

Exploring the Impact of Employment on the Health and Wellbeing of Refugee Women from
Middle Eastern Backgrounds

Gur P Kaur

School of Psychology
The University of Adelaide

This thesis is submitted in partial fulfilment of the Honours degree of Bachelor of Psychological
Science (Honours)

Word Count: 9454

Table of Contents

List of Figures	4
Abstract	5
Declaration	6
Contribution Statement	7
Acknowledgments	8
Introduction	9
1.1 Overview	9
1.2 Terminology	11
<i>1.2.1 People from refugee backgrounds</i>	11
<i>1.2.2 Health and Wellbeing</i>	12
1.3 Health & Wellbeing in Women from Middle Eastern Refugee Backgrounds	13
1.4 Employment for Women from Refugee Backgrounds	14
1.5 Psychological Wellbeing & Employment	17
1.6 Refugee Women from the Middle East, Psychological Wellbeing & Employment	18
1.7 The Present Study	19
Methodology	21
2.1 The Broader Study	21
2.2 The Present Study	22

	3
2.2.1 <i>Participants</i>	22
2.2.2 <i>Analysis</i>	23
Results	25
3.1 Overview of Themes	25
3.2 Motivation to Work	26
3.3 Barriers to Gaining Employment	30
3.3.1 <i>Lack of English Language Proficiency</i>	31
3.3.2 <i>Family Responsibilities</i>	32
3.3.3 <i>Lack of Work Experience, Visa Restrictions and Skill Recognition</i>	35
3.4 Unfair Treatment at Work	39
3.5 Psychological Wellbeing and the Refugee Experience	42
Discussion	48
4.1 Overview of Findings	48
4.1.1 <i>Employment and the refugee experience</i>	48
4.2 Strengths and Limitations	51
4.3 Implications	53
4.4 Conclusions	54
References	55

List of Figures

Figure 1. Thematic network of identified themes 25

Abstract

According to the United Nations High Commissioner for Refugees (UNHCR), 25.9 million people around the world are classified as refugees. The majority of research based on this demographic focuses on the negative experiences and trauma refugees face before, after, and during the resettlement process in a new host country (Whittaker et al., 2005; Sherwood et al., 2012). Although research on refugee populations has been a growing area of interest, there is little research on specific aspects of resettlement, including employment, and its relationship to health and wellbeing. Therefore, the aim of this study is to address this gap in the literature by exploring the experiences of Middle Eastern women with refugee backgrounds in relation to looking for work and working, and how these experiences have impacted their sense of health and wellbeing. The lack of existing literature in this area and the need to accommodate for a conceptualisation of health and wellbeing in regards to employment for this demographic necessitated the implementation of qualitative analysis, specifically, Thematic Analysis. Data was obtained through semi-structured interviews with 16 refugee women with Middle Eastern backgrounds. Interviews were analysed using Braun and Clarke's (2006) six phases for conducting thematic analysis. Analysis of the interviews revealed four overarching themes: Motivation to Work, Barriers in Gaining Employment, Unfair Treatment at Work and Psychological Wellbeing and the Refugee Experience. One of the main implications from this study is that it is important to provide consistent support to refugee women even once employment has been gained.

Declaration

This thesis contains no material which has been accepted for the award of any other degree of diploma in any University, and, to the best of my knowledge, this thesis contains no material previously published except where due reference is made.

I give permission for the digital version of this thesis to be made available on the web, via the University of Adelaide's digital thesis repository, the Library Search and through web search engines, unless permission has been granted by the School to restrict access for a period of time.

Gur Kaur

September, 2020

Contribution Statement

In writing this thesis, my supervisors and I collaborated to generate research questions of interest and design the appropriate methodology. My supervisors added me to their existing ethics application and allowed me to use data previously collected from a broader study for this thesis. I conducted the literature review, and generated initial codes and themes. My supervisors and I then collaborated to refine the resulting themes. I wrote up all aspects of the thesis, except the methodology section, which was partially written by my supervisors to include details of the broader study this thesis is based on.

Acknowledgments

Through this project I was given the opportunity to research a topic that holds a lot of meaning to me. I would like to express my utmost gratitude to my supervisors, who were so understanding and patient with me during this stressful year, on top of generously answering all my questions and guiding me through my first experience with qualitative research. I will forever be grateful.

This project would not have been possible without the wonderful women who participated in this study and I hope this study adds to literature which could be of use and help to them.

I would also like to thank my family for their constant support and care, even from different parts of the country and the world. I really appreciate the support, prayers and love I received from my parents, and I could not have gotten through this year without my siblings. Penji, Viji and Prince, you truly are the best brothers anyone could ask for.

Introduction

1.1 Overview

Extensive previous research has established that people with refugee backgrounds face a range of challenges both prior to, and after resettlement in a new country (Hitchinson & Dorset, 2012; Green & Davidson, 2017; Murray et al., 2008; Krahn et al., 2000). For example, prior to resettlement, such challenges include death of, or separation from loved ones, physical or sexual abuse, and other forms of violence (Whittaker et al., 2005; Sherwood et al., 2012; Due et al., 2018). Upon resettlement in a new host country, people with refugee backgrounds face issues such as acculturation stress, lack of employment and education opportunities, lack of housing opportunities, language barriers, racism and discrimination (Abraham et al., 2018; Lenette et al., 2013; Hitchinson & Dorset, 2012; Fozdar & Hartley, 2014; Murray, et al., 2008; Lindencrona et al., 2008). These challenges often make the resettlement process difficult, with key challenges in terms of obtaining employment, education, and accessing services (Lamb & Smith, 2002; Lenette et al., 2013). There are also a range of negative impacts for mental health and wellbeing (Lindencrona et al., 2008; Fozdar & Hartley, 2014; Slewa-Younan et al., 2017; Carswell, Balckburn & Barker, 2011, Silove et al., 2017). Employment has been identified as a key predictor of mental health and wellbeing for people with refugee backgrounds, as employment is a key aspect of integration into the new society and culture, has a pervasive impact on identity, and contributes towards financial stability for their families (Hocking, Kennedy & Sundrum, 2015; Taylor & Stanovic, 2005). People of refugee backgrounds from Middle Eastern nations such as Iran, Afghanistan, and Syria, in particular, carry with them their backgrounds of war, violence, and displacement, and it is important to understand their specific needs as well as explore the impact pre-migration and post-migration stressors have on their mental and physical

health and wellbeing (Renzaho & Dhingra, 2017). The overall weight of distress experienced in the Middle East leaves people with refugee backgrounds from this area, specifically first-generation people from refugee backgrounds, at an increased vulnerability to long-term physical and mental health impacts (Silbermann et al., 2016). The number of refugees and asylum seekers coming to Australia from Middle Eastern nations such as Iran and Afghanistan have been reported to be increasing in recent years (Department of Home Affairs, 2026; Due et al., 2019). Furthermore, globally, out of 4.8 million refugee people from the Middle East, three-quarters of this population is made up of women who flee due to reasons such as gender-based violence, poverty, sexual violence, sex trafficking and forced marriage (Guruge et al., 2012; Rizkalla et al., 2020). Women are often a more vulnerable group under the refugee spectrum, due to reasons such as gender-based discrimination in their home countries (Greenwood, 2013), including lack of access to education (Rizkalla et al., 2020; Alvi-Aziz, 2008). This also affects them upon resettlement, as they often feel isolated and inferior to others due to their lack of education and formal skills (Mehran, 2003; Alvi-Aziz, 2008). Although there has been significant research on people from refugee backgrounds and employment in general (Fozdar & Torezani, 2008; Krahn et al., 2000; Hoang & Tran, 2018; Ferrara & LaMeau, 2015) there is a gap in the literature regarding the relationship between employment, health and wellbeing for women with refugee backgrounds, specifically, women from Middle Eastern refugee backgrounds. To address this research gap, this thesis will explore two research questions: (1) What are the experiences of women from Middle Eastern refugee backgrounds when looking for work and working? (2) How do these experiences impact the perceived sense of health and wellbeing of women from Middle Eastern refugee backgrounds?

1.2 Terminology

To better understand the literature review in this thesis, the key terms commonly used in studies and research on people from refugee backgrounds will first be defined. The constructs of health and wellbeing will also be defined.

1.2.1 People from refugee backgrounds

The United Nations High Commissioner for Refugees (UNHCR) refers people who fit the definition of a 'refugee' to the Australian Government in order to start the process of resettlement. According to the UNHCR (2020), a refugee is defined as a person who has been forced to flee their country due to reasons such as war, persecution, or violence. A refugee has a fear of persecution due to reasons such as political opinion, race or religion; and most likely, they cannot return home (UNCHR, 2016). This study will refer to 'refugees' as people from refugee backgrounds.

Australia's Refugee and Humanitarian Program aids people in humanitarian need who are either currently in Australia (onshore) or residing outside of Australia (offshore) (Department of Home Affairs, 2020). More specifically, onshore options for applicants seeking refuge include a permanent Protection Visa (PV), Temporary Protection Visa (TPV), or a Safe Haven Enterprise Visa (SHEV) (Department of Home Affairs, 2020). A permanent PV allows individuals to live and work in Australia as a permanent resident on the condition that applicants have entered Australia legally, and have met the healthcare standards proposed by the government (Department of Home Affairs, 2020). For those who have been refused refugee immigration clearance, a temporary protection option may be used. The SHEV offers 5 years of temporary protection (with conditions relating to work or study) and the TPV offers up to 3 years of temporary protection (Department of Home Affairs, 2020). Until a decision has been made on which visa type, if any, is granted to

those seeking asylum, a Bridging Visa (BV) may be granted (Department of Home Affairs, 2020). Each visa type differs in terms of eligibility to apply for employment opportunities, financial help from the government, access to healthcare services, and work eligibility (Department of Home Affairs, 2020).

1.2.2 Health and Wellbeing

According to the World Health Organization (WHO) (2012), health is defined as “a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”. Wellbeing is defined as “...a positive rather than neutral state, framing health as a positive aspiration” (WHO, 2012). However, in many studies exploring the health and wellbeing of people from refugee backgrounds, such terms are often left undefined unless the type of health being referred to is specified (e.g. mental health) (Davidson et al., 2008).

Wellbeing is a contested and often ill-defined term (Dodge et al., 2012). Although there is no one definition of wellbeing, most researchers agree that it is a multi-dimensional construct (Diener, 2009). In general, some studies have conceptualised wellbeing as the primary outcome of health and it can be viewed in both an objective and subjective light (e.g. life satisfaction) (Camfield & Skevington, 2008; McCarthy & Marks, 2010). A study by Brough and colleagues (2003), looked at the mental health and wellbeing of young people from refugee backgrounds living in Australia. It was clear that although the participants understood terms like ‘mental illness’ and ‘wellbeing’, their interpretation and display of such constructs were connected more to their sense of community and families instead of western and medicalized definitions of these constructs. This shows that the definitions and displays of such terms may vary between cultures. Allowing participants to interpret these constructs in more culturally relevant ways will aid further understandings of these concepts in relation to different cultures.

1.3 Health & Wellbeing in Women from Middle Eastern Refugee Backgrounds

Women from refugee backgrounds have been found to be more likely to experience violence, especially sexual or gender-based violence, compared to males from refugee backgrounds (Guruge et al., 2012). Women from Middle Eastern refugee backgrounds often face violence at a higher rate compared to women from other refugee backgrounds (Ghanim, 2009). A study conducted by Guruge and colleagues (2012) reported that 20% of refugee women from Iranian backgrounds living in Canada were victims of violence before the age of 15 while none of the refugee women from Sri Lanka in the study had experienced physical violence before the age of 15. Violent experiences have been shown to add to the risk of developing Post-Traumatic Stress Disorder (PTSD), depression, and psychosis (Rizkalla et al., 2020).

The stress of resettlement and displacement challenges such as financial insecurity, unemployment, separation from family and loved ones, and discrimination has been found to negatively impact the mental and physical health of people from refugee backgrounds (Hassan et al., 2015; Fozdar & Hartley, 2013; Trautman et al., 2002). Women of refugee backgrounds are more prone to developing PTSD, anxiety, and depression (Davidson et al., 2008; Slewa-Younan et al., 2017). These illnesses are often linked to factors such as a lack of social support, poverty, discrimination, and poor physical health (Davidson et al., 2008; McCarthy & Marks, 2010). Furthermore, refugee women from Middle Eastern backgrounds are disproportionately more vulnerable compared to other female refugee groups (Rizkalla et al., 2020). For Muslim women of refugee backgrounds, it has been reported that the stress and hardships faced as part of the resettlement experience is further exacerbated by the growing scrutiny and discrimination they face (Kamalkhani, 2001; Bouma & Brace-Govan, 2000). A study conducted in Perth, Western Australia with Muslim women from refugee backgrounds showed that this demographic often

experiences feelings of being unsafe due to their religious identity (Casimiro et al., 2007). These feelings were based on experiences of harassment and discrimination faced as a result of practicing their religion, such as, by wearing the hijab (Casimiro et al., 2007). Although not all the women in this present study were Muslim or practiced Islam, past research has also shown that people of refugee backgrounds from the Middle East are predominantly perceived as being Muslim and as a result of this, they face discrimination due to their ethnicity as well as perceived religious identity (Awad, 2001). The discrimination they face also affects the job opportunities available to them and has a negative impact on their mental health and wellbeing (Awad, 2001; Kamalkhani, 2001).

1.4 Employment for Women from Refugee Backgrounds

Generally, people from refugee backgrounds face many barriers to gaining employment. Some of these barriers include lack of education or skills, language barriers, and discrimination based on factors such as having a refugee status (Colic-Piesker & Tilbury, 2007; Krahn., et al., 2000). Compared to men from refugee backgrounds, women from refugee backgrounds are underemployed and face a number of additional barriers in gaining employment (Due et al., 2020; Feeney, 2000; Lindencrona et al., 2008). For example, Feeney (2000) identified that the barriers to employment that women from refugee backgrounds face, often begin with learning English or gaining qualifications. Factors that make it difficult for women to access classes for English and skill training upon resettlement include caring and household responsibilities, isolation, lack of previous education and literacy skills, and cultural differences; for example, resistance by husbands/fathers for women to learn English or attend classes with men (Feeney, 2000). Research has also found that the likelihood of integration for women from refugee and migrant backgrounds into the labour force is impacted by the views held in their home countries (Triggs, 2016). If female

integration into the work force is viewed as unfavourable in their home countries, it could negatively affect labour force participation in their host country (Triggs, 2016).

In Australia, the rate of employment for women from refugee backgrounds is much lower than that of men (Due et al, 2020). Due et al. (2020) reported that, at 5 years post-resettlement, 86% of women from refugee backgrounds were unemployed compared to 53% of men from refugee backgrounds. Furthermore, compared to Australian-born women, women from refugee and migrant backgrounds are approximately seven times less likely to successfully gain employment (Syed & Murray, 2009). A study conducted in Sweden demonstrated that while 65% of women from Bosnian refugee backgrounds were employed, only 29% of women from Iraqi refugee backgrounds were employed (Bevelander & Lundh, 2007). The authors of the study attributed this difference in employment rates to regional differences in employment integration for people of refugee backgrounds. Another study by Colic-Peisker and Tilbury (2007) reported that in Western Australia, people from Middle Eastern refugee backgrounds have lower rates of employment compared to other refugee demographics. This study reported an unemployment rate of 38% for people of refugee backgrounds from the Middle East compared to an unemployment rate of 14% for Ex-Yugoslav refugees. This difference in unemployment rates were observed despite the fact that, on average, people from Middle Eastern refugee backgrounds have higher levels of education (Colic-Peisker & Tilbury, 2007). The authors of the study proposed that factors such as cultural differences and increased discrimination towards people of Middle Eastern refugee backgrounds in the labour market, could be used to understand the reported differences in rates of employment.

In addition, women with Middle Eastern refugee backgrounds represent a broad range of skills and abilities depending on where they are specifically from. For example, women from Iran

often have higher education levels or greater access to opportunities for education and employment compared to women from Afghanistan (Mehran, 2003; Alvi-Aziz, 2008). Women from Syria and Afghanistan often face gender-based discrimination and are not given the same work and education opportunities as men (Baranik, 2020; Datta et al., 2020). This then places them at a greater disadvantage when looking for work in their host country (Baranik, 2020; Mehran, 2003). A study by Syed and Murray (2009) explored how English language fluency was also different within the demographic of refugee women from Middle Eastern backgrounds. They highlighted that refugee and migrant women of Iranian and Afghani origin living in Australia faced different types of barriers when looking for employment, and they qualified for different employment types (Syed & Murray, 2009). Due to their English competency and confidence, participants from Iran integrated into the Australian labour force at a quicker rate and gained more professional roles compared to participants from Afghanistan (Syed & Murray, 2009).

Secure employment and self-reliance have been identified as paramount for people from refugee backgrounds, because without it, their risk of becoming caught in a social and economic cycle of marginalisation increases; this could affect not only them, but also future generations (Correa-Velez et al., 2013). Furthermore, research on refugee populations has highlighted that finding employment is considered a top priority upon resettlement (Fozdar & Torezani, 2008). This is due to a number of reasons, such as needing to provide for their families, and that employment serves as a means of integrating into the new culture (Bevelander & Lundh, 2007, Krahn et al., 2000). Therefore, the barriers faced to gaining employment, particularly those faced by women, have been identified to have negative impacts on their sense of wellbeing (Tomlinson, 2010; Baranik, 2020).

1.5 Psychological Wellbeing & Employment

Upon resettlement, people from refugee backgrounds are often faced with a loss of identity, culture, and community (Colic-Peisker & Walker, 2003; Murray et al., 2008), and a major stressor during this time is that of unemployment or difficulty securing stable employment (Murray, et al., 2008; Krahn et al., 2000). Studies have shown that employment facilitates integration into the new culture and society for people from refugee backgrounds (Bevelander & Lundh, 2007; Krahn et al., 2000). Without employment, these groups often find themselves in financial instability and isolation from the new culture, which can lead to negative impacts on their psychological wellbeing (Berry et al., 2002).

A number of authors have highlighted the impact of unemployment on the wellbeing of people from refugee backgrounds upon resettlement (Fozdar & Torezani, 2008; Colic-Piesker & Tilbury, 2007; Correa-Velez et al., 2013; Taylor & Stanovic, 2005). For example, studies have shown that post-migration stress, such as unemployment, can increase the risk of developing mental health problems such as anxiety and depression (Carswell et al., 2011; Hocking, et al.2011). Ozturk and colleagues (2019) identified that being unable to work can add to the sense of loneliness and deteriorating self-esteem for people from refugee backgrounds, because resettling in a new country and adapting to a new culture can invoke feelings of isolation. Physical and psychological impacts have also been identified as a result of being unable to financially support their families (Ozturk et al., 2019). A 10-year longitudinal study, by Beiser and Hou (2001) reported that when refugee people of South East Asian backgrounds living in Canada were struggling to integrate into the Canadian labour force, a high rate of major depression was reported. However, as stable employment was gained, the rate of major depression declined (Beiser & Hou, 2001). Employment also affects other elements of the resettlement and integration process, such as access to adequate

and secure housing (Ager & Strang, 2008; Bakker et al., 2016; Phillips, 2006; Fozdar & Hartley, 2014; Li et al., 2016). A systematic review by Due and colleagues (2018) explored the relationship between housing, health, and wellbeing in people from refugee backgrounds, and found a positive relationship between poor housing and symptoms of PTSD. For women of refugee backgrounds, the authors reported elevated levels of anxiety and stress when faced with unstable and insecure housing conditions. These studies highlight how employment affects the mental health and wellbeing of people from refugee backgrounds, both directly and indirectly.

There also appears to be a complex relationship between employment, discrimination, health and wellbeing in people from refugee backgrounds. Past literature has suggested that people of refugee backgrounds face many negative experiences, such as discrimination, when integrating into their host country's labour force (Colic-Piesker & Tilbury, 2007). While it has been reported that discriminatory experiences can be damaging to the health of people from refugee backgrounds (Ziersch et al., 2020), employment may have a mediating effect on this. For example, Fozdar & Torezani (2008) found that, despite facing negative and discriminatory experiences in the workplace, people with employment reported high levels of physical and psychological wellbeing compared to those without stable employment.

1.6 Refugee Women from the Middle East, Psychological Wellbeing & Employment

While conducting this literature review, it became apparent that there is a significant gap in literature on women from Middle Eastern refugee backgrounds in relation to psychological wellbeing and employment. There were multiple studies which looked at employment and psychological wellbeing separately for this demographic (Datta et al., 2020, Li et al., 2016; Zolezzi et al., 2018; Slewa-Younan et al., 2017), however, there were limited studies on refugee women from Middle Eastern backgrounds and the link between these constructs. The scarce literature

available on this topic and demographic suggests that women from Iranian refugee backgrounds tend to have higher levels of education compared to refugee women from other Middle Eastern backgrounds (Mehran, 2003). A decrease in socioeconomic status due to unstable employment or employment that does not match their level of qualifications has been shown to negatively impact refugee mental health and wellbeing, and is a predictor of negative outcomes during resettlement (Murray et al., 2008; Porter & Haslam, 2005; Colic-Peisker & Walker, 2003).

The demographic of refugee women from Middle Eastern backgrounds is one that is diverse. The challenges and impacts on mental health faced by the Iranian women in prior studies, discussed cannot be generalised to women from other nations of the Middle East. Further research needs to be conducted to address this research gap, and women from different parts of the Middle East should be included in further studies to understand the different challenges and impacts on mental health they may face.

1.7 The Present Study

As mentioned above, women from refugee backgrounds, in general, are increasingly vulnerable compared to men from refugee backgrounds. Therefore, it is important to develop research on this demographic to further understand their views and needs. Women from Middle Eastern refugee backgrounds, in particular, face hurdles such as gender-based discrimination in their home countries, resulting in a lack of education and work experience, leaving them even more vulnerable to the stressors they face during the resettlement process (Fozdar & Hartley, 2013; Baranik, 2020).

In this thesis, a qualitative approach was employed to analyse 16 interviews that were conducted with women from Middle Eastern refugee backgrounds. A qualitative approach allowed

for the in-depth exploration of the experiences participants had with employment upon resettlement in Australia (Meyrick, 2006). As employment, health and wellbeing is an under-researched area for this demographic, a qualitative approach allowed the participants to share their own views and definitions of health and wellbeing, instead of having to adjust and conform to more western definitions and ideas of these concepts. This approach was used to answer the research questions of this study.

Methodology

2.1 The Broader Study

This current study is part of a broader project titled '*Refugee Women and Work: pathways to employment for social inclusion and health and well-being*', which focused on resettlement support services, employment and mental health for refugee women. This broader study on refugee women was a 3-year longitudinal study undertaken by researchers from The University of Adelaide and Flinders University. The eligibility criteria for participation in the broader study involved participants being over 18 years of age, having lived in Australia for less than 7 years, having arrived in Australia as a refugee or asylum seeker, and were either looking for work or working. Participants were also recruited to cover a range of work types including professional practice, self-employment, and semi-skilled or unskilled employment; across a range of part time, casual, and full-time working arrangements. Participants were recruited from a range of organisations and community centres that support refugee resettlement in Adelaide, including the Australian Refugee Association, The Welcoming Centre, Mercy House of Welcome, and the Kilburn Community Centre.

In total, 42 interviews were completed with women aged between 18 years and 49 years ($M = 30.95$ years, $SD = 7.99$ years). The participants were from a range of cultural backgrounds from 13 countries across Africa, the Middle East, South East Asia, and South America. Ethics was received from the University of Adelaide Human Research Ethics Committee and names of all the participants were changed to maintain anonymity. The interviews were conducted in either the participants' homes or a community centre, at a day and time suitable to them ($M = 42.48$ minutes, $SD = 15.35$ minutes).

The interview questions were semi-structured in nature and included open-ended questions. The interviews began with obtaining and confirming background and employment information, and then moved on to open-ended questions, which explored the following: work history prior to arrival in Australia; experiences with looking for work in Australia; support received in finding work; workplace experience; education and training in Australia, and; understandings of health and well-being and the connection these constructs may have with work.

2.2 The Present Study

2.2.1 Participants

The present study draws from 16 interviews conducted with women from Middle Eastern refugee backgrounds, aged between 23 years and 45 years ($M= 32.81$ years, $SD= 6.74$ years). Six participants were from Iran, six participants were from Afghanistan, three participants were from Syria, one participant was from Egypt and one participant was from Pakistan. While Pakistan is not considered to be part of the Middle East, the participant from here was of Afghani origin and her experiences echoed the experiences of the women in this study who were born and raised in Afghanistan. The level of education within this demographic ranged from no formal education at all, through to Bachelor's degrees from their home countries. All the interviews were audio recorded, with the exception of one woman. In this instance, extensive notes were taken. Interpreters were required for three participants, two from Afghanistan and one from Syria. The audio recordings were transcribed verbatim by a transcription service. This study prioritised participant anonymity while also maintaining the integrity of the data. Therefore, it was decided that a participant demographic table could not be included as specific demographic

details such as area of residence and length of time in Australia would have breached participant confidentiality and risked the potential identification of participants.

A realist approach was implemented in this study where a linear relationship was assumed between experience, language and meaning (Braun & Clarke, 2006). Within this research, a realist approach allowed for the exploration of links between the participants, their work experiences, their sense of health and wellbeing, and of how greater cultural and social contexts potentially shaped their understanding and experiences of work, and of looking for employment.

As suggested by Tracey (2010), self-reflexivity was implemented and practiced through self-analysis of the student researcher's research motivations and potential biases. The student researcher is an international student from a culturally diverse background, however, the student researcher does not come from a refugee background and has limited knowledge on the views held on employment, health and wellbeing from the viewpoint of women from Middle Eastern refugee backgrounds. The coding structure and development of themes were monitored and checked by this study's supervisors to ensure that the concepts of trustworthiness and rigour were implemented in this study (Tracey, 2010).

2.2.2 Analysis

Thematic Analysis (TA) was used to analyse the interviews. TA involves identifying, analysing and reporting patterned responses and some level of meaning that are present within the dataset (Braun & Clarke, 2006). Analysis followed Braun and Clarke's (2010) approach to inductive TA, which allowed themes to be identified through clear links with the data. TA is a highly flexible, qualitative approach that allows the key features of a dataset to be summarised through a structured approach (Braun & Clarke, 2006).

Braun and Clarke (2006) describe six steps involved in TA. The first step involved data familiarisation, where the dataset was reviewed multiple times while simultaneously creating initial codes using the qualitative data analysis software, NVivo. The next step involved ongoing discussions the supervisors of this study to review and refine the initial codes, resulting in 28 codes from an initial 61 codes. All of the interviews were then coded according to this coding structure. The third step involved searching for initial themes. After multiple revisions assessing codes and their relationships, five potential themes and six potential sub-themes were formed. These candidate themes and sub-themes were then reviewed as part of the fourth step in this process. This involved compiling relevant coded interview extracts to determine if coherent patterns formed. This was an iterative process to ensure that the data within the themes were meaningful and complimented each other while also maintaining distinguishable boundaries between the themes. The fifth step involved further refining and defining of the themes so that each theme could be explained in just a few sentences. After multiple revisions of the themes and sub-themes, the sixth step involved writing up the analysis for each theme and sub-theme.

Within some approaches to qualitative research, data saturation (that is, the point at which no new themes are identified) is considered as a goal standard in terms of determining sample size. Although, this is contested on the grounds that data saturation is subjective and often difficult to achieve as there is no fixed end point (Braun & Clarke, 2019). Within this study, the overall number of participants were pre-determined based on a range of characteristics including country/region of origin, work history, and education level. This led to 16 participants being included in the study, all of which were women from Middle Eastern refugee backgrounds.

Results

3.1 Overview of Themes

Four overarching themes were identified: *Motivation to work*, *Unfair treatment at work*, *Barriers to gaining employment*, and *Psychological wellbeing and the refugee experience*.

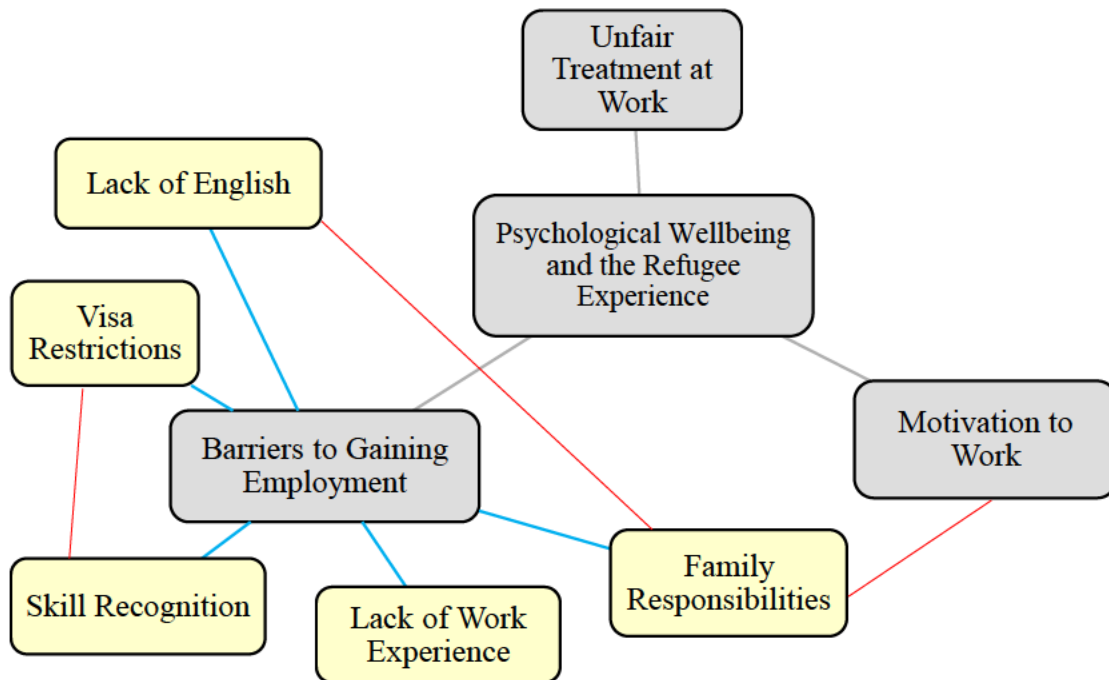


Figure 1. Thematic network of identified themes

3.2 Motivation to Work

Analysis of the interviews highlighted that the participants in this study considered stable employment as a key goal to achieve upon resettlement. This theme explored the reasons for which the participants remained driven and motivated to gain employment upon resettlement. Many of the participants in this study expressed that the need for financial stability and the responsibility of providing for their families acted as a strong sense of motivation. For example, ■■■ indicated that she needed to work in order to help support her family:

I am the oldest daughter and only my dad works, so I feel like I need to help the family. But I also wanted my own pocket money so that I don't have to ask my dad for money. I need to help support my family, I have my mother and father, my grandmother, and two younger brothers and a sister. I want to help my father.

■■■, 24, *Afghanistan*

■■■ mentioned living with a large extended family, this could be a potential factor which exacerbated her family's financial needs. Similar to ■■■, ■■■ from Egypt also expressed needing to work in order to financially support her family:

For me now, I didn't feel good without job because job give you money, give you much better life and you can pay everything you need now. It's hard you come in Australia and my son, eight years, and I...Newstart and Newstart has little money

because I must rent house and my son has lots of things he needs, especially because we come in Australia just two bags. Also, of course housing.

■■■■ 34, *Egypt*

Furthermore, ■■■■ expressed a link between financial security, which is gained through employment, and her personal feelings. She highlighted that without employment, her feelings were negatively impacted as the stress of resettlement was further exacerbated due to the financial pressures she faced. As highlighted in the Introduction, employment is seen as a top priority in many people of refugee backgrounds as financial security is needed for factors such as housing. This can be seen to be reflected in ■■■■ example.

In addition to the desire to support their families and the need for financial stability, another aspect of employment which acted as a sense of motivation was that of personal fulfilment. Employment allowed participants to feel like they were participating in society and contributing to their families

Here, ■■■■ explored the emotional impact of being able to work:

You know, when you work first you prove to yourself that you have the ability to keep going because we live in a modern, you know, society and you have to express yourself in some ways in your professional life, in your private life. Still I think work is important because when you are skilled and working, even to your partner and family I think – not you have more value but you prove to them that I could do, you know.

■■■■ 36, *Iran*

████ used to work in a media publishing company in Iran after completing her degree in graphic design and communication. In her interview, she mentioned that she could not secure a job in her profession, and instead had to gain qualifications to work in the aged care sector. Here, when █████ was asked what she liked about work, she explained that work was a way she used to prove to herself and the people around her that she could ‘keep going’ despite her difficult circumstances. Furthermore, she mentioned that through work, she was able to express herself in her personal and professional life. █████ experience highlighted that work also carried an aspect of personal fulfilment for the participants in this study.

████ from Afghanistan expressed a similar idea that work provided a sense of personal fulfilment:

Of course, work is a positive. I love to work because you can't sit at home all the time and waste your time ...so of course working - when you go outside – even when you work in restaurant you get experience from the people; you learn. You learn - every minute you learn from the people what you should do, what you shouldn't, even ...an experienced person that [they are] – you meet new people, you know new things about Australia, about the people. You get good opportunity for job so I love to work. Yeah, it's a positive thing.

████ 27, *Afghanistan*

████ indicated that work acted as a facilitator of integration into the Australian culture, since through work she was able to learn new things about Australia and meet new people. Another way work acted as a way of personal fulfilment was expressed by █████:

I told you I've been working since I was 19 and then I came here and for one year I wasn't allowed to do anything, which was not nice. Then I had my son, which is a lot of work but still [they don't] give you that sense of being independent and working so, yeah, it feels nice to be [on your own feet]...when I talk about... impressed I'm like... so, yeah, it feels nice to be helping, to be on your own feet, to be earning money and, yeah.

■■■■ 31, *Iran*

■■■■ was an English teacher in her home country, Iran. Once she had gained working rights in Australia, she started working as an interpreter while undertaking studies at university. ■■■■ expressed that she needed to work for financial reasons, however, she also acknowledged that work gave her a sense of independence. ■■■■ made the distinction that as an educated woman, work gave her a sense of independence and personal fulfilment which she did not feel without employment.

The sense of personal fulfilment which comes from employment was seen in not just the participants with high education levels and work experience, it was also seen in participants who had lower levels of education and little to no previous work experience. For example, ■■■■, who had no previous English language skills or formal qualifications, explained how working in Australia made her feel happy even though her life now is very different to when she was in Pakistan:

Of course, working. In here it's very important. In my country I was housewife, I didn't work, I just cooked food for my husband, that's it. I had three four

servant there for washing clothes, separate for dishwashing, separate for everything, but in here it's very important. If I work with my husband, so it's very important for us because we started from beginning so it's – you know, yeah. I'm happier. I'm happy.

■, 39, *Pakistan*

Overall, two main aspects of work were highlighted by the participants in this study. The first aspect of the desire to support their families was very prevalent and was seen to be highlighted by most of the participants. The second aspect of self-fulfilment was expressed by participants regardless of their education levels, showing that work holds an aspect of intrinsic worth for the participants. There was also an overlap between these two aspects. The sense of personal fulfilment and independence expressed by some of the participants came from financial stability which was gained or to be gained through employment.

3.3 Barriers to Gaining Employment

While, as seen in the previous theme, participants were very motivated to work, they also highlighted a range of barriers to employment in the interviews. As noted in the Introduction there is extensive literature on barriers to employment for people with refugee backgrounds more generally, therefore, this theme focussed specifically on barriers which may be exacerbated for refugee women from the Middle East. Based on prevalence in the interviews, some of the main barriers, reported here as sub-themes, identified by the participants were: *Lack of English Language Proficiency, Family Responsibilities, Visa Restrictions and Lack of Work Experience, and Skill Recognition.*

3.3.1 Lack of English Language Proficiency

Some participants in this study expressed that not having an adequate level of English language proficiency put them at a big disadvantage upon initial arrival, specifically in relation to gaining employment. Even after some English had been learnt or improved, not being fluent and comfortable with English still posed as a barrier to gaining employment.

██████ was one of the women in this study who required an interpreter for her interview. Here, ██████ expressed that not being able to speak and understand English well was one of the first barriers she had faced when looking for employment in Australia:

I don't have good English. Speaking English first barrier, and money. So, if I think to start my business now, today, first the money and the English but in addition I'm too frightening from not succeed.

██████, 36, *Syria*

In Syria, ██████ worked in a family business with her husband. She mentioned being unable to apply for work in Australia due to her lack of English proficiency. ██████ hoped to open her own restaurant some day and she highlighted that before she could do that, along with saving money, her English language skills need improvement. Furthermore, ██████ expressed being afraid; suggesting an additional barrier that implies that as much as she desired to succeed, there was an aspect of emotional struggle around the idea that she may not.

██████ from Syria expressed similar experiences to ██████ when it came to looking for work in Australia, noting that “Because everything need to experience English, everything. Some of the work don't need more English, like the cleaning.” ██████ had previous experience working

as a tailor, however, she moved to working as a cleaner in Australia as cleaning did not require her to be fluent in English.

██████ from Afghanistan was another participant who required an interpreter for her interview. She expressed that due to her lack of English language proficiency, as well as her caring responsibilities, she was unable to work in Australia. In response to a question about working in Australia, she replied:

No because of the children. But I am going to school to learn reading and writing. My husband and I are both uneducated so we are both now going to school...but considering school is three days per week and we don't know English, who will hire us? Even when we go shopping we need help.

██████, 28, *Afghanistan*

Along with her English language proficiency, ██████ mentioned being unable to work due to family responsibilities. ██████ example demonstrates that it is not enough to learn English, she was still unable to work due to the caring responsibilities of her children. This example shows that for women of Middle Eastern refugee backgrounds, there are numerous barriers faced to gaining employment and they collectively impact one another and therefore they cannot be looked at in isolation.

3.3.2 Family Responsibilities

As mentioned above, the barriers women from Middle Eastern refugee backgrounds face when looking for employment cannot be considered in isolation. Similar to ██████ experiences,

a number of women in this study highlighted that family responsibilities were a key barrier to finding employment. For example, █████ shared that she could not attain qualifications in order to gain employment as she had to care for her baby:

Yeah in Afghanistan for women is no facility for working, only men is go to [outside] and working. Just we all stay at home. Now I'm decide to go to TAFE and start diploma of nursing for part-time and just I'm looking for child care to take my baby in there and that's a little bit expensive, that's why I'm waiting until she become one year.

█████, 23, *Afghanistan*

As noted, █████ has had little work experience and education. In her interview she highlighted that in Afghanistan, women usually do not work as it is seen as a man's role to do so. This aspect of Afghani culture where women are expected to stay home and look after household responsibilities instead of join the work force, can be seen to add an additional layer to the barriers women from this refugee background face. Furthermore, █████ explored the option of using a child care service for her daughter so she could work or commence her course, however she subsequently mentioned that it was too expensive, acting as an additional barrier. █████ example indicates an almost cyclical effect these barriers have on each other.

Similarly, █████ from Afghanistan who used to work as an interpreter, also shared that due to her family responsibilities she found it difficult to continue working:

Because I have kids with disability, intellectual delay and [ASD] so it was really difficult to, you know, take care of them at home and then going to job. Now my child is three and a half and because - the real thing is that I can't afford for childcare because even it was \$50 to \$100 in a day but I have to pay nearly half of the amount, the child care. Yeah, and [daughter] she has got – [as you see] at the moment she's got. She was like screaming and crying all the time. She wasn't happy all the time, you know. It was really difficult, especially in my – you know, I can't go to friends' house, I can't go to events, you know, I can't go to the festivals because it's really, really difficult, you know.

■■■■, 33, *Afghanistan*

The cyclical effects of the barriers to gaining employment can be seen again in ■■■■ circumstances. She was unable to work as she had to look after her children, and was unable to afford child care services; something she could afford with stable employment. On top of this, ■■■■ shared that she has children with Autism Spectrum Disorder (ASD). In her interview, she highlighted that having children with disabilities impacted not just her ability to work, but also her social life and connections. ■■■■ example highlights that having caring responsibilities for family members with disabilities exacerbates the barriers already faced by women from refugee backgrounds when seeking employment.

While many of the participants in this study had child care responsibilities, ■■■■ from Iran indicated that her responsibilities of caring for her parents acted as a barrier to employment:

Yes, difficult to work. As I said, my parents are not able to speak English very well. So, it's me most of the time doing most of the things. But I'm not saying about shopping or - shopping is very easy and of course, my mum [unclear] she does all the shopping, cooking. But for other work, if you want to rent a house, for example, I have to apply for it, or whatever we need to do, it's me that has to do most of the work. Yeah. But now I've got my parents here so if they want to see a doctor - sometimes they do have interpreters but sometimes, yeah asking me to go with them.

■■■■ 24, *Iran*

■■■■ is an example of how the barrier of having family responsibilities extends beyond caring for children and household duties. She was indirectly affected by the barrier of a lack of English language proficiency. Due to ■■■■ parents lack of English proficiency, the responsibility of important tasks such as renting a house fell on ■■■■ She also had to occasionally act as an interpreter for them and she highlighted how this had impacted her ability to work.

3.3.3 Lack of Work Experience, Visa Restrictions and Skill Recognition

In the previous sub-theme, ■■■■ extract highlighted cultural norms which sometimes put refugee women from Middle Eastern backgrounds at a further disadvantage upon resettlement, such as not being able to work or gain education in their home countries. This idea is further explored in this sub-theme.

Some of the participants in this study shared that they had difficulties securing employment due to having little or no previous work experience, especially experience relevant

to Australia. As seen in the Introduction, having no previous work experience puts women from refugee backgrounds at a further disadvantage of successful resettlement as it adds to the difficulties they face when looking for work.

Here, ■■■■, who left Iran when she was 18 years old and was therefore too young to work, highlighted that her lack of work experience posed a barrier when she was looking for work:

I feel like my resume is quite empty. Because I don't have much experience from my other friend. She does have a lot of experience but, for me it's only [current employer], the election for one month and then the second-hand shop which was only volunteering. So, I feel like that's very empty. I would say my grades are fine because I'm mostly on high distinction, distinction. So that shouldn't be an issue but, yeah...just experience.

■■■■, 24, *Iran*

Furthermore, visa restrictions were found to impact and exacerbate the barrier of not having work experience specific to Australia. For example, ■■■■ from Iran expressed how not having relevant Australian work experience, along with not being able to work in Australia due to visa restrictions, acted as barriers in gaining employment:

I was on bridging visa and I didn't get any benefit from my country, from my family, whatever I left in my country. I couldn't work, we didn't have work rights so it was almost impossible. Then I decided to take something, you know, close to that because I wasn't that kind of person to sit back and say okay, I'm not going to

do anything. Then I take a course and they were really nice to us, honestly, and they accepted for us, in our situation, to pay in instalments so we started studying cert four in disability, which was close to my – you know, it was kind of relevant to my study. Then I tried to find a job but it was interesting because to find a job here you have to have experience in Australia and to get a new job, you know, the first job in Australia, how do you have experience? So, it was confusing and wherever we go – you know, it's understandable but it was impossible.

██████ 44, *Iran*

██████ example highlighted again how the barriers the participants in this study faced cannot be looked at in isolation. ██████ shared that even once her working rights had been granted and she had gained the necessary qualifications to work in the disability care sector, her lack of Australian specific work experience acted as a barrier in gaining employment.

Another barrier for people from refugee backgrounds in gaining employment is often linked back to the fact that their qualifications gained overseas may not be recognised in Australia. Some of the women in this study had formal qualifications which allowed them to work in their chosen fields in their home countries. However, upon resettlement they were left with few job opportunities that they qualified for, as their qualifications were not recognised in Australia. This left them with one of two options, either they had to earn their qualifications again in Australia, or they had to choose a job which did not meet their expectations or needs. For example, ██████ who came to Australia as a refugee after being targeted by the Iranian government for religious reasons, shared that her previous qualifications were not recognised in Australia:

I think the biggest barrier before I get the job is education. Look, it's big disappointment, and it's the big things in life that you accept. You did four years of study in your own country, and they didn't recognise you here, so you should start from zero, while you have that knowledge. So yeah, that's the big things. You just put that aside, and then you come to the point that, okay. Honestly confused, believe me or not, because they said to me that this is not Bachelor of Psychology. But again, they said, this is Bachelor of Psychology to do the Master of Social Work. I doesn't understand how that works, because I remember I asked them that if they can give me one year or two year credit for psychology. I'm still going to continue with psychology, but they've just been, no, you need to start from zero. It was like, oh no, I just did my four years, I can't - but that's something that is a big barrier before getting the job. You need to just believe that it's not what you did, and you need to start from zero.

■■■■, 33, *Iran*

Similarly, ■■■■ expressed facing this barrier to gaining employment:

The biggest problem, we were all people who came from my country where we had our qualifications and jobs and experience and here we had nothing and I don't think it's...Australia doesn't really recognise the qualifications so, yeah, we had nothing to start with and went like...and people around me who aren't that young anymore so...starting all over...something really hard.

■■■■ 31, *Iran*

This barrier was observed to be more prevalent among the participants from Iran, where they had higher levels of educations compared to the other participants in this study. The examples of [REDACTED] and [REDACTED] further show that the cohort of women with Middle Eastern refugee backgrounds is very unique in that different women face different barriers in gaining employment, depending on factors such as their levels of education.

3.4 Unfair Treatment at Work

While the previous theme looked at the barriers faced by the participants when looking for work upon resettlement, this theme explored the hurdles the participants faced even once employment had been gained. Some of the participants in this study highlighted that even once employment had been gained, they faced negative experiences in the workplace due to factors such as racism and discrimination.

[REDACTED] shared that due to her negative experiences and lack of support at her workplace, she left the job and had to start looking for employment again:

Yeah, the racism is too much, [as you] observed. First when I came to Australia I was wearing a scarf but when I was looking, going for job, even once I was working in a pizza shop and I was wearing scarf and the lady came and she ordered five pizzas, big pizzas, and then she came – it was a phone call and then she came at the counter and she saw me, that I am wearing a scarf and said ‘no, I don’t want these pizza. You can keep it’ and she wouldn’t even pay and after that I thought that no, it’s really bad living here to wear a scarf. The shop owner was

really angry on me. I said ‘it’s not my fault’ like every people wear or don’t wear, it doesn’t [mean to that] pizza so I left that job at the time because I really feel bad. So that’s the bad thing that happened to me.

■■■■■ 27, *Afghanistan*

■■■■■ example highlighted the need for ongoing support for women of Middle Eastern refugee backgrounds. As mentioned previously, although not all the participants in this study were Muslim and practiced Islam, women like ■■■■■ who practiced their religion faced discriminatory responses and experiences.

Similarly, ■■■■■ shared her experiences with racism and discrimination in the work place:

Not by people who employed me but sometimes I just go to a – and this much happen, I don’t know, maybe just my experience but maybe a... they say ‘oh where are you from?’ and then you said ‘I’m Persian, I’m from Iran’ and then they ‘oh, these days everybody’ – you know, or some people ‘oh, do you have a bomb in your pocket with’ – like a joke but it’s not funny.

■■■■■, 36, *Iran*

■■■■■ example again highlighted the need for ongoing support for women of Middle Eastern refugee backgrounds once employment has been gained. Unlike ■■■■■ ■■■■■ was not wearing the hijab but still faced negative experiences in the workplace due to her cultural background and refugee status.

The experiences of [REDACTED] and [REDACTED] highlight that refugee women from Middle Eastern backgrounds face specific forms of discrimination due to their religion and cultural backgrounds. The perception of people from these cultural backgrounds as ‘terrorists’ further exacerbates their experiences with discrimination.

[REDACTED] highlighted that not all acts of discrimination are overt:

The racism comes up for me, when I got my job, my second job in Australia.... So I don't know, is that called racism or is that called discrimination, but I will experience a hard time currently in my workplace. They are government's workers, all of them are from government. I am the only one who is non-government organisation there, and they are all teachers and community development director, and the family practitioner. So that started after a few months, I notice, I struggle, then I talk with my manager, we hope for some changes but it doesn't happen. Because from the first day, I get the vibe from the director that she doesn't like me really, but then after a while, it's just expand. Then I start to have affect my mental health, and the situation that my doctor offer me to take antidepressant. ... before I get this job, I was a casual worker in [organisation]. So that's another government job, and I was get the job there, but the way that they ended up my contract was racism completely and discrimination completely, because I am not Australian I can't get a position there that I deserve to have. What happened, there are other casual workers, now they have a position in the [organisation]. Why I didn't even get that offer, why I didn't even have access to that positions in my emails. It's not just about me, there is another lady

who is from my background who's working there for 12 years. She's been in the same position for 12 years. They didn't even give her a permanency, while the other Australian workers just get it in six months.

■■■■, *Iran*

■■■■ example showed how subtle and pervasive acts of discrimination can be. This also showed two key impacts of discrimination faced in the workplace had on ■■■■; there was a negative impact on her mental health as well as career progression.

3.5 Psychological Wellbeing and the Refugee Experience

As highlighted in the Introduction, the constructs of health and wellbeing vary in meaning across different cultures. This theme explored the impacts of employment and looking for employment on the health and wellbeing of the participants in this study. As alluded in previous themes, participants were clear that work was linked to health and wellbeing.

When asked what health and wellbeing meant to the participants, many of the participants in this study linked the concept of health to physical health and the concept of wellbeing to something more psychological in nature. For example, ■■■■ explained what these concepts meant to her and how she thought they were connected to work:

Health is physical, being healthy and not sick, and wellbeing is happy, enjoying life. Yeah, I don't like to stay at home, I told you. I like to go somewhere, anywhere to ask, to find anything. I know this work doesn't suit me, but I like to ask why, what they're doing. Yeah, I feel very good if I go somewhere to ask to

find a job. If I work, if I don't have any work, I feel like not good at home here. I have to do something. Like now I try to improve my English, some English class, some English, different level. Yeah, I like to find, to try all the time.

■■■■, 38, *Syria*

■■■■ example also showed how work potentially helped the participants at an individual level. Furthermore, ■■■■ linked work back more to the concept of wellbeing and how work helps her keep busy and acts almost as a distraction from her negative feelings.

Similar to ■■■■, ■■■■ also linked the concept of wellbeing with mental health and acknowledged that wellbeing is linked to work:

Wellbeing? Even mental health probably. If you're not mentally prepared so you can't work, yes. I've been struggling even like - I don't know what is happening to me but from - I wasn't like this when I was in Iran when I went for an exam. I wasn't so stressed that my hand really shake and I couldn't control myself. But since I came to Australia it's like been really stressful. Like my brain doesn't work properly it's really slow to get something. But I was really fast to learn something and like work quickly but since I'm studying here and the stress, I was so stressed because of everything you know because the same time they cut off my payments I couldn't get a job. I was asking my family to support me but it was really hard for them to support me as well and I was so struggling with everything. So, yes, I was really struggling.

■■■■, 30, *Iran*

This example describes how traumatic experiences have had an impact on Sanaz's daily functions. These experiences have amplified her mental health issues and are linked to a decline in her cognitive functioning. ██████ expressed an increase in feelings of anxiety due to resettlement stressors such as not being able to obtain employment, along with anxiety related to her education. ██████ experiences act as an example of the compounding stressors many women from Middle Eastern refugee backgrounds face. The compounding stressors serve as barriers to attaining and continuing with education and employment opportunities.

Although ██████ had negative experiences during her resettlement process and shared how these experiences impacted her ability to gain qualifications and employment, when asked if work was positive for her, this was her response:

Yes, I mean I feel effective. I feel like I'm doing something I'm not hopeless. So, yes, one of the reasons I just try to get the scholarship was to do something not just to stay at home because I couldn't get a job. Yes, I tried - I have to do - I need to get degree from Australia to get a job. Because I'm just - if I stay or if I was staying at home for another year, I would have suicide.

██████ 30, *Iran*

Like ██████, ██████ highlighted how work, or in this case gaining qualifications in order to gain employment, acted as a distraction from negative feelings. She shared that if she had not gotten the opportunity to gain qualifications at university, she would have resorted to suicide. This highlights the extreme nature of distress and setbacks that women from Middle Eastern

refugee backgrounds face upon resettlement; and how education and employment opportunities are seen as ways out of these negative circumstances. This can also be seen in ██████'s example:

My health is okay but my sugar is - like sometimes it's going up, sometimes going down and my cholesterol is also high. When I wasn't coming to the school until evening I was sitting and crying; now it's good. I am coming and I am having good time. They are very good. All the friends are very good.

██████, 45, *Afghanistan*

It was observed that participants with higher levels of education had a more western understanding of the concepts of health and wellbeing. Although participants with higher levels of education articulated their understanding of these concepts more explicitly, participants with lower levels of education, like ██████, were still able to equate their mental health and psychological wellbeing in terms of crying. At the same time, ██████ also highlighted aspects of her physical health. Even though ██████ was not working, she highlighted that the social connections she had gained through her English classes had positively impacted her mental health.

The examples of ██████ and ██████ highlight how important English language classes, education and employment can be for refugee women of Middle Eastern backgrounds as it prepares them for an easier transition into the Australian society. Furthermore, this enables them to form connections which positively impact their sense of health and wellbeing.

While work was seen as a positive experience for many participants in this study, ██████ was one participant who highlighted the negative impacts of work on her health and wellbeing:

All the other issues in the job. Then I was like, oh, it's not going well. Then I got sick, then my GP said, it's all about, you know when your mental health shows you physically that you are drained, so she offered me to get the tablets, but I just said no, because I've been there once in life, and I tried so hard to get out of it and just be with myself. I'm scared it's affect...my job. Yeah. Me feel a step back, and also, I know it has a side effect. When you take medication, it's all make you sleepy, it affects your concentrate...or you're kind of going to be a bit more sensitive. All those traits, it's so important in my workplace. So I don't want to risk to loss...my job for my mental health. That's my biggest worry. So I don't think so, I just try to find other was to cope with that really.

██████ 33, *Iran*

Dealing with the effects of the trauma from the refugee experience is complex and impacts people of refugee backgrounds in a variety of ways. Here in ██████'s example, it is seen that the mental health effects on and from work are an important feature of this complex experience. While many of the women in this study, especially those educated and previously working in their home countries, described a want to work, the process of gaining employment and actually working potentially acted as an additional stressor. ██████ example highlighted the cyclical effects and compounding stressors that are sometimes part of the refugee experience. She experienced negative impacts on her mental health due to resettlement stressors such as work, however, she was reluctant to get help for this as it would also impact her ability to work. Mina prioritised her employment over her health. Unlike women who have not gone through the

refugee experience, the women in this study faced a range of stressors related to work, in complex and sometimes contradictory or unexpected ways.

Discussion

4.1 Overview of Findings

The aim of this study was to explore the impact of employment on the health and wellbeing of women from Middle Eastern refugee backgrounds. The use of Thematic Analysis did not only produce results which supported current literature, but it also allowed for further understanding of the participants' experiences.

Overall, this thesis emphasised how gender, education levels, pre-resettlement stressors and post-resettlement stressors influenced the participants' ability to find work and continue working. The women in this study prioritised pragmatic concerns and employment. During analysis, it was identified that there were two main aspects of work which acted as motivation to work: the need for financial stability and work was seen as a form of personal fulfilment. Although the participants in this study were highly motivated to work, a range of barriers to gaining employment were highlighted. The type of barriers faced were found to be impacted by participants' level of education. For example, participants with higher education levels faced barriers such as not having their formal qualifications and skills recognised in Australia, while the participants with lower education levels experienced barriers such as a lack of English language proficiency. In most participants, it was seen that employment had a positive impact on health and wellbeing, however, it was also seen that negative pre-resettlement and post-resettlement experiences had a negative impact on ability to work thus impacting sense of health and wellbeing.

4.1.1 Employment and the refugee experience

The participants in this study had practical concerns regarding financial security and supporting their families. Aligning with previous literature (Tomlinson, 2010; Hutchinson &

Dorset, 2012), the results of this study suggested that women from Middle Eastern refugee backgrounds feel responsible for the financial security of their families and therefore, employment was a top priority upon resettlement. The aspect of personal fulfilment which came from employment and also being able to provide for their families, was a finding that contributes towards the scarce literature looking at the impact of employment on the sense of personal fulfilment, specifically, in refugee women of Middle Eastern backgrounds (Baranik, 2020; Datta et al., 2020). Given that in some Middle Eastern nations working women are uncommon and are faced with negative responses, being able to work in Australia and gain a sense of independence may be a contributing factor towards an improved sense of wellbeing.

Consistent with previous literature, a number of barriers to gaining employment were identified (Abraham et al., 2018; Murray et al., 2008; Fozdar & Hartley, 2014). Participants in this study indicated that for women of Middle Eastern refugee backgrounds, support is needed in terms of mental health and confidence. This is because, along with pragmatic barriers, emotional barriers were also identified and they were seen to exacerbate the existing practical barriers. Pragmatic barriers such as a lack of English language proficiency were seen to be more prevalent among participants from Syria and Afghanistan compared to the other participants in this study, such as those from Iran. A common factor among these participants was their lack of formal education, which was linked to a lack of English language proficiency. This was consistent with previous literature and is seen to be linked with the gender-based discrimination women from Middle Eastern refugee backgrounds sometimes face in relation to education (Alvi-Aziz, 2008). Some of the participants in this study highlighted that in places such as Afghanistan, women are unable to work or study due to traditional gender roles where women are expected to stay home and take on caring responsibilities. This finding aligns with previous studies and suggests that

having a lack of formal education affects English proficiency, and these factors both act as barriers to gaining employment upon resettlement (Syed & Murray, 2009; Baranik, 2020). The range in education levels of the participants emphasised the diversity of experiences and skill within this cohort of women and allowed for a further understanding of how the resettlement process is affected by education.

Furthermore, this study highlighted that the refugee experience does not end once employment has been gained. Pre-resettlement and post-resettlement stressors were seen to exacerbate difficulties in gaining and continuing with employment. A way forward for policy and service provisions for refugee women of Middle Eastern backgrounds would be to consider taking an intersectional approach. This would allow for policies and services to look beyond the existing policies which focus on factors such as migration and race. This would also encourage the consideration of the influences of pre-resettlement stressors such as gender-based discrimination and post-resettlement stressors such as racism in the workplace (Hankivsky & Cormier, 2009).

For the participants in this study, it was clear that work was seen in a positive light and had a positive impact on their sense of health and wellbeing. Aligning with previous literature, participants in this study used employment as a coping mechanism from negative feelings and experiences (Baranik, 2020; Correa-Velez et al., 2013). As such, it is important for employers and service providers to understand that women of Middle Eastern refugee backgrounds face various barriers to gaining employment, including having a lack of education due to gender-based discrimination in their home countries, and that these experiences along with the stress of resettlement may be compounded by other structural and systemic overlaps such as racism and a refugee status.

Furthermore, consistent with previous literature, employment was highlighted as a way of integrating into the new culture and society of the host country (Bevelander & Lundh, 2007; Hocking et al., 2015). This study also highlighted that while employment enabled the participants to gain social connections and support, education was another aspect which encouraged social connections and this in turn positively impacted participants' sense of wellbeing. The participants who were gaining qualifications in order to work expressed that services such as English classes and university enabled them to establish social connections they would otherwise not have and this would have left them isolated from the new society, further exacerbating the negative aspects of the refugee experience.

Moreover, aligning with previous research, while education and employment opportunities were seen to positively impact health and wellbeing in this study, unfair experiences at work were reported to negatively impact mental health (Hassan et al., 2015; Fozdar & Hartley, 2013; Trautman et al., 2002). In particular, participants reported discrimination based on religion and cultural identity — especially for those participants who were visibly Muslim due to attire. This finding aligns with previous research (Ziersch et al., 2020; Baranik, 2020). These negative impacts at work support findings of cyclical effects of employment and health, whereby employment was seen as important for mental health. However, once employment has been gained, negative work experiences also reduced mental health and psychological wellbeing.

4.2 Strengths and Limitations

One of the main strengths of this study was its contribution towards the growing body of literature regarding women from refugee backgrounds, employment, health and wellbeing.

However, the focus on women of Middle Eastern refugee backgrounds set this study apart in that there has been little research previously done on this demographic in relation to this topic. Furthermore, this thesis outlined the importance of listening to the participants to further understand their experiences of finding work in Australia, as well as how these employment experiences have impacted their sense of health and wellbeing. The use of a qualitative method allowed for a nuanced understanding of the participant's experiences, and the use of semi-structured interviews allowed for the participants to have some control over the information they chose to share. Moreover, this demographic was unique in that the women involved varied greatly in terms of their education levels. Some of the women had post-graduate qualifications while some of them had no formal qualifications or schooling. This allowed for further understanding of how pre-resettlement circumstances, such as levels of education, can impact the resettlement process.

Due to the small and diverse sample size of this study, the findings of this study may not be generalisable to the wider community of women from Middle Eastern refugee backgrounds. To achieve a further nuanced representation of the experiences of this demographic regarding employment, health, and wellbeing, a larger sample size should be implemented in future research. This would allow for the further exploration of the impact of factors such as education and cultural issues on employment and wellbeing. Another limitation of this study was language. The interviewer in this study did not speak the primary language of any of the participants and all interviews were conducted in English. Although interpreters were offered to all participants, some of the participants with lower levels of English declined. The language barrier in some interviews did not allow participants with lower levels of English to fully express themselves and their thoughts. In smaller communities, such as people from Middle Eastern refugee

backgrounds, the use of interpreters is sometimes not preferred (Gartley & Due, 2016). This is due to reasons such as fear of the interpreter personally knowing the participant and fear of judgement from the interpreter (Gartley & Due, 2016). Future studies involving this demographic should aim to build rapport and trust with the participants as this may help alleviate the challenges faced involving language.

4.3 Implications

This study contributes towards bridging the gap in literature specific to women from Middle Eastern refugee backgrounds, their employment experiences, and how these experiences impact their sense of health and wellbeing. This study also contributes towards the understanding of health and wellbeing for this demographic, and highlights the importance of factors such as education. The main implication from this study is that from the interviews, it was made clear that this demographic requires ongoing support throughout the resettlement process. Even after employment has been gained, the cyclical effects of pre-resettlement and post-resettlement stressors still affect this demographic; therefore, ongoing support is needed to encourage a smoother transition upon resettlement. Furthermore, the barriers faced in gaining employment were not solely pragmatic barriers. Support services specific to mental health and confidence building could prove to be helpful for this demographic. This study also highlighted the importance of employment and education opportunities in successful integration into a new culture. Service providers could consider the importance of education opportunities as a way of forming social connections and a way of integration into a new society and culture.

In addition to applied implications, this thesis contributes to academic knowledge concerning understandings of integration, particularly employment, on the mental health and

psychological wellbeing of women from Middle Eastern refugee backgrounds. This was done by addressing the research gap using a qualitative approach which allowed for further understanding of how factors such as employment can impact integration and mental health and wellbeing.

4.4 Conclusions

The refugee experience and the process of resettlement can be a very stressful period where women from refugee backgrounds are faced with the challenges of re-building their lives in a foreign land and adapting to a new culture. The use of Thematic Analysis importantly highlighted that most participants were motivated to work and expressed a positive impact of work on their sense of health and wellbeing. However, cyclical effects of the various barriers faced to gaining employment and the compounding stressors of the refugee experience can have a negative impact on health and wellbeing. A tailored approach to understanding this demographic's employment experiences in relation to their sense of health and wellbeing is required. Additionally, further exploration of this topic through quantitative studies would increase generalisability and understanding of findings, and would add to bridging the current literature gap. This study contributes to understanding the impact of employment experiences on the health and wellbeing of refugee women from Middle Eastern backgrounds.

References

- Alvi-Aziz, H. (2008). A progress report on women's education in post-Taliban Afghanistan. *International Journal of Lifelong Education*, 27(2), 169-178.
- Asaf, Y. (2017). Syrian Women and the Refugee Crisis: Surviving the Conflict, Building Peace, and Taking New Gender Roles. *Social Sciences*, 6, 2-18.
- Awad, G. (2010). The impact of acculturation and religious identification on perceived discrimination for Arab/Middle Eastern Americans. *Cultural Diversity and Ethnic Minority Psychology*, 16(1), 59-67.
- Baca, B. (2014). THE REFUGEE WELL-BEING PROJECT. *WorldView*, 27(4), 28–30.
- Baranik, L. E. (2020). Employment and attitudes toward women among Syrian refugees. *Personnel Review*, 49, 1-17.
- Beiser, M., & Hou, F. (2001). Language acquisition, unemployment and depressive disorders among Southeast Asian refugees: a 10-year study. *Social Science Med.* 53(10), 1321-1334.
- Bevelander, P., & Lundh, C. (2007). Employment integration of refugees: the influence of local factors on refugee job opportunities in Sweden. *Discussion Paper*, 2551.
- Bouma, G., & Brace-Govan, J. (2000). Gender and Religious Settlement: families, hijabs and identity. *Journal of Intercultural Studies*, 21(2), 159-175.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research In Psychology*, 3(2), 77-101.
- Braun, V., & Clarke, V. (2010). *Successful qualitative research: A practical guide for beginners*. sage.

- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis, *Qualitative Research in Sport, Exercise and Health*, 11(4), 589-597.
- Brough, M., Gorman, D., Ramirez, E., & Westoby, P. (2003). Young Refugees Talk About Wellbeing: A Qualitative Analysis of Refugee Youth Mental Health from Three States. *Australian Journal of Social Issues*, 38(2). 193-203.
- Camfield, L., & Skevington, S. M. (2008). On subjective well-being and quality of life. *Journal of Health Psychology*, 13, 764–775.
- Carswell, K., Blackburn, P., & Barker, C. (2011). The Relationship Between Trauma, Post-Migration Problems and the Psychological Well-Being of Refugees and Asylum Seekers. *International Journal of Social Psychiatry*, 57(2), 107–119.
- Casimiro, S., Hancock, P. and Northcote, J. (2007). Isolation and Insecurity: Resettlement Issues Among Muslim Refugee Women in Perth, Western Australia. *Australian Journal of Social Issues*, 42: 55-69.
- Colic-Peisker, V. & Tilbury, F. (2007). Integration into the Australian Labour Market: The Experience of Three “Visibly Different” Groups of Recently Arrived Refugees, *International Migration*, 45(1), 59-85.
- Colic-Peisker, V. & Walker, I. (2003). Human capital, acculturation and social identity: Bosnian refugees in Australia. *Journal of Community and Applied Social Psychology*, 13(5), 337-360.
- Correa-Velez, I., Barnett, A., & Gifford, S. (2015). Working for a Better Life: Longitudinal Evidence on the Predictors of Employment Among Recently Arrived Refugee Migrant Men Living in Australia. *International Migration*, 53(2), 321–337.

- Datta, N., Constant, L., Thawesaengkulthai, N., & Acheson-Field, H. (2020). Addressing Employment Obstacles for Young Syrian Refugee Women. *Job Notes World Bank*, 12.
- Davidson, G., K., & Schweitzer, R. (2008). Review of refugee mental health and wellbeing: Australian perspectives. *Australian Psychologist*, 43(3), 160-174.
- Department of Home Affairs, Australian Government. (2020). *Fact sheet- Australia's refugee and humanitarian program*. Retrieved from <https://www.homeaffairs.gov.au>
- Diener, E., & Ryan, K. (2009). Subjective Well-Being: A General Overview. *South African Journal of Psychology*, 39(4), 391–406.
- Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235.
- Due, C., Callaghan, P., Reilly, A., Flavel, J., & Ziersch, A. (2020). Employment for Women with Refugee and Asylum Seeker Backgrounds in Australia: An Overview of Workforce Participation and Available Support Program. 1-19.
- Due, C., de Heer, N., Baak, M., & Hanson-Easey, S. (2018). "At night he cries from dreams": Perceptions of children's psychological distress and wellbeing amongst parents with refugee or asylum seeker backgrounds in Australia. *Australian Psychologist*, 1-12.
- Feeney, A. (2000). Refugee Employment and Local economy. *The Journal of the Local Economy Policy Unit*, 15(4), 343–349.
- Finney, C., & Smith, M. (2002). Problems refugees face when accessing health services. *New South Wales Public Health Bulletin*, 13(7), 161–163.
- Fleay, C., Hartley, L. and Kenny, M.A. (2013). Refugees and asylum seekers living in the Australian community: the importance of work rights and employment support. *Australian Journal of Social Issues*, 48, 473-493.

- Fozdar, F., & Hartley, L. (2013). Refugee Resettlement in Australia: What We Know and Need to Know. *Refugee Survey Quarterly*, 32(3), 23-51.
- Fozdar, F., & Torezani, S. (2008). Discrimination and Well-being: Perceptions of Refugees in Western Australia. *International Migration Review*, 42(1), 30-63.
- Gartley, T. & Due, C. (2017). The interpreter is not an invisible being: a thematic analysis of the impact of interpreters in mental health service provision with refugee clients. *Australian Psychologist*, 51(1), 31-40.
- Ghanim, D. (2009). *Gender and Violence in the Middle East*. Westport, CT. 265-449.
- Guruge, S., Roche, B., & Catallo, C. (2012). Violence Against Women: An Exploration of the Physical and Mental Health Trends among Immigrant and Refugee Women in Canada. *Nursing Research and Practice*, 1-15.
- Hankivsky, O. & Cormier, R. (2009). *Intersectionality: Moving Women's Health Research and Policy Forward*. Vancouver: Women's Health Research Network.
- Hassan, G., Kirmayer, L., Mekki-Berrada, C., Chammay, R., DevilleStoetzel, J. B, et al., (2015). Culture, Context and the Mental Health and Psychosocial Wellbeing of Syrians - A Review for Mental Health and Psychosocial Support Staff Working with Syrians Affected by Armed Conflict. *UNCHR*.
- Hoang, T., Le, N., & Tran, T. (2018). Women's Employment and Well-Being of Children Under 5 Years in Vietnam. *Asia Pacific Journal of Public Health*, 30(8), 708–716.
- Hocking, D., Kennedy, G., & Sundram, S. (2015). Mental disorders in asylum seekers: the role of the refugee determination process and employment. *The Journal of Nervous and Mental Disease*, 203(1), 28–32.

- Hutchinson, M., & Dorsett, P. (2012). What does the literature say about resilience in refugee people? Implications for practice. *Journal of Social Inclusion*, 3(2), 55-78.
- Kamalkhani, Z. (2001). Recently Arrived Muslim Refugee Women Coping with Settlement. In A. Saeed & S. Akbarzadeh (Eds.), *Muslim Communities in Australia*, (pp.97-115). Sydney: University of New South Wales Press.
- Krahn, H., Derwing, T., Mulder, M. & Wilkinson, L. (2000). Educated and Underemployed: refugee integration into the Canadian labour market. *Journal of International Migration and Integration*, 1(1), 59-84.
- Li, S.S.Y., Liddell, B.J. & Nickerson, A. (2016). The Relationship Between Post-Migration Stress and Psychological Disorders in Refugees and Asylum Seekers. *Current Psychiatry*, 82(18).
- Lindencrona, F., Ekblad, S., & Hauff, E. (2008). Mental health of recently resettled refugees from the Middle East in Sweden: the impact of pre-resettlement trauma, resettlement stress and capacity to handle stress. *Social Psychiatry and Psychiatric Epidemiology*, 43(2), 121–131.
- Mccarthy, C., & Marks, D. (2010). Exploring the Health and Well-being of Refugee and Asylum Seeking Children. *Journal of Health Psychology*, 15(4), 586–595.
- Mehran, G. (2003). The Paradox of Tradition and Modernity in Female Education in the Islamic Republic of Iran. *Comparative Education Review*, 47(3), 269-286.
- Meyrick, J. (2006). What is Good Qualitative Research? : A First Step towards a Comprehensive Approach to Judging Rigour/Quality. *Journal of Health Psychology*, 11(5), 799–808.

- Nilsson, J., Brown, C., Russell, E., & Khamphakdy-Brown, S. (2008). Acculturation, Partner Violence, and Psychological Distress in Refugee Women From Somalia. *Journal of Interpersonal Violence, 23*(11), 1654–1663.
- Ozturk, L., Serin, V. Z., & Altinoz, H. (2019). Challenges and Obstacles for Syrian Refugee Women in the Turkish Labor Market. *Societies, 49*(9), 2-10.
- Porter, M. & Haslam, N. (2005). Predisplacement and Postdisplacement Factors Associated with Mental Health of Refugees and Internally Displaced Persons: A Meta-analysis. *American Medical Association, 294*(3), 1-8.
- Renzaho, A.M.N., & Dhingra, N. (2017). Addressing the needs of Syrian and Iraqi refugees in the Nepean Blue Mountains region: A formative assessment of health and community service needs. Penrith: Wentworth Healthcare Limited.
- Rizkalla, N., Arafa, R., Mallat, N., Soudi, L., Adi, S., & Segal, S. (2020). Women in refuge: Syrian women voicing health sequelae due to war traumatic experiences and displacement challenges. *Journal of Psychosomatic Research, 129*, 109-909.
- Silbermann, M., Daher, M., Kebudi, R., Nimri, O., Al-Jadiry, M., & Baider, L. (2016). Middle Eastern Conflicts: Implications for Refugee Health in the European Union and Middle Eastern Host Countries. *Journal of global oncology, 2*(6), 422–430.
- Silove, D., Ventevogal, P., & Rees, S. (2017). The contemporary refugee crisis: an overview of mental health challenges. *World Psychiatry, 16*(2):130-139.
- Slewa-Younan, S., Uribe Guajardo, M., Yaser, A., Mond, J., Smith, M., Milosevic, D., Smith, C., Lujic, S., & Jorm, A. (2017). Causes of and risk factors for posttraumatic stress disorder: the beliefs of Iraqi and Afghan refugees resettled in Australia. *International Journal of Mental Health Systems, 11*(1), 4.

- Syed, P., & Murray, P. (2009). Combating English Language Deficit: the labour market experiences of migrant women in Australia, *Human Resource Management Journal*, 19(4), 416.
- Taylor, J. & D. Stanovic (2005) Refugees and regional settlement: balancing priorities. Brotherhood of St. Laurence, Fitzroy, VIC.
- Tomlinson, F. (2010), Marking Difference and Negotiating Belonging: Refugee Women, Volunteering and Employment. *Gender, Work & Organization*, 17(1), 278-296.
- Tracy, S. (2010). Qualitative Quality: Eight “Big-Tent” Criteria for Excellent Qualitative Research. *Qualitative Inquiry*, 16(10), 837-851.
- Triggs, G. (2016). Human Rights and the Overreach of Executive Discretion: Citizenship, Asylum Seekers, and Whistleblowers. *Macquarie Law Journal*, 16(3), 3-16.
- UNHCR (2020). *UNHCR Resettlement Handbook*. Retrieved from <https://www.unhcr.org/en-au/protection/resettlement/4a2ccf4c6/unhcr-resettlement-handbook-country-chapters.html>.
- UNHCR. (2016). *Global Trends in Forced Displacement in 2016*. Retrieved from <http://www.unhcr.org/globaltrends2016/>.
- What is a Refugee? Definition and Meaning | USA for UNHCR. (2020). Retrieved 16 July 2020, from <https://www.unrefugees.org/refugee-facts/what-is-a-refugee/>
- World Health Organisation (2012). Definition of Wellbeing. Retrieved 16 July 2020, from <https://www.who.int/about/who-we-are/constitution>
- World Health Organisation. (2012). Definition of Health. Retrieved 18 July 2020, from <https://www.who.int/about/who-we-are/health>

Ziersch, A. & Due, C. (2018). A mixed methods systematic review of studies examining the relationship between housing and health for people from refugee and asylum seeking backgrounds. *Social Science & Medicine*, 213, 199-219.