



Lives on hold: A qualitative study of young refugees' resilience strategies

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Abstract

Although the literature on positive adjustment following traumatic events is growing, only a few studies have examined this phenomenon in young refugees. Using the social-ecological framework, the aim of this study was to identify factors and processes that according to young refugees promote their resilience. A total of 16 treatment-seeking refugees aged 13–21 years, living in the Netherlands, were interviewed. Data analysis revealed four resilience strategies: (1) acting autonomously, (2) performing at school, (3) perceiving support from peers and parents, and (4) participating in the new society. These strategies interacted with one another and demonstrated the interrelatedness between individuals and their social context. Having to wait long for a residence permit and being older appeared to negatively influence participants' resilience strategies. These findings suggest that resilience refers to a dynamic process that is context and time specific.

Keywords

Adaptation, refugees, resilience, trauma, youth

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Introduction

The term resilience has been widely used in recent years. Fundamentally, it refers to a person's ability to adapt successfully to acute stress, trauma or chronic forms of adversity (e.g. Masten, 2014). However, there are various understandings of resilience. While, for example, some researchers conceive of resilience as a multiply determined developmental process that is not fixed (Cicchetti and Blender, 2006; Luthar and Cicchetti, 2000; Rutter, 2012; Sapienza and Masten, 2011), others use measures of trait resilience, which favours the assumption that people are resilient primarily because of their personal characteristics (e.g. Connor and Davidson, 2003). Although no consensus exists on how to define or measure resilience, resilience is more than a popular term. It has the potential for augmenting the understanding of protective processes. Investigation of these processes can lead to the expansion of developmental theory and useful avenues for intervention (Luthar and Cicchetti, 2000).

Young refugees¹ are considered to be an extremely vulnerable group because of the psychological distress caused by traumatic experiences in their country of origin and during the flight, the waiting period in asylum seekers' centres (ASCs) and the adaptation to a new life and culture in the host country (e.g. Bean et al., 2007). Consequently, studying adverse outcomes of these experiences has been the predominant aim of research on refugees for a long time (Lustig et al., 2004; Mohaupt, 2008). Indeed, several studies have shown that young refugees are at increased risk for a range of psychological problems, including posttraumatic stress disorder (PTSD) and depression (Bronstein and Montgomery, 2011; Fazel et al., 2005).

Nevertheless, it appears misplaced to consider young refugees' mental health problems as proof of lack of resilience because some of these may be considered as normal reactions to abnormal circumstances (Kleber, 1995; Papadopoulos, 1999). Also, Bonanno and Diminich (2013) emphasize that in the context of chronic and extreme adversity, gradual movement towards healthy adjustment may be regarded as resilience. Montgomery (2010) found that, while many young refugees showed high levels of psychological problems at arrival in Denmark, after 8–9 years these problems were significantly decreased in most of them. Vulnerability and resilience may not always be opposite poles of the same continuum (Fergus and Zimmerman, 2005). Looking from a resilience perspective at young refugees may be meaningful for this group that has its whole future ahead.

It is necessary to study the impact of traumatic events and the process of adaptation across multiple systems of the refugees' social ecology (e.g. Bronstein et al., 2013; Sleijpen et al., 2013; Weine et al., 2014). For young people, war, fleeing from their home country and adapting to a new country represent 'a fundamental alteration of the social ecology and infrastructure' (Betancourt and Khan, 2008). Young refugees' exposure to post-migration stressors are best understood as reflecting problems in the relation between demands of the setting in which they live and the protective factors (resources) at their disposal. Nevertheless, empirical research into the resilience construct has still been criticized for lacking social, cultural and contextual sensitivity (McAdam-Crisp, 2006).

A social ecological interpretation of resilience, meaning that dynamic interactions among various personal and environmental factors are involved, emphasizes the need to

listen to populations with different social and cultural backgrounds. These backgrounds can influence the resources that are accessible to them to overcome adversity. In this regard and because of the lack of agreement about the way resilience is constructed within young refugees, qualitative measures are particularly helpful: they seek answers to questions about the 'how' or 'why' of an equivocal phenomenon such as resilience (Green and Thorogood, 2013), and they can detect unnamed and specific cultural and contextual factors associated with resilient functioning (Ungar and Nichol, 2002; Vindevogel et al., 2015).

Using the social-ecological framework, the aim of this study was to identify factors and processes that according to young refugees themselves contributed to positive outcomes following adverse life circumstances. By giving a voice to young refugees, this study enabled them to express the way they deal with the challenges they faced. In this study, resilience was regarded (in line with most of the recent definitions of resilience [Southwick et al., 2015]) as a process of adapting well in the face of adversity. Resilience was not viewed as the absence of pathology, and just by including treatment-seeking young refugees with different levels of psychopathology this study tried to get insight about the way they adapt and 'find it difficult to adapt' to negative life circumstances. By introducing contextual diversity (e.g. living arrangement, cultural practices and residence status) and by giving attention to processes and individual differences, we tried to add value to the existing body of literature on protective factors that contribute to the psychological well-being of refugee youth (e.g. Sleijpen et al., 2015). Understanding of mechanisms underlying variations in response to adversity might have implications for interventions not only at the individual level, but, more broadly, at the family and community level.

Method

Procedures and participants

Participants were recruited from Foundation Centrum '45. Seven therapists working in the youth team of this institute were asked to invite their clients to take part in the study. Inclusion criteria for participation were being a refugee and between 12 and 21 years of age. Exclusion criterion was severe cognitive disability.

From October 2012 till December 2013, therapists were asked to invite a total number of 21 young refugees eligible for participation. Of these 21, 5 were never invited by the therapists for various reasons: 1 was in custody and 1 in his country of origin, 1 dropped out of treatment, 1 met the exclusion criterion (of cognitive disability) and 1 was already overloaded with investigations. The remaining 16 refugees were initially approached by their therapists and then by the first author (M.S.). All of them wanted to participate in the study. Written informed consent and verbal assent were obtained from guardians and from participants separately. This study was approved by the Medical Ethics Committee of the University Medical Centre Utrecht (protocol number: 11-331/K).

The participants were eight females and eight males with a mean age of 16.7 years (range=13–20, standard deviation [SD]=2.43) and an average length of stay in the Netherlands of 4.9 years (range=1–11, SD=2.71). They had fled from different

countries and regions (Middle East=8, Africa=5, Eastern Europe=2, Asia=1). Four of them stayed without a parent in Netherlands, eight only with their mothers, and four with both parents. Three participants had a residence permit for an indefinite period and one for a certain period of time. Most of them had no residence permit ($n=12$); nine of these twelve participants lived in an ASC, one in a foster home and two of them stayed at an illegal residence because their application has been processed. They were all diagnosed with symptoms of PTSD.

Interviews

The interviews were semi-structured and conducted in face-to-face sessions with the first author, who has ample experience working with refugee populations and adolescents. This method created space for explanations and additions and let the participants develop their own views and feelings (Glaser and Strauss, 1967). Participants were offered the opportunity to have an interpreter present at the interviews. Only one participant preferred to have a professional interpreter present during the interview, all other interviews were in Dutch. The duration of each interview was approximately 1 hour. Although the participants could stop at any time they wanted, no interview was prematurely truncated. Three interviews took place at the refugees' homes and 13 at Foundation Centrum '45. Afterwards, the participants received a 10 Euro voucher for their time and effort.

For the interviews, we used a topic guide that we generated on the basis of a meta-ethnography conducted in the field (Sleijpen et al., 2015) and the expertise of the researchers and therapists of the Foundation Centrum '45 youth team. As a basis for building the topic guide and analyses, we considered resilience as a process of adaptation following stressful and/or traumatic events.

Our first question in the interviews was, 'Do you know the word resilience and can you explain what it means to you?'. This gave the interviewer the opportunity to elucidate the aim of the study and to ask if this construct existed in the language and culture of the participant. Because the interviewer was unknown to the participants, the purpose of this question was to give the participants some control. Then, the participants were asked if they could give an example of when they considered themselves (their process) 'resilient'. From this, we could derive what the participants meant by the word and which factors stood out for them as protective factors that modify the negative effects of adverse life circumstances. Subsequently, the topic guide included questions related to traumatic experiences and daily stress and the way they deal with these challenges, cultural and contextual influences on dealing with these experiences and positive experiences and thoughts about the future. With respect to cultural influences, we asked all participants what their original culture taught them and whether they noticed differences with the Dutch culture, in regard to dealing with distress.

The interviews were tape-recorded and transcribed by research assistants directly after the interview. The confidentiality and anonymity of all participants were always maintained. In addition, the interviewer made an observation report including reflections on her role as interviewer as well as additional information about the language level and level of understanding of the participants that was used for validation of the interviews. After three interviews, the transcriptions and reflections were discussed with two other

authors. They kept track of the progress of the later interviews and addressed interview techniques as well as interpretations.

Data analysis

All interviews were transcribed verbatim, except for names, countries and locations, which were substituted with functional codes to ensure confidentiality. These transcripts were imported in Maxqda2010 (Verbi, Berlin), to enhance consistency of the coding process and facilitate thematic analysis. Selected quotes for this article were translated from Dutch to English by a bilingual translator.

Factors and processes that according to the participants directly or indirectly promoted or inhibited their resilience were coded. We based our data analysis on a three-step process derived from grounded theory formulation (Glaser and Strauss, 1967). First, the interviews were open-coded. This entailed reading the transcripts closely and coding line-by-line based on the meaning that emerged from the data. For the first three interviews, this was carried out independently by [MS](psychologist) and [HB] (sociologist) and differences were discussed until consensus was reached. Subsequent interviews were initially coded by [MS] and checked by [HB]. Afterwards, [TM] (clinical psychologist) reviewed the codes, to strive for intersubjectivity about interpretation. Knowledge from new interviews was always compared with existing codes to identify similarities and differences. Later, we assigned the codes into main groups (life stages, stressors, resilience strategies) and subgroups (e.g. acting autonomously and performing at school). Finally, the team of researchers interpreted the data by connecting the codes and looking for contextual factors that might modify the negative effects of adverse life circumstances and subsequently identifying processes that might underlie associations found. By grouping participants according to main regions of origin, residence status (whether or not having a residence permit), age (older or younger than 18 years old) and gender, we aimed to look for differences in codes between groups. Saturation was achieved after 11 interviews, which meant that the researchers did not come up with new interpretations of the data and no new main themes emerged in the subsequent 5 interviews.

Findings

Overall, participants talked about traumatic experiences in their country of origin and during their flight; however, they focused especially on current stressors related to lack of refugee status. Even participants with a resident permit often referred to this waiting period, and the way they had dealt with it. In this section, the life stage(s) of young refugees and the hardships they faced are described first. We then describe the strategies that promoted young refugees' resilience as well as the breakdown of these strategies in some of the participants. In this study, we defined resilience strategies as choices, behaviours and resources that were (actively) used by participants to promote their resilience.

Life stages and stressors

When comparing the participants' stories, different stages they went through were found (see Figure 1): (1) life in country of origin, (2) flight to a new country, (3) waiting period

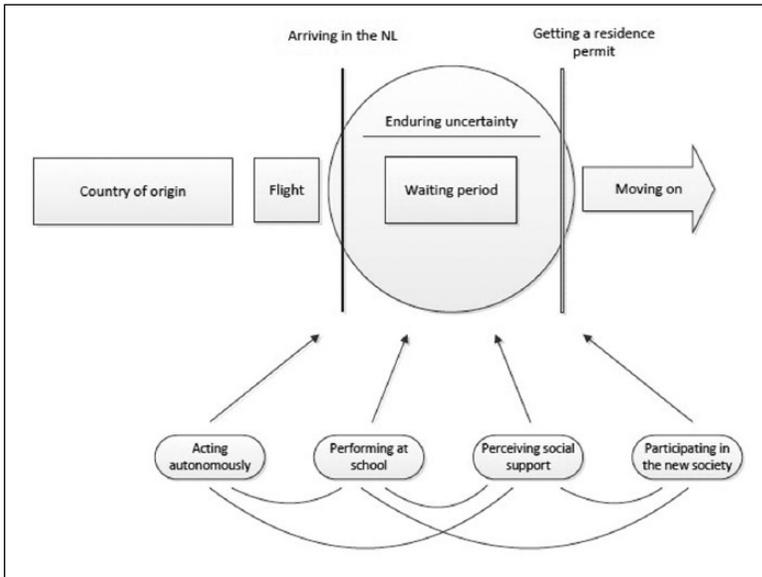


Figure 1. Young refugees' life stages and resilience strategies.

for a residence permit, and (4) 'moving on' in the Netherlands. At the time of the study, 12 participants were in stage 3, and 4 participants in stage 4.

All participants had experienced potentially traumatic experiences during stages 1 and 2, like the loss of loved ones, war, violence, being abused and tortured, and separation from family members. Arriving in the Netherlands was (initially) a positive experience for them, because they felt safe:

In [Country of Origin] we weren't safe, here we are safe. Okay we have problems here, but we live in safety. (P12, 21 years old)

After arrival in the Netherlands, participants had to live in ASCs because their claims for refugee status had not yet been assessed. When a sense of safety was secured, other (basic) needs started to play a role in young refugees' lives: they wanted to go to school, have their own room, live a purposeful life and achieve their ambitions. At the moment of the interview, participants without a residence permit were mostly focused on current stressors related to lack of refugee status:

I hope to obtain a residence permit as soon as possible. Then I can get a nice room, decorate it, get a nice job, and continue with my studies. Actually, very normal wants, but for me it's a big dream. (P13, 18 years old)

Living in an ASC was perceived as inconvenient; having little space, little privacy and little freedom for several years. Asylum seekers in this study had to report to the ASC on

a daily or weekly basis as evidence of presence, and they shared small rooms with family members. They had the feeling that their lives were put on hold:

I can't say I'm Dutch because I don't have these papers. And I also don't feel [Ethnicity of origin] anymore ... I'm nothing. (P13, 18 years old)

Most poignant was the feeling of uncertainty they had to endure. Asylum seekers were uncertain about their future in the Netherlands, and they felt opposed by the government, resulting in a feeling of powerlessness:

A characteristic of refugees, especially of young refugees, is that they can't be happy until they have the confirmation that they can stay in the Netherlands. Because you are never sure about the decisions the Dutch immigration agency will make. And that makes me angry, but the worst part is that you can't do anything about it. It's not in your hands. (P13, 18 years old)

The four participants with a residence permit did not have this uncertainty anymore and were able to move on: *'The Netherlands have given me a residence permit, now it is my own responsibility to take this opportunity'* (P02, 18 years old).

Resilience strategies

The process of enduring uncertainty and dealing with a traumatic history was manifested in participants with and without a residence permit in the form of four strategies: (1) acting autonomously, (2) performing at school, (3) perceiving support from peers and parents, and (4) participating in the new society (see Figure 1). These strategies interacted with one another and comprised the interplay between individuals and their social context.

Acting autonomously. Participants explicitly mentioned that they were left to their own devices when dealing with difficulties (n=9). They revealed a striking persistence: they tried to be strong, to stay positive and to go on despite distress. This gave some of them a sense of pride and confidence in their own abilities, and some sense of 'being resilient' and of having personal control. Furthermore, participants indicated that their own pep talks helped them to cope with stress and difficulties (n=8):

My mother has been ill for a long time now, almost five years. I find it very difficult because I am always thinking of her, but then I say to myself you have to keep going. Because if you think so much you can become ill yourself and that makes it even worse. If you stay healthy, you can help your mother. So that is my way of not giving up. (P03, 15 years old)

Despite the fact that participants had difficulty answering questions about positive changes following negative experiences, almost all of them (n=15) found that they had psychologically matured: they had become stronger and more independent through the hardship they had endured. Participants explained that they were more mature in comparison with their peers (*'Dutch adolescents are like babies: they have experienced nothing and I've*

seen everything' [P07, 14years old]). They did not, however, perceive this as particularly positive because they felt that they had had too short a childhood.

Performing at school. School was very important for the adaptive process of participants ($n=14$). It meant a key to a better future. Besides, performing at school provided distraction from negative thoughts about their traumatic history and it gave participants some sense of power, something they could be proud of and had control over. Furthermore, it provided social contacts and helped them integrate into the new society. As a result, participants who had no access to school because they were too old felt lost; it negatively impacted their resilience:

I know that school is my only rock. I feel good when I get good grades. At school, I forget everything. When I'm at home, I think no, no, no, fortunately school is there too. Sometimes I complain though, getting up early and stuff, but if there was no school, what would we do? Life has certain policies, guidelines and in your youth you need to go to school and I do it with pleasure. (P13, 18years old)

School could also cause stress. Some asylum seekers had to move several times to different ASCs around the country and consequently had to change schools repeatedly. Apparently, this was not conducive to their learning performance. One participant (*P03, 15years old*) was resistant to changing schools and to leaving her friends again. Her initiative to remain at the same school was supported by the school and family, but not by the Dutch immigration agency. At the moment of the interview, she still went to the same school and consequently had to live with another family. Only during holidays and when money permitted, was she able to visit her family.

Most participants from Africa were from illiterate backgrounds. These participants perceived going to school as a chance to move up in the world. For participants with a high original education level, who came mostly from the Middle East, it was disappointing to realize that they could not maintain their former academic level. Nevertheless, in general, these participants studied in the Netherlands at a higher level than participants from an illiterate background. Most of the participants had about a year of special education in Dutch and then they had to move on to Dutch mainstream education. This proved to be tough, especially for older participants. For participants without a residence permit, holding on to why they wanted to perform at school was hard. At times, they felt like it was useless to go to school because they stood a high chance of being deported:

Sometimes I wonder, why should I have to go to school because I don't know if I can stay here. Why do I have to go to school? But maybe school is better for me; I can laugh with classmates and make jokes too. It is better for me than staying in our room in the ASC. That is just one room with four walls. If you don't go to school and stay inside 24hours a day, then you go really mad. (P08, 17years old)

Perceiving support from peers and parents. While different types of support (like support from teachers and financial support) positively influenced the resilience of participants, perceived support from peers and parents were most frequently mentioned.

Almost all participants had contact with peers from different cultural backgrounds. They appreciated the mix of people, which helped them to integrate in the Netherlands and provided some of them with a sense of safety: in their country of origin, they were punished when befriending peers from other cultural or ethnic backgrounds. Furthermore, peers provided support, distraction and fun (n=12):

For me it is important to be around people from here. That is important; I just want to feel at home. I live with Surinamese, with Dutch people, and people from other nations. That is a really good thing for me, because, for instance, in my country of origin you aren't allowed to spend time with people from other ethnicities. (P01, 19 years old)

Although the participants experienced support from peers, they found it very hard to really trust other people. Most of the time only family members, and especially mothers, served as confidants. Participants with a parent indicated that their parents supported and comforted them when they struggled (n=11). Consequently, participants without parents (n=4) expressed how they missed their parents and indicated that they needed and were searching for more outside support than did peers with parents:

- I: And what makes you strong then?
 P: My mother.
 I: Your mother makes you strong, how does she do that?
 P: She comforts me and stuff like that.
 I: And that makes you strong?
 P: Yes, it gives me power. (P10, 14 years old)

On the other hand, many participants felt responsible for their parents' well-being and tried to take care of their parents. Although this was a heavy burden for them, the ability to help their parents also gave them a sense of pride and power:

- I: What makes you proud about yourself? Do you know the word?
 P: Yes. That I'm still alive, because everyone who was taken in prison together with me is dead, and I'm still here and I'm able to take care of my sister and mother. I've no father, so I have to help my mother with everything. Young people here do things young people do, but I do a lot of what adults do. (P08, 17 years old)

One participant, who did not have a residence permit, explained that she read the letters from the Dutch immigration agency to her mother and helped her mother with legal obligations. Counsellors were of the opinion that she took too many responsibilities, but she disagreed because she wanted to be involved herself; she wanted to know what was going to happen to her:

- I want to know if I will be arrested tonight and have to leave this country or if I can sleep without fear for a few extra months. Please let me retain some control over my own life. (P15, 13 years old)

Participating in the new society. All participants tried to learn Dutch quickly in order to adapt to the new country, by connecting with Dutch peers, going to school and watching television. They acknowledged the positive impact of integration into the new society. In this context, integration refers to young refugees' act of amalgamating with the Dutch community with at the same time maintaining aspects that they found important of one's own culture (Berry, 2003). It gave them a sense of belonging without denying their own cultural background and the ability to function as 'normal' adolescents:

You have to adapt. You just have to try to understand the Dutch rules because if you can stay in the Netherlands, you can get a good life. You have to work, for example. And if you have children, they have to go to school because that is required here in the Netherlands. (P02, 18 years old)

As a result, almost all participants (n=15) felt at home, at least most of the time, in the Netherlands. Half of the participants felt no longer connected with the country of origin, for different reasons: they had stayed for a long time in the Netherlands and were too young when they lived in their country of origin, they were too westernized, or their home country was still unsafe. Despite the fact that the majority had not obtained a residence permit, most of them felt accepted by Dutch people. Only four participants (mainly boys) mentioned that they were discriminated against. Most of the participants did not mention any forms of discrimination, with one exception that several participants felt treated as 'criminals' by the Dutch immigration agency.

In general, participants accepted the laws of the new society and they adopted a common set of values with the new society. With regard to dealing with events, many participants (n=13) said that in their country of origin it was unusual to speak about psychological distress. Moreover, in their countries of origin, friends and family rather than professionals were used as support systems.

Participants did not abandon all aspects of their original culture, especially not their original religion (n=9). Religion was significant for their resilience: it provided support and guidance, distracted them and prevented distress. For some participants, their religion was a source of hope and God or Allah served as a confidant:

For my faith, you have to ... just like my mother said, you must accept your circumstances. Actually, in our religion we see life as a test. So Allah will test you. If you just go on, you are strong. Just everything that happens, He says, comes from God. You just have to accept it. (P02, 18 years old)

Breakdown of strategies

In the previous section, we described four strategies that were used by participants to deal with the hardships they faced and to endure uncertainty when waiting for a residence permit. Two participants were no longer able to endure this period of being on hold. They explained that they did not experience the positive consequences anymore of these strategies or that they were not motivated anymore to activate them; they demonstrated a breakdown of resilience strategies. They could no longer be strong and go on

like they used to: *'I tried to keep going, but at a certain point I no longer had the strength. Then I just gave up. And then I keep giving up'* (P16, 18 years old).

It seemed that these participants saw their moment pass by; they had dreams when coming to the Netherlands, but after waiting for years for their residence status and becoming too old to easily adapt to the Dutch school system or to have the rights to enrol in subsequent education, their hope faded away:

- I: You told me that many conditions changed in your life, did you change as well?
- P: Look, when I was in [Country of Origin], I thought only about my education. I did very well at school and I wanted to get the highest degree. Now, I only want to get my level four in vocational education and then I will quit.
- I: And why?
- P: I'm almost twenty. When I was younger I wanted no less than a Master's degree. I just didn't achieve this goal.
- I: Why not?
- P: I can't go to high school because I'm too old now.
- I: But do you still have the dream?
- P: I used to when I came to the Netherlands, but not anymore. I also do not contact my old friends from [Country of origin] anymore. Because what should I say to them? I'm in level two? They're going to laugh at me. What is level two in [Country of origin]? That's nothing ... That is really low there.
- I: So if I understand you correctly, you lost your dream?
- P: Yes, I lost hope. Without a residence permit I have no freedom.
- I: And suppose you can stay in the Netherlands, you get a residence permit, will your thoughts on this change do you think?
- P: I really have no idea. I don't know. I don't expect anything anymore. (P14, 19 years old)

The feeling that they were unable to influence their circumstances resulted in lassitude; their feelings of powerlessness and their loss of dreams made them pessimistic and at times numb, as if they did not care about their own lives anymore. It seemed that they adopted this attitude for reasons of self-protection because hope had repeatedly led to disappointment:

- I: What would you advise others in this position?
- P: Don't think about tomorrow. Just live. Always laugh. Even if you're crying inside, just smile.
- I: Because that helps you?
- P: No, it doesn't help, nothing helps. But it enables you to keep on living, you know. Life goes on. (P14, 19 years old)

Discussion

A total of 16 young refugees between the ages of 13 and 21 years were interviewed about their traumatic and stressful experiences and how they dealt with them in order to explore resilience. Qualitative analysis of transcripts revealed that young refugees were affected by traumatic experiences in their country of origin or during the flight, but at the time of the interview, current stressors, especially for the young people without a residence

permit, played a more significant role in determining their psychological well-being. They had to endure this uncertain period of waiting for a residence permit.

In general, the participants in this study used four strategies to deal with traumatic experiences and current stressors: (1) acting autonomously, (2) performing at school, (3) perceiving support from peers and parents, and (4) participating in the new society. These strategies positively influenced resilience: they helped young refugees to strengthen their sense of power and control, to give them some distraction, and to support or sustain their spirit within the family unit and the new society.

The stories of the young refugees revealed that resilience is not an all-or-nothing state, as has previously been advocated by several researchers creating a dichotomy whereby refugee adolescents 'are seen as either "vulnerable" or "resilient" is overly simplistic' (Bonanno, 2012; Ní Raghallaigh and Gilligan, 2010; Rousseau et al., 1998). Our results showed that the same adolescents can be in a way both (vulnerable and resilient) depending on the available support systems and transitions faced over time – like getting a residence permit, having access to school, perceiving social support from significant others, and experiencing control over their lives. Besides, positive adaptation can apply to a specific sphere and not across all areas (Bonanno and Diminich, 2013); for example, some of our participants functioned very well at school while they suffered at the same time from PTSD symptoms. Furthermore, past experiences appear to interact with dealing with current difficulties and future views. Trusting others when arriving in the host country, for example, seems for many young refugees challenging because of their adverse past experiences, and long waiting periods appears to diminish young refugees' hope and opportunity (see also Ní Raghallaigh and Gilligan, 2010). Altogether, this interplay between individual, social, and contextual factors supported the ecological model for understanding resilience in young refugees (e.g. Bronstein et al., 2013; Weine et al., 2014).

The factor that negatively influenced resilience was the duration of the period of uncertainty. When this period lasted too long, participants showed 'metal fatigue': they broke from overloading. Nielsen et al. (2008) also concluded that protracted stays at ASCs have an adverse effect on children's mental health. Although the study of Thommessen et al. (2015) included only participants that had already received their refugee status, also in this study one prominent theme across all interviews was 'living in a limbo', referring to the anxiety and concern they had experienced during their waiting period (see also Chase, 2013). Allsopp et al. (2014) showed a divide between young immigrants' intentions and future goals and the intentions of an immigration control system which seems to underestimate the power of young immigrants' determination.

Another factor that made some young refugees more vulnerable was being older. Older participants appear to have more problems with integrating into the Dutch (school) system (or they had no access to school at all), which, for example, negatively impacted their self-esteem and their feelings of personal control. Hodes et al. (2008) also revealed that increasing age was associated with increased PTSD symptoms in asylum-seeking adolescents. This shows that influences within and between micro-, meso- and macro-systems are bidirectional; political decisions influence young refugees' school circumstances and subsequently their well-being as well as vice versa (their well-being influences their school performances).

Our culturally diverse participants commonly used the four strategies, but they approached these strategies in their own unique way. We did not find any specific differences between groups of main regions of origin. Besides the importance of original religious beliefs (see for a description of the relevance of religion in young refugees' lives, Kohli, 2011; Ní Raghallaigh and Gilligan, 2010), no other culture-specific factor stood out. Nevertheless, the present sample was heterogeneous (e.g. regarding their educational background), young and occupied with participating in the Dutch society. Adolescence is an important time for communities to communicate their beliefs about norms and moral standards and, especially during this period of development, social cognitions are constantly changing (Arnett and Hughes, 2012; Crone and Dahl, 2012). Therefore, not only the family but also aspects of the new society, like peers, school and media, influence the beliefs and values of young refugees. Consequently, we might argue that resilience, like other psychological constructs, needs to be understood as a construct that shares commonalities across populations and is culturally and contextually embedded at the same time.

Young refugees had the desire to move on and to live a purposeful and meaningful life in the Netherlands. Their focus on education and the future was found in other studies on the individual experiences of unaccompanied refugee minors (Hopkins and Hill, 2010; Thommessen et al., 2015) as well. The refugees in our study seemed to be reluctant to talk about their past or not to have room to look back to their past; they mainly talked about current stressors related to gaining a residence permit. This may be explained by the fact that our sample consisted primarily of refugees without a residence permit or refugees who had just received a residence permit. Young refugees' focus on staying in the Netherlands appears to be a conscious and functional choice (the two participants who did not hold this focus anymore were slipping into depressive feelings). Nevertheless, it might make these asylum seekers vulnerable as well; they did not consider the possibility of going back to their country of origin and they seemed unprepared for deportation.

In agreement with other studies, we found that refugee families can experience shifts in settings and roles (e.g. Betancourt and Khan, 2008). Our participants had high feelings of responsibility (even regarding the well-being of their parents) and took on adult tasks. Although this might be explained from a cultural point of view considering differences in age-related roles between cultures (Arnett and Hughes, 2012), the data do not necessarily confirm this interpretation. Participants attributed their roles and maturation process to the hardships they experienced and the current situation they were living in. Other studies showed that the influence of family on the mental health of war-affected children often takes two forms: parents can have a protective role during hardship or they can complicate a child's coping when they themselves manage stress inadequately (Dybdahl, 2001; Miller, 1996). Our findings replicated these two forms, but the roles of parents were not all black or white; a more dynamic model suits better. Furthermore, although young refugees found it hard to deal with their (psychologically) ill parent and their autonomy could be considered as forced maturation, they explicated that they actively and willingly pursued this strategy and that helping their parents gave them power and the feeling that they were able to keep up spirits within the family unit as well. Refugees without parents explicated a deprivation of support. For unaccompanied refugee minors,

it appears of special importance to create a friendship network (see also Chase et al., 2008; Ehntholt and Yule, 2006).

Limitations and strengths

While this study provided important insight into young refugees' experiences and how they deal with hardship, it has several limitations. The participants were recruited from a mental health institute: a specific selection of young refugees who have requested assistance or are referred by others which may bias the findings. Furthermore, a researcher with a Western background (although with skills in cross-cultural communication) conducted the interviews. In addition, we may have asked questions and interpreted narratives from a Western perspective. Besides, no longitudinal data were available, which is necessary to identify causal relationships between social, cultural and developmental factors and adaptive processes. Because resilience is a complex construct with no accepted definition (Panter-Brick, 2014), it remains criticizable the way this study defined resilience. Also our choice to use the term 'resilience strategies' is not indispensable or undiscussable. In view of our attention for dynamic processes, rather than only focusing on risk and protective factors in a static way, we believe that for this study the term resilience strategies is adequate.

One of the merits of this study lies in the fact that we asked young refugees themselves about their experiences: about when they thought themselves 'resilient' and how they dealt with hardships. We invited them to raise issues that mattered to them. Furthermore, the variation in our sample enabled us to identify commonalities across young refugees from different backgrounds. Moreover, the data were continuously analysed and discussed within a multidisciplinary team of researchers and practitioners, thereby avoiding the subjectivity sometimes associated with qualitative research carried out by one researcher.

Implications

When a resilient spring is being pushed, the spring stores potential energy. How can this potential energy be mobilized when young refugees are not released but kept under pressure? The feeling of powerlessness is a major issue in the lives of young refugees (see also Gustafsson et al., 2012; Kohli and Mather, 2003; Sleijpen et al., 2015; Ungar et al., 2007); therefore giving them some power and personal control, for example, by supporting and activating their school progression, may help them to mobilize their energy. Nevertheless, we have to be aware that protective factors may not equally benefit young people across various levels of risk (Vanderbilt-Adriance and Shaw, 2008); sometimes, reducing the pressure (exposure) is more important than building resilience.

Access to school and the possibility to integrate well in a new school system can mitigate the trauma's effect on young refugees (e.g. Betancourt, 2005). Our findings acknowledge that older adolescents (young adults) also need access to education because this might ward off despair. Moreover, the entire education system should stimulate young refugees and not hinder their development (Montgomery, 2010).

Young refugees appear to adapt fast to the Dutch society. Many young refugees in this study found themselves westernized; they declared little bonding with their country of origin, and they felt at home in the Netherlands. With regard to their adaptation and developmental process, young refugees are different from adults; the specific circumstances of adolescence, such as the harmful effects of prolonged immigration procedures on the development and identity of young people, must be considered when assessing an application for a residence permit. In the asylum application and procedure, more attention is needed for the United Nations Convention on the Rights of the Child (CRC). The interests of adolescents need important consideration in all actions concerning them, for example, when making decisions about returning them to their country of origin or about moving to different ASCs and consequently to different schools (Zijlstra, 2012).

Conclusion

Just at the time when young refugees need to explore and develop their personal and social identity and become autonomous, their lives are put on hold. Young refugees were found to use four strategies associated with resilience: (1) acting autonomously, (2) performing at school, (3) perceiving support from peers and parents, and (4) participating in the new society. These strategies interacted with one another and demonstrated the interplay between individuals and their social ecology. Moreover, two contextual conditions appear to have a negative impact on resilience because they hindered the proper use of these strategies: the duration of the waiting period for a residence permit and an older age. These findings confirm that resilience is a dynamic process that is influenced by accessible support systems and changes faced over time.

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Note

1. We used the term refugees to refer to both asylum seekers and refugees. When we used the term asylum seekers, we referred specifically to the participants whose claims to a refugee status were still under examination.

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