

Facilitating 'reasonable hope' with refugees and asylum seekers

Greg Turner

The loss of hope over time has led to despair and a mental health crisis for refugees and asylum seekers on Manus Island and Nauru. The use of the principle of 'reasonable hope', however, can support their mental health and well-being.

The reasons why people seek asylum are diverse but the common factor is the overriding need to flee and a hope that life will be better. For many asylum seekers, Australia seemed to offer everything they hoped for. But in August 2012, nervous of public perceptions of being 'swamped' by asylum seekers, the Australian government passed legislation decreeing that all Irregular Maritime Arrivals (asylum seekers arriving by boat) would be sent to either Manus Island in Papua New Guinea or to Nauru for the processing of their asylum claims. Furthermore, in September that year the government announced that refugees who had arrived by boat on or after 13th August 2012 would no longer be eligible to sponsor their family members for resettlement, and in October 2016 the government announced that individuals who had been sent to Manus Island or Nauru since July 2013 would never be allowed to settle in Australia under any circumstances.

It thus became a question of date of arrival or means of transport – or occasionally other, at times inexplicable, reasons – as to whether a person would be held in detention in Australia or be sent to Nauru or Manus. The inability to make sense of the process or to anticipate future events, their powerlessness, and the obvious unfairness of the process are not just mental health risk factors but a recipe for cognitive decline and mental health breakdown.¹

In limbo on Nauru

Nauru is a tiny island in the Pacific Ocean – small enough to drive around in half an hour. In the last decade or so its greatest source of revenue has been the immigration detention centres built and maintained by

the Australian government. Asylum seekers sent to Nauru are detained while their claims are processed; most are recognised as refugees and are then 'settled' into various camps located around the island. Outside the detention centre, life can be even more difficult than inside, with reports of assaults, rapes, bullying of children, poor schooling, poor health care and a myriad of psychosocial stressors and mental health risk factors. It is not what was hoped for.

The tidal flow of hope and despair gradually erodes mental health, and as months turn into years, and the years roll by, the hope of getting to Australia or some other country becomes their sole focus. Over a two-year period to December 2016 I worked as a consultant psychologist providing support and training to the refugee settlement workforce on Nauru, which included refugees themselves.² During this time I became aware of the mental health risk factors associated with this overwhelming focus on what I call the 'One Big Hope' – that is, of leaving Nauru – and how the idea of 'reasonable hope' articulated by Kaethe Weingarten³ might help maintain healthy mental processes and preserve mental health.

Support workers and mental health professionals often struggle to find viable strategies to maintain the mental health of the refugees on Nauru. Some of the professionals worry about encouraging hope in the face of what often may appear as hopeless, concerned that they may be supporting false hope. Others encourage the One Big Hope, perhaps in the hope that the image of desperate refugees will help 'prove' that settlement on Nauru is not working and that they must therefore be resettled in Australia or another country. As well intentioned as

June 2017

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this may be, the result is a constant preoccupation with the future and with what may be an unattainable hope of resettlement. This type of obsession has led to severe mental health problems and suicidal behaviour resulting in some cases in serious injury and death. This is particularly the case following perceived opportunities, such as elections or visits from UNHCR, the UN Refugee Agency.

From a neurological perspective, the result of the constant focus on a distant hope is the reinforcement of neural pathways associated with that hope and the decay of neural pathways not associated with it. Thus afflicted, people find it difficult to maintain meaningful activities and healthy mental processes for daily life.

From despair to 'reasonable' hope

One of the major tasks of the refugee settlement support worker is, or should be, to assist their client to maintain healthy mental processes despite uncertainty, disappointment and apparent hopelessness. While resources may be scant, workers can use evidence-based interventions and practices, applied with professionalism, persistence and imagination. A primary purpose of this is to stimulate pathways in the brain, not so as to encourage denial or the extinction of the One Big Hope but to encourage the development and reinforcement of other neural pathways – other thought processes – through identifying other hopes which have a relatively high chance of being realised.

"Reasonable hope's objective is the process of making sense of what exists now in the belief that this prepares us to meet what lies ahead. With reasonable hope, the present is filled with working not waiting [...] it provides a way of thinking about hope for therapist and client alike that makes it more accessible even in the grimmest circumstances..." Kaethe Weingarten



Nauru

US Energy Dept Atmospheric Radiation Measurement Program

According to Weingarten there are five main characteristics of reasonable hope:

- Firstly, it is 'relational' in that it flourishes in relationships and is not merely an individual attribute. I found this resonated with the refugees of Nauru as they live in close contact with others in the same situation, supported by empathetic workers.
- Secondly, it consists of a practice that is a daily process rather than an end point – about doing rather than wishing. This is fundamentally important for refugees with the One Big Hope which is generally about an end point such as getting off Nauru, or getting a visa. This characteristic of reasonable hope shifts the reinforcement of neural pathways associated with the One Big Hope to reinforcing those associated with daily living.
- Thirdly, it maintains that the future is uncertain but open. Although uncertainty is a significant mental health risk factor for asylum seekers and refugees, these characteristics mean that there are still possibilities. Nobody can predict what is around the corner. I utilised this many times with refugees on Nauru to challenge their despair and pessimism.
- Fourthly, it seeks goals and pathways to identified goals. By identifying realistic goals, and pathways to achieve these goals, refugees can obtain – often through

a process of trial and error – a sense of control and predictability over daily life. As more and more new neural pathways and networks are activated, cognition improves as do general mental health and well-being.

- Fifthly, it accommodates doubt, contradictions and despair – very appropriate in the environment in which refugees exist.

Training in facilitating reasonable hope provides those who support refugees and asylum seekers with practical mechanisms to support their clients to focus on the present and to reinforce positive cognitive processes. It is in no way my intention to deprive refugees and asylum seekers of the hope of getting off Manus Island or Nauru. The One Big Hope will always be in their minds. However, rather than have that sole, distant hope dominate their lives, the concept of reasonable hope can provide

other points of focus in the present and the immediate future, helping individuals to identify achievable albeit humble hopes that bring satisfaction and further motivation. When refugees and asylum seekers do finally reach a place of safety, their mental processes will be intact and they will be in a stronger position to face the challenges of settlement and to lead productive lives.

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1. The Nauru files, *The Guardian*
www.theguardian.com/news/series/nauru-files
2. The settlement organisation employed refugees in administrative and operational support roles – which had benefits in terms of participation but resulted in role conflict and relationship challenges.
3. Weingarten K (2010) 'Reasonable hope: Construct, clinical applications and supports', *Family Process*, 49 (1): 5-25
www.kean.edu/~psych/doc/reasonable%20hope.pdf