

Skills for transition: the perspectives of women seeking asylum in Ireland

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Abstract

Purpose – Current domestic and international research predominantly examines the past experiences of people seeking asylum and the negative influences such experiences have on health and well-being. However, few studies address the future needs of people seeking asylum, as they transition from Direct Provision. This study aims to address this gap in knowledge by exploring the perspectives of women seeking asylum in Ireland on the skills they think they will need, as they transition from Direct Provision to life in Ireland.

Design/methodology/approach – A qualitative methodology using a community-based participatory research (CBPR) approach was used, to collect data collaboratively and sensitively with a vulnerable population group. Convenience sampling was used to recruit six women seeking asylum in Ireland, to participate in focus groups and semi-structured interviews. Data were transcribed and analysed using thematic analysis.

Findings – Women seeking asylum identified four themes of skills for doing, skills for being, skills for becoming and skills for belonging that are necessary for life in Ireland after Direct Provision. Barriers and opportunities to develop these skills were documented as sub-themes. The skills identified under these themes and sub-themes included work, education, driving, childcare, social integration, money management, home management, health management and leisure.

Originality/value – Using participatory methodologies, future research should further explore the skills required for transition from Direct Provision, to continue to raise awareness of the potential for occupational injustice and the role occupational therapists could play in this transitional period.

Keywords Asylum seeker, Skills, Community-based participatory research, Occupational therapy, Occupational deprivation

Paper type Research paper

Introduction

Globally, over 70.5 million people were forcibly displaced worldwide, with 3.5 million people seeking asylum in 2018 [United Nations High Commission for Refugees (UNHCR), 2019]. In Ireland, 6,252 were awaiting their applications for asylum to be processed in 2018 (Irish Naturalisation and Immigration Service, 2019). Most people seeking asylum in Ireland, whilst awaiting refugee status, are accommodated by a service called Direct Provision [Department of Justice and Equality (DoJE), 2019]. This service is provided by the Reception and Integration Agency under the Department of Justice and Equality and provides people seeking asylum with full board accommodation and certain ancillary services, whilst their applications for asylum are being processed (DoJE, 2019). It is estimated that most people seeking asylum spend between 14 and 24 months in the Direct Provision system (DoJE, 2019).

At the time of data collection, Ireland had no legal framework for how people seeking asylum should be provided for whilst awaiting a decision on their asylum application (Irish Refugee Council, 2013). Recently, however, in response to the Supreme Court judgement which found Ireland's absolute ban on employment for asylum seekers to be unconstitutional, the Recast European Union Reception Conditions Directive was

transposed into Irish law, which sets out standards for reception conditions for people seeking asylum including living conditions, housing, food, employment and healthcare (Irish Human Rights and Equality Commission, 2018). Despite these advancements, there is, however, a shortage of state-provided support services to assist those seeking asylum to attain the transition skills necessary to integrate into community life in Ireland. Thus, it is not surprising that recent reports highlighted the challenges experienced, particularly by women, as they transitioned from Direct Provision to community life in Ireland (Irish Human Rights and Equality Commission, 2017).

International counterparts are identifying that occupational therapists are increasingly supporting people seeking asylum to adapt to the socio-cultural and practical demands of moving to a new country (Winlaw, 2017). Occupational therapists'

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involvement in responding to human displacement is supported by the World Federation of Occupational Therapy (WFOT) which sets out a clear mandate for occupational therapists to respond to human displacement (WFOT, 2014). This WFOT position statement articulates that socially and politically constructed barriers can disrupt occupational performance, leading to prolonged participation restrictions, impacting an otherwise healthy population's health and well-being.

Whilst the occupational therapy (OT) skill set could be used to prepare people seeking asylum for their transition into Irish society, it is imperative that the development of any potential integration programme be done so through collaboration with members of this population group, to identify the skills they envisage they will need when they leave Direct Provision. Hence, this study aimed to explore the perspectives of women seeking asylum on the skills they will need to live outside of the Direct Provision system in Ireland.

Literature review

Wilcock and Hocking (2015) have asserted that humans are inherently occupational, and meaningful occupational engagement is central to health and well-being; consequently, it seems plausible to argue that depriving humans of occupations is detrimental to one's health and well-being. Thus, it is not surprising that many studies report widespread health problems, in particular mental health, amongst people seeking asylum globally, particularly those held in immigrant detention centres. For example, studies from the Australian context demonstrate very high rates of depression and anxiety amongst people seeking asylum who live in detention centres (Green and Eagar, 2010; Young and Gordon, 2016). Moreover, long periods of detention have demonstrated worsening of mental health issues (Robjant *et al.*, 2009), with detained individuals scoring higher in mental ill-health symptoms than non-detained individuals.

Moreover, literature suggests that people seeking asylum are subject to occupational deprivation because of the exclusionary government policies of industrialised nations (Davies, 2009; Hocking, 2012). Occupational deprivation is considered an outcome of socio-economic and politically determined occupational injustices (Townsend and Wilcock, 2010). International studies have highlighted how exclusionary policies, identified previously, pose a particular risk to the health and well-being of people seeking asylum owing to the increased prevalence of past traumatic experiences, as well as their vulnerable legal position (Crawford *et al.*, 2016; Hocking, 2012; Whiteford, 2004). Indeed, researchers have demonstrated that economic and political policies and legislation that cause this deprivation affect roles, particularly worker roles, with authors coining terms such as "having nothing to do" (Crawford *et al.*, 2016), to demonstrate the impact on personal identity and societal integration.

Several researchers have explored the conditions of immigrant detention as a cause for potential loss of or altered identity (Gupta and Sullivan, 2013; Huot *et al.*, 2016; Smith, 2015). Different ways of performing occupations in an unfamiliar socio-cultural context are linked to meaning changes for roles in the literature. For example, mothering occupations, identity and worker identity were lost or altered owing to

occupational discontinuity (Gupta and Sullivan, 2013). An implication of experiencing such changes of identity owing to prolonged occupational deprivation is the difficulty of adapting to new environments in refugee resettlement (Suleman and Whiteford, 2013). Lengthy time in detention exacerbates the challenges faced when transitioning to a new country, with research suggesting that the severity of such difficulties correlates with the length of time spent in detention (Green and Eagar, 2010; Robjant *et al.*, 2009; Young and Gordon, 2016).

Smith (2015) asserted that being prevented from participation and engagement in occupations, whilst in detention, reduces people's capacities to adapt to the new context. Moreover, Michalski (2001) identified further challenges to adjusting to the required occupations to resettle in the community, such as accessing paid employment and understanding culture. A lack of support can further limit these to facilitate occupational adaptation in refugee resettlement. The literature highlights the impact of legislation and policies on the socio-cultural context challenges when becoming an asylum seeker. This poses a particular risk to the health and well-being of people seeking asylum owing to the increased prevalence of past traumatic experiences as well as their vulnerable legal position (Crawford *et al.*, 2016; Hocking, 2012).

In light of this, this study aims "to explore women seeking asylum's perspectives on the skills they will need to live outside of the Direct Provision system in Ireland." The questions guiding this research were as follows:

- Q1. What are the specific skills women seeking asylum envisage they will need to live outside of Direct Provision in Ireland?
- Q2. Are there differences between the long- and short-term skills they envisage they will need?
- Q3. What opportunities do women seeking asylum report are available to practice these skills whilst in Direct Provision?

Methods

Considering this research sought to examine the perspectives of a specific population, a qualitative research method was deemed most appropriate (Carpenter and Suto, 2008). This research used a community-based participatory research (CBPR) approach to get a true "insider perspective." Ethical approval for this research was granted by the Social Research Ethics Committee in University College Cork in February 2018.

Design

CBPR studies have been found to be particularly effective in studies focusing on underrepresented groups including indigenous populations (Datta *et al.*, 2015), immigrants (Culhane-Pera *et al.*, 2010) and women (Lykes and Scheib, 2016). CBPR is an action research approach with a specific emphasis on enabling action (McIntyre *et al.*, 2007), working collaboratively between communities and academic researchers (Lykes and Scheib, 2016), empowering participants (Datta *et al.*, 2015) and focusing on issues of justice (Branom, 2012), hence differentiating it from conventional research approaches.

In CBPR studies, community-based and academic researchers work collaboratively in non-hierarchical partnerships to generate knowledge and solve local problems (Culhane-Pera *et al.*, 2010). In this research project, a research team was formed to work collaboratively to design and implement the study in an ethically and culturally sensitive manner and ensure noncoercive recruitment for this vulnerable group (McIntyre *et al.*, 2007). The research team comprised of three university-based researchers (including two students and one academic supervisor) and two community-based researchers (a woman seeking asylum in Ireland and a community non-government organisation member). Co-researchers were obliged to sign an agreement to keep all information confidential. Participants were made aware of this as well as the fact that pseudonyms would be used when documenting findings.

Participant sampling and recruiting

One Direct Provision centre was used for a sample of convenience, as community links had already been established. Purposive sampling based on an inclusion criterion was used to recruit participants. Participants were eligible for inclusion if they were women seeking asylum currently living in Direct Provision, aged 18 years and over and able to communicate verbally in English. As advised by the community-based researchers, information was provided about the study in different formats including written, verbal and images. In addition, owing to the vulnerable nature of the potential participants, two information sessions were held prior to recruitment. These provided clarity on voluntary nature and to allow potential participants to ask questions. Informed consent was gained using a combination of images, verbal and written formats, and developed by the community researchers for this specific population. A total of six consenting participants were recruited for the study.

Data collection

Data were collected using focus groups and semi-structured in-depth interviews. The focus groups were used to gain a general perspective from women seeking asylum, on the perceived skills they will need to live in Ireland outside of Direct Provision.

Focus groups

Two focus groups were held for this study the venues of which were decided by the six participants. The research team facilitated both focus groups. The research questions were used as the primary lines of enquiry for the focus group. A visual prompting sheet of different occupational performance areas based on the American Occupational Therapy Association (2014) Practice Framework was used during the focus groups so that participants understood the range of skills they could discuss within the sessions. Emerging concepts were documented on flip charts and member-checked with participants throughout and at the end of the focus groups.

Interviews

After the focus groups, two of the women volunteered and consented to participate in semi-structured in-depth interviews. An interview guide was developed from the

concepts documented during the focus groups. Interviews took place in a local community setting which was collaboratively chosen by participants and the researcher team. Participants had the option of choosing whether they wanted a male or female researcher to conduct their interview, ensuring a culturally humble approach was used. The two interviews lasted approximately 60 minutes and were audio-recorded and transcribed verbatim. Each of the student researchers conducted one of the interviews, with one of the community-based researchers also present. To ensure the trustworthiness of data, member checking of themes occurred with the research team after thematic analysis of the interview transcripts by university-based team members. A community-based researcher outlined the themes to the interviewees both verbally and in documented format to confirm that the themes represented their true perspectives. It was advised by the community-based researchers that this would be more easily understood by participants than giving them copies of the transcripts to read.

Data analysis

Data collected from the focus groups were analysed using an inductive approach (Datta *et al.*, 2015), as emerging concepts from the conversation were documented (Reed and Hocking, 2013). These concepts were then used to analyse the content of the interviews deductively. Transcripts from interviews were analysed using line-by-line coding. Codes were then re-grouped to become categories and themes, which were matched with the concepts already identified during the focus groups. The final themes that arose from analysis reflecting the principles of Doing, Being, Becoming and Belonging, which have already been linked with refugees and people seeking asylum (Gupta and Sullivan, 2013; Smith, 2015).

Findings

The analysis resulted in eight subthemes that formed four main themes: skills for doing; skills for being; skills for becoming; and skills for belonging. These themes and associated subthemes were aspects that the participants reverted to when assessing their current ability to practice skills and determining the necessary skills for transitioning from Direct Provision to life in Ireland. Skills identified primarily pertained to work, education, driving, childcare, social integration, money, home and health management skills as well as leisure occupations (Table 1).

Theme 1: skills for doing

Skills for doing was identified as a core theme. Participants identified their desire to “do,” opportunities to “do” and the current barriers that inhibit their ability to “do.”

Barriers

Participants identified restrictions to the activities they can partake in as barriers that inhibit their skill development opportunities. These restrictions included system-imposed barriers like restrictions on work, access to education and driving. Participants spoke of their desire to work but difficulty getting employment or attaining volunteer work:

Table 1 Focus group findings

Categories	Skills
Work	Attaining work experience, marketing skills, interview skills, creating a CV
Education	Learning: language skills, beautician skills, computer skills
Driving	Driving skills, learning for theory test
Childcare	Accessing childcare
Social integration	Communication skills, accessing Irish community
Money management	Budgeting skills, banking in Ireland
Home management	Renting process, finding and maintaining a house
Health management	Accessing health care, understanding health system and benefits in Ireland
Leisure	Yoga, art, sewing

They don't give any work to asylum seekers, so I can't find a job (P. 2).

One participant reported she would like to be using her time in Direct Provision to upskill and study so that she would be prepared for life in Ireland:

Like I said my studies. I want to do it and I would love it if people have the opportunities in Direct Provision, so it takes them a step further (P. 1).

Not being able to learn to drive was discussed by participants as a barrier to living in Ireland outside Direct Provision. The ability to drive in Ireland was reported as a necessary skill owing to the distality of services and poor public transport and was linked strongly to how they could participate in other activities:

They don't want people in Direct Provision to drive in Ireland, why is that? That is so unfair. How can you not want us to drive, how can you not want us to work, how can you not want us to study, how many things don't you want us to do? There is a lot of restrictions, but yes I would love to drive (P. 1).

Opportunities

Participants identified attending limited classes including English language, basic computer skills, yoga, sewing and art, as a means of increasing confidence in the skill being taught. The sharing of skills was also identified as an opportunity to develop skills for doing:

They help me, they improve my confidence. My whole life improved through myself even when I'm taking English classes (P. 2).

One participant explained how information about skills can be gathered and exchanged from interactions with people outside of Direct Provision. She gave an example of some domestic skills that she has learned from Irish women:

The Irish ladies share their experience about the electricity and water and washing, because here they are all given to us (P. 2).

Theme 2: skills for being

Being refers to the essential nature of participants, as occupational and human beings (Wilcock and Hocking, 2015). Participants identified factors that act as barriers and opportunities for "being."

Barriers

Participants reported that being in Direct Provision influenced their sense of being and inhibited skills development. Direct Provision was identified as a barrier to developing the new sense of being required with a cultural adjustment. Participants reported that their abilities to fulfil new worker, educational,

family and community roles were impacted negatively by restrictive policies. Participants reported a personal desire to fulfil worker, education roles and parental roles:

For me the most important thing at the moment is for me to study. It doesn't matter what I study or what is available for me to study, I want to study (P. 1).

Opportunities

The primary opportunity to being was participant's self-motivation and determination to further themselves and achieve role competence. Participants mentioned their drive to educate themselves, their willingness to work for free to attain work experience and to contribute to society:

I really do want to study, I want to have a stand, I want to know that I've done something with my life (P. 1).

Theme 3: skills for becoming

Becoming is linked with the participants undergoing change, transformation and development through what they do day by day in Direct Provision in preparation for life in Ireland (Wilcock and Hocking, 2015).

Barriers

Participants identified restrictions related to living in Direct Provision, such as lack of money, work and access to education as barriers to them achieving their future goals and aspirations. Participants reported that the courses they did in Direct Provision were rarely applicable to the skills they need to transition, were not long enough, had little follow up and no certificates were provided to present to potential employers:

We do the basics but after that what do we do next? We need something to follow up, to go more, to say we can do (P. 1).

Participants also suggested that the skills to access information are needed to help them successfully transition, particularly in relation to accessing information on health and education systems:

It's better when you have a class and you know exactly how to live in Ireland (P. 1).

Opportunities

Participants expressed their motivation as an opportunity to increase their skill set in anticipation for the future:

I want to become something, I want to become someone (P. 1).

Participants identified skills they have from past experiences, such as “teaching” and “management and organising,” which they will be able to use when they transition.

Theme 4: skills for belonging

Belonging is the sense of connectedness to others inside and outside Direct Provision, experienced through shared occupations (Wilcock and Hocking, 2015).

Barriers

Physical exclusion from the Irish community, including geographical location and cost of transport, was identified as barriers to participant's feelings of belonging:

How can we go by walk? There is no train and we don't have any money (P. 2).

Cultural variances, including factors such as language barriers, were reported to inhibit participant's ability to integrate and interact with members of the Irish community:

Different things I want to talk but I can't because sometimes words not help me (P. 2).

Opportunities

Participants spoke of their attempts to actively engage with the socio-cultural environment outside of Direct Provision in Ireland, to “mingle with the community.” They viewed such interactions positively, as an opportunity to learn skills, obtain information and familiarise themselves with life in Ireland. They identified improved mood when socialising and practicing skills as a group:

I want to know what Irish people are like. You have to be with them, you have to mix in with the community, to know what they're about.

Participants spoke of their desire for reciprocity, to give and share as well as receive information and skills from others. Participants made clear they are “always ready to help other people.” They reported that they preferred to help others with skills than be the ones being helped:

I'd love to help people. Not with money, you can help people with your wise, you can give them the confidence (P. 2).

Discussion

As per the participant's wishes, the barriers were presented first. These were identified by participants as significant barriers to using and developing skills whilst in Direct Provision. More specifically, these were a combination of both system-imposed barriers and socio-cultural barriers. Both barriers were found to heighten a sense of uncertainty amongst participants about how they would adapt or learn skills in an Irish community context. These findings are well supported within the existing literature.

The lost opportunity to both develop and maintain skills, and its negative impact on both health and identity, is well documented in the literature. Socio-cultural challenges are widely acknowledged as a barrier when transitioning into a new community, for all migrants (Bennett *et al.*, 2012; Nayar *et al.*, 2012). The participants identified lost socio-cultural opportunities, such as the skills for cultural belonging, as well as systemic barriers, as locating the centres a distance away from local community and cultural centres during the research.

These system-imposed barriers were found to be facilitating occupational deprivation amongst this group, restricting participants' opportunities to develop the skills they think they will need. Combining both sets of barriers was found to intensify occupational deprivation for this group, which over a prolonged period limits individuals' abilities to adapt their skills to live in a new environment for both participants and within the literature (Suleman and Whiteford, 2013).

Opportunities to use and develop skills, which resulted in increased self-confidence in one's own ability to use skills, were also reported by participants. The availability of classes for English, computers, art and yoga was reported as a positive experience to develop skills and an opportunity to integrate into local communities. Some classes, such as art and sewing, were however reported to have little application to life after Direct Provision. One-off classes for subjects like computer skills with no follow-up were viewed as not particularly beneficial for skill development by participants. Other opportunities identified included sharing skills with others, both within and outside of the Direct Provision centre, as well as actively seeking opportunities to engage and interact with Irish nationals. These opportunities, however, were reported to be most commonly self-created by individuals and not provided by the Direct Provision system or governing policies.

These findings were comparable to those of a similar study of female asylum seekers in a refugee centre in Austria (Steindl *et al.*, 2008) wherein the women's occupational engagement was underscored by two themes of “Daily occupations – a struggle against restrictions” and “Travelling towards the future.” Opportunities to engage in occupations were mostly self-created by the women themselves and driven by their future aspirations. An essential contrast between the two studies, however, was the perception of time spent in detention. In the Austrian study, time spent in the refugee centre was seen as a time of transition, and although these participants also experienced restrictions, they were able to use this time to prepare for the future. Conversely, the findings of this study showed that in an Irish context, time spent within the Direct Provision system is seen as a period of stagnation by participants whereby they did not have the opportunities to adapt and develop the perceived skills they would need to live in Ireland. Participants reported that assistance in developing information and integration skills, as well as increased opportunities to access and use educational and work-based skills whilst in Direct Provision, would help obviate stagnation.

Participants reported that they wanted to develop information, integration, education and work skills through courses and experience to be used in the future. The women were willing to engage in volunteering to gain experience, contributing to society. Volunteering roles have been reported in other studies to provide structure to days, create opportunities for community integration, increase language skills, build self-confidence and develop generic work skills amongst immigrant groups like asylum seekers (Morville and Erlandsson, 2013; Smith, 2015). Participants also sought opportunities to develop skills on how to find information and access services in Ireland, a skill that is crucial for successful transitions to a new country (Suleman and Whiteford, 2013). Enabling the women seeking asylum to familiarise themselves with the cultural milieu, would facilitate acculturation further

promoting successful transitions. The Irish public shared this sentiment during a recent European Commission study into the integration of immigrants in the European Union (European Commission, 2016). Whilst it was not asylum seeker specific, it would appear as if universally these are the skills that are perceived, by the public and immigrants, as most important for successful integration.

Implications for practice

Supporting the development of activities of daily living is a key aspect of occupational therapy practice. This research indicates that women living in Direct Provision have identified key occupational skills, which they need to transition to Irish Society. Without the development and provision of such skills, women may be at higher risk of unemployment and homelessness, especially when integration services are provided too late in the transition from asylum seeker to refugee (Irish Human Rights and Equality Commission, 2017). If we, as a profession, believe in occupational justice, it falls within our scope of practice to support the skills acquisition and advocacy for this population. OTs are uniquely skilled and positioned to advocate, lobby and develop new roles and services to support this transition. These roles already exist internationally. The challenge is to develop these within the Irish context.

Limitations

Several limitations exist within this study. As this study was a small pilot, only women living in one Direct Provision centre were recruited as participants. In addition, only women were recruited. Although this was because of the pre-existing links of the feminist nongovernmental organisation, both of these limitations mean that the findings cannot be generalized to the larger population. It is noted that the American Occupational Therapy Association Practice Framework comes from a “western-centric” perspective. This was used to frame the concept of occupations, as the multilingual participants had little to no previous exposure to occupational therapy. To address this cultural issue, the community-based researchers modified the hand-out, to better communicate the concepts to the participants.

Conclusion

The conceptualisation of the themes of skills for doing, being, becoming and belonging has highlighted the occupational needs of these participants during transition. The concepts are theoretical underpinnings to meaningful occupational engagement within occupational therapy literature and are linked to health and well-being. These findings highlight the importance of occupational skills for both successful transitions to living outside of Direct Provision. Occupational therapy can contribute to adaptive life skills, promote health and generally enhance the lives of this population and are well-positioned to work with people seeking asylum in Ireland. Owing to their unique perspective, occupational therapists could enable women seeking asylum to do, be and belong in relation to the life skills they identified they needed to become part of the Irish community. Further to collaborating with women on their resettlement journey, the profession would be upholding its commitment to occupational and social justice.

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