strategies have required explicit consideration
of the impact of the refugee experience on participants. The building of
trust and a sense of belonging is critical for these young people, and research
with this potentially vulnerable group must be shaped by their unique
characteristics and experiences. Research that puts ‘scientific objectivity’
above social responsibility is both ethically and scientifically flawed. While it
can be argued that the establishment of a relationship with the Good Starts
study biases study outcomes, these relationships are crucial to the viability of
the longitudinal study.

Methods and Measures for Data Collection

Quantitative and qualitative methods of data collection were organized
around five theoretically derived themes: identity and self, social support,
connections to place, health and wellbeing, and aspirations for the future. This section describes the instruments used for gathering data for each of these themes. Each data collection session (and journal section) focuses on one of these themes.

Session 1: Who I Am: Identity and Self-esteem

Positive self identity and self-esteem have been identified as important predictors of psychosocial wellbeing among adolescents (Crocker et al. 1994). In negotiating the dual transitional periods of resettlement and adolescence, refugee young people develop multiple dynamic and overlapping identities that allow them to shift between the various cultural, behavioural, and linguistic contexts in which they participate (Selvamanickam et al. 2001; Smaje 1996). While the (re)formation of these identities is likely to be informed by young people’s refugee experiences, it will also be mediated by numerous other factors including gender, ethnicity, and social status (Brough et al. 2003), as well as both the interpersonal and systemic responses of the host society (Colic-Peisker and Walker 2003). A focus of this study is on the meanings of identity and the extent to which positive self identity and self-esteem are associated with wellbeing and successful settlement. The first section of the Settlement Journal gathers data pertaining to these relationships.

Methods

Qualitative methods include the drawing of self-portraits that facilitate the examination of self-image and identity, and provide insight into the way young refugees see their life and themselves. Each year, young people are asked to depict who they are by drawing a picture of themselves (see Figure 1). Visual methods such as drawing are considered important for young people who might find these easier than verbal communication—especially among newly-arrived young people whose English may be very limited (Boyden and Ennew 1997). Self portraits provide an entrée point for eliciting narratives of ‘self’ as young people are given the opportunity to explain their pictures (Boyden and Ennew 1997; Ennew 2003) through one-to-one interviews and group discussions.

Identity and wellbeing has also been shown to be influenced by subjective social status (Adler et al. 2002). During adolescence, young people’s subjective social status is in transition as they develop their own identity and own ‘emerging self concept of social stratification’ (Goodman et al. 2001). To examine these relationships, the MacArthur Scale of Subjective Social Status (Adler 2000)—originally developed to capture subjective social status as indicated by education, occupation and income—was modified. In the pilot phase of this study qualitative data was collected about the meanings and indicators of social status most relevant to adolescent refugees. Indicators of subjective social status thus focused on social standing in
school, the position of a young person’s family within their ethnic community, and the position of a young person’s family within the wider Australian community. Young people are asked to place an X on the rung of a ladder (10 point scale) where they think they stand (see Figure 2). They are then encouraged to explain the reasons for their responses during one-to-one interviews and small group discussions.

In addition to the qualitative activities, two standardized scales of psychological self-constructs are used: Rosenberg’s Self Esteem Scale (Rosenberg, 1989) and the Affirmation and Belonging subscale of the Ethnic Identity Measure (Phinney 1992). For all the quantitative scales, we modified the response framework to a four-point Likert scale consisting of a variation of yes/no responses: NO! no, yes, YES! This response framework
was adopted after the pilot found Agree/Disagree options potentially subject to courtesy biases, and scales with a range beyond four levels too complex and confusing. Finally, this first session on self includes demographic and background questions eliciting information on country of birth, date of birth, cultural background, date of arrival, country prior to arrival, who they arrived with, visa type, refugee status, languages spoken, reading and writing in own language, years of schooling, level of English prior to arrival, and length of time at current school.

Session 2: The People in my Life: Social Support and Social Connections

Social support and social connections are key determinants of psychosocial wellbeing in population health (Berkman et al. 2000), and social
connectedness underpins wellbeing outcomes for young people, providing a ‘positive context’ in which they can face the challenges of adolescence (Resnick et al. 1993; Dumont and Provost 1999). For youth facing the additional challenges of resettlement, social support and social connectedness are particularly important, and positive social interactions may be the single most important factor for positive resettlement (Brough et al. 2003). In investigating social connectedness, the Good Starts study drew upon research carried out amongst unemployed young people in Norway which highlights the important role that social connections, particularly informal ties with peers, play in helping youth cope with their marginal position in a society (Heikkinen 2000). Heikkinen’s study found that strong social networks mediated the potential social isolation brought about by being excluded from the labour market. Cross-cultural research on social support suggests that the meanings of support are important, as is the balance between social support received and social support given (Janes 1986). These studies stress the importance of the quality of the relationships and suggest that quality may be more important than the size of social networks. Finally, the research into wellbeing and social capital has highlighted the importance of bonding and bridging relationships (Portes 1998) both of which are particularly important to newly-arrived refugee communities (Loizos 2000). Within this context, we developed a number of methods and measures to gather information about social connectedness.

Methods

The Heikkinen Social Circle (Heikkinen 2000) has been adapted for this study to examine young people’s social networks: size and composition of connections; bridging and bonding relationships; and giving and receiving
support (see Figure 3). The circle is divided into five domains which were identified as relevant in the pilot study. Participants write the names of all the people with whom they have a close relationship within the appropriate domain. Particularly important is the inclusion of a domain for people who live outside Australia as young people both give and receive social support from social networks overseas. Participants then indicate the people they can turn to for help (with a yellow marker pen) and the people who they help or support (with a blue marker pen). Finally, participants circle the friends in Australia who are from their own ethnic community. In addition to providing numerical data on social support, the social circle provides an anchor for in-depth discussions about the meanings and nature of the different relationships in young people’s lives. It also provides a method to compare changes over time.

In addition to the social circle, specific information is gathered about the people who live in young people’s houses, as family composition and household composition do not necessarily equate and household composition can fluctuate during the early resettlement period. To gather this information, participants are asked to write the names of people they live with inside a picture of an empty house. Again, this exercise has proved useful for charting household changes over time and for anchoring discussions about family relationships, especially as many refugee young people are not living in intact family units (Coventry et al. 2002).

Photo novellas are also used to examine connections to people (Collier and Collier 1986; Berman et al. 2001). Students are given disposable cameras with instructions to take photographs of four people who are important in their lives. They use these photographs in their Settlement Journals where they are asked to write (in their own language and/or English) about why these people are important to them. This method has been especially popular with participants as it allows them to take control and ‘make their own decisions about what to include or exclude in the photographic records of their lives’ (Berman et al. 2001: 27). The photos are used both as data sources to visually chart changes in friendship and peer networks over time (particularly cross-cultural and mixed gender) and as anchors for more in-depth discussions about social connections during resettlement. Over the data collection sessions, students build up a photo journal of their first year of settlement and this is an important methodological strategy for enabling participants to give voice to their experiences, particularly where young people may have less-developed language, verbal or drawing skills (Buss 1995). Photographic methods of research provide immediate feedback to participants and are an excellent strategy for building trust and rapport between researchers and participants, as well as providing a way of strengthening the rigour of the qualitative methods through the use of multi-method triangulation (Hurworth 2003; Orellana 1999).

Finally, in addition to the qualitative methods, a number of standardized instruments widely used to measure social connectedness, social capital, family
connectedness, and peer attachment have been used. These include: four items about ‘significant others’ from the Baruth Protective Factors Inventory (Baruth and Carroll 2002), a peer attachment scale from the Inventory of Parent and Peer Attachment (Armsden and Greenberg 1987), and items about trust adapted from the Social Capital Community Benchmark instrument (Kennedy School of Government 2000). Finally a series of questions were included about the relationship with parents/guardians, adapted from the Australian Health and Wellbeing Survey (Bond et al. 2000).

Session 3: The Places in my Life

Core to the refugee experience is displacement, and establishing new connections to place is a key task in the resettlement process (Hammond 2004; Brun 2001). Resettlement involves the establishment of connections to place in relation to
home, neighbourhood, and public and institutional spaces including schools, parks and shops, as well as the development of feelings of safety and belonging to the social spaces of everyday life. Research into the meanings of place and home among refugee communities highlights the importance of ‘home’ as not merely a physical space, but also as an emotional connection (Kissoon 2003). Connections to home and neighbourhood including ‘proximity to friends, family, and ethno-cultural community’, and establishing a feeling of belonging and connection to places such as school (Resnick et al. 1993) are important determinants of psychosocial wellbeing and resettlement.

Methods

A series of qualitative and quantitative methods have been used to gather information about connections to place. Young people are asked to draw a picture of their neighbourhood (Morrow 2001) and to mark places they like best (in yellow) and places they do not like (in blue) (see Figure 4). These neighbourhood maps are used to guide small group discussions about safety, belonging and meanings about place.

Photo novellas are also used to examine connection to place. Using disposable cameras participants are asked to take photos of the places where they live everyday life. These include photographs of their home, the street where they live, their favourite place in their home, the place they spend the most time when out of school, the place they like the best at school, the place they like the least at school, a place they feel they belong and a place they feel they do not belong. Photos are placed in their Settlement Journals and students write brief descriptions about the significance of these places in their lives (see Figure 5).

Finally, a number of scales and open ended questions have been included to elicit information on connections to home, school and neighbourhood and feelings of safety in these places. Questions about home, school and neighbourhood, were adapted from the Australian Health and Wellbeing Survey (Bond et al. 2000). Open ended questions were included about what participants like about school, what they don’t like about school, what they are looking forward to in their new mainstream school and what they are worried about. We also asked about the number of school absences in the last term and reasons for their absenteeism. Questions about religion were also included to examine the importance of religion, their attendance at a place of worship and the location of their place of worship.

Session 4: My Life in Australia Now

There is growing evidence that post-displacement factors can have a stronger influence on the mental health of refugees than pre-displacement factors (Porter and Haslam 2005). While the focus of this study is on post-settlement transitions, these must be understood within the context of the pre-migration experience. One of the challenges facing the study has been how to collect
information about the past without at the same time re-traumatizing the young people in the study. Thus this session of data collection uses a mix of qualitative methods designed to elicit information about young people’s lives prior to arriving in Australia and standardized instruments to measure psychosocial health and wellbeing over time.

Methods

To gather information about young people’s experiences prior to arrival in Australia, the qualitative approach of journey maps has been used. Young people are asked to draw their own personal journey map from the time of their birth until their arrival in Australia and to include as much or as little detail as they choose about places they have lived and any significant
events (see Figure 6). These journey maps are important both for what is included and for what is left out. Indeed, 16 of the young people in the study were unable or unwilling to draw their journey maps at the time of the first year of data collection. However, at follow-up young people are asked to draw their journey maps again from birth to arrival in Australia, and from arrival to the present. Journey maps allow young people to communicate past experiences over time, they provide an anchor for more in-depth discussions about pre- and post-migration journeys, and they provide a visual marking of key events over young people’s first five years of settlement.

In addition to the journey maps, young people are asked to respond to a number of standardized instruments to measure factors associated with health and wellbeing, and outcome measures of subjective health status. These include the Coping Scale for Children and Youth (Brodzinsky et al. 1992), a discrimination scale (Krieger et al. 2005), and a quality of life/wellbeing measure, the Australian WHOQoL–Bref (World Health Organization 1991). The journal also contains questions and scale items examining: participation in community activities, barriers to participation, internet use, sense of belonging, subjective health now and prior to arrival, and health risk behaviours of self and friends (smoking, drug and alcohol use, gambling) adapted from the Australian Health and Wellbeing Survey (Bond et al. 2000). Finally, several open-ended, short-answer questions elicit information from the young people about things that have made their life difficult since arrival and things that have helped, things that worry them and things that make them happy.

Session 5: The Path to my Future

The ways in which young people view their futures play a key role in how they live their lives in the present. Young people who lack a vision of a future
self, do not have a sense of working towards a future goal, or feel helpless or hopeless about their futures, are at risk of a range of poor health and wellbeing outcomes (Riolli et al. 2002). Hope and a sense of control of one’s future are key elements of recovery among those who have suffered forced displacement, torture or trauma (VFST 1996). The final session engages young people in describing their hopes and aspirations for the future.

Methods

Qualitative information on hopes and dreams is collected through drawings of how young people see themselves in ten years’ time (see Figure 7). Each year, this exercise is repeated, allowing for comparisons of how hopes and dreams change over time, as well as serving as a method for anchoring in-depth interviews to elicit information about the barriers and facilitators that young people experience in relation to achieving their hopes and dreams. It also provides valuable insights into qualitative dimensions of hope and optimism, or the absence of these. Standardized quantitative instruments have also been used including the Life Orientation Test (Scheier et al. 1994) to assess optimism, a two-item scale to assess educational aspirations (Rumbaut 1994), and the Mastery Scale (Pearlin and Schooler 1978) to measure control over one’s life and future. Finally, short-answer open-ended questions ask what young people would like to change about themselves, their life, and the world, as well as the best thing they think will happen in their future.

Logistics of Analysis

Studies that combine qualitative and quantitative data present many challenges for analysis, particularly given that each requires a different approach. A further problem is the issue of missing data, resulting from participants having different levels of confidence and ability. In this study the completion of qualitative activities varied in the first year of data collection, with some young people using very simplistic sketches or a few words only. The standardized questions eliciting quantitative information were equally challenging for some young people, and so while all participants completed their journals, some of the questions and activities were left blank. The second year of data collection indicates that participants were better able to complete the activities and questions. The problem of missing data is being dealt with in a number of ways including follow-up of participants for additional sessions and the use of specific statistical techniques described below. In sum, although every attempt has been made to ensure full completion of the journals, the problems of missing data are likely to be an ongoing challenge for this study.

Analysis of the first year results is underway. The longitudinal data on health and wellbeing will be compared (e.g. by gender, ethnicity, age) using date of arrival in Australia as the baseline. Mixed effects models will be used...
to model the effect of independent variables on outcome measures over time (Diggle et al. 1996). The Generalized Estimating Equations (GEE) model will be used to run these longitudinal models (Diggle et al. 1996). An important advantage of the GEE model is that participants with incomplete data on one or more out of $T$ repeated measurements are not excluded from the analysis (Twisk and Vente 2002).

Qualitative data including drawings, photo novellas, open-ended responses, field notes, interview and focus group transcripts are managed with the assistance of NVivo 7, a qualitative software package (QSR International 2006). Thematic, content and narrative analysis (Patton 2002), are the key strategies informing interpretation of qualitative data.
Finally, studies such as this are data rich and run the risk of data overload. A range of strategies have been developed to ensure that both qualitative and quantitative data are fully utilized in the analysis. The project provides student placements that focus on the analysis of particular research questions which in turn are developed into papers for refereed journals. Student placements are also developed that focus on more applied aspects of analysis. For example, one placement project involves analysing participants’ responses to questions on transiting from ELS to mainstream school, and from this data a resource will be produced that can assist other refugee students who are transiting to mainstream school. Finally, a PhD scholarship has been created specifically for research to focus on the challenges of analysis that a study such as this creates.

Discussion

Two major gaps within the field of refugee research are the lack of longitudinal studies that focus on change over time and the lack of studies that combine methods to yield both measurement and meaning. The Good Starts study, investigating the psychosocial determinants of wellbeing and settlement for refugee youth, has been designed to address both of these gaps. This longitudinal study in combining both qualitative and quantitative methods has to grapple with many methodological challenges which are not unique to our study population. Research with newly-arrived people, regardless of their age or background, needs to take account of a range of issues that will impact on data collection. In addition to the methodological issues inherent in cross-cultural research, research with newly-arrived refugees needs to deal with issues of literacy, lack of familiarity with research, issues of informed consent (especially where human rights have been violated) and the fact that participating in research may represent an additional burden within the early stages of resettlement. However, one of the strengths of refugee studies is that it is inherently multidisciplinary, drawing on a mix of theory, method and practice. Not being rigidly tied to an overriding epistemological paradigm, the field is ideally placed to approach methodological challenges with innovation and rigour. It is within this context that the methodological approach used in the Good Starts study has many merits as well as many weaknesses.

Despite our reluctance to use standardized quantitative instruments, their inclusion allows associations and outcomes to be tested over time. Furthermore, the use of instruments such as the WHOQol-Bref (World Health Organization 1991, 1998) allows for potential comparisons with other populations of young people with and without refugee-like backgrounds. We recognize the problems of validity in the application of standardized instruments such as this one, but the use of multiples methods—method triangulation—has been critical to building the overall rigour of the study design. The qualitative methods used in this study have proven equally challenging, as more common approaches of in-depth
interviews and group discussions have proven difficult in a context of early resettlement. The use of visual and non-verbal methods, commonly used in a range of disciplines including research with children, ethnographic field work and social psychology, have proven effective. The qualitative methods provide a less structured context for eliciting information and allow participants to give ‘voice’ to their settlement experiences while adding ‘meaning’ to ‘measurement’. They also allow for more in-depth nested qualitative studies that are much better suited to describing the more subtle nuances of experience, such as the ups and downs of being an adolescent in a new context.

Finally, from a more practical perspective, conducting this study through the use of a Settlement Journal which is completed mostly in English, in an English Language School setting (with the assistance of interpreters and bicultural community workers) in the first year, has allowed young people to learn about research processes while developing their English language skills and comprehension.

Longitudinal studies such as Good Starts are time and resource intensive, especially in the first year. Five years of development preceded the actual implementation of the study and considerable time and resources still need to be devoted to maintaining the cohort, maintaining collaborations with schools and communities, liaising with interpreter services and community workers and the development and preparation of project materials. Despite these challenges we argue that more studies need to be conducted that address the refugee experience over time and combine a range of methods to capture meaning and experience, as well as more quantitative data about health, wellbeing and settlement outcomes. In conclusion, we believe that facing these challenges by engaging with new and innovative approaches to refugee research is the only way to begin to build a strong evidence base for how best to promote health, wellbeing and successful settlement over time. We also firmly believe that such research approaches are especially needed when working with people who have overcome perhaps some of the most formidable challenges of their lives. The refugee experience is inherently one of change and resilience, of finding new solutions for life; and refugee research should be equally responsive and courageous.

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Good Starts materials can be accessed from www.latrobe.edu.au/rhrc/refugee_youth.html


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