

Psychosocial Support for Refugees and Asylum Seekers in South Africa

Context

Refugees and asylum-seekers (RAS) in South Africa have freedom of movement, the right to work and the right to avail themselves of basic social services. Consequently, they reside mainly in urban areas amongst migrants, foreigners and the national population. There are approximately 43,500 refugees recognised by the South African Government, mainly from Burundi, the Democratic Republic of the Congo and Somalia. In addition there are around 300,000 registered asylum-seekers.



National legislation provides refugees access to the public health care system inclusive of HIV and mental health services. However, the South African public health care system is currently struggling to ensure adequate access to services for their nationals. Mental health care is not given first priority in the overburdened South African health care system.

As the xenophobic wave of 2008 clearly showed, RAS often experience violence while leaving their countries, during their flight, and after their arrival to South Africa. Trauma and counseling services in

South Africa have been rendered by a network of non-governmental organisations and Government providers since the post-apartheid period; however, those mental health providers usually do not conceptualise the specific issues affecting RAS such as language, culture, gender dimensions and barriers to access services in South Africa.

UNHCR and its implementing partners – Refugee Social Services in Durban, Jesuit Refugee Services in Johannesburg and Pretoria, Refugee Aid Organization in Pretoria and Catholic Welfare and Development in Cape Town, have developed Psychosocial Support (PSS) networks in addition to providing direct PSS to RAS.

Actions for change in mental health care for RAS in South Africa

The Mental Health Act provides a legal framework for mental health in the country and in particular for the admission and discharge of mental health patients in mental health institutions with an emphasis on human rights for mentally ill patients. Frontline staff working with RAS on social assistance has been made familiar with the basic aspects of that policy so that they can refer severe mental health cases to the adequate institutions.

South Africa / Urban refugees / A young man studies. The Central Methodist Church in central Johannesburg provides shelter to in excess of 3800 Zimbabwean refugees. People sleep wherever they can find a surface to lie. UNHCR / JAMES OATWAY / 6 August 2009



In South Africa, UNHCR provides direct material and legal assistance to the most vulnerable people of concern to the agency in the country through a range of local partners. Many of the partners' staff members dealing directly with RAS are social workers who struggle on a daily basis to provide the required assistance. The RAS' needs are massive and the available material and social assistance are limited. RAS repeatedly contact social workers for the same social issues; social workers end up becoming RAS counselors.

"As a Community Development Worker dealing with refugee issues, we are faced with people who are traumatised, stressed, unemployed and so forth – All of them need PSS."

Refugee Social Services, Durban

UNHCR organised two workshops during 2009 targeting social workers involved in RAS social assistance. The aim of both workshops was to make the participants familiar with basic psycho-social issues (from mental health conditions to possible interventions inclusive of the continuum from stress to trauma), relevant counselling skills, self care and relevant resources.

Outcomes

After the workshops, social workers integrated the newly learned knowledge and skills into their daily responsibilities providing a variety of services to RAS.

Refugee Social Services in Durban provides PSS to UNHCR's populations of concern and their families. These cases include victims of the xenophobic attacks, new arrivals and persons living with HIV and AIDS.

The Worker then encouraged the client to keep a daily Journal to record his challenges as well as achievements – which by his own admission is difficult due to the reality of being physically disabled. The client has reported that by regularly writing down his daily activities the once 'sad book' has become more of a gratitude journal.

Refugee Social Services, Durban

Jesuit Refugee Services in Pretoria attended UNHCR's PSS workshop and have since integrated a PSS approach into their assistance to RAS.

"I then realised that their support system is no longer strong, therefore, they need someone to support them financially so that they will further their studies. Since they have a strong desire to continue with their studies we agreed that JRS will assist them with short courses as well as their rental until they finish their six months training. The Psychosocial Support Training helped me to look in to the client's problems in a holistic view especially when making a decision on how to support a client to realise their potential and improve their lives."

Jesuit Refugee Services, Johannesburg

Catholic Welfare and Development in Cape Town offers PSS to clients in order to enhance their well-being and positively impact the therapeutic process. Some of the successful strategies have been:

- Enrolment of youths in therapeutic art groups
- Creation of links between RAS and different RAS associations in South Africa
- Emphasis on working with couples and family counselling

"We realised that she was in pain. She had been to the doctors but they did not assist her. We organised that the intern, assist her in attending the local clinic. We further realised that she could not speak about certain time periods of her life. It caused her emotional pain. With her permission we made an appointment with a partner organization for some counselling."

Refugee Aid Organization, Pretoria

Conclusions

Psychosocial support among RAS in South Africa can be effectively integrated into existing social work programmes by providing social workers with appropriate tools for assisting UNHCR's populations of concern and their families. When PSS training is provided, social workers are better able to offer a more comprehensive assistance and RAS' needs are better met.

