

ED439625 1999-12-00 Mental Health and the Adult Refugee: The Role of the ESL Teacher. ERIC Digest.

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ERIC Identifier: ED439625

Publication Date: 1999-12-00

Author: Adkins, Myrna Ann - Sample, Barbara - Birman, Dina

Source: National Clearinghouse for ESL Literacy Education Washington DC.

Mental Health and the Adult Refugee: The Role of the ESL Teacher. ERIC Digest.

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English as a second language (ESL) teachers are often among the first people available

to help refugees and other immigrants cope with a new cultural and linguistic environment. Although the identified role of the teacher is to teach English language skills, the teacher's role as a cultural broker is very important as well.

This digest focuses on how teachers can help adult refugee and immigrant learners make significant progress in adjusting to a new life in an unfamiliar culture. It discusses the qualities of mental health, stresses faced by refugees, and three things that teachers can do to help their students adjust.

QUALITIES OF MENTAL HEALTH

Mental health includes two components: a "psychological," internal experience of well-being and "behavioral" markers, observable by others, that indicate whether the individual is able to handle life's challenges in adaptive ways.

"Psychological." Mental health involves the ability to cope adequately with life's difficulties and demands, to experience joy and happiness when life events call for this, and to grieve and live through the painful and tragic times in life.

"Behavioral." Mentally healthy people can successfully accomplish basic life functions such as eating and sleeping, perform well in the occupational arena, and have satisfying relationships with others.

Concepts of mental health are laden with cultural bias. For example, one of the most important ways that cultures differ is that the societies where many of the refugees and immigrants to the United States come from tend to be more collectivistic, whereas U.S. society is more individualistic. In the United States, parents are generally encouraged to rear their children to be independent and self-reliant, to leave home early, and to be responsible for their own happiness and well being. In collectivist societies, parents raise their children to be interdependent and to be responsible for others, within a system of relationships where others in turn care for them. Americans may see behavior of people coming from such cultures as overly dependent and dysfunctional. However, behaving in individualistic ways could be seen as dysfunctional within the context of these other societies. Because of these cultural differences, U.S. teachers of refugee adults must be cautious in passing judgment on behaviors they may not understand.

STRESS EXPERIENCED IN RESETTLEMENT

Stress occurs when the burdens imposed on people by events or pressures in their lives exceed their resources to cope. For refugees, resettlement involves three types of stress: "migration stress, acculturative stress", and (for many) "traumatic stress".

"Migration stress". Moving to a new country triggers a number of stressful life events at one time. When migration occurs suddenly as a result of political violence, war, or other catastrophes, refugees are functioning under conditions out of their control. Moreover,

many of the losses associated with migration represent the loss of the usual coping resources--such as family, friends, surrounding community--that people would ordinarily rely on to help them cope with stress.

"Acculturative stress" results from having to learn to function in a culture different from the one an individual is born and raised in. Immigrants and refugees often do not expect that the very fabric of life around them will be profoundly different. Ways in which people relate to each other and form and sustain friendships will be different, and how children go to schools and are socialized will change. Even the most simple of daily tasks, such as shopping for food or asking for directions, can become challenges involving not only the language barrier, but also the potential for deep cultural misunderstanding. New refugees and immigrants can feel that their very identity is threatened in the new culture (Ullman, 1997).

"Traumatic stress" results from extreme events that cause harm, injury, or death, such as natural disasters, accidents, assault, war-related experiences, and torture. Generally, it is believed that injury resulting from accidents and natural disasters is less traumatic than injury resulting from willful acts by other human beings, such as torture. It is inevitable that individuals suffering such events will be changed by that experience, and research suggests that these changes will be psychological, social, and physical (Pynoos, Sorenson, & Steinberg, 1993).

WHAT ESL TEACHERS CAN DO

Teachers of adult refugees can promote cultural adjustment and mental health by learning about the challenges facing refugees; by providing material and activities in the classroom that will address some of the individuals' particular needs; and by becoming an integral part of a larger network of providers that includes mental health professionals.

1. Teachers can learn to recognize symptoms of mental illness, or abrupt behavioral changes that disrupt the class. Signals teachers identify from observation may include absences, withdrawal from participation, lack of attention, sleeping in class, frequent crying, behavioral problems, and change in progress. Symptoms often reported by students include headaches, backaches, stomachaches, insomnia, and excessive drinking of alcohol (Adkins, Birman, & Sample, 1999).

Sometimes the signs are not obvious. In writing about survivors of domestic abuse, Horsman (1998, p. 2) talks about the "hidden" impacts of traumatic stress that may make it difficult for adults to be totally "present" or involved in their learning, including "a lack of comfort with ambiguity, and a tendency to see everything as all or nothing." Horsman suggests addressing these issues openly in the class, making it part of the curriculum to discuss what it means to be present in the class, giving permission for learners to not always be totally involved in all the class activities, and exploring the value of the "middle ground * deciding which stories to tell when, and creating a safe

place to learn" (p. 3).

2. Teachers can discuss health and cultural content relevant to learners. When refugees seek help from a medical doctor or a mental health professional, they often become uneasy when asked about details of their personal lives and backgrounds. In the ESL classroom, activities related to making appointments to see a doctor and then talking about health issues with the doctor, finding and keeping a job, negotiating transportation, and so forth are all natural components of the curriculum. These activities give learners opportunities to discuss issues of personal interest and concern with others and to solve problems related to survival, family, and employment. When viewed as part of the process of developing needed competencies using the English language, they are usually not considered invasive or out of context by either students or teachers.

Topics for discussion related to mental and physical health include:



* accessing medical services;



* going to the doctor;



* finding an adequate place to live;



* identifying and shopping for food and drink;



* using available recreational activities;



* interacting with the school;



* disciplining children;



- * developing healthy relationships among family members;



- * learning conflict resolution strategies; and



- * relating to the past, the native country, and distant relatives and friends.

Activities that help learners develop strategies for coping with cultural adjustment can also promote mental health (Silver, 1999). Some suggestions for activities are listed below.



- * Language experience stories. In groups, students write stories about something from their culture (for example, a custom, a place, or a food).



- * "Dialogue journals". Learners write to their teacher about topics of their own choice, and the teacher responds to them in writing.



- * "Picture stories". Learners respond to questions about a story told through photos or drawings. Silver describes how asking a question about an obviously sad woman in a picture story ("What advice would you give this woman?") brought different responses from the learners, depending on where they came from, their length of time in the United States, and their age and gender. Out of this simple activity came an array of language and culture learning, giving opportunities to talk about register and to look at acceptable forms of offering advice.



- * "Goal-setting exercises". Learners map out short-term and long-term goals. Even such a straightforward exercise as this may be problematic. As Horsman (1998) points out, this needs to be handled delicately. The issue of control is central to goal setting, and for survivors of trauma, having and taking control is a "complex and fraught area" (p. 3).



- * "Timeline activities". Students map and reflect on the highs and lows of their past while

looking ahead to the future. (See Adkins, Birman, & Sample, 1999, and Van Duzer & Burt, 1999, for activities related to goal setting and timelines.)

3. Teachers can network. Most teachers are not therapists, but they can work with others who have more knowledge and experience. *First, they can collect information about community resources for dealing with refugee mental health.

* Second, they can develop relationships with interested local mental health providers, find out how the local mental health system works, and identify community resources related to accessing help for cultural adjustment and mental health. Useful contacts might include a provider at a local clinic or hospital who is familiar with the situation of refugees and is willing to serve as a resource and the local refugee resettlement office that may provide interpreters.

* Finally, they can make a decision about whether or not it is appropriate to contact resources, speak with other family members, bring the situation to the attention of a resettlement agency or sponsor group, or give the student the opportunity in classroom activities to discuss or disclose personal information.

CONCLUSION

The myriad needs that refugees bring to the classroom provide rich opportunities for learning. ESL teachers can be a critical link in a well-functioning team of providers helping refugees establish a new life that is both productive and satisfying. Teachers can be a crucial resource to their culturally diverse students who are grappling with concerns related to cultural adjustment and mental health. The ESL classroom is a safe place where students can improve their English and learn about U.S. culture--both of which can serve as tools for enhancing mental health.

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Title: Mental Health and the Adult Refugee: The Role of the ESL Teacher. ERIC Digest.

Document Type: Information Analyses---ERIC Information Analysis Products (IAPs) (071); Information Analyses---ERIC Digests (Selected) in Full Text (073);

Available From: NCLE, 4646 40th Street N.W., Washington, DC 20016-1859. Tel: 202-362-0070. For full text: <http://www.cal.org/ncle/DIGESTS/mental.htm>.

Descriptors: Acculturation, Adult Education, Cultural Differences, Culturally Relevant Education, English (Second Language), Immigrants, Land Settlement, Language Teachers, Limited English Speaking, Mental Health, Refugees, Second Language Instruction, Second Language Learning, Teacher Role

Identifiers: ERIC Digests

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