




CHAPTER 3.2

Taking Account of Gender

GOALS FOR INTEGRATION (SEE CHAPTER 1.3)

-  **ONE** To restore security, control and social and economic independence by meeting basic needs, facilitating communication and fostering the understanding of the receiving society.
-  **TWO** To promote the capacity to rebuild a positive future in the receiving society.
-  **THREE** To promote family reunification and restore supportive relationships within families.
-  **FOUR** To promote connections with volunteers and professionals able to provide support.
-  **FIVE** To restore confidence in political systems and institutions and to reinforce the concept of human rights and the rule of law.
-  **SIX** To promote cultural and religious integrity and to restore attachments to, and promote participation in, community, social, cultural and economic systems by valuing diversity.
-  **SEVEN** To counter racism, discrimination and xenophobia and build welcoming and hospitable communities.
-  **EIGHT** To support the development of strong, cohesive refugee communities and credible refugee leadership.
-  **NINE** To foster conditions that support the integration potential of all resettled refugees taking into account the impact of age, gender, family status and past experience.

 The focus of this Chapter

 To keep in mind



Chapter 3.2

Taking Account of Gender

This Chapter explores factors that will need to be taken into account in integration planning to support the adjustment in gender roles, identity and relationships that often accompany settlement in a new country. It also outlines gender related differences in the refugee and resettlement experiences that need to be considered when planning integration programs in receiving societies.

Why consider gender in integration planning?

While refugee men and women share many needs in common, gender role and status differences (which characterise societies across the globe, albeit in different ways and to different degrees)¹ produce differences in their refugee and resettlement experiences which need to be considered in integration planning.

While some refugees will be settling in countries with gender relations comparable to those in their countries-of-origin and asylum, many will have come from societies where gender roles are more clearly defined and gender inequality and segregation is more marked. Both men and women may require some support to deal with the gender role and identity adjustment involved in resettlement.

The impact of gender role adjustments on relationships between men and women will also need to be considered. In some refugee source countries, greater authority is vested in men as household heads and community leaders. In contrast, in receiving societies women may have access to a greater range of rights and freedoms, particularly in family and relationship matters such as property rights, divorce and marital concerns. They may be more likely than is the case in refugee source countries to be in paid employment and to be engaged in civic life. This may result in tensions between men and women in refugee families and communities as women secure greater economic independence and embrace new possibilities in the receiving society.



CHECKLIST

Taking account of gender

Integration program component (see relevant Chapter in Part Two)

Think about:

Placement	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> family and ethnic community support services, public transportation and trauma counselling for at-risk women; <input checked="" type="checkbox"/> child care services for refugee families.
Early settlement and social support	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> individual and family based assessment and settlement support; <input checked="" type="checkbox"/> identifying and offering more intensive settlement support to 'at-risk' refugees; <input checked="" type="checkbox"/> community support networks, especially for women not in paid employment; <input checked="" type="checkbox"/> culturally responsive services for refugee families affected by family violence and female genital mutilation (FGM).
Income support	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> income support for single parents.
Language training	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> strategies to foster the participation of refugee women.
Orientation	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> as for language training; <input checked="" type="checkbox"/> providing information relevant to the family and domestic sphere (e.g. child care services, child welfare issues, FGM, health services and programs for women, family violence, family relationships, customs and laws); <input checked="" type="checkbox"/> providing child care to promote participation.
Housing	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> safety and security issues, especially for women.
Employment	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> intensive job search assistance for women experiencing employment disadvantage; <input checked="" type="checkbox"/> the adequacy of existing legislative frameworks to prevent discrimination against women in the work force; <input checked="" type="checkbox"/> home based micro-economic enterprises, especially for families with child care responsibilities; <input checked="" type="checkbox"/> safety and security issues affecting women accessing employment (e.g. transport arrangements, working hours); <input checked="" type="checkbox"/> availability of child care.
Health care	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> support for refugee families to access hospital based obstetric care.
Welcoming and hospitable communities	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> providing information about family relationships and the strengths, customs and practices of refugee women to receiving societies; <input checked="" type="checkbox"/> fostering opportunities for refugee women's civic and community participation; <input checked="" type="checkbox"/> gender sensitive community and recreation services (e.g. 'women only' swimming sessions).
General	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> facilitating choice of gender of service provider for both men and women; <input checked="" type="checkbox"/> professional development, training and awareness raising activities for key personnel and professionals to enhance their capacity to provide gender sensitive support.

Gender inclusive planning will also be important for family economic self-sufficiency. Most refugee families, like families in the wider community, will depend on the wage earning capacity of both men and women. However, since many refugee women originate from societies where women's role is more clearly defined in the home, they may require additional support in the transition to paid employment.

Refugee men and women bring different but equally valuable resources to both receiving societies and the tasks of integration. Efforts will need to be made to ensure that the contributions of both are adequately supported. As indicated below this is a particular concern for women, who often assume primary responsibility in the domestic and family sphere, areas which are at risk of being neglected in integration planning when the principal emphasis is on economic self-sufficiency.

In recent decades, many countries of resettlement have adopted strategies to support gender equality in access to public resources such as employment, education and recreation; the equal participation of both men and women in civic life; and women's freedom from violence in both the public and private realms. Gender sensitive integration planning can help to enhance understanding of these goals in refugee communities and ensure that both refugee men and women have access to the same rights and opportunities as their counterparts in the receiving society.

The extent to which gender issues influence integration will vary, depending on:

- resettlement category. Women resettled as 'women-at-risk' may have particularly intensive needs;
- the extent of difference in gender roles and relations between refugee source countries and the receiving society;
- family status on arrival and in the early resettlement period. Women who do not have family or partner support, and single men may have more intensive resettlement needs.

Gender sensitive planning: Overall considerations

Role and identity adjustment

Resettlement in a new country may involve substantial changes in gender roles and identity. Refugee men, for whom identity is integrally linked with their paid work, their roles as providers



GENDER



Appreciating the strengths and contributions of refugee women

REFUGEE women offer unique and valuable qualities to receiving societies and bring important resources to the process of integration. As well as having educational, vocational and professional skills, refugee women, like their counterparts in receiving societies, commonly assume primary responsibility in the domestic and family sphere. Hence, they are a major vehicle through which refugee communities contribute unique cultural perspectives and family and

community relational skills to resettlement countries.

The experience of international aid organisations is that refugee women are key contributors to community and economic development initiatives in refugee and other emergency situations. This involvement testifies not only to the skills and attributes of refugee women, but also to their survival skills and motivation in conditions of adversity.

In receiving societies, refugee women have

demonstrated a preparedness to organise both with one another and with women in the wider community around their common experiences as partners, mothers and home-makers or to address their shared vulnerability to violence and gender inequality. In many countries this has been an important force for promoting mutual understanding and harmony within and between refugee communities and between them and the wider society.

and their civic participation, may have particular difficulties in adjusting to the loss of social status that often accompanies resettlement, especially if they are unemployed or unable to work in their former professions.

Many resettled refugees are young single men from traditional societies where they will have been accustomed to having domestic tasks such as cooking and cleaning performed for them by female relatives. They may require additional support to learn the tasks of independent living. Men in these circumstances may also face the adjustment associated with the loss of emotional support and natural male role models (such as fathers and uncles) that would otherwise have been available to them in the context of the extended family in their countries-of-origin. Particular efforts may be required to link men in these circumstances with alternative sources of support and guidance. In Canada, for example, a Somali community supported the integration of young male resettled refugees by linking them with older Somali family men who had been in Canada longer. The older men served as mentors, imparting important social and cultural values as well as providing practical and emotional support.



The particular needs of 'women-at-risk'

'WOMEN-AT-RISK' are considered by the UNHCR as refugee women who have particular protection problems and find themselves without traditional support mechanisms. The special needs of refugee women in these circumstances could derive from persecution as well as from particular hardships sustained in either their country-of-origin, during their flight or in their country-of-refugee². The objectives of the UNHCR's assistance to 'women-at-risk' are to:

- provide international protection through

resettlement of refugee women who are particularly at risk in their country-of-refugee;

- ensure that 'women-at-risk' receive specialised care, if needed, and intensive support upon arrival in their country of resettlement, with a view to achieving successful socio-economic integration and self-sufficiency.

Australia, Canada and New Zealand have special 'women-at-risk' programs as part of their broader refugee and humanitarian resettlement programs.

Other countries resettle 'women-at-risk' as part of their general refugee intake.

'Women-at-risk' are likely to have experienced a high degree of refugee-related trauma and may lack personal integration resources such as literacy, education and prior formal work experience. Most will be without family support.

Specific efforts should be made to identify women in these circumstances through early assessment and to ensure that they are offered more intensive support (see Chapter 2.3).

Refugee women, meanwhile, face multiple role adjustments in receiving societies. In many refugee source countries, greater communal responsibility is taken for domestic tasks and the care of children, the elderly and those with disabilities. This is in stark contrast to women's experience in many receiving societies where they are likely to have limited access to family and community support; where the nuclear family is the dominant family form and where far greater emphasis is placed on individual responsibility. For these reasons, social and community support will be particularly important to refugee women in the early resettlement period.

As indicated above, many women will be entering paid work for the first time and may require some support in this transition.

Single, separated or widowed refugee women may have to make particular adjustments since they may be assuming the role of household head for the first time. The difficulties involved in sole parenting are now well documented in studies in receiving societies³. For refugee women these are compounded by the stresses associated with their refugee and resettlement experiences⁴.





In Ottawa, high tech companies hire women assemblers, and women were successful in finding employment before their husbands did. This meant that roles were reversed in the home. The husbands could not take the extra stress on top of everything else: being a refugee and then being a foreigner in a strange, new culture and now losing the dignity of being the provider in the family. The women would arrive late, there would be no food prepared, this would lead to a row...

Resettlement worker

Women in Somalia are shy and cannot do that (ask for a divorce) because of the customs and traditions.

Resettled refugee



Adjustment may also be a challenge for women from certain traditional societies in which women's identity is linked to her relationship with a male family member, whether a father, husband or brother.

Family centred integration planning

While it is important that integration planning addresses the needs of refugee men and women in their own right, the whole family unit will need to be taken into account. Changes in women's roles in the early resettlement period can have a significant impact on family dynamics as refugee men come to terms with the demands on women outside of the home and women's greater social and economic power.

Equally, role status changes affecting refugee children and young people have an impact on both men and women (see Chapter 3.3). The authority vested in refugee parents, and in particular, refugee men as traditional household heads, may be undermined as children and young people exercise the greater rights and freedoms often available to them in receiving societies. Women, especially those who remain in the home, may be affected by the role reversal that often occurs as children and young people integrate more rapidly than their parents (see p. 265).

This suggests the importance of receiving societies adopting strategies to support the adjustment of both refugee men and women to gender role expectations, family relationships and women's and children and young people's rights and responsibilities in receiving societies. These will be particular considerations in the provision of early settlement support (see p. 81). Orientation programs also provide an opportunity to provide resettled refugees with information about gender and family issues in receiving societies (e.g. laws relating to family violence and marital and property rights).

Supporting the integration of refugee women in holistic terms

Integration planning should reflect and embrace women's diverse roles as partners, carers, members of communities and paid workers. In many refugee families (as is the case in receiving societies), women assume primary responsibility for domestic tasks such as cooking and cleaning and food preparation, for the care of children and other dependants, and for monitoring the physical and mental health of partners and other family members⁵. In these roles they will be required to

mediate between the family and other services and systems, such as health care providers, schools and child care facilities, as well as to nurture relationships between their families and social networks in the wider community.

Particular efforts will need to be made to ensure that support is provided in these areas as well as those concerned with promoting economic self-sufficiency.

Without support, women who remain outside of the labour force may struggle to integrate into receiving societies. Women in these circumstances are not only vulnerable to personal and psychological problems such as social isolation, depression and anxiety, but will be less able to support children and other family members in their integration⁶.

In a number of countries, efforts have been placed into bringing home based refugee women together, with the aim of reducing isolation, fostering mutual support and engaging women in addressing barriers to their integration.

Addressing barriers to participation in integration activities

In some refugee source countries women are socialised to play a role that is subservient to men. They may feel uncomfortable participating in a mixed gender environment or may be prohibited from doing so. Women from gender segregated societies and those who have been subject to male violence in the course of their refugee experience may feel unsafe or uncomfortable discussing issues in the presence of men, particularly those of a gender sensitive nature.

The experience of established resettlement countries has been that, as a consequence, some refugee women may be less likely to participate in language training and orientation programs, and in a mixed gender environment, may be difficult to engage in interactive learning processes. Similar issues apply in engaging women in relationships with male service delivery staff, a particular concern in the areas of health care, social support, language assistance, language training and orientation.

Owing to cultural expectations, participation in employment, language training and orientation programs may not be seen as a priority, by women themselves, their families or refugee communities. In some cultures there may be specific religious or cultural prohibitions on women's employment outside of the home.

INTEGRATION IN PRACTICE

Engaging home-based women in Toronto

A CENTRE for survivors of trauma and torture in Toronto brought together a group of Somali women whose common concern was the level of social isolation they experienced in their new country. While the primary focus of the group was mutual support, it became apparent in group discussions that women often stayed at home because they did not feel safe in the streets of their new city. As it developed the group began to explore practical strategies for addressing these concerns.



GENDER



I looked after the children, nothing else. Women are allowed to go out to work here but not there.

Resettled refugee





Supporting women's equal participation in language training and orientation programs

COUNTRIES of resettlement have attempted to ensure that language training and orientation programs are sensitive to the needs of women by:

- holding separate 'women-only' sessions or classes, where women may feel more comfortable to speak and participate;
- delivering orientation and language training on an outreach basis through established women's support or social groups; As well as providing a focus for engagement, these programs may attract women for whom it may be culturally unacceptable to participate in a dedicated orientation or language training program;
- engaging ethno-cultural communities in planning and delivering programs. For example, in Canada language instruction is contracted to community based providers, among them ethno-cultural service agencies. These agencies have been able to tailor programs to meet the specific needs of refugee communities and offer a learning environment that is more acceptable to refugee women and their communities;
- ensuring that orientation and language training programs address issues of particular relevance to women such as sexual harassment, family violence and gender discrimination in the workplace;
- developing orientation programs on issues of particular concern to women;
- organising programs so that they are accessible to women (e.g. scheduling sessions in daylight hours, offering transport and child care, offering home tutor options for women with responsibility for the care of young children);
- taking steps to actively engage women participants in group discussion (e.g. providing structured opportunities for all group members to speak, using gender inclusive language);
- fostering awareness of gender issues in training programs for orientation and language training providers.

Work force development in all areas of integration planning will need to take into account the fact that many women will require or prefer a female service provider. Similarly, gender issues will need to be addressed in professional development activities for both settlement support personnel and workers in the wider community who have contact with resettled refugees.

Redressing past disadvantage

As a consequence of gender inequality in refugee source countries and countries of refuge, refugee women may be less likely than their male counterparts to be literate, to be educated or to have an established work history (see Table Twelve).

This may put them at some disadvantage when accessing integration resources and is a factor which will need to be taken into account when assessing the level of integration



**Table Twelve:
Gender differences in selected refugee countries-of-origin**

Country	Adult literacy rate (%)		Education gross enrolment ratio (%)		Estimated annual income (US\$)	
	Female	Male	Female	Male	Female	Male
Burundi	40.4	56.2	16	21	490	698
Sudan	46.3	69.5	31	36	847	2736
Angola	*	*	21	25	*	*
Dem. Rep. of Congo	50.2	73.1	26	37	548	986
Vietnam	91.4	95.5	64	69	1635	2360
Eritrea	44.5	67.3	24	29	571	1107

*Data not available

Source: United Nations Development Program *Human Development Report, 2002. Deepening democracy in a fragmented world*, Oxford University Press, 2002.

support required. Low literacy levels and lack of prior educational and work force experience will also need to be considered in the design of language training, orientation and employment placement programs. Nevertheless, it should be remembered that many refugee women will have gained a wealth of experience through their informal participation in labour in refugee camps and other emergency situations. They may require assistance to recognise and evaluate the relevance of this experience for the purposes of accessing employment in the receiving society.

Economic self-sufficiency and refugee families

Most countries recognise the advantages of supporting women's participation in paid employment. These efforts are particularly important for the long term economic stability of female-headed refugee families. Participation in paid work can speed the process of integration for refugee women (through language acquisition and social contact) and prevent their isolation in the home.

In countries with high expectations of early economic self-sufficiency, the earning potential of both parents in two parent families is formally factored into assessment and settlement support processes and both are encouraged to seek paid



My students didn't even look up. Our gazes never met at first, and the women in particular spoke so quietly that you could hardly hear them. It was as though they didn't dare take up a space in the room...

Language teacher





employment as soon as possible after their arrival. In some countries, there are high expectations that refugee sole parents will be economically self-sufficient. In others, resettled refugees may have access to income support programs established for sole parent nationals.

There are a number of factors to consider in determining expectations of participation in paid employment in both two and sole parent refugee families:

- adjusting to paid work may be stressful for some women at a time when they are already facing adjustments in other aspects of their role. This may be particularly the case if they have not worked outside of the home in the past. Further, studies conducted in a number of countries suggest that the burden associated with child care and domestic tasks is seldom redistributed equitably within the family when women enter paid employment⁷. Managing the ‘double day’ of paid and unpaid work may be an additional stress for refugee women in the early resettlement period;
- domestic and child care roles undertaken in the family have an economic value and contribute to family economic self-sufficiency;
- the participation of both parents (or sole parent women) in paid employment in the early resettlement period may compromise their capacity to support children in adjusting to their new circumstances;
- the involvement of both parents in paid work may involve placing children in child care. As discussed in Chapter 2.9 this may generate some anxiety for refugee families;
- women with limited prior formal participation in paid employment may require more intensive job placement support;
- economic self-sufficiency planning can involve the couple as a unit. For example, one partner may work in an entry level job to enable their spouse to participate in further study or training and subsequently to support them to upgrade their training or qualifications.

Refugee-related trauma

Resettlement countries may need to invest additional thought and effort into gender sensitive approaches to engaging refugee men and women with services and programs offering psychological and resettlement support (see Chapters 3.1, 2.3).



Domestic violence and refugee families

DOMESTIC violence occurs across cultural, racial and socio-economic lines⁸.

However, refugee women who are subject to domestic violence are a particularly vulnerable group as they may:

- lack family and community support;
- be unaware of laws prohibiting domestic violence in receiving societies;
- have a heightened tolerance of their partner's violent behaviour if he has been subject to trauma in the course of his refugee experience;
- be unable to communicate in the language of the receiving country and have limited knowledge of the resources available to them to leave a violent relationship (e.g. housing, income support);
- encounter difficulties in accessing legal and social support owing to

language and cultural differences;

- be wary of involving the police and legal personnel in family matters given their negative experiences of law enforcement authorities in their countries-of-origin;
- be unaware of the consequences of involving law enforcement authorities⁹.

Many refugee women come from traditional societies where there are strong cultural prohibitions against separation and divorce. The pressure on women to 'keep the family together' may also be particularly strong given the degree of trauma and dislocation to which refugee women have been subject.

Women who are experiencing psychological difficulties associated with their traumatic experiences may also fear being alone. For some women, an

unsatisfactory union may be better than having no adult relationship.

It is beyond the scope of this resource to explore broader strategies for preventing and addressing domestic violence in culturally diverse communities. However, in an integration context, both refugee women and men should be provided information in orientation programs about the law as it relates to family violence and the services and supports available to affected families. Domestic violence issues of relevance to refugee communities should also be addressed in professional development activities targeted to both settlement support workers and workers in the wider community who have contact with resettled refugees, particularly the police.



Supporting refugee women and communities affected by female genital mutilation

FEMALE genital mutilation (FGM) is defined by the World Health Organisation as 'comprising all procedures which involve partial or total removal of the external genitalia or other injury to the female genital organs whether for cultural or any other non-therapeutic reasons'¹⁰.

FGM is practised in approximately 28 countries in Africa and in some countries in Asia and the Middle-East. These include a number of refugee countries-of-origin¹¹.

While not all women experience long term complications associated with FGM, pelvic, urinary and menstrual difficulties are not uncommon¹². Affected women will require special care antenatally, during child birth and in the postnatal period. Some women may not associate complications of FGM with the procedure, but rather see them as a normal part of being a woman. Psychological effects may include reactions to the trauma of FGM, anxiety and depressive symptoms and effects on sexuality¹³. However, there is some debate as to whether these are attributable to FGM or to

resettlement issues (e.g. the reactions of receiving communities, inter-generational issues).

FGM is supported in affected communities as a rite of passage, as a fundamental part of being a woman and in the mistaken belief that it has health benefits for women.

Some families may want their daughters to undergo FGM. This may pose a dilemma for receiving countries who are committed to respecting the cultural practices of refugee communities while at the same time being concerned about the practice of FGM.

The World Health Organisation, the United Nations Children's Fund, and the United Nations Population Fund issued a joint statement in 1997 confirming the universally unacceptable harm caused by female genital mutilation¹⁴, or female circumcision, and calling for the unqualified elimination of this practice in all its forms. While noting that FGM continues as a deeply rooted traditional practice, the statement maintained that culture is in constant flux, capable of adapting and reforming. This

statement follows a number of existing international agreements in place to support the elimination of the practice of FGM.

FGM (whether it is anticipated that it will be performed in the receiving country or elsewhere) is prohibited in a number of resettlement countries, under child welfare and/or criminal assault legislation. However, some resettled refugees may not be aware of this.

The prevention of FGM in receiving societies has been a complex and sensitive issue. Affected communities may oppose this, believing that it represents a lack of respect for their cultural practices. It has also been argued that prohibitive legislation may simply drive the practice 'underground' where it is likely to be performed in unsafe conditions. Proponents of this view argue that positive change is more likely to be achieved through education in refugee communities. Others, however, point to the effects for women and girls and to the international commitment to eradicate the practice. Some countries have adopted a dual strategy involving both



legislation and education in refugee communities, in the belief that legislation communicates an important symbolic and practical message that the practice is unacceptable.

The following are factors to consider when planning integration programs:

- Intensive settlement support may be required for affected women to ensure that they have access to appropriate and sensitive health services, particularly when requiring gynaecological and obstetric care.
- Steps may need to be taken to prevent the practice of FGM in the receiving society.
- Affected refugee communities will require culturally sensitive information in their own languages regarding services available, the physical and psychological effects of FGM on women and girls and, where relevant, any laws relating to FGM.
- Some receiving societies have developed support programs for women affected by the practice of FGM.
- Bilingual and bi-cultural workers in receiving

countries have played an important role in supporting affected women and in providing advice to health care providers and settlement support workers.

- Written resources and professional development will be useful for health care providers to ensure that they are aware of the issue, respond sensitively to affected women and their families, provide appropriate care and understand the legal situation and their obligations (if any) in relation to this.
- Health care providers in the wider community will require access to technical assistance on appropriate management of the physical, social and psychological implications of FGM. A lead agency should be identified to provide this (e.g. a specialist tertiary referral hospital for women, the relevant professional college of obstetrics and gynaecology).

It is vital that receiving countries engage affected refugee communities when developing strategies to prevent FGM and support those affected by it.



TAKING ACCOUNT OF GENDER



Women may be reluctant to disclose experiences of sexual violence owing to the level of shame and a fear of being ostracised by their partners and communities. In their roles as carers of others, they may feel unable to attend to their own psychological problems, particularly if their partners or children are experiencing difficulties in their resettlement.

Many women, especially those entering under ‘women-at-risk’ criteria or programs, will have spent a period in the course of their refugee experiences without the ‘protection’ of a male partner. Studies suggest that women in these circumstances will have been particularly vulnerable to trauma and have faced additional physical hardships as refugees¹⁵. The incidence of rape and other forms of sexual assault perpetrated against refugee women is now well documented¹⁶. The grief associated with forced movement may also have a particular significance for refugee women, with the home and family and community networks being integral to their roles as home-makers and carers¹⁷.

Refugee men, for whom emotional strength is more integrally linked with masculine identity, may be reluctant to acknowledge psychological problems for fear that this may be construed as a sign of weakness. Like their counterparts in receiving societies, refugee men may also be less likely than women to seek ‘talk-based’ solutions to emotional difficulties through either their informal support networks or professional providers.

Safety and security for refugee women

In receiving societies, refugee women, particularly those who are single, separated or widowed, may feel a heightened vulnerability to threats to their personal safety due to lack of familiarity, language difficulties, hostility in the receiving community and limited access to resources such as secure housing, private transport and telecommunications.

The personal safety of refugee women will be important considerations in placement decisions, in supporting women’s participation in paid employment, and in planning times and venues for language training and orientation programs.