

Stress in Refugee Settlement: Syrian Mothers' Strains and Buffers During Early Integration

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Abstract

Refugee mothers confront enormous tasks, facing strains linked to the care, schooling, and support of their children in dislocation and upon settlement into communities that may differ dramatically from their homeland. We build on refugee parenting stress literature through the family stress process model (SPM). We interviewed 41 newly-arrived Syrian refugee mothers in two locations within the Greater Toronto Area, focusing on mothers' mental health and well-being; and re-interviewed 28 mothers several months later. Mothers articulated *parental strains* that undermined well-being and the *social and personal resources* that potentially buffered the strains experienced. First, most described the difficult, diffuse stressor of involuntary separations from relatives who were an important part of their mothering, but who were unable, unwilling or not chosen to resettle. Buffers included: a) internet/social media connections to distant family members, and b) felt support from other mothers, particularly for those located in neighbourhoods with similar others. Second, mothers described stressors linked to children's schooling — though resources to resolve academic and social concerns were often apparent. Finally, mothers described complex “upending” experiences during resettlement. Although mothers often felt a sense of mastery in the successful creation of future security for children in a relatively welcoming society, it was inescapably linked to a loss of future control, with fears that children might not stay closely aligned with parents over time. We discuss policy implications of the study.

Introduction

In this chapter, we analyze the experiences of Syrian refugee mothers' early integration into Canada, using a sociological approach, the family stress process model. We centre mothers' own voices through in-depth interviews conducted by an Arabic-speaking, culturally sensitive research team. Respondents articulate the stressors they experience in mothering in a new culture, as well as resources they draw upon and build to enhance their and their families' well-being. The research extends the family stress process model theoretically to underscore the connectedness across family members' experiences, and provides knowledge important for practitioners and policy makers.

Refugee mothers face both the enormous tasks involved in acclimatizing themselves to a new culture and environment and the strains linked to the care, schooling, and support of their children. Indeed, research on immigrants and refugees points to the unique positions of mothers, who experience greater difficulties when compared with other groups (e.g., Beiser 2009; Collins, Zimmerman and Howard 2011; Ahmed et al. 2017). The current study centers on refugee mothers' well-being because this group is often neglected (Maghbouleh et al. 2019), and their well-being (or lack thereof) is not only important in its own right, but also vital to that of other family members, especially children. In other words, refugee mothers' capacities to nurture their children depend upon navigating the unique post-migration stressors they face as refugee parents.

The Stress Process Model (SPM) underscores how parents' mental health is linked to the number and types of stressors they experience and the resources that they may bring to bear on difficult situations (Pearlin 1999; Milkie 2010; Nomaguchi and Milkie 2017). In this study, we assessed parenting strains that threaten mothers' well-being and the resources that potentially

helped ameliorate these stressors. Importantly, we allowed mothers to provide accounts themselves, in their own language. We also discuss the circa 2015-16 era of Syrian resettlement to Canada as a welcoming time, potentially relevant to mothers' experiences (Bogic et al. 2015). The study's elucidation of mothers' stress process will expand knowledge in order to aid parental capacities, children's health, and family integration success over the long term (Beiser et al. 2002; Noh and Kaspar 2003).

The Stress Process Model and Refugee Mothers

The Stress Process Model: Key Stressors and Supports for Refugee Mothers

The SPM is a widely-used perspective within the sociology of mental health, focusing on demarcating the stressors creating distress, and the resources people draw upon to help thwart and ease stressors from bearing negatively on well-being. The model calls attention to social statuses such as gender, ethnicity, and age, as well as the neighbourhood context, in assessing pathways and variations in the stress process. The goal is to understand influences on individuals' mental health and well-being. Figure 1 outlines the basic contours of the SPM as applied to refugee mothers. It illustrates the impact of pre- and post-migration stressors on mental health outcomes (i.e., distress like depression and anxiety) for refugee mothers. In addition, it highlights the role of resources that may buffer the impact of these stressors.

A family stress process model (Milkie 2010) underscores the relational aspects of the stress process. In demarcating stressors or strains, a family-level view includes the idea that as part of the mothering role, problems impinging directly on children and made apparent to mothers, also act as *mothering* strains. In essence, the strains that impact their children —“cross over” to be experienced as stressors to mothers themselves. Additionally, difficulties in the

parent-child relationship act as a strain. Particularly where the parents make a far-reaching (albeit constrained) choice related to children's well-being — to move to a different country quite foreign to them — any troubles a child has are likely to be amplified in terms of becoming a strain that impacts mothers' anxiety and depression. In other words, mothers may feel responsible for children's well-being in an especially deep way, having made a drastic, albeit forced choice, on their behalf.

Insert Figure 1 here.

We used the SPM to guide attention to refugee mothers' experienced stressors in early resettlement. In addition to those they articulated, we focused attention on children's problems integrating into schools -- indeed, children's problems with school and peers are a key source of parental strain under more typical conditions (Milkie 2010; Milkie et al. 2011). There may be subtle or overt forms of discrimination experienced by children, who relate stories to parents (Maghbouleh 2017; Montazer and Wheaton 2011). Such felt discrimination can be a considerable cause of stress, while also reducing refugees' optimism for integration. This is particularly acute among refugees who face issues of cultural distance between sending and receiving countries (Beiser et al. 2015). Upon migration, problems may also arise between generations, including struggles over cultural values, occurring through schooling or peer relations (Waters 1999; Montazer and Wheaton 2011; Noh et al. 2012).

Given that the SPM focuses on neighbourhood, we take account of resettlement neighbourhood in Canada, as well as the contrast with former neighbourhoods in Syria and in temporary resettlements, typically in Jordan, Lebanon or Turkey.

The SPM considers resources to mitigate threats as central. Two are crucial here. First, felt social support, especially from those in similar circumstances, is vital to parental well-being (Thoits 2011). For refugees, who are migrating in involuntary conditions, maintaining supportive social ties is critical. The number and strength of ties to local and far-flung others will vary widely but should be an important variable in parents' ability to buffer strains that have arisen (Stewart et al. 2008). Social engagement in the new environment with similar others, as well as non-refugees, may also be an important resource. Second, two types of self-concept resources that can help buffer strain among parents include one's sense of control over important aspects of the present and future (mastery), and a felt sense of mattering to others in the community. *Mastery* can be critical to identifying and solving individual and family problems (Pearlin 1999; Milkie 2010); and *mattering* (Rosenberg and McCollough 1981) or feeling the importance of oneself to the community, may both be important buffers.

The Unique Status of Refugee Mothers

Refugee mothers are a highly disadvantaged group, with research confirming that the caregiver role may be especially difficult in transition. Immigrant and refugee women, particularly mothers, face unique and more difficult stressors, compared to men and those not parenting, respectively. For example, studies of the mental health of Vietnamese refugees in Canada find higher levels of depression among women over time compared to their male counterparts (Beiser 2009). This persistent and elevated level of post-migration depression amongst Vietnamese refugee women over time is largely explained by structural factors, such as lack of social support, parental stress, and acculturation processes. Other studies also show refugee women, particularly mothers, are at higher risk of experiencing mental health issues such as depression

and anxiety (Collins et al. 2011; Ahmed et al. 2017). Problems for mothers might arise when children themselves experience difficulties in the community, or when there are problems within the parent-child relationship (Betancourt et al. 2015).

A recent longitudinal survey of immigrants to Canada reiterates the importance of focusing on mother refugees. Despite their healthy immigrant advantages at the time of arrival, by two years post-migration, nearly a third of immigrants report emotional problems such as depression and anxiety (Browne et al. 2017). These are concentrated among disadvantaged groups, including visible minorities and women. Visible minority immigrants (except for Latina/os and Filipinos) were more likely to have increased emotional problems over time compared to White immigrants. Refugees and married and single immigrant mothers had significantly higher rates of emotional problems compared to other immigrants (Browne et al. 2017). The authors attribute these systematically high rates of emotional problems amongst immigrant mothers to parenting and caring stresses and the lack of social resources, although they were not able to assess mechanisms by which mothers' difficulties led to distress. They suggest that "future research is needed to clarify the pathways through which parenting status impacts mental health amongst immigrants" (Browne et al. 2017, 11).

The Case of Syrian Refugees Resettled to Canada, 2015-2016

Both the stressors and the resources that may buffer those strains are moderated by the particular experiences of specific refugee groups that set them apart from others living in the host country and, sometimes, from each other. Moreover, they may have different experiences compared with earlier refugee arrivals and earlier contexts of reception may not be similar to current contexts. Syrian newcomers rapidly arrived in Canada following the 2015 federal election of a Liberal

government, which quickly welcomed and resettled 25,000 Syrian refugees in its first six months, as well as significantly expanded private settlement (PSR) and “blended Visa Office referral” (BVOR) sponsor programs. In general, Syrian refugees possessed less formal education, had larger families, and were less likely to be familiar with Canadian official languages compared to earlier refugees, with Ontario home to the largest portion of Syrian refugees among the provinces (IRCC 2016). As of August 2018, 11,800 Syrian newcomers had been resettled in Toronto and another 2,500 in Hamilton Census Area (IRCC 2018), which means that roughly 1 in 4 Syrian refugee newcomers to Canada were in the Greater Toronto Area at least at time of initial entry. Thus, our sample of refugee mothers in Toronto is central to the story of this cohort of newcomers.

Many refugees arrive to their destinations with trauma. Research on Syrian refugee children in Turkish refugee camps suggests that nearly 50 percent demonstrate signs of Post-Traumatic Stress Disorder; 79 percent experienced a death in the family; 60 percent had seen someone get kicked, shot at, or physically hurt; and 30 percent had themselves experienced such violence (Sirin and Rogers-Sirin 2015). These findings closely resonate with a review of 29 studies on the long-term mental health outcomes of war-refugees (Bogic et al. 2015). Bogic and colleagues (2015) find high prevalence of mental health issues years after migration, in particular those related to war trauma and post-migration socio-economic conditions. There are varied levels of war trauma experienced by refugee parents that may impact their abilities to connect with social support, impact their own sense of self, and ultimately affect their capacities as caregivers. In the case of Syrian refugee parents in Canada, not only do they have to manage the trauma of war violence and the losses of their families, properties and communities, but they also have to protect their children in a new and foreign environment where they have little or no

knowledge of host language and culture, nor social and economic resources (Beiser and Hou 2000).

Research Objectives and Questions

Raising children even under typical conditions — in one's home country, with extended family, friends and neighbors serving as supports — can be challenging (Nomaguchi and Milkie 2017).

When mothers migrate, many additional issues in parenting children in a new country arise. Our questions centered around stress processes linked to refugee mothers' forced migration and settlement experiences. Compared with other migrants, decisions to leave home and choices of destination are each highly constrained. We rarely hear mothers' own perspectives on how mothering in new involuntary transnational spaces is experienced. Research with newcomers *themselves* helps us best understand how family caregivers experience stressors and resources in their lives (Rose et al. 2002). Our goal, then, was to assess the stressors of newcomer Syrian refugee mothers, articulated in their own stories, and the potential social and personal resources they maintained or developed to buffer the stressors that they experienced.

Based in the SPM, we asked the following Research Questions:

1. What are key stressors that newly-arrived refugee mothers experience?
2. How are mothers' resources of social support and self-concepts (mastery and mattering) part of the parental stress process?
3. Overall, how do mothers experience parenting in the context of settling in a large Canadian metropolitan area circa 2015-16?

Data and Methods

Sample

To obtain a purposive sample of refugee mothers, we recruited participants across two strategically selected regions in the Greater Toronto Area (GTA): 21 participants from Peel region (more suburban, west of Toronto), a sizeable first- and second-generation Arab-Canadian newcomer receiving area; and 20 from the central city of Toronto. To be eligible, mothers had to have a child attending public school by September 2016. Recruitment was facilitated through different means. For Peel region, we worked in partnership with a leading social services organization to identify and recruit participants. Most mothers in the suburban group lived in the same neighbourhood, and were regular participants in settlement services like English language courses. For the city sample, a leader in the Syrian community who had been volunteering with newcomers became a research assistant (RA) on the project. Unlike the suburban sample, the city sample drew mothers from a range of neighbourhoods and included some who were not regular participants in formal settlement and integration services. Although this chapter does not systematically compare the suburban versus city samples, some differences were noted, and locale is an area for further inquiry and analysis. The mothers were 35 years old on average, with a range of 23 to 56 years. The number of children ranged from two to 13, with a mean of 4.7 children; moreover, five mothers were pregnant at Wave 1. The mean age of the children was 10.5 years. Two mothers were widowed and the rest were married. Eighty percent of the mothers and their families were government sponsored refugees.

Because mothering integration stress is fundamentally a process, we gathered data at two time points: for 41 mothers in November 2016-January 2017 (Wave 1) and again, for 28 of the original sample, three to six months later (Wave 2). Attrition was higher in Toronto, in large part

due to the greater resources required for reaching and interviewing city mothers who were not congregated around a single site; resources became depleted at the close of this pilot project before all second wave interviews could have been conducted. At the first interview, informed consent was obtained and an Arabic-language “one-pager” summarizing local no-cost mental health resources and referrals was provided. After participation, mothers were given a gift card (for a quick service restaurant or grocer/drugstore) in appreciation.

Interviews and Analysis

We began with a pilot interview guide that the RAs and authors reviewed, with special attention to the construction and wording of questions, in order to maximize the likelihood that data would address study objectives. Three of four RAs were native Arabic speakers (two in Syrian and Levantine Arabic; one in Egyptian Arabic) and relatively recent newcomers to Canada with backgrounds in Syria or the Middle East; the fourth was proficient in Arabic, with professional expertise in Syrian refugee camp settings and local resettlement efforts. Including these RAs on the team was essential for building trust and understanding, and helped ensure that in advance of participant contact, we could address unique ethical and analytical issues. The RAs conducted semi-structured interviews in Arabic, which ranged from 25 to 100 minutes, with an average length of just under one hour.

Wave 1 interviews included questions about mothers’ backgrounds and family composition; stressors and parenting strains in general, and those linked to children’s adjustment in school; discrimination in social fields like school, neighbourhood, and community organizations; support resources; and parental self-concepts. The questions were arranged in order to solicit mothers’ narratives about life before landing in Canada (including identities and

experiences as parents); experiences during early settlement, especially in terms of parenting; children's experiences; "telling cases" that captured achievements (and obstacles) to the sense of belonging and integration; and well-being. In Wave 2, we followed up on how each child was doing in and outside of school, asked about relationships with family and friends, and queried respondents about their imaginings of the future. Interviews were audio recorded and transcribed/translated from Arabic to English. For data analysis, we used an iterative approach in which discussions and coding informs ongoing analyses. We developed a series of secondary and tertiary codes capturing emergent themes pertaining to study objectives. With this approach, we explored the stressors mothers experience, the resources they tapped into, and their well-being.

Results I: Mothering without "Home"

We identified three sets of mothering strains articulated by Syrian refugees, and discuss these alongside identifiable supports that may buffer these difficulties. Notably the ones we describe are focused on initial stressors linked most directly with mothering roles. Many mothers also discussed stressors related to themselves and their husbands learning English, locating work, and maintaining family finances, which are beyond the scope of this study.

A first and foremost stressor for Syrian mothers was the huge loss of home, neighbourhood, extended family and country that felt fundamental to mothering. Talking about these losses, crystalized once they arrived at their permanent new "home" in Canada, most mothers wept. Mothers expressed feelings of deep sadness in losing their former lives in Syria; moreover, it was sometimes a husband's decision to leave the prior place of temporary settlement, not a mutual one. Even when describing very dire circumstances in Syria, they discussed the deep comforts and community of home — that no longer existed. In terms of

mothering, their longing for the past included raising children among family members and familiar others in a context having important cultural and social rituals for their children. Families were forced from “beautiful” communities in Syria described by several as “heaven.”

A mother of five said: “The biggest factor was the war that made it necessary for us to get out and to register [as refugees]. First of all there was my husband’s illness – he has a blood disorder, haemophilia, and there was no way for him to get treatment in Syria. So we had to leave for his sake and for the sake of the children for whom we were always scared... that they would be killed and they couldn’t study...one day they could go [to school], another day there was an attack, and then who knows what... . The days they went to school we would be paralyzed with fear, that they would be kidnapped or arrested and the worst was fear of kidnapping. That was why we had to leave – most of all for the children.”

Given the chaos of war, many mothers were forced to quickly leave behind extended families and kin networks. For one mother of four, who first legally migrated to neighbouring Jordan, her extended family was forced to break into its smaller, “nuclear” formations once war broke out: “Even if we [were to] go home [to Syria now], my sister is with *her* kids, my brother is with *his* kids... My mother is with my father... So I have to be with *my* kids and my husband as well. But I would have liked to have time to see my parents as well. In periods of war, you’re not with anyone. Everyone wants to be safe.” The wistful “you’re not with anyone” speaks volumes about the huge loss and current loneliness in mothering. All participants described significant upheavals in extended family structure.

Mothers identified specific buffers that at least partially thwart stressors to ameliorate deep feelings of loss, sadness and grief. In terms of social support, key was communicating with close family members through Facebook or WhatsApp, which allowed free encrypted text,

audio, and video communication on smartphones (see Ahmed, Veronis and Alghazali 2019; this volume). A mother of six, asked how she keeps in touch with family members left behind in Syria and neighbouring countries, joked, with sorrow:

Interviewer (I): Do you talk to your family - and how?

Participant (P): On Facebook, and Whatsapp...that's the only way I recognize my family [rueful laughter]. It's been five years since I've seen most [of them].

These regular calls allowed Syrian refugee mothers to experience at least some of the warmth their families, once much closer, provided in the past. However, mothers also described how intermittent mobile and electrical outages in Syria and nearby regions frustrated their efforts at maintaining consistent, ongoing communications. Additionally, for at least some mothers, this reminded them of a distance that seemed harder and harder to bridge and could evoke feelings of melancholy that were seemingly not resolvable. A mother of two young children who described herself as “broken,” talked about crying because she deeply missed her family. “I feel lost. The other day, I was talking to my family on Viber. Then my son came to me, I told him ‘Come on, let’s get ready to go to your aunt’s house!’ I had forgotten we weren’t there anymore! I was thinking, why am I talking to her on the phone, why don’t I just go to her house? I used to go to her house all the time when we were in Jordan, when I wasn’t feeling well. I told my kids – ‘Come on let’s go!’ And because they’re kids, they said ‘yes! Let’s go!’ [giggles]. I felt like – I missed it a lot.”

Social media allowed this mother to deeply connect with extended family and kin networks, but its limits became poignantly obvious as she momentarily believed she could go visiting. Moreover, in terms of social support, mothers were reluctant to share their problems

with distant family members, indicating those relatives had their own burdens to worry about. A few mothers indicated they had nobody to talk with about their deep losses and difficulties.

Face-to-face, local networks supported some mothers. For suburban mothers, where a significant number of Syrian refugees live clustered around a community centre, many described community support from similar others (Thoits 2011) who have shared major upheavals through war. Moreover, they shared knowledge about resources, such as a particular translator for the school that many mothers seemed to know. Mothers described warm exchanges of conversation, advice and support from those in similar circumstances. Many refugee mothers settled in the city of Toronto were moved to less expensive areas of the city ring, sometimes not nearby many similar others. This may have inhibited key initial supports. Yet among the small number of second interviews of Toronto mothers, some indicated that they had developed new supportive acquaintances or friends, typically those in similar circumstances, with whom they managed to connect. This suggests the importance of personal and community networks and supports for mothers' well-being, and agency on their part to connect with similar others. Notably, we recruited in part based upon a university program in the city site; this program may have allowed city mothers to make connections to these similar others sooner than they would have otherwise. Thus both virtual and face-to-face connections, the latter varying somewhat by research site, acted as buffers, potentially protecting mothers' well-being to some extent in the initial months.

Finally, in line with the stress process model, mothers' self-concepts also seemed to be important resources in certain arenas. Mothers descriptions of saving children through landing in Canada perhaps linked both to a profound sense of mastery in mothering, and a renewed mattering, in which they and their children were valued as worthy of attention and importance in

society. In some ways, mothers' stronger selves might keep them going during otherwise tough times, and allowed for distress to be held somewhat at bay.

Results II: Schools are Good, But...

A second set of refugee mothering stressors are linked to children's school experiences. Mothers were relieved and grateful to have their children in a stable education system. Although mothers reported concerns about children as they entered schools, they indicated especially for younger children, issues resolved quickly. Some mothers reported teenagers were having difficulties learning the language and thus the curriculum; they were concerned about teens being and falling behind at a critical life stage. Mothers did not report many experiences of maltreatment or discrimination, and either they or their husbands, often along with community translators, had met with teachers when academic or social concerns had arisen. The difficulties were generally viewed as expected and resolvable, given that children were taught in a language foreign to them, with comparatively different pedagogical and discipline styles, in new neighborhoods in a new country. Translators were a vital support for communicating with teachers and principals in attempting to resolve difficulties.

The mothers landed in Canada with diverse past experiences in Syria and in trying to access proper schooling for children in temporary settlements. For example, a mother who initially fled to Jordan with her four children and husband sent her children to Jordanian private schools before financial resources ran out:

P: In Jordan, [my] oldest [son] was in grade 1, and [eldest] girl was in KG2 [Kindergarten].

They went to a private school. Then we were not able to afford private schools... in terms of education for Syrians in Jordan, there was no attention given [to children] at all.

I: So the private school was better?

P: Of course. They were good, and there was a lot of attention [paid to them] in Arabic and English classes. They had 4 books for their English class. As for the other [public] school, they had 1 or 2 books, but they didn't really use them... even though the *mufawadin* [United Nations Refugee Agency UNHCR] provide everything for Syrians [in an UNHCR-organized public school]. But the Jordanian teachers are not really concerned... there was no attention given at all. The same teachers teach in the morning and in the evening, so they don't take any break. And only Jordanians are allowed to teach. But they don't have any experience. One of the teachers had a degree in tourism but taught math at school, in grades 3 and 4. She didn't know anything... Nothing...

I: Here if you have any concern... [do teachers] answer your questions? Do they pay attention to you?

P: Yes, of course.

I: So you felt a difference between the school here and in Jordan?

P: *Alhamdulillah*. Schools here are very good.

Nonetheless, some parents thought Canada's curricula were not as challenging as Syria's, and thought there should be more homework; and a number were concerned about sex education.

After stating "*Alhamdulillah*. Schools here are very good," the mother above said:

P: But there are some things that kids face at school... the discussion about sex [education].

I: So the words they use are not acceptable where you're coming from?

P: No, they're not. My kids don't know anything related to [the topic of] sex. I'm surprised when they ask me questions; I don't know how to respond to them. We [are] Arabs... and we're Muslim... we don't usually talk to them about that. When they grow up, they [will] understand. I took [attended an information session about] the [updated Ontario health and physical education] program at school. But I wanted to teach these things to my kids my own way.

I: Did they give you that choice [to decide whether or not her kids could participate in the Ontario health and physical education program]?

P: Yes, they did – but I'm not sure if they will accept [my answer].

I: What happens if their teacher explains that to them in class?

P: No, I didn't like it... The kids talk about the same things *outside* the classroom. I'm okay with my son knowing about these things because it's normal in Canada. At home, on the street, among kids... It's normal. But I want to teach them to him my own way.

At the same time this mother related concern about the 2015 updated Ontario health and physical education program, representing a very different approach from how sexual health is taught in her community of origin, she conceded that she is “okay” with her Grade 3 son, the oldest of four, knowing about these things because “it's normal” in Canada. Her feelings about the curriculum (which in Grade 3, introduced gender/sexual identity and reinforces correct terminology for body parts) were complicated, as she was keenly aware of their new Canadian setting and described a general open-mindedness about its influence on her children, but regretted that she wanted “to teach them... my own way.” Her concerns appeared to be shared with a proportion of Ontario residents (including newcomers in immigrant-rich neighbourhoods like those in the study) who mobilized against this curriculum shortly after implementation. At

the time of writing, a recently-elected Conservative provincial government had repealed the contentious curriculum.

In all, mothers were relieved and happy that their children now had access to a good education, were learning English, and that they had a future as educated citizens of a safe and welcoming country. Most school-related difficulties, including academic and peer-related, were viewed as expected and resolvable.

Results III: Mothering Upended

A third set of stressors was linked to a loss of control based in new authorities and new values within Canada, that sometimes clashed with how their own mothering was envisioned – making mothers feel upended in varied ways. Their relief at finding a place of safety and relative welcome in Canada, possibly linked to stronger selves – both mastery or control over their lives, and mattering to the society – was ironically coupled with cloudiness over their current and future mothering. Notable in the statement below is a “similarity” when living in the Arab world that was lost. A mother of four, who initially settled in Lebanon after fleeing Syria, described the condition of Syrians now dispersed across the region:

“When it started, none of us could imagine that Syria would turn out like this. We were shocked; we’ve lost all these years and had to leave. And *inshallah* we will see there was some point...we Syrians...we can take a lot. Of course we couldn’t go to any of the Arab countries because they don’t want us. We went to Lebanon, to Jordan, to Turkey, and in all of those places they hate us...and in Canada it is the opposite. We see here peace and care...we saw that there remains a remnant of humanity that no longer exists in the Arab countries...all the people started to complain about the Syrians, the Syrians, but it wasn’t like that. We were living basically the

same as Lebanese...there is a similarity among us all. But then they started to close every door in our faces, in the faces of the Syrians [shakes head in sadness].”

Another mother who said she was happy because she “saved” her children, stated: “There is no future in the Arab world. But here, there is a future.” Mothers uniformly reported their children’s futures as secured, at the same time many stated that they themselves had no future, that their future was “done” or “gone.” A 40-something mother of six, ages 16 to 26, four of whom migrated to Canada with her and her husband said “My future is over... I think of my children now, I want to make sure they finish their studies and fulfill their dreams. That is my future now. Just the children. Their future is my future. I will see them and be able to be proud of them [deep sigh].” Notably, most mothers referred to God being in control of the family’s future.

The data pointed to connectedness in stress processes across family relationships and roles. Mothers, though securing children’s future, experience costs or ruptures to mothering. The ruptures can be thought of in three ways. First, fundamentally, mothers’ general authority can be upended by landing in a culture they may not understand aspects of due to language barriers and different norms. Second, a seamlessness of values is disrupted – mothers’ similarity between their own and the new culture’s values can be glaring; and third, there are hints that their previous place as traditional women and mothers – is now altered in a more gender-equal society.

First, in terms of upended authority, a mother of four relayed this stressor through an example of how power relations between parents and children are disrupted (Orellana et al. 2003). Here, a boy made claims to agents of Canadian state power before the mother’s authority was somewhat re-established through intervention:

Here [we] were scared when we first arrived. We didn't know anything, we were scared that if [our children] cried one of the neighbours would call the police and we weren't told anything. We were scared because we thought that if [for example] my son cried for the mobile phone and we said he had to wait, he would threaten to call the police on us. Then yesterday I had a meeting with one of [our private] sponsors and I told him, "whenever my son wants something he threatens to call the police if we don't give it to him." So we sat my son [down] and [the sponsor] said, "if you want to call the police, go ahead, use my phone." He explained to my son that you can't call the police because your mother doesn't give you an iPad or a mobile. He made [my son] sit and explained that "your mother is in the right and she is not wrong." And I swear, my whole self relaxed! Since I arrived in Canada I've lost eighteen kilos... from the uncertainty, from my nerves. He was always threatening me with the police and I was even thinking about going back to my country...it was like a nervous condition...but when [the sponsor] did that everything relaxed.

Note the inverted power relations between child and mother; and then reversion to a "normal" parental authority and control (and lessened anxiety) with the intervention of a supportive sponsor.

A second upending occurred through a rupture in the seamlessness of one's own with the larger cultural values. Mothers felt the weight of a new society where they perceived that families, and parent-child relations, were negotiated differently. As they looked to the future, many expressed concerns about how their children might be influenced by the new local culture around them. Similar to previous research on immigrants in a new land (e.g., Waters 1999), mothers expressed concerns about whether and how their own children would maintain family

values and traditions. Many mothers commented on the freedoms available to young people; although they noted some positives such as being able to choose a profession, they saw freedom could lead to some disturbing pathways. They did not want their children to participate in the drinking or drug use they saw occurring among some Canadian teenagers. They did not want children, once adults, to move away from families which they viewed as the norm in their new nation. Below a mother of six, who had been talking in a positive and hopeful way, dramatically shifted to a markedly dark and fearful tone as she explained that she felt a loss of control over her children when they become young adults:

P: What can I say? For [my children's] future, people's talk here scares me.

I: How so?

P: Well, they say that if they are 18 [years old], you have no legal obligations towards them; they go one way and you another. It plants an idea in their heads. The future scares me. That's it.

Finally, a third upending related to gender roles. Whereas being a mother had the certainty of a prescribed and certain role in Syria, mothers recognized that what is “mothering” and “fathering” in Syria might turn out to be different in Canada. Notably, there is no word for “parent” in Arabic, only “mother” and “father,” underscoring how gender specialization in the homeland may be transformed in parenting children in North America. For example, whereas previously mothers might have been in charge of children's schooling, if fathers knew English better, or did not have work obligations, they might be the “go to” parent for connecting to schools. Whereas mothers might have felt second in power to husbands, some felt empowered by

quick acquisition of English, especially when supports like childcare were provided and women's labour market participation was encouraged. Some mothers noticed how busy Canadian women seemed and how they did "everything." These impactful transformations in the gendered division of parenting labour and the balance of power between spouses resembled "transnational gender vertigo" (Hoang 2013). Building on Risman (1998), Hoang describes it as the process through which traditional, familial gender roles (e.g. "breadwinner") are upended as a result of transnational migration.

Although mothers shared fear relating to loss of authority or cultural differences in parenting, many also describe these as necessary to have secured their children's safety. A few mothers noted that some differences they experienced in their new society, such as those related to mothers' more equal role in society, were positive or welcome.

Discussion and Conclusion

Despite huge losses, and a stressful and ongoing transition during early resettlement, Syrian refugee mothers also expressed great relief at providing their foremost obligation to children: physical safety and securing their education and a future. In doing so, mothers often express gratitude for the care, respect, and positive treatment they receive in Canada. They feel they matter and are valued in Canadian society. This was not always the case in temporary settlement, where Syrian mothers described maltreatment or indifference and difficulties accessing reliable work and schooling. Their stories are marked by resilience. Still, of course, refugee mothers face a number of weighty stressors as they settle with their children in the GTA. Mothers' losses – separation from extended families and the destruction of cherished homes, neighbourhoods, and cities – crystalize in settlement. The separation is more than just physical:

for many, it meant the dismantling, nuclearization and distancing of extended families, and the disintegration of the structure and relationships that held what they may have believed as the ideal family form. This sense of family breakdown was further expressed in their worries and ambivalence about whether their familial languages and cultures present advantages or obstacles to their future relationships with their children and to living well in Canada. Second, there are some stressors identified with children's challenges as they begin schooling, though mothers appear most concerned about their adolescent and young adult children, who struggle more with language and peers. Finally, even as mothers feel strong because they fulfilled a fundamental moral obligation to secure children's futures, they express some loss of control and fears about the future – that their families may fade into a culture that is different in many ways, with young adult children accessing freedoms that pull them away from parents.

No doubt additional and more complex stressors will emerge as children grow and often surpass their parents' connectedness and proficiency in the new society. Indeed, the two waves over a brief time period already provide a glimpse into the importance of understanding refugee mothers' experiences and well-being in processual form. The current study extends the family stress process model through indicating the complexity of dramatic stressors like dislocation occurring to oneself *and* significant others and how forced choice events may alleviate some but create other mothering stressors and simultaneously destabilize social support and personal resources like mastery or felt control.

Mothers' mental health becomes vital to other family members' well-being. Indeed, in their study of cultural distance and emotional problems among immigrant and refugee youths, Beiser and colleagues (2015) show that the family environment, particularly parental depression and harsh parental practices, have negative effects on immigrant youths' mental health. The New

Canadian Children and Youths Study (NCCYS) finds that, while immigrant children's mental health is affected by factors similar to those affecting Canadian-born children, immigrant children whose parents spoke little English or French, or who were having greater resettlement issues, seemed to experience more distress (Beiser et al. 2010). A study of youth school adjustment in Finland found that Vietnamese immigrant youths had better school adjustment than Finnish youths – these youths' successful school adjustment seemed to be positively associated with parental support (Liebkind, Jasinskaja-Lahti and Solheim 2004). Looking across these studies shows that maintaining high levels of *parental* well-being is associated with immigrant children's adjustment in the host country.

Some of the resources evident in this study can be strengthened and reinforced through public policies that set mothers up for success as they raise their children. Important supports include access to Internet and phones, which allows them to make vital connections to faraway relatives. This tool goes a ways toward ameliorating loneliness and disconnection from the past (see Ahmed et al. 2019, this volume). Supports from being in a community of like others are seemingly important to mothers' everyday experiences in raising children (Betancourt et al. 2015); the location of resettlement housing in proximity to language centres with free childcare is similarly vital (see Rose and Charette 2019, this volume). Services such as translators or settlement workers in schools, individual and family counselling, parenting skills, cultural interpretation, intensive education services for teens and young adults, mental health support, and community development are also important for positive adjustment and integration of Syrian newcomer families. Similarly, a careful screening of and proactive responses to physical and mental health concerns of Syrian mothers at the doctors' offices and health clinics – for example, post-partum depression/anxiety which may be exacerbated by social isolation during resettlement

– also would be important. However, public policies should not be directed to newcomers only. As previous research has shown, the prevalence of long-term mental health issues among war-refugees is very high (Bogic, Njoku and Priebe 2015). Public policies therefore should also communicate Syrian refugee and immigrant resettlement issues to local and host communities, key service providers such as social workers, teachers, physicians and cognate professionals, and help build capacities to integrate newcomers. This may include supporting NGO and sponsor groups with anti-racism and multiculturalism training, volunteer training, community building workshops, and immigrant resettlement and integration services.

Mothers' senses of successfully bringing children to a new land that helps secure their future is fundamental to mothers' well-being. Those working with mothers can help build up mastery and mattering by underscoring mothers' crucial role in sacrificing for children and discussing how others have successfully maintained their cultural ties. For example, more connections can be facilitated between Syrian newcomer and Southeast Asian communities resettled in the 1970s and 1980s, who continue to live in multigenerational households and sustain their cultural values. Public policy makers might consider initiating a multi-sectoral task force that brings together community leaders, NGOs, experts, and policy actors to develop ways and means to build such a connection.

Overall, our study points to unique stressors of mothering disrupted by war and displaced into a foreign land. In their own voices, mothers in this study reveal great sorrow at losses from fleeing Syria and strains during their resettlement in Canada, but also great strength and resolve as they nurture their children. Fragile ties to their new communities need bolstering early on in order to best protect mothers', children's and families' well-being.

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List of Figures

Figure 1: The Refugee Stress Process Model

