

Soldiers and NSW police in Fairfield, south-western Sydney, on Monday morning. Photograph: Mick Tsikas/AAP



Understanding refugee experiences of COVID-19

A new study on the specific effects of COVID-19 on the mental health of refugees and asylum-seekers in Australia was recently published. Belinda Liddell, Philippa Specker and Angela Nickerson from the Refugee Trauma and Recovery Program at the School of Psychology, UNSW Sydney, discuss the findings

While the COVID-19 pandemic is weighing heavily on everyone's mental health, people from refugee backgrounds may be uniquely affected because of traumatic experiences. As survivors of war and persecution, many refugees have faced the threat of death because of their race, religion, political stance or social group. Some have endured conflict that involved restrictions on their movements and major social and economic upheaval. As a result, aspects of the current pandemic may be reminiscent of past traumatic experiences. And this overlap between past and present may have serious and far-reaching consequences for refugee mental health.

To help understand the impact of COVID-19 on refugee communities in Australia, 656 adult refugees living in Australia completed an online or pen-and-paper survey in June last year. It was conducted as part of the Refugee Adjustment Study, a longitudinal investigation of the mental health and adaptation of refugees living in Australia. Participants were from across Australia, although mainly NSW and Victoria, and were asked about their experiences during pandemic and their mental health. In this study, 385 (61.3 per cent) participants were from Iraq, 111 (17.7 per cent) from Sri Lanka, 10 participants (1.6 per cent) from Afghanistan and the remaining 35 participants were from other countries. Half of the participants were male and the other half were female; they were 42.9 years old on average; and had been in Australia for an average 4.6 years.

Participants had been exposed to an average of 3.9 different types of traumatic events, for example conflict, witnessing the murder of loved ones, torture or sexual violence. The rates of psychological distress were also high: 32.9 per cent of the group met criteria for post-traumatic stress disorder (PTSD), 17.3 per cent met criteria for depression and 23.3 per cent met criteria for health anxiety, which includes feeling worried about bodily sensations and attributing them to diseases such as COVID-19.

The COVID-19 pandemic reminds refugees of their trauma

We were particularly interested in exploring the relationships between particular COVID-19 stressors and mental health and functioning. Our study, recently published in the *European Journal of Psychotraumatology*, found that 41.1 per cent of participants reported that the pandemic reminded them of stressful or difficult experiences in the past, and this was the strongest factor related to increased PTSD, depression, health anxiety and poor daily functioning. This was the case even after accounting for other factors known to contribute to refugee mental health, including exposure to past trauma and other COVID-19 stressors.

Clients who are engaging with the Refugee Trauma and Recovery Program, UNSW Sydney, for psychological treatment have described experiences that substantiate these findings. For instance, we've heard from some refugee participants that the sight of empty streets is prompting flashbacks of air raids. For others the sensation of wearing a face mask brings up memories of being gagged or hooded during imprisonment and torture. Some have said lockdowns, quarantine and a heightened police and military presence in their communities are distressing reminders of political terror or detention. Others in the Refugee Adjustment Study have said that panic-buying reminded them of a time when there was a rush to obtain basic supplies because of an impending invasion or conflict, while COVID-19 lockdowns brought up memories of not being able to visit family or see their doctor.

Overall, these findings suggest that the mental health impact of COVID-19 on refugees may be particularly strong because of the interplay between past trauma and the stresses of the pandemic.

The worry about COVID-19 and the social impacts of lockdown

The most prevalent COVID-related stressors reported in the Refugee Adjustment Study were related to worry about

contracting COVID-19. For instance, 66.5 per cent of participants were concerned about being infected with COVID-19 and 72.1 per cent were worried about family members being infected. Where these worries were stronger, it was related to increased PTSD and health anxiety symptoms. Elevated health anxiety has been generally observed in the Australian population during the COVID-19 pandemic, particularly amongst those with pre-existing mental health issues.

Health anxiety is not commonly considered in refugee communities, but is of high relevance during COVID-19. Those experiencing high levels of health anxiety could be at risk of social withdrawal, engaging in excessive hygiene practices such as handwashing, or of increasing their consumption of media relating to COVID-19 – which may have a detrimental effect on wellbeing and coping. We also observed that many participants were worried about the health and safety of family members and loved ones. For example, 15.8 per cent of participants said they were worried about family living overseas in refugee camps or detention during the pandemic, where the capacity to socially distance, access personal protective equipment or regularly wash hands is more limited.

Engaging in regular social activities also proved difficult for many refugees in this study. For example, 46.7 per cent of participants reported they were experiencing significant problems because of children being home from school, 46.6 per cent said they were experiencing difficulties because of not being able to engage in regular social activities and 41.3 per cent reported problems because of having to stay at home. These social-related COVID-19 stressors were specifically associated with increased depression. Refugees, particularly those more recently arrived in Australia, already report significant mental health problems from feeling isolated and lonely, and COVID-19 may increase their vulnerability in regards to these social stressors. In findings from an earlier wave of the Refugee Adjustment Study, belonging to groups such as volunteer groups was associated with less severe depression, particularly among refugees with insecure visa status (i.e. temporary protection visas,

bridging visas or seeking asylum). Maintaining social engagement during COVID-19 lockdowns is considered vital to protecting the mental health of refugee communities. Of course, under lockdown conditions this can be challenging; therefore, creative approaches to supporting clients to transition into 'virtual' forms of social engagement may be important.

Resilience and coping

We also observed that while many participants in our study were struggling with the impact of COVID-19, others were coping relatively well and reported low levels of mental health problems. Some COVID-19 stressors were also less common amongst participants.

Difficulties accessing services and resources were relatively less frequent. For example, just 13.5 per cent said they were having trouble accessing emergency government support, 14.5 per cent said they were experiencing difficulties accessing emergency NGO support and 28.3 per cent said that they were having problems obtaining basic day-to-day items such as food. Moreover, experiencing these access-related difficulties were not linked to mental health in this study.

Another group of stressors examined in this study were related to trust and engaging in public

health measures. We found that 11.7 per cent of participants said they had trouble trusting authorities responding to the COVID-19 pandemic, 13.8 per cent of participants in our sample reported having trouble accessing information about COVID-19, and 16.7 per cent said that they had difficulty implementing COVID-19 public health regulations such as social distancing, handwashing and getting tested if they had symptoms. These stressors were not associated with mental health outcomes in this study.

Other research suggests that newly arrived refugees have high trust in authorities like police and the government. Our findings suggest that refugees in the Australian community are doing their best to comply with COVID-19 safety measures, even when experiencing significant disruptions including being reminded of past traumatic events.

*... the sight of empty streets
is prompting flashbacks
of air raids. For others the
sensation of wearing a face
mask brings up memories of
being gagged or hooded during
imprisonment and torture.*



Police and Military are seen at the pop-up walk-in clinic at the Michael Wenden Aquatic Leisure Centre in Miller on August 05, 2021 in Sydney, Australia. (Photo by Brook Mitchell/Getty Images)

What is the significance of these findings?

People with a refugee background may be affected by COVID-19 in unique ways, particularly if the pandemic is reminding them of distressing memories and traumatic events in their pasts. It is essential that others in the community are aware of this impact on refugees, particularly their doctors, caseworks, government authorities/officials and members of their support network. Refugees must be supported in engaging with medical and mental health services during this increased time of stress.

The data from this study was collected in June 2020, and since then, the experience of COVID-19 in Australia has changed dramatically. It is likely that the ongoing nature of the pandemic and the experience of prolonged lockdowns, particularly since July 2021 with the increased spread of the Delta and Omicron-variants of COVID-19, will be putting increased pressure on refugees in the community. This has been especially pronounced in Sydney over the past few months, where neighbourhoods

most affected by the Delta and Omicron variants and experiencing the most restrictive lockdowns are home to most of Sydney's refugee population.

The good news is there are things we can do to minimise the burden of the pandemic on refugee communities.

Consultation and engagement with community leaders and experts are the best tools to ensure public health measures and messaging are culturally sensitive and trauma-informed. For example, providing clear and inclusive information in multiple languages can be an effective way to dispel fears and misinformation. Unfortunately, translated health advice has been lagging.

During lockdowns, authorities need to carefully consider the use of police and army personnel, and transparently communicate their plans with the public. Finally, the psychological effects of this pandemic will likely be felt long after the final restrictions have been lifted. So continued funding of mental health services that support refugees will be essential.✉

*Belinda Liddell, Senior Research Fellow and Deputy Director of the Refugee Trauma and Recovery Program, School of Psychology, UNSW
 Philippa Specker, Scientia PhD scholar at the Refugee Trauma and Recovery Program, School of Psychology, UNSW
 Angela Nickerson, Professor & Director, Refugee Trauma and Recovery Program, School of Psychology, UNSW*

Parts of this article originally appeared in The Conversation, 18 August 2021, <https://theconversation.com/for-refugees-in-australia-life-during-covid-lockdowns-recalls-the-trauma-of-war-and-persecution-165884>

*The original research paper: Liddell BJ, O'Donnell ML, Bryant RA, et al. The association between COVID-19 related stressors and mental health in refugees living in Australia. *European Journal of Psychotraumatology*. 2021;12(1):1947564. <https://www.tandfonline.com/doi/full/10.1080/20008198.2021.1947564>*