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Housing and health for people with refugee- and asylum-seeking backgrounds: a photovoice study in Australia

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**ABSTRACT**

Housing is a social determinant of health, and previous research has linked housing with health for the general population. Less research has explored this relationship for people with refugee or asylum seeker backgrounds in resettlement countries. This article reports on findings from the photovoice component of a larger study exploring housing and health for refugees and asylum seekers in South Australia. Participants were 11 refugees and asylum seekers who participated in a photovoice exercise, taking photographs of their housing and neighbourhood and then discussing these in an interview, with verbal data analyzed thematically. Participants identified several elements of housing that affected health, specifically the following: gardens, physical condition, space, layout and privacy and, in relation to neighbourhood, safety, green spaces and proximity to services. Cutting across these themes were affordability, security of tenure and agency which in turn affected ontological security. The article concludes that consideration of ways to promote ontological security in housing should be a critical component of resettlement policies.

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Photovoice; refugees; housing; health

**Introduction**

Previous research has identified a link between housing and health, with housing recognized as a key social determinant of health (Baker \textit{et al.}, 2014; Marmot, 2000; World Health Organisation (WHO, 2011)). Importantly, ‘healthy housing’ goes beyond just a physical shelter – as the World Health Organisation argues: ‘to have a home, a place which protects privacy, contributes to physical and psychological well-being and supports the development and social integration of its inhabitants’ (Bonnefoy, 2007, p. 413). Housing and home are therefore linked to health and well-being through the importance of physical shelter as well as elements such as agency
and control, all of which contribute to ontological security (Easthope et al., 2015; Giddens, 1991). However, housing and its relationship to health and well-being is less explored for people with refugee and asylum seeker backgrounds, and only a small amount of this research has been conducted in resettlement countries (see Ziersch & Due, 2018 for review of this literature). In order to explore this gap in the literature, this article draws upon the photovoice component of a larger project concerning housing and health and well-being for refugees and asylum seekers in South Australia, Australia (Ziersch et al., 2017; Ziersch & Due 2018). Specifically, this article addresses two research questions: 1) What are the housing experiences of people with refugee and asylum seeker backgrounds in South Australia and how do this group of people perceive the impact of housing on their health and well-being; and 2) What are the challenges and benefits associated with a photovoice exercise in relation to gaining information about issues such as housing for groups of people who could be considered ‘vulnerable?’ We note here that the terms ‘refugee’ and ‘asylum seeker’ are used to refer to people who meet the criteria for refugee status as defined by the United Nations High Commissioner for Refugees, and those still waiting for their claims to be assessed, respectively. However, we acknowledge the limitations associated with these terms in describing only one aspect of identity.

**Housing, ontological security, and health and well-being**

Housing and home are typically defined as both material and symbolic spaces (Easthope, 2014), representing both physical shelter and spaces associated with meaning (McCarthy, 2020). Research has long recognized that, understood in this way, housing can facilitate ontological security – that is, a sense (or lack thereof) of identity and constancy in relation to self, social and physical environments (Giddens, 1991). Ontological security as derived from housing has also been closely linked with agency and control – particularly in relation to those in precarious housing who lack some autonomy in their home, as compared to those whose housing is more stable or those who own their own homes (Saunders, 1990). In turn, ontological security – including that associated with housing – has been linked to health and well-being, further demonstrating the relationship between the two (Easthope et al., 2015; Fozdar & Hartley 2014).

As noted, home ownership has previously been seen as more likely to lead to ontological security than rental accommodation or other forms of housing due to increased agency and control derived from owning a house (Saunders, 1990) – although research suggests that choice of neighbourhood may be the primary consideration for people from marginalized ethnic backgrounds for whom safety is particularly important (Ortiz & Zimmerman, 2013). On the other hand, precarious housing – defined by Mallett et al. (2011) as that which comprises at least two of the following elements: (un)suitability, (un)affordability and (lack of) security of tenure – threatens ontological security by decreasing agency and control over housing including choice of neighbourhood. The threats from precarious housing are also mediated by age, gender, ethnicity, culture and personal circumstances (Ziersch et al., 2017; Ziersch & Due 2018; Foster et al., 2011). Research suggests that many people with
refugee and asylum seeker backgrounds in resettlement countries such as Australia live in housing with insecure tenure (Ziersch et al., 2017), and therefore, face threats to agency and control and in turn ontological security – with compounding disadvantage exacerbating this relationship. However, this remains a relatively unexplored area in the literature, with little understanding of the effect of suitability, affordability or security of tenure on the links between either the physical or symbolic aspects of housing and the health and well-being of refugees and asylum seekers, as discussed further below.

Housing and health and well-being for refugees and asylum seekers

People from refugee and asylum seeker backgrounds constitute a marginalized and often vulnerable section of the global community for whom experiences of violence, trauma and dislocation lead to increased risk of poor health and well-being (Fazel et al., 2005; Fozdar & Hartley, 2014; Hollifield et al., 2002). Positive health and well-being outcomes post-resettlement rely on a range of factors including engaging in education, finding employment, building social connections and accessing services (Ager & Strang, 2008; Phillimore & Goodson, 2008), as well as housing (see especially Marmot, 2005).

Australia (along with many other countries of resettlement) provides some level of housing support to refugees and asylum seekers, although this is often dependent on visa status, with greater protections for those on permanent visas than those on temporary visas. Moreover, while Australia has a generally high standard of housing relative to other parts of the world, a ‘hidden fraction’ of people live in housing in a poor condition that negatively impacts their health and well-being (Baker et al., 2014). This may include people from refugee and asylum seeker backgrounds, with previous literature identifying a range of housing issues in both Australia and other high income resettlement countries, including cost, lack of appropriate housing, language barriers, a lack of familiarity with housing processes, cultural appropriateness of housing, challenges securing housing, experiences of discrimination, as well as the likelihood of newly arrived migrants living in disadvantaged ‘gateway’ suburbs (Beer & Foley, 2003; Easthope et al., 2018; Flatau et al., 2014; Phillips, 2006; Rose, 2001).

Securing housing and creating home are particularly important elements of ensuring the well-being of newly arrived refugees and asylum seekers given that – by definition – they have experienced dislocation and separation from their previous homes (Fozdar & Hartley, 2014). However, mirroring more general research as noted above, our broader project found significant issues with housing affordability, suitability and security, with these issues interacting to affect both mental and physical health (Ziersch et al., 2017; Ziersch & Due 2018). While these issues are found in research with general populations, they are particularly distressing for refugees and asylum seekers given prior exposure to trauma and dislocation. Moreover, these issues are notably salient for asylum seekers who typically have less capacity to afford suitable housing due to lower benefit entitlements, challenges securing housing because of a lack of paperwork, identity documents, and local rental references, difficulties signing leases due to short term visas, and fear of repercussions for their visa applications if
they raise housing issues with landlords. Importantly, for both refugees and asylum seekers, there are cumulative impacts related to these issues such that health and well-being outcomes from negative experiences of home are amplified (Hynie, 2018).

Beyond these issues, however, it is important to consider ontological security as an overarching framework in relation to experiences of housing and its relationship to health and well-being for people with refugee and asylum seeker backgrounds. Ontological security is of particular importance for this group of people given the likelihood that they have experienced heightened levels of threat to their personal safety previously – as well as ongoing uncertainty particularly for those on temporary visas – such that ontological security is already compromised (Hynes, 2003). Correspondingly, it is likely that people with refugee and asylum seeker backgrounds will face significant challenges addressing ontological security associated with insecure housing. These challenges have particular relevance for those living in rental accommodation, with research noting that those living in insecure housing have to find alternative ways of making ‘home’ (Easthope, 2014). For example, possessions may play a key role in the absence of security of tenure, and ‘homely’ practices such as cooking and hospitality can become important as representations of home (Hurdley, 2013).

Overall, however, the relationship between housing and health and well-being is not well understood for people with refugee – and particularly asylum seeker – backgrounds. As such, and as noted above, this research aimed to explore the housing experiences of people with refugee and asylum seeker backgrounds in South Australia, including in relation to the ways in which housing may affect health and well-being for this group.

**Photovoice as a research method**

Undertaking research with people from refugee and asylum seeker backgrounds presents a range of specific methodological and ethical issues, which have been well documented in the literature (Due et al., 2014; Hugman et al., 2011; Jacobsen & Landau, 2003; Ziersch et al., 2017). In particular, psychological trauma, language and literacy skills, challenges gaining informed consent, power imbalances, and concerns about the use of information gained during research, all interact to increase the need to be particularly mindful of methodological and ethical considerations when conducting research with this population (Block et al., 2013; Gifford et al., 2007). Photovoice has been used in a broad range of research with people with refugee and asylum seeker backgrounds as a way of overcoming some of these challenges, particularly through addressing power imbalances and allowing participants to discuss issues of importance (Catalani & Minkler, 2010; Due et al., 2014, 2016; Fozdar & Hartley, 2014; Gifford et al., 2007; Green & Kloos, 2009; Lenette & Boddy, 2013; Oh, 2012; Vaughan, 2016). Indeed, a central premise of photovoice is that photographs have the capacity to offer information and perspectives beyond that of a qualitative interview (Cooper & Yarbrough, 2010; Murray & Nash, 2017).

Photovoice is a visual research method that involves using participant-generated photographs to represent and explore participants’ perspectives in relation to a given
topic (Wang & Burris, 1997), including health (Cooper & Yarbrough, 2010; Kingery et al., 2016; Mizock et al., 2014). As such, photovoice is often used in research with applied outcomes, and particularly with oppressed and/or disenfranchised groups of people (Bukowski & Buetow, 2011; Dassah et al., 2017), including those from culturally and linguistically diverse (CALD) backgrounds (Adekeye et al., 2014; Graziano, 2011; Haque & Eng, 2011; Haque & Rosas, 2010; Oh, 2012; Rodriguez-Jimenez & Gifford, 2010; Stevens, 2010; Sutherland & Cheng, 2009).

The process of photovoice varies, but the key steps typically include training/information provision, taking photographs, choosing images, and discussing those images in one-on-one interviews and/or focus groups (Wang, 1999; Wang & Burris, 1997). In some instances photovoice is used as an intense method that involves working with participants over multiple sessions (Due et al., 2016; Gifford et al., 2007), while others have used a more succinct process (Gentry & Metz, 2017). While photovoice has numerous benefits, it also raises potential ethical issues that are distinct from other qualitative methodologies. These relate in particular to participant recruitment, privacy and the use of images (Creighton et al., 2018; Wang & Redwood-Jones, 2001). The potential benefits of photovoice, together with methodological challenges and ethical considerations, are discussed throughout this article, with the aim of exploring the challenges and benefits of photovoice in relation to exploring housing for people with refugee and asylum seeker backgrounds.

Method

The broader project from which this article derives involved mixed-methods research that aimed to explore the intersections between housing, health and well-being, and social inclusion for refugees and asylum seekers in South Australia, Australia. We conducted a survey with 423 participants, interviews with service providers and refugees and asylum seekers and a digital storytelling process, as well as the photovoice exercise that forms the basis of this article.

In relation to the photovoice component, participants were recruited through the survey, which included a question ascertaining interest in participating in a follow-up interview or photovoice, and requesting contact details if they were. Participants were then contacted via telephone, and decisions about which of these participated in the photovoice process (as compared to interview only participants) were made on the basis of a range of factors including purposive sampling for gender, visa status and country of origin, and level of interest in photovoice as expressed by participants when they were contacted. Where participants had indicated in the survey that their level of English was not strong, they were contacted with the assistance of an interpreter in the language in which they completed the survey (Dari, Farsi, Swahili, Nepali or Arabic).

A total of 15 people were approached to participate, with 11 undertaking the photovoice exercise. Of the four participants who did not ultimately participate, one participant changed their mind and did not take photographs, while in three instances during the process of ensuring informed consent the researcher felt participants were unable to understand the purpose and requirements of the research, or were
experiencing other issues (related to mental health) which meant it was considered unethical to continue the photovoice process. The final 11 photovoice participants included six people from refugee backgrounds (holding permanent protection visas) and five asylum seekers (awaiting the determination of their claim for refugee status). Of the refugee participants, three were women and two men, from Africa, the Middle East and South East Asia. Asylum seekers (two women and three men) were all from the Middle East. In this article, we use pseudonyms to describe participants and include their gender, broad continent (defined as Africa, Middle East, South East Asia) and visa status (refugee, asylum seeker) for any direct quotes. In terms of housing situation, one participant had a mortgage on their house, one lived in a house their father owned, and all others were renting in the private rental market.

It is important to highlight additional ethical considerations when undertaking research with people with refugee and asylum seeker backgrounds. For the current project, ethics approval was secured from [removed for anonymity]. Participants were given several opportunities to choose not to participate, the project was explained in detail with offers of interpreters, and participants’ consent included an image release form that provided several options for the publication of images – ranging from use in research and presentations through to public display, with an option to decline consent for image release. Seven participants gave consent for their images to be used in all of the prescribed ways, while four participants declined to release their images beyond the direct research team. Project documentation was translated into key language groups as noted above. Furthermore, the project was conducted with the assistance of a working group comprised of people from refugee and asylum seeker backgrounds, to ensure that the project was conducted in partnership with communities. The working group assisted the researchers to oversee the broader project, particularly in relation to ethical considerations and the appropriateness of research instruments.

Once participants had provided written consent, they were asked to take photographs of their house and neighbourhood to discuss face-to-face at a time and location that was convenient, with an interpreter if the participant chose (with two participants taking up this offer). The interviews lasted up to 84 minutes ($M = 49.9\text{mins}$). The photovoice exercise took place between August and December 2016.

Participants were asked to take photographs of aspects they did or did not like about their housing and neighbourhood. In practice, this process varied between participants. Eight participants took photographs using their own devices, while three participants used the researcher’s phone at the time of interview because they had not taken photographs prior to the interview. One participant brought existing photographs taken of their previous housing to discuss. Another participant took photos during the interview while the researcher walked with the participant around their house. Where participants took photographs prior to interviews, they were typically given one month between the study being explained and the interview occurring. Participants were then invited to talk about their photos and also asked additional questions about their housing and neighbourhood experiences since arriving in Australia (e.g. their housing journey in Australia, what they looked for in housing,
how they had found housing in the past, whether they were satisfied with their housing and whether they felt their housing affected their physical and/or mental health).

In relation to data analysis, the recorded interviews were transcribed verbatim and this data forms the basis for this article, together with the photographs which are provided as context for the verbal data. Braun and Clarke’s (2006) approach to thematic analysis was used to analyze the verbal data, which involves six steps: transcription, reading/familiarization, coding, searching for themes, producing a thematic map, naming and defining themes and finalizing the analysis through writing. Key themes are presented below, together with photographs where these provided important additional information relating to housing and health and well-being, or where discussions surrounding the photographs offer nuances relating to these relationships.

Results

This section outlines key themes relating to housing, neighbourhood and health and well-being that were identified through the photovoice process. Housing related themes identified were gardens and outside spaces; poor housing condition; space, layout and privacy; and furnishings and homemaking practices. Neighbourhood-related themes identified were safety, green spaces, and proximity to services. Issues of affordability and insecurity of tenure (private rental status) were not explicitly represented in the photographs; however, these aspects were frequently discussed by participants. In particular, affordability and insecurity of tenure were seen as interacting with (temporary) visa status and contributed to an absence of control over housing issues, ongoing ontological insecurity, and the adverse effect these issues have on physical and mental health. These elements are discussed throughout the themes below.

Housing

Gardens and outside spaces

Participants indicated that gardens were an important component of their housing that facilitated ontological security by offering private refuge and a safe space for children to play. Aspects of gardens were also described as a threat to (the restoration of) ontological security – most notably as a result of the lack of control that participants saw when they were required to manage large backyards without adequate resources.

Common amongst participants was a concern with the condition and ongoing maintenance of large yards, which they described as having a range of impacts on their sense of health and well-being in their homes. For example, Naweed (Middle East, asylum seeker) took several photos of his garden, with Figure 1 showing overgrown trees and lawn and Figure 2 showing the front façade of his house where an active beehive prevents access. Naweed noted the large overgrown trees and the way they blocked light from coming into the house: ‘At the moment my wife’s [nieces], they need the sunshine but unfortunately we haven’t got any sunshine because so many trees here and only two small windows’.
In relation to Figure 2, Naweed expressed frustration that despite his requests to remove the beehive, his landlord had not done so: 'For one and a half years we were suffering from the bees. All the time you – can you see like the… there is a bee’s house'. Naweed’s sense of powerlessness was compounded by the work restrictions associated with his temporary visa, which limited his financial capacity to move somewhere more suitable. The precarity of his situation was also illustrated by his inclusion of an image of another aspect of outdoor spaces – specifically the location of his letterbox. Sharing a photograph of this (see Figure 3), he revealed that he was awaiting documents from the Afghani Embassy that were important to his case to obtain a refugee visa. However, he was really worried because said his mail was often delivered to the wrong box because of where it is situated on the intersection of streets. He said: ‘if I can get like a permanent visa I could work and make a good house for myself and be relaxed, peaceful, but now many, many hassles’.

Figure 1. Overgrown trees which block light from the house.

Figure 2. An active beehive which the landlord will not remove.
Similarly, Banou, a refugee from the Democratic Republic of Congo and single mother with four children, took several photographs of her yard, which she described as overgrown and difficult to maintain as well as an unsafe space for her children to play – she felt she had very little control over this aspect of her housing (Figure 4).

As with Naweed, and Banou, Zarin (Middle East, asylum seeker) took photographs to show what he described as a ‘huge’ backyard, which he found difficult to manage. Zarin noted the effort needed to manage the yard, which he said placed a strain on his time and resources: ‘Everything old. Every day we have to deal with the leaking of some things and also we have a really, really huge back yard. It’s taking time to gardening […] Also we always have really high water bills because we have to take care of the garden’. Despite the stress associated with these compounding maintenance issues, Zarin was also able to seek solace in his large garden: ‘Sometimes, especially in the evenings sometimes you have depressed feeling sometimes. It’s good to sit

Figure 3. The position of the letterbox is a symbolic representation of lack of agency and control when waiting for notification about a visa application.

Figure 4. Unmanageable backyard which is unsafe for children to play in.
somewhere in the garden and to just watch the trees and have some air. That’s why we don’t like to go to something like a unit and also, you know, we have a good privacy in this house’.

Other participants similarly highlighted the positive effect that their garden had on their health and well-being through their ability to cultivate a private refuge and source of satisfaction and – in contrast to the accounts above – a sense of agency. For example, Nikta (Middle East, asylum seeker), who had been in Australian immigration detention, took several photographs of the courtyard of her new unit (e.g. see Figure 5), and said: ‘Both [courtyards] is private, has a door and – yeah, it’s completely your area, you can do whatever you want in this one’.

The experiences faced by many refugees and asylum seekers, including experiences of detention, can emphasize the importance of privacy, which in this case came from Nikta’s private courtyard space. In addition, the sense of well-being Nikta gained from her outside spaces was new, as she had lived in large apartment complexes in Iran: ‘…living on the land is a new thing for me and [I do] gardening. That’s why I have a lot of things that I didn’t experience [before]’. Nikta and her husband also discussed issues finding housing due to the lack of identity documents and paperwork they had as asylum seekers, and thus Nikta noted that her garden offered a sanctuary in the face of significant external pressures related to her status as an asylum seeker.

Lastly, Esron (Africa, refugee, no image release), an Australian citizen, also discussed the importance of having a yard, noting that he had wanted to buy an older property rather than a newly built one, since newly built properties often had small yards. He specifically noted the ways in which having a yard influenced his health and well-being, saying he wanted: ‘….an existing property with big back yard where I can plant vegetables and I can keep chooks, just to make my life happier’.

Overall, participants’ experiences of gardens reflected varying degrees of agency and control and associated impacts on health and well-being. Some participants described their gardens as a key site of powerlessness concerning housing maintenance and interactions with landlords – resulting in stress and frustration that compounded the stressors they already faced as refugees and asylum seekers. Others drew comfort and a sense of control from their gardens, with gardens particularly important for the privacy they offered – something many refugees and asylum seekers have been deprived of during their journeys to a resettlement country such as Australia.
Housing condition

A number of participants took photographs of the condition of the house and noted in interviews that condition affected their health and well-being with particular emphasis on agency (or lack thereof) in terms of their ability to address issues and/or make improvements to the house. For example, Banou (Africa, refugee), took several photographs of elements inside her house, including her oven and the ceiling in the garage (see Figures 6 and 7 below). Banou noted the importance of the oven given her responsibility for cooking and preparing food for a large family; however, neither the oven nor the hotplates functioned appropriately: ‘...this one and this one and this one I’m not using, and the oven I’m not using. I’m using only one side [of the hotplate]’. Banou said her landlord was unwilling to repair both the oven and the leaking ceiling, which Banou worried was unsafe for her children.

Housing condition – and specifically here oven functionality – was particularly important for Banou since she was a single mother with existing health issues. Banou was facing eviction from her house due to her lease drawing to an end, but noted she was unable to find another house due to lack of support in Australia, with these factors compounding to limit Banou’s sense of agency in relation to housing and her capacity to restore a sense of ontological security (for example, by limiting her ability to care for her family in ways congruent with her cultural background).

Figure 6. Broken oven which the landlord hasn’t fixed, and which can’t be used to cook for family.
Nikta (Middle East, asylum seeker) similarly showed photographs of the poor condition of her previous house (see Figure 8), saying: ‘... I [was just] a bit concerned about that area that is a bit damp, just get bacteria or things like that...’.

Conversely, Nikta was mostly happy with her current house, although she indicated that ultimately affordability issues prevented her from moving again. Her

**Figure 7.** Leaking roof which is unsafe for children.

**Figure 8.** Damp in previous house which could lead to health issues.

Nikta (Middle East, asylum seeker) similarly showed photographs of the poor condition of her previous house (see Figure 8), saying: ‘... I [was just] a bit concerned about that area that is a bit damp, just get bacteria or things like that...’.

Conversely, Nikta was mostly happy with her current house, although she indicated that ultimately affordability issues prevented her from moving again. Her
asylum seeker status in particular affected her ability to find suitable housing, as she did not have work rights and received lower levels of income support than the rest of the Australian population.

In this way, as with gardens, agency and control were identified as mediators of housing condition and health. The lack of willingness by landlords to fix items that were broken or attend to physical issues such as mould led to participants perceiving a lack of control over their housing, and rendered them key sites of powerlessness for people who already frequently lacked power in their lives. Affordability issues also led to an inability to move houses despite poor condition, and compounded this lack of agency over housing, particularly for those in private rental accommodation. Notably, affordability was a key issue for many of the participants who faced significant external pressures including lack of work rights for asylum seekers and trauma associated with refugee or asylum seeker status such as experiences of detention.

**Layout, space, and privacy**

Layout, space and privacy were all identified as important elements of housing. For example, Nikta (Middle East, asylum seeker) shared a photograph of her previous house, showing a living room brightly lit with natural light, where she and her husband slept (Figure 9). Nikta indicated that the absence of blinds to make the space completely dark was problematic due to experiences of torture (including related to light) that Nikta’s husband sustained in their country of origin.

Nikta described the impact of this on her husband’s already poor mental health, as well as her own:

> Our [previous] house I can tell you it’s [the relationship between housing and health] really important because when we have been there we didn’t have the right space. When you are sensitive with light and the house doesn’t have blinds and you can’t get it dark,

![Figure 9](image.png)

*Figure 9.* No curtains to make the room dark enough which disrupts sleep and evokes memories of trauma.
you can’t get to sleep. My husband, he was sleepless. Like 4am he was just sitting and
couldn’t sleep anymore […] Because my husband has depression - I have too - because
he used to be - what do you call it? Prisoner, a political prisoner, and when the sharp
light coming to him it’s like when you are in the confidential [interrogation] - very
strong light coming to your eyes, he get a bit panicky.

As noted by Nikta, the inability to make the room dark – and therefore the neces-
sity to try and sleep in a light room – had significant negative effects on her hus-
band’s mental health as they reminded him of the torture he had sustained prior to
coming to Australia.

Banou (Africa, refugee) and Zarin (Middle East, asylum seeker) also discussed lay-
out in relation to small spaces that were unsuitable for their living practices (Figures
10 and 11), including not having space to eat together (in the case of Banou).

Similarly, Menah (Middle East, refugee), discussed issues of layout, saying that her
house was too small for her and her family, and that this affected her health:
‘sometimes when we at home we not feeling good too much […] like someone put a
pillow on my face and we can’t breathe like this’. Again, experiences of trauma asso-
ciated with the refugee experience were particularly salient for Menah, where a small
space meant more than simply inconvenience, but exacerbated experiences of trauma.

In relation to privacy, a key concern highlighted was that of noise. For example, Shabir
(Middle East, asylum seeker), who lived in a share house, photographed a connecting wall
between his and the neighbour’s house, as well as the floorboards of his home (Figure 12),
and noted: ‘Whatever we’re going to do then the neighbours next door are going to hear. Even they’re going to be annoyed even though we could be annoyed, or they could be annoyed because when we are walking and talking, they hear’.

Shabir noted that these issues were problematic: ‘They’re going to affect your social and physical and psychology, which is unhealthy’. Again, agency represented a key pathway to health consequences, with Shabir indicating that because he was on a temporary visa, he had limited options when applying for and obtaining housing more suitable to his needs: ‘Because we haven’t got any choice. This was available at that time so it’s like “okay, it’s better than nothing.”’ In this regard, the absence of control in relation to housing compounded existing powerlessness resulting from visa limitations.

For other participants, however, the space in their house led to satisfaction. Lorena (Middle East, refugee) took a range of photos of her house emphasizing the generous space of the rooms, which she had carpeted in line with Afghani cultural practice.
She indicated that: ‘That’s why we prefer to live somewhere that’s big and then – I don’t know, it’s our nature; when it’s big you feel comfortable […] We have a saying, we say that when the space is big you can breathe easily’ (Lorena; no image release provided).

**Furnishings and homemaking practices**

Participants’ furnishings and homemaking practices were important to their experiences of housing, and appeared to affect their health and well-being. For some, furnishings and other homemaking practices facilitated agency and helped to restore a sense of ‘being at home’ – a key aspect of ontological security, particularly for those in precarious housing. For example, Zafar (Middle East, refugee), who had lived in a refugee camp prior to coming to Australia, spoke of the images of his house with pride (e.g. Figure 13). He said: ‘This is my first time in my whole of my life that I live in a house like this with furniture […] I just saw this picture in the movies and I never could imagine that I’m going to have – I’m going to live in a house like this’.

Zafar specifically indicated that having space in his house was positive for his health and well-being, saying: ‘I am happy in this house because I have everything here’.

Similarly, despite the concerns – discussed above – that Banou had with the physical condition of her house and garden, she photographed a large sofa as a representation of a positive element of her housing, due to her ability to choose furniture which she liked (see Figure 14). This large sofa can also be seen as a symbol of family unity and, in contrast to other areas of the house, as a space of safety and comfort.

In this way, some participants were able to demonstrate agency through their choice of furnishings – an aspect of rental accommodation that could be controlled by participants. In particular, furnishings were able to offset poor housing condition to provide a symbolic sense of home.

**Neighbourhood location**

Participants’ discussions of their photos also highlighted pathways between location of housing and health. This key issue in this regard was safety, with other aspects including green spaces and position of housing.
Safety was a key concern noted by participants in relation to the location of their housing and health and well-being. Notably no photographs specifically sought to capture this, but the issue of safety was raised in relation to discussing photographs more generally. This speaks to a potential limitation of using photographs to discuss more abstract elements of housing, a point we take up further in the discussion.

Participants highlighted the overall importance of living in a safe neighbourhood, often choosing their neighbourhood at the expense of other housing elements. For example, Zarin (asylum seeker, Middle East), noted that problems with his previous neighbourhood had a particularly negative impact on his health and that of his family – especially after spending time in detention:

> It was a really depressing period of time and, you know, you’d go outside, see people. You know, around [suburb] there are many drunk people and it’s really hard to live like this. At least for us it was really hard […] also when we were in [suburb] it really affected my children.

Despite being happy with the layout and condition of the house that they were renting, Zarin and his family relocated to another neighbourhood due to these neighbourhood concerns. He noted that the house itself had various issues (too small, close to main road), but that he and his wife were prepared to overlook these issues given the peace of mind that their good neighbourhood and neighbours provided:
For us most important is neighbourhood. It’s really important you live somewhere safe. Kids - for example our daughter go to school and back by herself sometimes because she just walks to school and back and it’s really safe. When we were in [area] we never let her do something like this. For sure if we had a brand new house or something better than this, it should be better but right now we are happy because of the suburb, just because of the suburb.

Having trust and confidence in the neighbourhood community also contributed to feelings of belonging and a sense of ontological security. The positive impact that feeling safe had on Zarin and his family’s health and well-being in the neighbourhood he lived in at the time of the interview was in stark contrast to what he and his family encountered in their previous neighbourhood.

Affordability again arose in discussions around location, with some participants unable to live in neighbourhoods of their choice as Zarin had done due to financial constraints. This typically resulted in them living in situations in which they did not feel safe – a particular threat to health and well-being and ontological security given the trauma and fundamental threats to safety that many people with refugee or asylum seeker backgrounds have faced. For example, Armita, an asylum seeker from the Middle East on a temporary visa with no work rights, discussed the negative impact of the location of her house in terms of its proximity to a public housing complex, which she perceived as problematic:

Safe neighbourhood very important because now we have building for housing and the people live there are dangerous people. When [it gets] dark it’s not safe to come outside because the people come drunk and, you know, a lot of problem. Always police comes, ambulance comes. It’s not good place there.

Because of her visa conditions, Armita noted that she was prevented from finding work in order to afford safer and more suitable accommodation, and she was therefore stuck in ongoing experiences of threats to her safety, fundamentally affecting her health and ontological security.

Other elements of neighbourhood – green spaces and proximity to services

A number of other elements of neighbourhood location were highlighted by participants, including green spaces and proximity to services (see figure 15). Nikta (Middle East, asylum seeker), for example, took several photographs of her neighbourhood and said: ‘it’s a very green suburb. We have pharmacy, shopping centre, medical centre, some local shop everything is there. You just walk there and you will see everything’.

Lorena (Middle East, refugee) discussed the positive impact of the location of her house when discussing her photographs (publication permission not granted). Photographs taken from the front of Lorena’s house show a large park with open green spaces and large trees. When discussing the photograph, she said: ‘…a good view… so a lot of trees and a lot of like greenery so I really like it. I don’t like too much when there is no greenery and stuff because I do want to breathe some air and healthy air’.

Esron (Africa, refugee), the only participant to own his own home, also took photographs that depicted aspects of his front yard and street location (publication
Esron discussed the importance of neighbourhood, and specifically tied this to affordability issues when renting:

If you’re paying your rent - there are some suburbs here, they are too expensive and others, they are cheaper and those ones who are cheaper, there are like a lot of issues. For example, in [suburb], if you live in [suburb] you always have stress because it’s ‘oh maybe someone going to hit my child, they’re going to do this, they’re going to do this’. Imagine to live in like a suburb where you feel stressed and…. suburb where you can live a bit better but you cannot - you’re free to live there but you cannot afford the rent. You see, that’s another like issue that impacts health of like the population.

Ersen indicated that he was happy where he was currently living, in the house which he owned: ‘It’s a nice area where I’m living because since I’ve been there I didn’t have any issues,’ and specifically noted the affect this had on his well-being: ‘At the moment where I’m living I feel happy’.

**Figure 15.** Local shops and greenery are important aspects of location.
Discussion

The results of this study indicated that housing affected health and well-being in both positive and negative ways. Across both positive and negative health outcomes, the key aspects of housing identified as having an effect were gardens and outside spaces, the physical condition of the house, space layout and privacy, and the location of the house. Issues of agency in terms of control over housing and affordability issues cut across these domains, affecting health through inability to move from unsuitable housing and little choice or control over housing in general – and this was particularly the case for those on temporary visas. Negative health outcomes were particularly notable where participants indicated that they lacked control or agency, and therefore faced challenges restoring ontological security. Conversely, positive health outcomes often resulted from aspects of housing that participants could exercise some control over, or where they perceived they had agency. Here, we discuss these findings relative to existing literature, noting specifically those aspects that are unique for people with refugee and asylum seeker backgrounds. In addition, we reflect on the use of photovoice in exploring housing as a social determinant of health.

A key theme identified in this research was the effect that gardens and outside spaces were seen as having on participants’ health and well-being – with the nature of these effects dependent on participants’ sense of agency and control. For some participants, gardens offered positive health benefits by allowing them privacy and the opportunity to be outside – and there is a large literature on the positive impact of exposure to green spaces on health and well-being (see Bowler, 2010, for review). This includes a small amount of previous literature concerning gardens and health for people with refugee backgrounds, which notes a positive relationship between gardens and health (e.g. Hartwig & Mason, 2016), including through ability to provide a sense of control (Graham & Connell, 2006), as also found in this study – with gardens also found to be particularly important for those who had experienced trauma. This sense of control appeared to promote ontological security. However, for other participants, gardens were hard to maintain and represented a lack of control over living circumstances, which in turn negatively affected ontological security. Notably, gardens have not featured heavily in previous research on housing and health for this particular population, and as such, photovoice may have helped to elicit this aspect of housing as relevant for refugees and asylum seekers.

Other themes related to housing condition and health were more expected. Specifically, we found that housing condition, layout, space and privacy, and the location of the house, were all seen by participants as having an effect on their health and well-being. In particular, poor housing condition such as mould or appliances which did not work compounded the lack of control and sense of agency which participants already had as a result of constraints due to their visa situation or other structural impediments faced by people with refugee and asylum seeker backgrounds in resettlement countries. In turn, this led to negative health outcomes occurring through multiple pathways (e.g. unable to cook for family; multiple failed dealings with landlords), leading to health effects such as stress, anxiety, and concerns over physical health (e.g. illness from mould). Importantly, where participants did have some control over their housing condition – most notably through furnishings – they
reported positive health outcomes. This reflects previous research with more general populations indicating that people frequently ‘use material culture to establish and reflect a sense of home, comfort and self’ (McCarthy, 2020, p. 17), where home is seen as a practice rather than stable entity (Petridou, 2001). Furnishings are therefore a potential key pathway through which people with refugee backgrounds could build a sense of home and obtain agency over their living situations which are otherwise frequently outside their control.

Layout, space and privacy were also all identified by participants, reflecting our own research and that of others (e.g. Mallett et al., 2011). Key elements here included living spaces which did not meet the needs of participants, spaces which were too small for families to accommodate living practices, noise, and issues of privacy – all of which exacerbated previous trauma contributing to ongoing ontological insecurity. These issues all reflect in some part sensory elements of home where, as Burrell (2014) argues, housing can be seen as a ‘multisensory process’. In the case of participants who had experienced torture and trauma, sensory elements such as noise and light were particularly salient, acting as triggers for memories of trauma. Again, affordability cut across this theme, with participants noting that despite the issues they had with their house they were unable to move due to financial constraints – often as a result of their visa and lack of work rights. Where participants did live in a space that was suitable, they specifically linked this to positive well-being outcomes. As one participant said: ‘… you can breathe easily’.

Finally, the broader location and environment in which the house was located were also seen as affecting health, primarily through perceptions of safety, as well as green spaces, and proximity to services. Neighbourhood factors such as these have been found to affect health and well-being more generally, and also specifically for people from refugee and asylum seeker backgrounds (Mallett et al., 2011). Importantly, feelings of safety in association with neighbourhood (and neighbours specifically) have the ability to ‘unmake’ a home (McCarthy, 2020), and this presents issues for people with refugee and asylum seeker backgrounds for whom the sense of safety afforded by housing is particularly important given contexts of trauma. Safety is also a key component of ontological security, and thus, this facet of location is especially salient when considering housing for this population.

Affordability, insecurity, agency and corresponding effects on ontological security cut across all the elements of housing found in this article. Many participants noted that they had to make compromises in relation to housing – most notably by choosing neighbourhoods at the cost of housing condition. Housing affordability has been identified as a key issue in much of the research concerning refugees in resettlement countries (Ziersch & Due, 2018), exacerbated by visa insecurity. In particular, in this study, those on temporary visas felt least able to improve their housing situations and thus felt particularly powerless, exacerbated by Australian government policies which frequently limit welfare and work rights to asylum seekers. This issue is likely to be mirrored internationally where there are similarly punitive policies for those on temporary visas, including in the United Kingdom (Palmer, 2006; Palmer & Ward, 2007). In contrast, one participant who owned their own home – who was also a citizen – reported satisfaction with his house, resulting from agency arguably as a result of
both home ownership and status as a citizen. A range of existing literature has highlighted the negative effect of uncertainty and lack of ontological security on health and well-being (Strout et al., 2018), and this research reinforces this finding through the effect of uncertainty over housing as a social determinant of health for people with refugee and asylum seeker backgrounds. Moreover, in relation to home ownership, previous research has found that ethnicity moderates the relationship between home ownership and health, such that neighbourhood safety becomes more important than home ownership itself (Ortiz & Zimmerman, 2013).

In relation to methodology, a key advantage of using photovoice was that images allowed participants to communicate aspects of their lives – including housing and health – with more nuance than may have been possible in a traditional interview, and this reflects findings of previous literature (Cooper & Yarbrough, 2010; Murray & Nash, 2017; Rodriguez-Jimenez & Gifford, 2010). However, in many cases, while photographs allowed participants to express difficult to communicate aspects of their housing, the interview component of photovoice was necessary in order to understand the meaning of these elements (e.g. illuminating the different experiences associated with large backyards). Similarly, while in many cases using images facilitated shared meaning and communication between the participants and the researchers, in other cases participants faced challenges capturing abstract concepts associated with the research, such as safety, affordability and insecurity of tenure, which participants discussed in the broader interview but did not capture in their photographs (Ziersch et al., 2017).

In addition to potential issues capturing more abstract elements of housing, this project highlighted several additional methodological issues related to the use of photovoice. For example, as noted in the methods section, two participants used the researcher’s mobile phone to take photographs immediately before the interview and one participant took photographs during the interview because they had not yet taken any when the researcher arrived. This practical issue may have led to fewer photographs of neighbourhoods. These issues were further exacerbated by the use of interpreters and telephone discussions to set up appointments and explain the task. Whilst meeting with participants in person prior to the interview may have facilitated a more thorough understanding of the purpose and requirements of the task, this may have meant several of the participants from this study would not have been included due to constraints involved with meeting in person (e.g. time, availability, childcare, the ability to catch public transport). These issues are also noted elsewhere, with research indicating that a range of factors need to be taken into account when designing photovoice methodologies, including interaction with researchers, relationships with participants, and explaining the purpose of the task (e.g. see Murray & Nash, 2017).

Conclusion

In summary, this photovoice component of the research extends knowledge concerning the links between housing and health for people with refugee and asylum seeker backgrounds. It is well established that insecure or precarious housing affects agency and control and – in turn – ontological security for populations in general. The findings of this article indicate that this relationship is exacerbated for people with
refugee and asylum seeker backgrounds who face compounding disadvantage related to visa status, work rights, previous experiences of detention and torture and trauma, and additional resettlement risk factors, and this is likely to be the case not only in Australia but also internationally (Palmer, 2006; Palmer & Ward, 2007). Participants indicated that a range of housing factors – both material and symbolic – affected their health, with affordability, security of tenure and agency in particular cutting across these elements. Neighbourhood issues were less commonly identified – however, analysis of the interviews frequently suggested that this may be due to difficulties participants faced in photographing more abstract elements of their housing rather than the fact that neighbourhood elements do not affect health. As such, it is possible that a research design which combines participants taking photographs in their own time who are also taking photographs while walking with researchers in neighbourhoods may help to collect data on more abstract elements such as neighbourhood safety. Overall, the findings add further weight to the importance of housing for health for people with refugee and asylum seeker backgrounds, and particularly the importance of control and building ontological security for this group for whom ontological security has been fundamentally challenged.

This research suggests a number of key recommendations for consideration in any resettlement context, particularly in relation to an awareness of the importance of ontological security in assistance provided to people with refugee and asylum seeker backgrounds (for example, in navigating the rental market and finding suitable housing). Key policies in this regard could include attempts to create agency and control in what housing support looks like and how it is offered, linking tenants to housing support agencies or complaint mechanisms where required, consideration given to gardens and the role they might play in health and well-being, and the potential benefits of trauma training for housing support and real estate staff. In addition, our findings evidence the agency of people with refugee and asylum seeker backgrounds in home-making practices. Supporting this agency through the formation of ‘bottom-up’ networks or services which are with the community’s control, such as neighbourhood collectives, could also assist to promote health within housing and neighbourhoods for refugees and asylum seekers, by promoting ontological security and reinforcing existing pathways to control over elements of housing. Overall, our findings point to the critical need to consider ontological security in housing for people with refugee and asylum seeker backgrounds, to ensure that the lack of agency and control they often face in many areas of their lives is not compounded by further challenges and disadvantage as a result of their housing.

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