

Editorial by Paul Tibbles in dialogue with Ncazel Ncube

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This edition of *Clinical Child Psychology and Psychiatry* (CCPP) has developed in the context of ongoing and increasing international alarm at the levels of displaced children, young people and families seeking refuge from persecution, war and economic privations. Initially as special editor, my focus was on how to promote articles which addressed the immediate and long-term needs of these people and the therapeutic care that should be made available to them. However, I was aware of divergent views that existed between some practitioners who focussed on addressing trauma, while others were attentive to promoting resilience. Among the many other issues which I considered important were the long-term effects on parents of losing a child during conflict, cultural sensitivity of services, the wider political context, and the impact of vicarious trauma and vicarious resilience on health and social care staff. I think that the articles in this edition cover many of these issues which are highly relevant when addressing the psychological well-being of displaced and persecuted children and families. Although these articles are derived from different parts of the globe, they inevitably reflect a bias towards researchers and clinicians originating from more affluent recipient countries rather than the perspective of those working in emerging economies. It was with this in mind that I approached Ncazel Ncube to ask her to engage with me in an email dialogue about our different perspectives on how best to promote the psychological development and well-being of children, young people and families seeking asylum and refuge. Ncazel is well known for her work in South Africa using narrative approaches with displaced children (Ncube, 2006). Our email dialogue is located below and, as can be gathered, there was considerable reflection about our own history and cultural context and how that impacted on the way we made sense of what we experienced and the ramifications of this on our work.

Paul: Life contains periodic poignant coincidences and such an incident happened to me while preparing to write this editorial. A number of unexpected conjunctions in my own life had ramifications and connections with my thinking about the victims of war, refugee families and unaccompanied children seeking sanctuary. Prior to starting to write the editorial, I was called to jury service for a trial in a part of London where I had moved to from Devon almost 40 years earlier. At that time, it was a desolate and empty area of derelict warehouses surrounded by the last remaining bombsites in the city. I revelled in being able to walk through this during the working week without seeing another person. It was truly Dickensian. Now, it has some of the most expensive real estate in the country, there are vast crowds of people walking along its footpaths and the last remaining physical memories of World War II have been erased. The

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young person accused in the trial was a former unaccompanied child seeking asylum who had been unaware of the requirements made by the state on the handling of her financial affairs and how this differed from her own culture.

The context of the trial raised for me a number of thoughts and corollaries. First, how much this part of London had been transformed and how this was also reflected in changed demographics involving peoples from across the globe, working in multi-national organisations, living alongside more established residents adjusting to this new context while having a communal history of the area. Old certainties about community and identity have changed dramatically bringing with it a sense of hope and dynamism for some, and for others uncertainty and a wish to hold on to the familiar. Second, that although the obvious scars of war had been covered over the memories and psychological consequences had lingered on through generations. Despite never having actively experienced armed conflict, I was brought up like others in the United Kingdom with a grandfather and father who had unspoken and unappreciated experiences of extreme violence which had an ongoing and unrecognised impact on family life. In my own way, I experienced vicarious trauma and vicarious resilience although as a child largely unaware and uncomprehending of the origins and its impact. Finally, that the young person in the dock although apparently disconnected from this historical background in fact provided a painful reminder that violence and trauma remains a component of our everyday life. We are all made aware in the media of the suffering produced by ethnic cleansing, civil war and other forms of armed conflict and persecution. However, in addition to these factors unaccompanied minors, child refugees and their families frequently need to adjust to the ramifications of seeking sanctuary in countries that differ significantly from their own in terms of schooling, language and cultural practices while processing or not processing their prior experiences of extreme violence and dislocation.

Ncazelolo: I am increasingly convinced that all services provided for refugees and migrants need to take into account their cultural beliefs, values and expectations for improved outcomes and their well-being. Your contribution to the editorial got me thinking a lot about the struggles that refugee families and unaccompanied children seeking sanctuary experience particularly pertaining to cultural differences in their host countries. I wonder to what extent cultural differences are considered in service delivery for refugees and migrants more specifically in the provision on mental health services. The article got me thinking about what the fate of the young person whose trial you attended would be and the role that cultural understandings or misunderstanding would play in the case. I also wondered about who might have been available to support her and perhaps help her to explain the cultural differences that influenced her actions and behaviour. I found myself also thinking broadly about culturally sensitive therapies and how these are very important for refugees and migrants.

In 2014, while studying for my Masters in Narrative Therapy and Community Work, I learnt about the New Zealand Maori traditional healing practices which had become increasingly integrated in family mental health practice (NiaNia et al., 2013). Indigenous communities in the Pacific and elsewhere have called for traditional healers to be employed alongside other mental health professionals working with their communities (Incayawar, 2009; Tamasese, Peteru, Waldegrave, & Bush, 2005). This account spoke to me about the benefits that close and sincere collaboration between those with cultural knowledge and health professionals (e.g. child psychiatrists) can offer families and children in distress, healing possibilities that may not be available to them in conventional child mental health or other family therapy settings. I was very drawn to the ways that professional therapists featured in the articles embraced cultural beliefs and invited them into the therapeutic context with great respect and understanding. I have drawn a lot of inspiration from this work and always endeavour to spend time learning about the culture and histories of the people who consult me for counselling.

Paul: The young person on trial was found not guilty, but her life would have been deeply affected by the fear of being potentially imprisoned particularly as this was to some extent analogous to the imprisonment of her parents and siblings in her country of origin. It was pleasing to know that to some extent, the UK legal system was understanding and accepting of dissimilarities in cultural practices and acknowledged the young person had struggled to adjust to new complex rules in the society she had entered. Following the trial, she would have had to pick up the pieces of what had formerly been a successful adjustment to a new life and do so being reliant on the support of her partner, friends and colleagues. I was left with a sense in which there was an expectation that those coming to the United Kingdom were expected to adjust, but there was much less awareness of how domestic society might in turn need to change as a consequence and in turn what this might evoke. The reverberations of the past in my experience play a particularly significant part in British national life, but often they are echoes not fully connected with their origins. I am thinking here particularly of the aftermath of the World War II, where there was an emphasis on 'getting back to normal', rebuilding and recovery. The men in my family serving in the armed forces during the war and the post-war period of decolonisation rarely if ever talked about their near death experiences or being at the heart of extreme violence. As a consequence, the impact of these experiences on family life remained unrecognised during their lifetime.

Maintaining emotional engagement with refugee and asylum-seeking children, young people and their families challenged me the most as a therapist, since I needed to shift between being alongside their hopes and aspirations and at other times their feelings of sadness, loss and disorientation. I felt distress as a consequence of hearing stories of abuse and suffering, but this was counterbalanced by seeing these people adjust and engage with their newly adopted homeland. Witnessing their increasing self-confidence helped me to maintain a sense of hope and to persevere when they and I felt discomfort and disappointment. Identifying areas of strength in these children, young people and their families was important for me to sustain a productive therapeutic relationship with them which would not have been possible had I solely focused on exploring past traumatic events. The past and the present exist together and need to be equally valued as and when the people concerned raise them.

Ncازelo: South Africa is regarded as the economic powerhouse of Africa and has become home to about 3 million immigrants and more than 1 million refugees. Children are part of the large-scale population movements currently taking place in the country.

Children on the move is a term used locally to describe children moving for a variety of reasons, voluntary or involuntary within or between countries, with or without their parents or other primary caregivers, children who have been trafficked, children seeking asylum and children who migrate for economic reasons. Numerous reports exist about the risks that children on the move face during their journeys including inadequate care, economic or sexual exploitation, abuse, neglect and violence.

In 2013, I worked with a troubled friend and colleagues who is a Social Worker at a shelter in Johannesburg which provides support services to children and young adults who are largely economic refugees from bordering countries. My friend was frustrated that her counselling work with the children and young adults who came to the shelter for a daily bath and meal and psychosocial services felt very inadequate; she said she was not sure how to fix this problem. Her stories about the children were heart breaking and heavily characterised by notions that they did not readily take up the services being offered by the shelter and that this was quite disappointing as the expectation was that they would grab the opportunities they were provided and live like normal people. She described the children as being out of control, wild, hopeless, directionless and totally lacking of critical life-skills that they needed to live productive lives. My friend requested that I join in with

her to try and find ways to help the young refugees. I took up the challenge to help; I felt the need to support her to develop a broader understanding and appreciation of the children that she was working with. The idea that the young people were totally spoilt and ruined was something that I immediately questioned. Hardships do not totalise people's identity. I knew from my own work with young people that they are not passive recipients to the problems of life. We had the challenge of finding a way of working with them to uncover the neglected stories about their lives, the things that people did not know about them, the hidden treasures about who they really are and what their journeys were about.

I have learnt that single storied accounts of people's lives dominated by problems can be hazardous in counselling contexts. They limit options for the therapist and trap people receiving counselling services into experiencing their lives and identity from the problem perspective. This can introduce hopelessness and a sense of futility. I have experienced problem-saturated accounts of people's lives as limiting to both the therapist and the people seeking counselling. I have for a long time questioned therapeutic approaches that invite us to privilege the problems that people face. The tools that we use to find out about people's lives implicate problems and the conversations that we have with them are about the same. In my own work, I have learnt that people's lives are bigger than the problems that they have experienced, this includes children. They have skills and knowledge about life, values and aspirations and hopes and dreams about their future.

It takes a lot of courage for children to leave their home country, families and familiar territories. At face value, however, these movements may be perceived as senseless and an inconvenience to others, but I have learnt that these are largely bold steps taken in pursuit of a better life. Young people on the move want more and believe they can achieve greater things than their local contexts can offer them. They are pushed into these movements by their hopes and dreams and curiosity about what more life could offer them. They dare to push boundaries and unsettle the status quo. They bring to our faces the things we would rather hide or not talk about, those things that we are not proud of, the things that happen behind closed doors in families and communities, and the inequalities and injustices that prevail in our societies.

These movements I have learnt are sometimes a protest against abuse or an expression of disappointment or dissatisfaction about the goings on in the young people's places of origin in relation to social issues, politics, the economy and so on. Stories about what push children to leave their homes, live on the streets, migrate to far away regions and countries are, however, usually thinly described. They are largely told from the point of view of others and usually in dominant story lines tainted with a lot of negativity.

Responding to the request to help out with the refugee children, I created a methodology I called 'The Narratives in the suitcase project'. This work drew inspiration from the Suitcase project (Clacherty, 2006) and with narrative practice and journey metaphors (Ncube-Mlilo, 2013). The project sought to find out what children's movements are really about. In developing this work, my intentions were to find ways for the neglected stories of the young refugees to be told from their point of view. It needed to be a project that would honour the hopes and dreams of children on the move and to support them to experience being connected to the things that are important to them; their loved ones, skills, knowledges and values. It was my hope that this would open up new possibilities for the young people, as well as support my friend to find meaning and derive hope in her work with the children.

The Narratives in the suitcase project was also intended to be culturally and contextually appropriate for the children it sought to support. I worked with metaphors that the children could easily relate to and identify with. The various steps in the methodology are drawn from local practices that children are familiar with. The Indaba or story circle used in the methodology for groups of children to sit together and share stories about journeys travelled are drawn from cultural approaches

used to share and collectively tackle the problems and joys of life in our communities. I have seen many benefits in my work related to ensuring that the counselling I provide fits with people's cultural ways and knowledges about how to solve problems. I find that culturally sensitive therapies give people seeking counselling their voices often lost due to the hardships they face on their journeys. They open up options for people and give them a sense of hope. They speak to me about the experience of counselling as being very meaningful and transforming for them.

In growing this work, I have identified important principles that cut across my practice with vulnerable groups including refugees. I have termed this, 'The Imbeleko approach to therapeutic practice'. Imbeleko is a traditional baby blanket made of animal skin which most African communities can identify with. In Southern Africa, it has become a common symbol for home grown indigenous knowledges about life. In my counselling work, I use the term to describe use of local knowledges and skills to provide counselling services that do no harm and are strongly rooted in community and culture. It is about connecting people to important aspects of their history, culture and to their loved ones in ways that can sustain them through difficult times.

The methodology centres children on the move and allows them to describe their journeys in ways that are more fitting for them. Children and young adults who participate in the project are supported to give richer descriptions about what they were in pursuit of when they left their home countries and cities. Young people sometimes get lost and deviate from the intended path(s) due to hardships faced on their journeys. Through the project, those who have deviated and gone off track are supported to find their way back.

Paul: I was struck in your account by the pervading sense of wanting to instil hope and a positive understanding and response to the 'children on the move' and wondered to what extent your own personal background and experience led you to work in this area. It left me thinking about the extent to which all elements of the child's and young person's account need to be respected and seen as important both the painful and the hopeful. That they are representative of human experience and that to see the strengths and resources of a child are fundamental in enabling that child to feel they are being welcomed and responded to with optimism.

However, I wondered to what extent there were some differences in Europe with those in Africa. In recent years, there has been a large movement of people out of Syria to neighbouring countries and a significant number then moving on to Europe. Families and unaccompanied minors from areas of the war torn Middle East are escaping the collapse of communities, extreme and sustained violence, and organised state persecution. All aspects of normal economic life have disintegrated for these people. In addition, children and young people during their escape may have witnessed the death of family members, suffered abuse, been threatened with violence whilst surviving physical deprivations in their search for safety. The experiences of persecution, violence and impoverishment combined with being uprooted from their communities and cultural base would have left a deep imprint on them psychologically. As a therapist working with young people arriving from such decimated societies, it has been important to bear listening to the very painful experiences they retell and their current worries but equally important to hold on to hope, to see a future and to see this in them and be open to their stories of resilience and strength. The assumption that hope and hopelessness are oppositional have been questioned by Flaskas (2007) who suggests they are potentially concurrent experiences, meaning that the clinician should be prepared for the possibility of strong feelings of hope and hopelessness to be equally present. In therapeutic work, hope and hopelessness are regarded as coexisting, and holding onto hope is balanced by an appreciation of the importance of witnessing and acknowledging in the therapeutic relationship experiences of hopelessness. I have commented elsewhere on the importance of integrating the different narrative of displaced families, child refugees and unaccompanied minors (Tibbles, 2017).

Ncازelo: Thank you for your response to my editorial piece. I agree that generally my work comes out strongly as honouring stories of hope and survival for the people that I work with. I do generally hold the position that problem stories generally receive a lot of attention and that people are very familiar to their problems and often seek counselling because they experience being trapped by problems. In my work, I emphasise helping people to become reconnected with that they have lost, that which has been taken away from them by the harsh experiences of life. This, however, does not mean that I do not discuss problems with the people that I work with. The work with the children on the move is not fully detailed in the editorial piece as I have just emphasised or highlighted the key aspects of the project; I have provided a link to the video presentation that provides a detailed account of the methodology. At some point in the methodology, the children are given an opportunity to talk about the boulders/roadblock and challenges that they have come across on their journey. I am, however, always careful to ensure that I do not talk about problems with people without talking about how they have responded to these problems and the skills and knowledges that they use to respond to the problems of life. This I have learnt challenges hopelessness and evokes personal agency in people. I am totally in agreement with you that conversations with people should be balanced and should take into account what people have suffered. However, I am also aware that problem-saturated accounts of people's lives can be re-traumatising to them and that the neglected stories of people's lives, such as their hopes, aspirations and skills, can be reinvigorating allowing them to reclaim that which they have lost.

Paul: Anyone working with unaccompanied minors, refugees and asylum seekers in the United Kingdom will be aware of the different conversations and descriptions that occur about them in the public arena and related political reactions to their reception and well-being. These descriptions and reactions form emotionally laden discourses which range from those containing sympathy, generosity and anguish to those comprising scepticism, resentment and fear. The world will continue for the foreseeable future to have mass movement of people fleeing persecution, deprivation and armed conflict. Therefore, those of us in the United Kingdom working with refugees and asylum seekers at whatever age will need to respond respectfully and sensitively to public concern while having ever greater demand placed on our therapeutic skills while practising with ever stretched resources. This raises for me the stamina needed by those involved in caring for and supporting unaccompanied minors, young asylum seekers and refugee families. I am reminded of your 'Narratives in the suitcase' project and wonder how opening up my family and cultural history will help me to identify my own strengths and resilience and how that in turn will support me in identifying these qualities in the refugees and asylum seekers I work with. This special edition can be seen as a suitcase containing different understandings and descriptions of the causes of dislocation, its legacy and the complex process of seeking a place of safety. All of those who have contributed to this truly international edition are hopeful that there will be many aspects within it which will inspire and energise those who open and unpack it.

References

- Clacherty, G. (2006). The world in a suitcase: Psychosocial support using artwork with refugee children in South Africa. *Participatory Learning and Action*, 54, 121–127.
- Flaskas, C. (2007). The balance of hope and hopelessness. In C. Flaskas, I. McCathy, & J. Sheehan (Eds.), *Hope and despair in narrative and family therapy: Adversity, forgiveness and reconciliation*. London, England: Routledge.
- Incayawar, M. (2009). Future partnerships in global mental health foreseeing the encounter of psychiatrists and traditional healers. In M. Incayawar, R. Wintrob, & L. Bouchard (Eds.), *Psychiatrists and traditional healers: Unwitting partners in global mental health* (pp. 251–260). London, England: Wiley-Blackwell.

- Ncube, N. (2006). The tree of life project: Using narrative ideas in work with vulnerable children in Southern Africa. *International Journal of Narrative Therapy and Community Work*, 1, 3–16.
- Ncube-Mlilo, N. (2013). Narratives in the suitcase. *Video Presentation*. Retrieved from <https://dulwichcentre.com.au/narratives-in-the-suitcase-by-ncazelo-ncube-mlilo/>
- NiaNia, W., Tere Bush, A., & Epston, D. (2013). 'I will not leave my baby behind': A cook island Māori family's experience of New Zealand Māori traditional healing. *Australian and New Zealand Journal of Family Therapy*, 34, 3–17.
- Tamasese, K., Peteru, C., Waldegrave, C., Bush, A. (2005). Ole Taeao Afua, The new morning: A qualitative investigation into Samoan perspectives on mental health and culturally appropriate services. *Australian and New Zealand Journal of Psychiatry*, 39, 300–309.
- Tibbles, P. (2017). Crossing frontiers: Narrative approaches with refugee children and young people. In A. Vetere, & E. Dowling (Eds.), *Narrative therapies with children and their families: A practitioner's guide to concepts and approaches* (2nd ed., pp. 253–270). Abingdon, UK: Routledge.